



**FOOD SECURITY AND INSECURITY IN OLDER ADULTS:  
A PHENOMENOLOGICAL ETHNOGRAPHIC STUDY**

**BY**

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## **Abstract**

Experiences of food, meals, and eating that are nourishing, enjoyable, and nutritious are crucial for older adults who are seeking to maintain their health and wellbeing while ‘ageing in place’. Food insecurity poses a threat to these aspirations. Although existing research has produced useful insights into food insecurity in older adults, it has not always fully engaged with the highly subjective, complex, and dynamic nature of the phenomenon.

The thesis addresses these gaps in knowledge by applying philosophical perspectives from phenomenological ethnography to explore implicit meanings in older adults’ experiences of food, meals, and eating, and then consider their significance for understandings of food security and insecurity in older adults. The thesis takes a phenomenological view of human beings as embedded in lifeworlds characterised by meaningful actions and experiences, including those involving food.

Phenomenological ethnographic methods of repeated in-depth interviews, walking interviews, and observation were conducted in the home environments of 21 community-dwelling older adults, aged between 72 and 90 years, in rural Tasmania, Australia. Case-based analyses informed biographical sketches of these older adults’ rich, varied, and often challenging lives. The main findings were generated by thematic analyses and pertain to four dimensions of the phenomenological lifeworld – subjective, intersubjective, place-based, and temporal.

Exploring subjective dimensions revealed these older adults as highly engaged with food and life. Exploring intersubjective dimensions revealed how older adults’ eating experiences are infused with their social identities and relationships. Exploring place dimensions revealed how older adults’ complex, deep, and nuanced relationships with different places inform their food experiences. Finally, exploring temporal dimensions revealed how time permeates older adults’ eating lives, whether in terms of quotidian activities or the grand sweep of life from childhood to old age.

The thesis considers these findings and their significance, and generates new understandings of food security and insecurity in older adults. Perspectives from interpretative phenomenology, anthropology, sociology, and social gerontology are woven

together to inform a theoretical argument for an interrelationship between food security and ontological security in older adults' lives. The contribution of the doctoral thesis lies in developing a more in-depth and substantial theoretical perspective on food security and insecurity in older adults, which has implications for policy and practice. The thesis reveals rural older adults who are engaging with food and life with considerable perseverance, resilience, and agency, even in the face of bodily and social contingencies of ageing.

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*People ask me: Why do you write about food, and eating and drinking? Why don't you write about the struggle for power and security, and about love, the way others do? They ask it accusingly, as if I were somehow gross, unfaithful to the honor of my craft. The easiest answer is to say that, like most other humans, I am hungry. But there is more than that. It seems to me that our three basic needs, for food and security and love, are so mixed and mingled and entwined that we cannot straightly think of one without the others. So it happens that when I write of hunger, I am really writing about love and the hunger for it, and warmth and the love of it and the hunger for it... and then the warmth and richness and fine reality of hunger satisfied... and it is all one.*

Fisher, M. F. K. 1943. 'Foreword', *The Gastronomical Me*, New York: North Point Press, p. ix.



## CHAPTER 1: NEW PERSPECTIVES ON FOOD SECURITY IN OLDER ADULTS

---

### 1.1 Introduction

Researchers and government agencies frequently apply the terminology of food security to older adults' experiences of food, meals, and eating, but only rarely engage in thoughtful exploration of the deeper meanings of food security in human lives. At first glance, food security appears to be a relatively straightforward and quantifiable concept. There is general consensus on the key elements of the definition of individual food security, which is often defined as "the ready availability of nutritionally adequate and safe foods and the assured ability to acquire food in socially acceptable ways" (Kendall & Kennedy, 1998, p. 337). As well, over the past 20 years, several conceptual models of food security in older adults have been developed which are in broad agreement about the features of the phenomenon. Based on these understandings, tools have been developed and validated for measuring food insecurity in populations of older adults. Certainly, at one level, it does appear as though food security in older adults is well understood.

However, looking more closely at the literature, it becomes apparent that food security in older adults also contains some less tangible and more subjective elements that are not very well explained. Engaging closely with these elements is essential for gaining clearer understandings of the depth and substance of the phenomenon. The research detailed in this thesis would appear to represent one of the first substantial phenomenological ethnographic studies of food security and insecurity in older adults.

The research is built upon a view that food security in older adults is less well understood than it first appears. Three important characteristics of the phenomenon complicate the tasks of unravelling its complexity, uncovering lived experiences, and exploring its meanings for human lives. Firstly, food security in older adults is experiential and subjective, as it arises from personally-experienced emotions; secondly, it is highly complex, as it made up of multiple interwoven considerations; and thirdly, it is dynamic rather than fixed, and can be managed over time. In view of these features, the research applies perspectives from philosophy and anthropology to explore food security in older adults, thereby bringing into clearer view four implicit but essential dimensions of the phenomenon. In addition to its

more readily visible elements – which pertain to food availability, adequacy, acceptability, and affordability – the research reveals that *food security in older adults is deeply informed by their personal identities and senses of themselves, relationships with other human beings, the meaningful places in which they live, and the flow of time in their lives.*

By way of introduction to the research, this chapter outlines the values and perspectives that underlie current discourses, policies, and programs directed towards food-related concerns in older adults. In doing so, it identifies an opportunity to apply new perspectives to the phenomenon which more effectively engage with the profound meanings that food security carries for older adults' lives. From there, this chapter proceeds to outline three commitments which form the overarching intent of the research. These are: being exploratory and speculative, engaging with complexity, and seeking in-depth understandings of the phenomenon. This chapter ends with an overview of the research, which employs the methodology of phenomenological ethnography to explore the phenomenon of food security and insecurity in community-dwelling older adults in rural Tasmania, Australia.

## **1.2 Current perspectives on food security in older adults**

### **1.2.1 Overview**

This study focuses exclusively on the phenomenon of food security in older adults who live in 'developed' countries, thereby excluding the experiences of those who live in 'developing' countries. The rationale for this decision is detailed on pages 34-5 in Chapter Two. In recent years, the phenomena of food security and population ageing in developed countries have separately become the subject of considerable attention from government agencies, community organisations, and media outlets. A brief view of the prevailing discourses and program responses to food security and population ageing reveals that their underlying values are sometimes in tension with each other, and this is reflected in current perspectives on food security in older adults.

### **1.2.2 Food security in the spotlight**

Although food security has been of some interest to international organisations and governments for at least four decades, it is now the subject of more attention and concern

than ever before (Gustafsson, Wills, & Draper, 2011; Ingram, 2011; Kneafsey, Dowler, Lambie-Mumford, Inman, & Collier, 2013; MacMillan & Dowler, 2012). This increased focus on food security has arisen in the context of growing interest among governments and international organisations in various forms of security, including national and international security (Philo, 2012). Increased attention on food security has also been informed by growing concerns about: global food price spikes and associated food riots in 2008 (Maye & Kirwan, 2013); effects of climate change on food production (Gustafsson, et al., 2011); and increased foreign ownership of agricultural land (Watson & Merton, 2013). These concerns are situated within a growing climate of anxiety about food which extends beyond food security to specific food scares such as bovine spongiform encephalopathy in British beef ('mad cow disease'), as well as more general concerns about food quality and allergies (Beardsworth & Keil, 1997; Fischler, 1988; Jackson & Everts, 2010; Milne, Wenzer, Brembeck, & Brodin, 2011).

In recent years, widespread food security concerns have prompted governments in many developed countries to introduce new policies and programs explicitly directed towards the issue. In 2010, the United States Department of Agriculture announced a goal of cutting US food insecurity in half by 2015 (ADA, 2010; MacMillan & Dowler, 2012); and in 2011, the United Kingdom Government launched its first food strategy for 50 years, entitled *Food 2030* (Jessop, 2011). Similarly, in Australia, the federal government released its first *National Food Plan* in 2013 (DAFF, 2013), and Australian state governments have implemented institutional responses to food security, including in Tasmania, where a high-level advisory body on food security issues was established (Tasmanian Food Security Council, 2012).

Although food security is sometimes contested within academic and policy discourses (Maye & Kirwan, 2013; Mooney & Hunt, 2009), the concept is consistently understood to be associated with "a broadly progressive agenda" that seeks to secure human rights and overcome socioeconomic inequalities (MacMillan & Dowler, 2012, p. 182; Shepherd, 2012). As such, at an international scale, food security issues sit within broader concepts of human security, human rights, social and economic inequalities, and the social determinants of health (Chilton & Rose, 2009; Werthes, Heaven, & Vollnhals, 2011; Wilkinson & Marmot, 2003). At national and local scales, food security is usually couched in terms of socioeconomic inequalities, and it is conceptually related to other socio-political terms for

food concerns, including hunger, food poverty, food insufficiency, and food sovereignty (Dowler & O'Connor, 2012; Radimer, Olson, & Campbell, 1990; Rehber, 2012; Vozoris & Tarasuk, 2003).

Rights-based approaches are primarily concerned with the creation of enabling environments for food security (Chilton & Rose, 2009). These responses take a strengths-based approach to food security, drawing attention to the capacity of all people, including older adults, to enact strategies to manage their food security over time without resorting to emergency food relief (for indicative examples, see Neill, Leipert, Garcia, & Kloseck, 2011; Quandt, Arcury, McDonald, Bell, & Vitolins, 2001; Radermacher, Feldman, & Bird, 2010). These perspectives have informed selected initiatives which focus on community development and individual capacity-building in order to address food insecurity in various population groups, although these initiatives have rarely exclusively focused on older adults (Larder, Lyons, & Woolcock, 2014; Tarasuk, 2001a).

Other food security discourses, policies, and programs are more heavily informed by value-driven perspectives on vulnerability and welfare. Some researchers and advocates draw particular attention to the vulnerability of certain population subgroups, and seek to uncover the many adverse consequences of food insecurity (for indicative examples, see Chilton & Booth, 2007; Hamelin, Habicht, & Beaudry, 1999; Tarasuk, Dachner, Poland, & Gaetz, 2009). This emphasis on vulnerability and providing care to people is reflected in some responses to food security concerns, which are heavily informed by welfare-oriented service models that focus on providing food to disadvantaged people (Babbington & Donato-Hunt, 2007; Herzfeld, 2010).

### **1.2.3 Ageing in the spotlight**

In recent years, issues of ageing have received increasing attention in many developed countries, arising in the context of growing concerns about population ageing (Cubit & Meyer, 2011; Scharf, 2013). In most countries around the world, older adults are growing in both absolute numbers and as a proportion of the total population, including in Australia, where these growth trends are projected to continue until at least 2050 (Treasury Department, 2010). Numerous adverse consequences of population ageing have been identified, including an increase in the burden of disease and spiralling health costs, such

that ageing is often seen as having destructive power amounting to a “‘tsunami’ of ageing” (Kendig & Browning, 2011, p. 26). Around the world, governments have responded to growing demands on their country’s aged care sectors by implementing significant reforms to regulations, funding models, and services directed towards older adults (Cubit & Meyer, 2011). For example, in 2012, following a Productivity Commission Inquiry, the Government of Australia released a package of major reforms to address the growing fiscal challenge of funding aged care services (DHA, 2012; Productivity Commission, 2011).

In particular, the notion of ‘ageing in place’ is an emerging area of interest for governments and older adults. Policies informed by this notion encourage older adults to age in their own homes, supported by the provision of flexible and targeted assistance, in order to minimise the risk of moving into resource-intensive residential aged care (Wiles, Leibing, Guberman, Reeve, & Allen, 2012). While this growing interest in ‘ageing in place’ is partially motivated by a desire to contain aged care costs, its growing appeal is also informed by emerging views of older adults as capable actors who can creatively draw on social and material resources in their communities to achieve positive experiences of ageing (Wiles, Leibing, et al., 2012).

#### **1.2.4 Policies and programs addressing food security in older adults**

Prevailing perspectives on food security in older adults are informed by views of older adults as inherently physically, socially, and economically vulnerable – and therefore in need of ongoing care and protection. Governments and researchers identify community-dwelling older adults as being particularly vulnerable to food insecurity and malnutrition, alongside other marginalised groups such as homeless people, people with disabilities or mental illness, and people living in rural or remote areas (ADA, 2005; Rychetnik, Webb, Story, & Katz, 2003).

Responses by governments and community organisations to food-related concerns in older adults are almost universally conceptualised in terms of welfare, aged care, and delivery of services such as delivered meals, rather than food security. Food-related initiatives aimed at older adults are rarely conceptualised in terms consistent with the underlying values of food security, such as human rights, social equity, and enablement. Responses which would reflect food security values might, for example, aim to enable older adults to grow fruit and

vegetables in communal gardens or support them to advocate for improved access to food. However, responses to food concerns in older adults that are explicitly couched in food security terms are few in number, significantly limited in scope, scattered geographically, and *ad hoc* in nature.

Governments and community organisations in many developed countries make very large investments in meal delivery programs targeted toward older adults. For example, in 2009, the US Government spent US\$648.5 million on *The Older Americans Act* Nutrition Program (OAANP) which provides congregate meals and home-delivered meals to older adults (Lee, Sinnett, Benge, Johnson, & Brown, 2011). In Australia, the non-government organisation Meals on Wheels provided over 14.8 million meals to around 53,000 recipients in 2010 (Australian Meals on Wheels Association Inc., 2011).

The vast majority of published research into programs addressing food concerns in older adults assesses various measures of efficacy in the provision of meals to older adults via congregate or home-delivered meals (for indicative examples, see Boyer, Orpin, King, & Bowers-Ingram, 2013; Duerr, 2006a; Duerr, 2006b; Frongillo & Wolfe, 2010; Lee et al., 2008; O'Dwyer, Corish, & Timonen, 2009; Sharkey, 2002; Timonen & O'Dwyer, 2010).

Consequently, the empirical evidence base remains markedly underdeveloped for initiatives which address food security in older adults through any means other than directly providing food (Gorton, Bullen, & Mhurchu, 2010).

#### **1.2.5 Multiple meanings of food in human lives**

As detailed in the previous section, current perspectives on food security in older adults are infused with notions of welfare, aged care, and service provision. What appears to be missing in those perspectives is an in-depth understanding of the profoundly meaningful role of food, meals, and eating in older adults' lives. Food is embedded in human life, and therefore engaging with questions about food ultimately entails engaging with questions about the nature of human existence. Food holds a central place in every human beings' feelings, thoughts, and actions. Food unites people in their shared humanity because it carries considerable weight of meaning in every human life, which is generated by: its important function as fuel for bodies, its dual role as both a threat and a promise, and the

way it symbolises love, security, and culture in human lives (Beardsworth & Keil, 1997; Fischler, 1988; Lupton, 1996; Mintz, 1996; Probyn, 2000).

Firstly, food is crucial to the survival of humans, and therefore food is the object of one of human being's most basic drives – to satisfy hunger through eating. Without food, humans die. This stark fact points simultaneously to the biological nature of humans and to their profound vulnerability as creatures who are dependent upon regular access to food (Probyn, 2000). Food anthropologist Sidney Mintz labelled this “the animal reality of our living existence” (1996, p. 4).

Secondly, food also operates as both a promise and a threat to humans. Preparing and eating food provides humans with the promise of considerable sensuous pleasure generated by food's multitude of appearances, tastes, smells, and textures. At the same time, they face the “omnivore's paradox”; human beings need and want to eat a wide range of foods, but they also experience a constant, low-level anxiety in relation to food, because of the possible threat of ingesting something that turns out to be harmful (Fischler, 1988, p. 277).

Thirdly, food also holds considerable meaning in human lives because it carries substantial symbolic weight which is enacted through humans' varied social relationships, economic transactions, religious beliefs, and cultural practices (Mintz, 1996). Hence, food is not merely a substance eaten by humans to ensure their biological survival, although that makes it significant enough, but it is also a prismatic symbol of multiple meanings in human lives (Counihan, 1999). Food reflects light onto the many and varied expressions of social connections, economic activities, spiritual rituals, and ethnic and cultural identities which humans engage in and enact all around the world. Besides being an edible substance, food is also deeply meaningful for human lives – and this perspective has informed all of the elements of the research.

## 1.3 The research

### 1.3.1 Research aim and questions

The research applies perspectives from phenomenological ethnography to fulfil the research aim – to explore experiences of food, meals, and eating among community-dwelling rural older adults, in order to develop deeper understandings of food security and insecurity in older adults.

The research questions, expressed in phenomenological terms, are as follows:

1. What is the nature of experiences of food, meals, and eating for older adults living in rural communities?
  - a. What are the *subjective* dimensions of these experiences?
  - b. What are the *intersubjective* dimensions of these experiences?
  - c. What are the *place* dimensions of these experiences?
  - d. What are the *temporal* dimensions of these experiences?
2. How do older adults' experiences of food, meals, and eating inform deeper understandings of food security and insecurity in older adults?

These questions relate to experiences of food, security, and ageing, as well as to the meanings of those experiences for human lives. To be a food secure older adult is to feel secure about one's food, meals, and eating while ageing. This statement gives rise to several different but related queries about what it means for older adults to have a sense of security, what food means to older adults, how older adults achieve and maintain food security, and how experiences of ageing might inform older adults' experiences of food security.

### 1.3.2 Research methodology

The research employs the methodology of phenomenological ethnography, which views human beings as embedded in personal lifeworlds that are sites of meaningful and practical day-to-day action, including engagement in food-related activities. The research explores older adults' experiences of food, meals, and eating through four dimensions of the phenomenological lifeworld: (a) subjective dimensions, which relate to older adults'

existence or ‘being’; (b) intersubjective dimensions, which relate to older adults’ relationships with others; (c) place dimensions, which relate to the varied homes, towns, and rural settings that older adults inhabit; and (d) temporal dimensions, which relate to the flow of time that reaches back into the past and forward into the future, and is experienced in the present.

Informed by phenomenological ethnography, the research explores human experiences that are universal – such as growing, buying, preparing, and eating food – and also highly situated and rendered meaningful within particular social, geographic, and cultural settings. Hence, while the research is idiographic in intent, in that it is primarily concerned with uncovering unique and subjective human experiences, the meanings of those experiences are interpreted in relation to the broader social and material environments in which they are embedded.

As well, phenomenological ethnography is particularly concerned with obtaining first-hand accounts of people’s experiences, rather than assessing outcomes of experiences or obtaining the perspectives of other people. Accordingly, the research seeks to observe older adults’ home environments and elicit their opinions, memories, stories, and descriptions, in order to shed light on their lifeworlds and experiences of food, meals, and eating – thereby illuminating their own lived meanings of food security and insecurity.

### **1.3.3 Scope of the research**

Originally, the focus of the research was on older adults’ experiences of food *insecurity* in particular. However, after initial recruitment activities were largely unsuccessful and following feedback from several food security stakeholders in Tasmania, the scope of the research was broadened to engage with older adults’ experiences of food, meals, and eating – and then consider their significance for understandings of food security and insecurity.

The scope of the research was more closely delineated in other respects. The reasons behind those decisions are detailed in Chapter Three but they are briefly outlined in this section. Firstly, the research is focused on older adults defined as people aged over 75 years, thereby including the ‘oldest old’ but excluding the ‘youngest old’ aged between 60 and 75. Secondly, the research is focused on older adults who live in rural areas of

Tasmania, thereby excluding older adults living in urban areas of Tasmania or elsewhere in Australia. And finally, the research is focused on older adults who are living in the community rather than in residential aged care or health care facilities.

#### **1.3.4 Limitations and contribution of the research**

The idiographic methodologies employed in phenomenological ethnography tend to produce findings that are not readily applicable to other people living in other places. The findings that emerge from such studies are often situated in particular places; they engage with small groups of people whose circumstances are revealed to be heavily informed by particular biographical experiences.

Although the empirical findings arising from the research cannot be generalised to a larger population of older adults, this does not diminish the overall contribution of the research. It deepens understandings of food security and insecurity in older adults at a theoretical level rather than an empirical level. The fieldwork produced in-depth and rich illustrative data of the older adults' experiences of food, meals, and eating. These findings provide valuable empirical threads which are woven into a theoretical argument that food security and ontological security are interrelated in older adults' lives. This perspective is relevant to community-dwelling older adults living in developed countries in general, as well as to those who participated in the research in particular.

### **1.4 Intent of the research**

#### **1.4.1 Overview**

The following section introduces the intent of the research which provides an epistemological foundation for the literature review and methodology, as well as for the research in its entirety. The research intent is made up of three separate but compatible commitments: being exploratory and speculative (Section 1.4.2), engaging with complexity (Section 1.4.3), and seeking in-depth understandings (Section 1.4.4). Each of these commitments is illustrated by applying one of three phenomenological metaphors: engaging in a dialogue, weaving threads together to make fabric, and gaining a better view of the appearance of an object.

#### **1.4.2 Being exploratory and speculative**

The first commitment is to initiate conversations with readers about food security in older adults, rather than provide definitive statements about particular factual considerations. This intent is entirely consistent with phenomenological research, which is considered to be “a beginning; a questioning that gathers continued conversations around complex issues” (Dahlberg, Dahlberg, & Nyström, 2008, p. 20). Similarly, Walsh states that the presentation of phenomenological research findings are “a turn that forms part of a conversation instead of being the final word” (2012, p. 5).

The exploratory and speculative nature of the research can be conveyed through the metaphor of engaging in a dialogue with another person. Inspired by the Socratic tradition of pursuing philosophical practice through dialogue, phenomenology is especially interested in conversations or dialogues between humans, seeing them as a means by which shared understandings can be reached (Moran, 2000). Phenomenological philosopher Martin Heidegger (1889 – 1976) wrote an essay towards the end of his working life that took the form of a fruitful dialogue between two people. Entitled ‘A Dialogue on Language’, it is characterised by a recursive series of respectful questions and exchange of views which are aimed at reaching a shared understanding about the nature of language (Heidegger, 1971b).

The phenomenological notion of shared understandings between humans does not imply that a state of absolute agreement should be reached between the parties to a dialogue. Informed by the philosopher Hans-Georg Gadamer (1900 – 2002), the aim of phenomenological dialogue is seen as gentle and modest but nevertheless requires careful attention to detail (1960/2005). As such, “...understanding the other does not mean agreeing with the other, but only recognising that the other person could be right. The task of understanding is to find the word that can reach the other...” (Risser, 2012, p. 5).

#### **1.4.3 Engaging with complexity**

This research intends to engage with the complexity of the phenomenon of food security. It is undeniably complex, informed by a wide range of factors, the subject of many different disciplines, and occurs at several different scales. Most food security researchers have sought to cater to this complexity by either focusing on one particular dimension of the

phenomenon or considering all its diverse dimensions simultaneously. However, such research has not always been able to fully elucidate the intricate ways in which the multiple dimensions of food security are interwoven to create the phenomenon as a whole.

Phenomenology usefully employs the metaphor of weaving, particularly when explaining the notion of hermeneutical interpretation of texts (Moran, 2000; Risser, 2012). The metaphor of weaving operates at two levels. Firstly, it implies the weaving together of different sentences or themes to form a unified and meaningful text: “every text presents the reader with a woven fabric, and in being woven together produces a con-text [sic], a relational event of meaning” (Risser, 2012, p. 61). The second level of the metaphor relates to weaving together of threads from the text with threads from the life of the reader of the text (Risser, 2012). This aspect of the metaphor is informed by Gadamer, who viewed human beings’ understandings of language as intimately woven with their lifeworlds and daily activities (1960/2005). It echoes an earlier argument made by Edmund Husserl (1936/1970), in which he employed the term “interweaving” (*Verflechtung*) to convey the intimate and recursive nature of the relationship between human ‘being’ and the world (Moran, 2000, p. 404).

#### **1.4.4 Seeking in-depth understandings**

This research intends to seek in-depth understandings of the phenomenon of food security in older adults. This intention needs to be carefully explained in order to rule out any implied criticism of previous research as being somehow shallow or trivial. Applying the metaphor of ‘depth’ instead reflects a commitment to viewing food security as having multiple dimensions that are held together in intricate unity, thereby allowing a clear view of the depth and substance of the phenomenon.

The metaphor of seeking a meaningful view of an object helps to explain this commitment. The act of viewing or perceiving something is fundamental to phenomenology – this branch of philosophy was explicitly conceived to engage with questions about how phenomena appear and are perceived by humans. Indeed, Edmund Husserl’s famous phenomenological cry, “back to the things themselves!” was an appeal for scholars to examine the visible aspects of phenomena before undertaking scientific theorisation (Gallagher & Zahavi, 2012; Husserl, 1900/2001, p. 252). Hence, the title of one of Merleau-Ponty’s most famous essays

is 'The Primacy of Perception' (1945/2012). In interpretative phenomenological terms, reaching an understanding is conceived as a visual metaphor – “a movement with respect to a way-making and opening that brings the matter at issue into *view*” [emphasis added] (Risser, 2012, p. 5).

Phenomenologists contend that a human's view of an object is made up of both actual and implied views. For example, when viewing an armchair, it is not possible to see its front, back, sides, inside, and underside all at once, such that “...the object is never given in its totality but always incompletely, in a certain restricted profile...” (Gallagher & Zahavi, 2012, p. 107). Despite this restricted view, it is still readily perceived to be an armchair. As Merleau-Ponty argued that, in order to understand something as a meaningful object, humans intuitively integrate its visible profile with its absent or implied profiles which are recalled from past experiences and shared understandings of an object (Gallagher & Zahavi, 2012; Merleau-Ponty, 1945/2012; Romdenh-Romluc, 2011).

Hence, the notion of seeking in-depth understandings represents a commitment to conducting interpretative research which brings into view the phenomenon's implicit elements or meanings, in addition to those elements which are more readily visible. Engaging in research of this nature, the aim is to generate understandings of the depth, substance, and significance of food security in older adults' lives.

## **1.5 Overview of the thesis**

The thesis consists of nine chapters and each of these are briefly summarised below. Following this introductory chapter, there is one chapter for a literature review and one for describing the research methodology and fieldwork. These are followed by four chapters which detail the research findings, and one further chapter which contains a discussion and theoretical arguments. The thesis ends with a brief concluding chapter that draws out the potential policy and practice implications of the findings and theoretical perspectives generated by the research.

## ***Chapter Two – Review of the literature on food security in older adults***

This chapter reviews the literature on food security in older adults and argues that the existing body of knowledge has not yet fully engaged with meanings of older adults' varied experiences of food security and insecurity. It also introduces several different perspectives from phenomenology, anthropology, sociology and social gerontology which, it is argued, may shed new light onto notions of food, security, and ageing.

## ***Chapter Three – Methodology, fieldwork, participants, and data analyses***

This chapter details the five interwoven methodological elements of the research: its aim and questions, research design, methodology and methods, characteristics of the older adults who participated in the research, and the approach taken to analysing the fieldwork data. It explains the motivations and perspectives of phenomenological ethnographic research and details how these infuse the methodological elements of the research. The epistemological strengths of each of the fieldwork methods are considered, and insights are provided into their practical application in the field. This chapter concludes by explaining how the research was guided by four principles of validity, thoughtfulness, empathy, and flexibility.

## ***Chapter Four – Findings: Subjective dimensions***

This chapter explores one of the four phenomenological elements of the human lifeworld listed in Section 1.3.2 – the subjective or individual nature of 'being'. It engages with the first part of the first research question – *What are the subjective dimensions of experiences of food, meals, and eating for older adults living in rural communities?* This chapter reveals how older adults' personal identity, sense of themselves, and strategies for living well into old age are inextricably intertwined with their varied experiences of food, meals, and eating.

## ***Chapter Five – Findings: Intersubjective dimensions***

This chapter is concerned with another phenomenological element of the lifeworld – the intersubjective nature of 'being'. It engages with the second part of the first research question – *What are the intersubjective dimensions of experiences of food, meals, and eating for older adults living in rural communities?* This chapter details how older adults' experiences of food, meals and eating are profoundly shaped by their varied social

relationships, involving marriage, parenting, friendship, neighbourliness, and community participation.

### ***Chapter Six – Findings: Place dimensions***

This chapter explores the third phenomenological element of the lifeworld – experiences of place. It engages with the third part of the first research question – *What are the place dimensions of experiences of food, meals, and eating for older adults living in rural communities?* Older adults' experiences of place, ageing, and eating are explored at three different levels – intimately lived-in home worlds, familiar local rural environments, and distant and sometimes foreign cities and countries. These older adults maintain complex, varied, and nuanced relationships with places at each of these three levels – and these connections are necessarily woven into their experiences of eating and ageing in diverse rural settings.

### ***Chapter Seven – Findings: Temporal dimensions***

This chapter explores a fourth phenomenological element of the lifeworld – the temporal nature of 'being'. It engages with the fourth part of the first research question – *What are the temporal dimensions of experiences of food, meals, and eating for older adults living in rural communities?* Three different but interrelated temporal elements are identified: vivid memories of the past which shape older adults' current food values; strategies for day-to-day living and eating in the present; and fears and hopes for their futures, which unsettle and motivate their present experiences of food, meals, and eating.

### ***Chapter Eight – Discussion: Food security and ontological security***

This chapter brings together the findings from each of the four previous chapters and discusses their significance for food security in older adults. It engages with the second major research question – *How do older adults' experiences of food, meals, and eating inform deeper understandings of food security and insecurity in older adults?* Drawing on perspectives on the concept of security from sociology and phenomenology, this chapter explores implicit elements of the phenomenon of food security in older adults. Significantly, it proposes a theoretical connection between older adults' experiences of food security and ontological security.

## ***Chapter Nine – Conclusion: Revisiting the literature, implications, and future directions***

After reflecting on the research, this chapter compares and contrasts the study's key findings with some of the key ideas in the research literature. It then proceeds to consider the implications of the study's findings for policy and practice in relation to food security in older adults. The research reveals older adults who are highly engaged in the world, and working agentially to achieve and maintain their food security *and* ontological security, well into very old age. These findings challenge the dominant welfare and care-oriented perspectives of food related discourses, policies, and programs directed towards older adults, and they open up new possibilities for food security responses which fully acknowledge older adults' resilience and agency. Finally, this chapter initiates a dialogue with others, proposing areas for further discussion, consideration, and exploration in relation to food security and insecurity in older adults.

### **1.6 Conclusion**

This chapter has introduced the topic of food security in general, and the ways in which current perspectives on food security in older adults are applied in particular. It has identified areas for further research which seek to uncover experiences and meanings of food, meals, and eating in order to develop understandings of food security in older adults which fully acknowledge the depth, substance, and significance of the phenomenon. This chapter also outlines the remainder of the thesis which details the research aim, questions, methodology, fieldwork, findings, discussion and theoretical perspectives, implications for practice, and possible areas for additional research.

## CHAPTER 2: VIEWS OF FOOD SECURITY AND INSECURITY IN OLDER ADULTS

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### 2.1 Introduction

This chapter details a comprehensive review of the published literature on food security and insecurity in older adults, and considers the ways in which the phenomenon is viewed by researchers and theorists. The review uncovers notable gaps in this literature, particularly in relation to considerations of the meanings of food in human lives. As a term, food security is laden with meaning, as are each of its component words of food and security. However, it is rare for literature on food security in older adults to engage with the multiple meanings that are implicit in each of those words, particularly in relation to experiences of ageing. There is a clear opportunity for additional research into the phenomenon of food security in older adults which employs different perspectives to engage adequately with the depth, substance, and interwoven nature of the phenomenon. In particular, these perspectives could be informed by several complementary social science disciplines, including anthropology, phenomenology, and social gerontology.

### 2.2 Reviewing the literature

#### 2.2.1 Refining the scope

Food security has quite a broad conceptual base which is reflected in the wide range of disciplines, concerns, settings, and population groups that are dealt with in the literature. Research into food security is conducted in several different disciplines, as illustrated by the results of a search conducted for the literature review. A search of Web of Science using the topic 'food security' produced 37,575 results from over 100 disciplines, including nutrition, plant sciences, social work, oceanography, psychiatry, history, urban studies, law, chemistry, geography, and tropical medicine.

The concept of food security also traverses a large number of concerns. The edited book *Food Security in Australia* is an illustrative example: its 30 chapters traverse a diversity of issues, including ethics, vulnerability, equity and access, emergency food relief, indigenous populations, local government policies, food pricing, climate change, food production, water sovereignty, soil, health, organic food standards, agriculture, horticulture, agri-food

sustainability, international trade, and land use planning (Farmer-Bowes, Higgins, & Millar, 2013).

Food security research is also undertaken in a wide range of settings with different population groups. A recent edition of the journal of *Public Health Nutrition* published 11 articles on food security research conducted with households in rural Honduras, school-age children in Brazil, low-income women in the United Kingdom and Australia, First Nations people in Canada, and African-American and Hispanic households in the United States (Nord, 2014).

### ***Literature search strategy***

The initial literature search strategy was broad and encompassing in order to gain an overview of the literature on food security. Searches were conducted of five electronic databases, as follows: Web of Science by Thomson Reuters, Cumulative Index to Nursing and Allied Health Literature (CINAHL) by EBSCO, Sociological Abstracts by ProQuest, EconLit by ProQuest and Google Scholar. The following key words and their synonyms were used in these searches: food security, food insecurity, hunger, food insufficiency; malnutrition and undernutrition; seniors, elders, elderly, and older adults; and delivered meals, Meals on Wheels, and congregate meals. Older adults were not narrowly defined by specific chronological ages for these searches. All of the terms were searched for alone and with Boolean operators such as 'and/or/not' in order to broaden and narrow each search.

Those searches uncovered a wide variety of scholarly sources including doctoral theses; original research, literature reviews, and editorials articles published in peer-reviewed academic journals; edited collections of essays; and academic books. Policy documents, research reports, and survey data were sourced through targeted searches of websites of governments, universities, and community organisations based in developed countries. Additional literature was identified by reviewing the citations in relevant journal articles and books. Automatic alerts were set up so as to receive notifications of relevant literature published during the research period. The publications that were identified through these searches and alerts were subsequently scanned for relevance by title and abstract before being included in the review.

These quite broad and encompassing searches were followed by a gradual and recursive process of refining which literature to include in the review. The boundaries of the concept of food security were delineated in order to focus on the literature of most relevance to the aim of the research. These boundaries were put in place by applying three exclusion criteria: geographic scales, settings, and timeframes of the research. During the literature review process, these exclusion criteria were applied in a flexible manner, allowing publications from the broader food security literature to be reviewed occasionally in order to contextualise the most directly relevant publications.

***Exclusion criteria: Global, national, and regional scales***

The first step in the refining process was to identify the different scales at which the research is focused. Food security concepts are applied at multiple different scales of global, national, regional, local, household, and individual scales (MacMillan & Dowler, 2012). Given that the research aims to explore personal experiences and meanings of food security, the review excludes the literature on food security at global, national, and regional scales in order to focus on food security concerns at individual, household, and local scales.

Food security literature that addresses food production issues was also excluded from the review, because this research generally engages with global, national, and regional food security concerns. Accordingly, literature was also excluded if it primarily addresses issues of agriculture, horticulture, aquaculture, food manufacturing, climate change, water, or soil. The literature on food system frameworks was also excluded as it is primarily directed towards issues of food production, manufacturing, and distribution.

***Exclusion criteria: 'Developing' countries and highly managed settings***

In order to further the refinement process, literature was excluded from the review if it detailed research conducted in developing countries. For this search, these countries were defined as those listed *below* the United Nations' top category of countries with "very high human development" (UNDP, 2013, p. 144). There is a separate literature on food security in developing countries which deals with issues of absolute poverty, extreme hunger, and famine. Those experiences are not directly relevant to experiences of relative food insecurity and poverty in developed countries. While there are some intriguing cross-overs

and discontinuities between the two bodies of literature, they are beyond the scope of this thesis and deserve detailed attention elsewhere. As such, the review almost exclusively focuses on literature which pertains to food security issues in developed countries. The majority of the literature included for review pertains to food security research conducted in the United States, Canada, New Zealand, Australia, and the United Kingdom. Literature which reports on food security research in developed countries in Europe and Asia was included in the review although this amounts to only a handful of publications.

Bearing in mind the concept of food security, literature was excluded if it exclusively engaged with older adults' food and eating experiences in hospitals, rehabilitation centres, and residential aged care. In those highly managed settings, food and meals are provided to people, and as such, older adults' eating experiences in those environments are not directly relevant to the research. Finally, focusing on food security implies excluding research into voluntary food refusal behaviours or psychological conditions related to eating.

#### ***Exclusion criteria: Timeframe of the research***

All the searches conducted for the review were open-dated. However, none of the literature published prior to the early 1990s was ultimately chosen for review because those texts employ concepts of food security which are not relevant to the aim of the research. The phrase 'food security' first appeared in research and policy literature in the early 1970s but this almost exclusively focused on situations in 'developing' countries (Maxwell & Smith, 1992). By the late 1980s, the concept of food security in developed countries was regularly appearing in the research literature but this was still primarily concerned with regional and national-level food production (MacMillan & Dowler, 2012; Maxwell & Smith, 1992). By the early 1990s, researchers applied concepts of food security to households, individuals, and neighbourhoods as well as more broadly to regions, countries, and the world (MacMillan & Dowler, 2012). As such, all of the literature chosen for the review after being scanned for relevance by title and abstract was dated from the early 1990s onwards.

#### **2.2.2 Overview of findings**

The review focused on literature pertaining to food security in older adults applied at individual, household, and local scales in developed country settings. This section briefly

introduces the review findings, which are detailed in the remainder of the chapter with specific reference to the literature. Despite the refinement process that was undertaken earlier, the resultant body of relevant literature still traverses several different disciplines of economics, geography, social science, and nutrition science. The varied methodologies employed in research into food security include statistical analyses of survey and nutrition data, spatial analyses of geographic data, and thematic analyses of qualitative interview data. There are notable disjunctures between the different paradigms, epistemologies, and methods which inform food security research. These disjunctures create challenges for collating and comparing findings and forming a coherent and holistic picture of the phenomenon of food security and insecurity in older adults.

The following Section 2.3 notes that a minority of the published research on food insecurity in older adults applies a nutritional lens to the phenomenon, which cannot fully engage with the social, cultural, and emotional significance of food in human lives. These nutrition-focused studies are usually rigorously conducted and, taken together, they provide a sound basis for understanding the negative physiological outcomes of food insecurity in older adults. However, the epistemologies and methodologies of these studies generate findings that are not readily comparable with those from other studies of food security which engage with the social, cultural, and emotional significance of food. Accordingly, Section 2.3 considers the nutritional perspectives employed in a subset of the food security literature and then sets them to one side.

Turning to research informed by other disciplines, Sections 2.4 – 2.6 detail the review's findings that other food security literature identifies, but does not fully engage with, three significant features of food security and insecurity in older adults. The phenomenon is (a) subjective and experiential; (b) complex, multi-dimensional, and interwoven; and (c) dynamic and actively managed. These three features need to be fully explored in order to develop an in-depth and nuanced understanding of food security and insecurity in older adults. Each of these features is detailed in one of the following three sections.

## **2.3 Considering nutritional perspectives**

### **2.3.1 Nutrition risk, malnutrition, and undernutrition**

A large body of published research investigates issues of nutrition risk, malnutrition, and undernutrition in older adults. Nutrition risk occurs when an individual is deemed to be at risk of malnutrition, which is defined as “an acute, subacute, or chronic state of nutrition, in which varying degrees of over-nutrition or under-nutrition... have led to a change in body composition and diminished function” (Mueller, Compher, & Ellen, 2011, p. 16). The nutrition-focused literature is relevant to measuring the physiological outcomes of food insecurity in older adults. However, notions of nutrition risk, undernutrition, and malnutrition cannot be readily integrated with food security’s other conceptual elements. As noted in the introduction of Chapter One, food security encapsulates considerations of food availability, safety, access, affordability, and acceptability, in addition to nutritional adequacy (Anderson, 1990).

### **2.3.2 The nutritional paradigm**

Only a small proportion of the literature on nutrition issues in older adults can usefully be considered to be part of the food security literature; the remainder applies a nutritional lens to the matter and does not adequately engage with the experiential elements or contextual aspects of the phenomenon. The majority of the literature on nutrition in older adults effectively sits alongside the food security literature because it focuses almost exclusively on the nutritional, biological, and physiological outcomes of eating inadequate, insufficient, or excessive food.

While the conceptual links between food insecurity and nutrition risk have not been closely examined or explicated, these concepts are evidently related to one another in terms of their shared associations with health concerns. Food insecurity is significantly associated with undernutrition in all age groups, characterised by a less varied diet and lower intakes of meat, fruit, and vegetables (Bhattacharya, Currie, & Haider, 2004; Tarasuk, 2001b). In older adults, food insecurity and nutrition risk is associated with poor management of diabetes (Seligman et al., 2011), low or very high Body Mass Index (BMI) (Bhattacharya, et al., 2004), diminished immunity (Payette & Shatenstein, 2005), and medication non-adherence (Sattler & Lee, 2013). Food insecurity and nutrition in this age group is also associated with poorer

long-term health outcomes, including higher morbidity and mortality, more frequent and longer admissions to hospital, more prolonged periods of convalescence, and earlier admission to residential care (Johnson et al., 2011; Stanga, 2009; Visvanathan, 2009).

### **2.3.3 Nutrition-focused research**

There is some research which employs nutritional terminology but it addresses issues of food security more closely than nutrition. For example, some articles are predominantly couched in nutritional terms but also address broader environmental and social barriers to food security (Lee, Frongillo, & Olson, 2005a; Lee, Frongillo, & Olson, 2005b; Quandt, Arcury, & Bell, 1998; Quandt & Chao, 2000). These variations in terminology might reflect researchers' attempts to conform to the preferred terminology of particular academic journals or research granting bodies. Alternatively, using terms such as 'nutrition risk' might represent a tacit acknowledgment that government survey data analysed in the research takes a nutritional perspective on food security by attempting to measure it in terms of dietary intake.

There is also a substantial body of literature that is overwhelmingly nutrition-focused in its research aims, methods, and findings, and this literature essentially sits alongside, rather than within, the food security literature. From this perspective, eating food is primarily viewed as a biomedical function which provides nutrients to human bodies (Scrinis, 2008). These studies usually employ quantitative measures of body weight and size, and aim to determine intakes of dietary variety, food groups, fat, carbohydrates, protein, and micronutrients, and then compare them to specified dietary recommendations (for example see Brownie & Coutts, 2013; Burke et al., 2013; Santos, Rodrigues, Oliveira, & de Almeida, 2014; Temple, 2006b; Winter, Flanagan, McNaughton, & Nowson, 2013).

This literature focuses heavily on physiological factors for nutrition risk in older people, with often minimal acknowledgement of the social aspects of eating. Commonly identified physiological factors include metabolic changes associated with ageing, oral health problems, and chronic diseases such as cardiovascular disease, dementia, cancer, and visual impairment (Brownie, 2006; Savoca et al., 2010; Stanga, 2009). As well, the majority of this research is conducted with aged care residents or hospital inpatients rather than community-dwelling older adults. Rare exceptions are studies of the nutrition content of

meals delivered to community-dwelling older adults (Frongillo & Wolfe, 2010; Keller, 2006; Lee & Frongillo, 2001b; O'Dwyer, et al., 2009).

Although nutrition-focused research has built an important evidence base for the physical harm that accrues to older adults from nutrition risk, it tends to privilege the biological functionality of food over its social, cultural, and emotional significance in human lives (Scrinis, 2008). For example, this literature rarely considers in any depth the social factors for undernutrition or nutrition risk in older adults. Although some studies have identified interpersonal concerns such as eating alone or social isolation as potential contributory factors, these are generally viewed as relatively straight forward functional problems rather than deep-seated features of particular older adults' lives (for examples, see Brownie, 2006; Brownie & Coutts, 2013; Donini et al., 2013; Holmes & Roberts, 2011).

Furthermore, nutrition-focused studies are somewhat constrained by their reliance on individualist notions of food choice which assume that older adults can freely choose what food they purchase, prepare, and eat (Connors, Bisogni, Sobal, & Devine, 2001; Wethington & Johnson-Askew, 2009). Dietary guidelines directed towards older adults tend to assume that older adults will be able to eat healthily once they are provided with adequate nutrition information (for example, see Truswell, 2009). This assumption does not adequately engage with conceptual models of food security which reveal that older adults face a wide range of challenges for obtaining and preparing food (Lee, et al., 2005b; Sylvie, Jiang, & Cohen, 2013; Wolfe, Olson, Kendall, & Frongillo, 1996).

In recent years, nutrition-focused food research has been criticised for translating intangible, meaningful, and nuanced ideas of human nourishment into tangible, functional, and quantifiable measures of nutrition intake. This approach to food has been variously criticised as "nutritionally reductive" (Schubert, Gallegos, Foley, & Harrison, 2012, p. 354), "nutritionism" (Scrinis, 2008, p. 39), and "nutritional black boxing" (Yates-Doerr, 2012, p. 293). From this perspective, research which employs nutrition-focused approaches to food is not readily able to generate deeper understandings of older adults' rich, complex, and highly situated experiences of food and eating.

## **2.4 Food security as subjective and experiential**

### **2.4.1 Contemporary views of food security**

As noted on page 35 in Section 2.2.1, the concept of food security gradually broadened out during the 1980s from an exclusive focus on global and national-level issues to include food security concerns at local, household, and individual levels (MacMillan & Dowler, 2012; Maxwell & Smith, 1992). In 1983, the Food and Agricultural Organization of the United Nations (FAO) expanded its definition of food security beyond food volumes, stating that food security is achieved when “all people at all times have both physical and economic access to the basic food that they need” (FAO, 1983 cited in FAO, 2003). Accordingly, traditional measures of food production volumes such as tonnage, calories, and protein were supplemented by qualitative measures which engage with the food-related coping strategies and experiences of households and individuals (Lo, Chang, Lee, & Wahlqvist, 2012; MacMillan & Dowler, 2012).

This greater emphasis on the subjective elements of food security was reflected in a widely-cited definition of food security developed by an expert panel of nutritionists and social scientists from the United States. The definition states that food security entails:

... access by all people at all times to enough food for an active, healthy life and includes at a minimum: a) the ready availability of nutritionally adequate and safe foods, and b) the assured ability to acquire acceptable foods in socially acceptable ways (e.g., without resorting to emergency food supplies, scavenging, stealing, and other coping strategies) (Anderson, 1990, p. 1560).

In this definition, food security entails four basic elements: quantity (“enough food”), quality (“nutritionally adequate and safe foods”), acceptability (“acquire acceptable foods in socially acceptable ways”), and certainty (“the assured ability”). In the same document, food insecurity was defined as occurring “whenever the availability of nutritionally adequate and safe foods or the ability to acquire acceptable foods in socially acceptable ways is limited or uncertain”(Anderson, 1990, p. 1560).

Evidently, these definitions reflect a conceptualisation of food security which includes an important subjective element, which is revealed by the inclusion in the definition of *a sense of assurance or certainty*. From a sociological perspective, notions of subjectivity refer to the experiences, motivations, thoughts, and feelings of individuals (Wagner, 1970). Hence, subjective experiences of food security relate to human beings' *feelings* of confidence in relation to their current and future food security, as well as to their ability to acquire sufficient quantities of good quality, safe, and culturally acceptable food. Accordingly, from this perspective, food security is less an objective and measurable phenomenon than a subjective experience that is profoundly shaped by human beings' subjective motivations, thoughts, and feelings (Webb et al., 2006).

Empirical research supports a view that experiences of food insecurity include a significant emotional or subjective element. Research has found associations between food insecurity and perceived lower quality of life, such that food insecure older adults are more likely to report feeling terrible, unhappy, or dissatisfied with their lives than those older adults who are food secure (Temple, 2006a). Significant associations have also been found between food insecurity and negative mental health and psychological indicators in both older adults and the general population, including psychological distress (Carter, Kruse, Blakely, & Collings, 2011) and depressive symptoms (Choi, Teeters, Perez, Farar, & Thompson, 2010; Johnson, Sharkey, & Dean, 2011; Vozoris & Tarasuk, 2003; Wu & Schimmele, 2005).

#### **2.4.2 Experiences of food insecurity across the lifecourse**

Contemporary perspectives on food security are informed by seminal research conducted in the United States which represented the first substantial attempts to measure subjective experiences of food insecurity, which was termed 'hunger' by its authors (Radimer, et al., 1990; Radimer, Olson, Greene, Campbell, & Habicht, 1992). These studies aimed to develop a measurable understanding of food insecurity by applying methods of naturalistic inquiry with women with dependent children. The researchers were highly cognisant of the subjective and experiential elements of the phenomenon and argued these were of epistemological relevance to their research: "the women's description of what led to their hunger experience, and the experience itself, provide rich detail for understanding the causes, evolution and consequences of hunger" (Radimer, et al., 1992, p. 39S).

This research found that although food insecurity was characterised by objective features of insufficient food intake and nutrition inadequacy, the phenomenon was also characterised by significant psychological and social features, including a lack of choices, feelings of deprivation, and disrupted eating patterns (Radimer, et al., 1992). Women with dependent children were found to experience food insecurity in a particular sequence of stages, in which food-related anxiety was experienced *before* the women compromised on food quality (Radimer, et al., 1992). Building on these findings, the researchers developed and validated survey items for measuring experiences of food insecurity which specifically incorporate experiences of food-related anxiety (Radimer, et al., 1992).

Subsequently, these survey items were formalised and adapted by other researchers and government agencies to create two tools that are now widely used to measure food security – the Radimer/Cornell Hunger Scale and the Household Food Security Supplement Module (Nord, 2014). For more than 20 years, these experiential measures of household-level food security have quantified the incidence and severity of the phenomenon among the general population and in various subgroups in developed countries, including older adults (Nord, 2014). However, the experiential or subjective elements of contemporary understandings and measurements of food insecurity were heavily informed by research conducted exclusively with women who had dependent children. This is significant because several large and rigorously conducted studies have found that older adults' experiences of food insecurity differ significantly from those of women with dependent children (Lee & Frongillo, 2001a; Wolfe, Frongillo, & Valois, 2003; Wolfe, et al., 1996).

In particular, research into the suitability of quantitative measures of food security have found that rural older adults experience food-related anxiety *after* they have already compromised their food quality, and they are less willing to report any food-related concerns than other age groups (Wolfe, et al., 2003). As such, it is possible that older adults experience compromises in their food quality, with all its attendant risks, well before they experience or report anxiety related to food. If so, the current widely-used tools for measuring food insecurity do not adequately reflect the nature of the experience for older adults.

This same research (Wolfe, et al., 2003) proposed, but did not explore in significant detail, the possibility that older adults' socio-historical experiences, including living through two world wars and the Depression, have informed their world views – such that they experience less anxiety about food than do other age groups (Wolfe, et al., 2003). Along with these older adults' rural values, their adverse life experiences fostered stoicism and acceptance of hardship, which might lead to them under-acknowledging their current food insecurity (Wolfe, et al., 1996).

## **2.5 Food security as complex, multi-dimensional, and interwoven**

### **2.5.1 Conceptual models of food insecurity**

Food security is widely viewed by many researchers as a highly complex phenomenon that features many interrelated and interwoven factors and dimensions, including the nutritional factors detailed in the previous section. However, the conceptual models developed for food security in the general population and for older adults in particular are not yet fully developed, especially in relation to the relationships, mechanisms, and processes which mediate between its various factors.

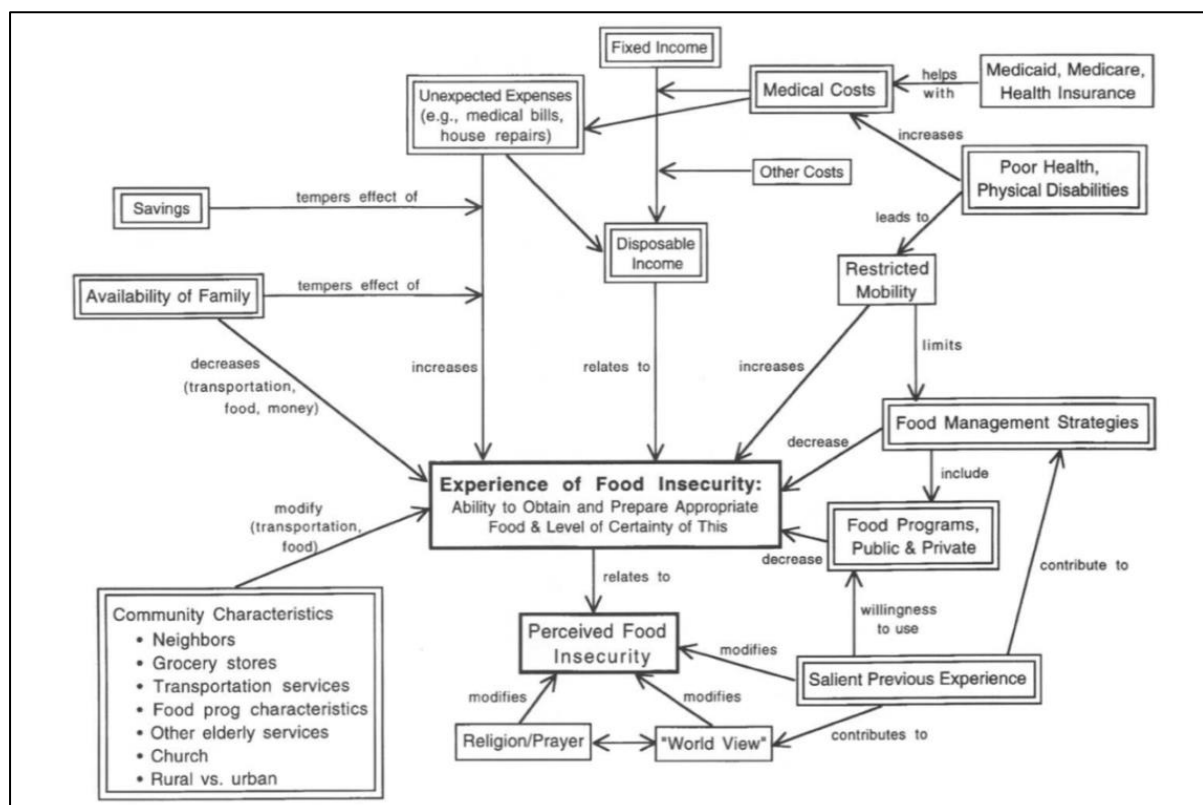
All of the contemporary conceptual models of food security incorporate at least six food-related elements, albeit in different relationship to each other, as follows: nutritional content, cultural value, safety, affordability, availability, and accessibility (Ericksen, 2008; Gorton, et al., 2010; Haering & Shamsuzzoha, 2009; Hamelin, Mercier, & Bedard, 2011; Ingram, 2011). Some models are more complex than others: one commonly-cited model of household and individual food security developed by Australian researchers identified 13 different objective and subjective elements that inform two determinants (Rychetnik, et al., 2003). The first of these determinants is food supply, which has six elements: location of food outlets, availability in outlets, price, quality, variety, and promotion. The second determinant is access to food, which has seven elements: financial resources, transport and distance to shops, knowledge and skills and preferences, storage facilities, preparation and cooking facilities, time and mobility, and social support (Rychetnik, et al., 2003).

Considering food security in older adults introduces several additional factors which further complicate conceptual models of the phenomenon. Below, four conceptual models are

briefly touched upon to illustrate how various models of food insecurity in older adults itemise the many factors involved in the phenomenon but have not yet successfully come to terms with the highly interwoven, situated, and nuanced nature of the phenomenon. For three of these models, diagrams are reproduced below to explicate the argument in visual terms but not to inform any detailed discussion of their features.

Qualitative research conducted in the United States in the 1990s informed a seminal conceptual model of food insecurity in older adults (Wolfe, et al., 1996). Reproduced below in Figure 1, this model views food insecurity in older adults as informed by many different factors, including economic constraints such as medical costs, fixed incomes, and unexpected expenses; health and physical disabilities; availability of family; food management strategies; food programs; previous experiences and religion; and the characteristics of older adults' communities (Wolfe, et al., 1996).

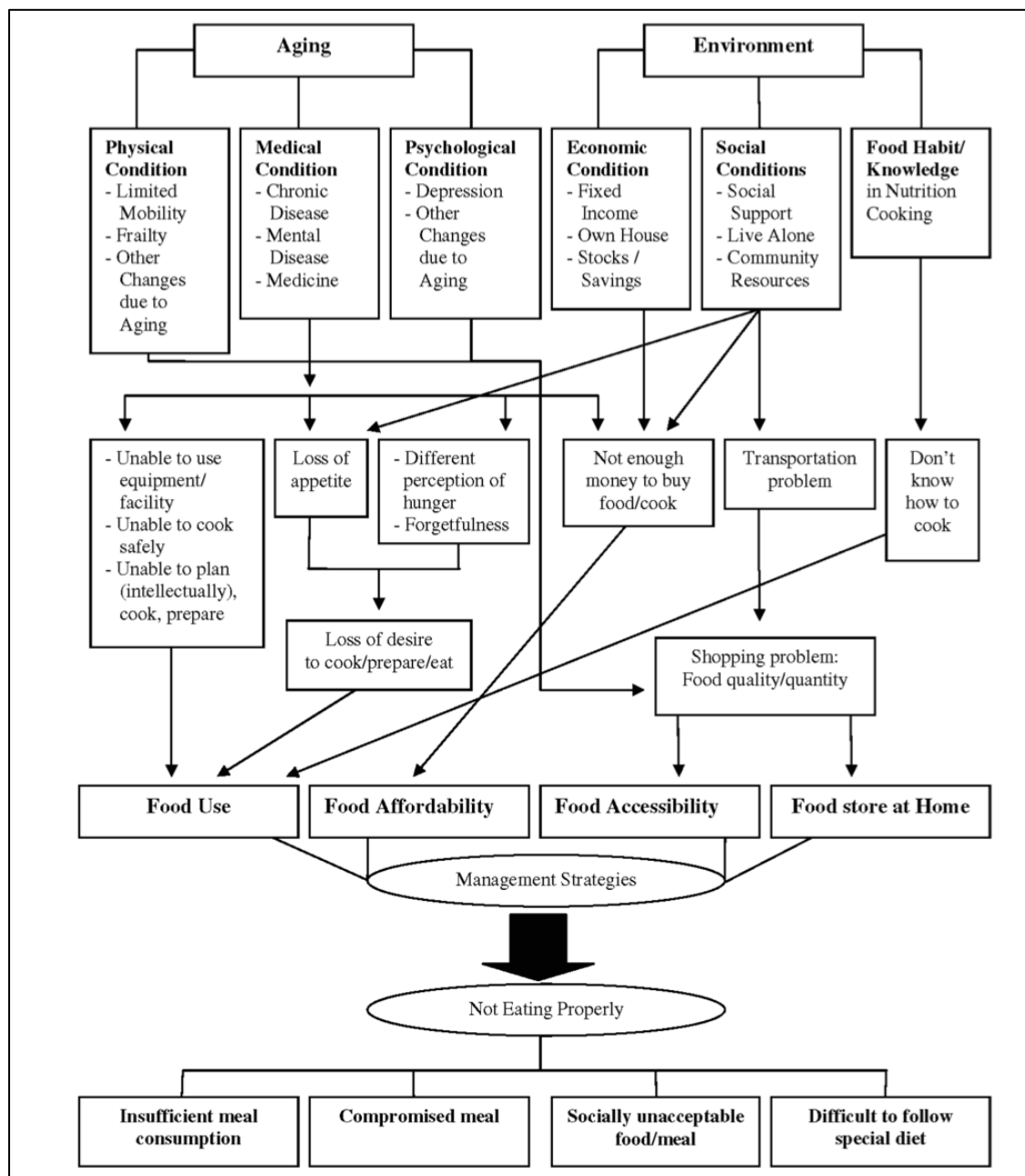
**Figure 1: Conceptual model of food security in older adults from Wolfe et al., 1996**



Source: "Figure 1. Food insecurity in the elderly: A conceptual framework" (Wolfe, et al., 1996, p. 95)

Another complex model of older adults' experiences of food was developed from research into how service providers funded by the Older American Act Nutrition Program (OAANP) conceptualise and assess clients' needs (Lee, et al., 2005b, p. 69). As illustrated in Figure 2 on the following page, the model identifies 16 primary conditions of ageing and features of older adults' environments which are thought to contribute in complex ways to older adults' food use, affordability of food, accessibility of food, and types of food stored at home. In turn, these four dimensions cause four adverse outcomes for older adults: insufficient food consumption, compromised meals, eating socially unacceptable food, and difficulties following special diets to manage health conditions.

**Figure 2: Conceptual model of food security in older adults from Lee et al. 2005b**



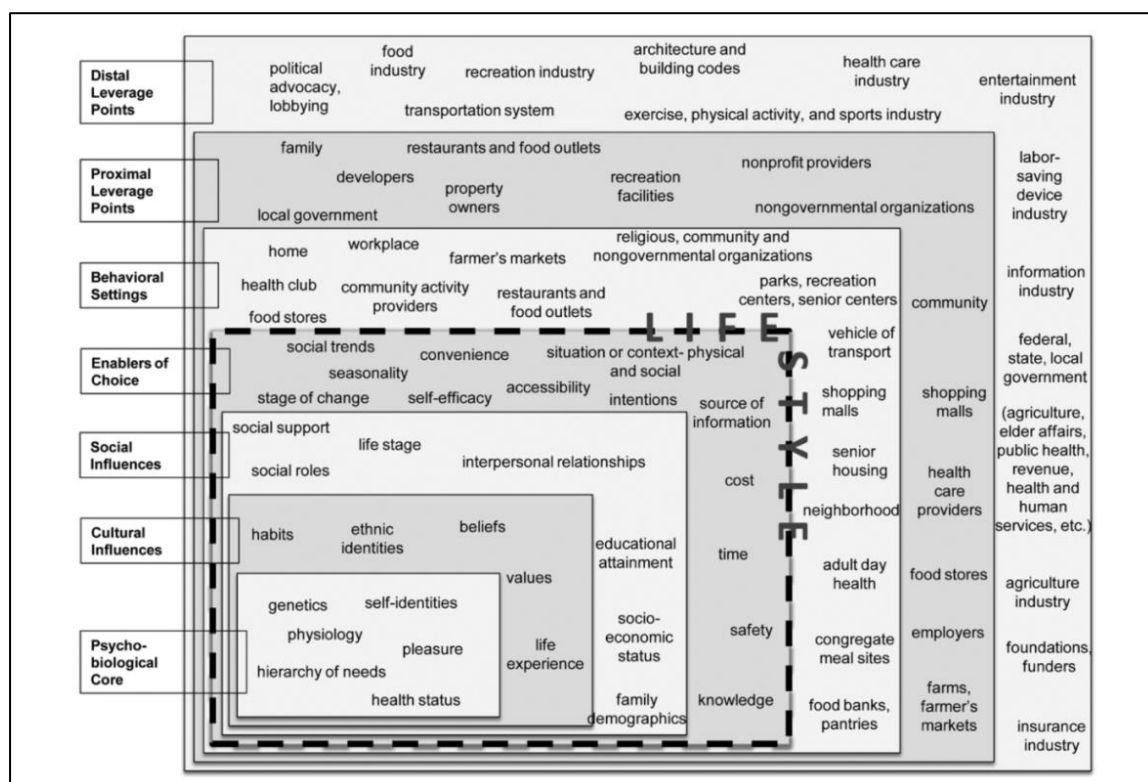
Source: "Figure 1. OAANP providers' perception of food and nutrition problems in elders" (Lee, et al., 2005b, p. 69)

Another two models of food security in older adults have been informed by social ecological theory. Adapted from Ecological Systems Theory, social ecological models emphasise mutually reinforcing relationships between multiple levels of influence and people's behaviour (Bronfenbrenner, 1979). The first of these two models consists of five concentric layers of influence on older adults' eating behaviours: (a) intrapersonal influences, including

knowledge, attitude, beliefs, and skills; (b) interpersonal influences, including formal and informal social networks and support systems; (c) institutional influences, including implicit and explicit rules and regulations for consuming food; (d) community influences, including social capital derived from organisations and social networks; and (e) public policy influences, including laws, policies, and services (Locher & Sharkey, 2009).

The second of these complex socio-ecological frameworks was developed in the United States by an expert panel of researchers and nutritionists (Sylvie, et al., 2013). Although it is couched in terms of older adults' "eating behaviours", it essentially deals with the same conceptual factors as the other models of food security. As illustrated in Figure 3 on the following page, this model has seven levels and more than 70 influences, settings, and leverage points. Evidently, it is a highly comprehensive model, but it does not seek to explain the varied relationships between those various levels and factors (Sylvie, et al., 2013).

**Figure 3: Conceptual model of food security in older adults from Sylvie et al., 2013**



Source: "Figure 1. Social ecological framework for determinants of eating behavior in older adults" (Sylvie, et al., 2013, p. 163)

The complex nature of the four models introduced above demonstrate that the factors for food security in the general population, and in older adults in particular, are many and varied. They also traverse diverse considerations of economics, nutrition, geography, politics, and social relationships. As well, these factors appear to be related to each other in highly complex ways via mechanisms that are not fully delineated in these models. The multi-dimensionality and complexity of the phenomenon of food security in older adults have created particular challenges for research, which would benefit from further developing these underlying concepts. As detailed in the following section, these opportunities are revealed in studies taking a broad and multi-dimensional perspective or those focusing in detail on one particular dimension of food security.

### **2.5.2 Examining multiple dimensions of food security**

A sizeable tranche of the published research on food security in older adults takes a multi-dimensional approach to the phenomenon by simultaneously considering its economic, spatial, and social factors. This research achieves comprehensiveness and acknowledges the complex and interwoven nature of the phenomenon. However, in doing so, these studies inadvertently lose sight of food security's conceptual depth and do not fully come to grips with the nature of the relationships between its multiple dimensions.

This research is situated within a much larger body of research conducted into population health inequalities and its various contributing factors, which are referred to as 'the social determinants of health' (Kaplan, 2004). Research of this kind has been conducted in Australia, including investigations of relationships between socio-demographic indicators, measures of social capital, and health in urban neighbourhoods (Baum, Putland, MacDougall, & Ziersch, 2011; Ziersch, Baum, MacDougall, & Putland, 2005).

In relation to food security, this multi-dimensional literature often considers and identifies long lists of readily-quantifiable factors. Complex and deeply personal living situations are often captured in labels such as marital status, sole parenthood, ethnicity, educational qualification, employment, income, and wealth. These labels risk skimming over deeply-felt experiences of daily life for people. While these multi-dimensional approaches do point towards the multiple disadvantages faced by many food insecure older adults, they cannot readily generate in-depth insights into lived experiences of the phenomenon.

This kind of research has not produced a strong consensus on which are the most important contributory factors for food security, with perhaps the exception of income. For example, an analysis of socially disadvantaged populations in the United Kingdom and Australia found that being born outside Australia, being married, being employed, or having a higher income was associated with food security (Thornton, Pearce, & Ball, 2014). A similar study of socio-demographic determinants conducted in Finland, Italy, the United Kingdom, and Sweden found that being tertiary educated, female, and living in a couple were significant factors for food security, but marital status and income were not (Irz et al., 2013). A third study from New Zealand found that dwelling tenure and family situation were significant factors, as well as income and employment (Carter, Lanumata, Kruse, & Gorton, 2010). Recently, a U.S. food security expert reviewed food security research over the past two decades and argued that more research needs to be done, because *“understanding of some key relationships and the underlying processes and mechanisms that mediate them is still preliminary and partial”* [emphasis added] (Nord, 2014, p. 3).

Several researchers have argued for an expanded definition of the concept of food security for older adults informed by further research and theorisation. For example, after analysing survey data collected from 1988 to 1994 in the United States, Lee and Frongillo (2001a) concluded that food insecurity in older adults is strongly associated with functional impairments which constrain cooking and meal preparation. As such, they argued, the concept of food security should be expanded to include “altered food use” in addition to its core components of affordability, availability, and accessibility (Lee & Frongillo, 2001a, p. S94).

Similarly, the author of an Australian study, which analysed data on older adults from the National Health Survey in 2001, called for future research to incorporate personal mobility into models of food security in older adults (Temple, 2006a). Another Australian study on food security in the general population highlighted the importance of transport and mobility for older adults, finding that older adults and teenagers were more likely than other age groups to have inadequate access to a vehicle for food shopping (Burns, Bentley, Thornton, & Kavanagh, 2011).

The author of a study which examined household characteristics associated with food security in older adults in the United Kingdom observed some inconsistencies and opacities in its statistical results and concluded that, "the task of separating out issues to do with food poverty, food access and matters of personal choice are complex and may be more suited to qualitative research methods..." (Deeming, 2011, p. 487). However, qualitative multi-dimensional studies have not made substantial progress either in developing an interwoven understanding of food security in older adults. Again, the research has generated long lists of seemingly unrelated or opaquely related factors. In general, this research does not engage in an in-depth manner with the personal meanings of these diverse factors for older adults' lives or the nature of the relationships between them.

For example, four of these studies conducted in America, Canada, and Australia identified a wide range of factors, but only a few of the same factors were identified in all of these studies (Keller, Dwyer, Senson, Edwards, & Edward, 2006; Lee, et al., 2005a; Locher et al., 2008; Radermacher, Feldman, & Bird, 2010). These factors included frailty, chronic disease, social support, living alone or losing a spouse, food habits and nutrition knowledge, financial resources, functional limitations, social isolation and psychological health, transport, and poor availability of culturally preferred foods (Keller, et al., 2006; Lee, et al., 2005a; Locher, et al., 2008; Radermacher, Feldman, & Bird, 2010). In two of these articles, the authors called for the development of a wider or more holistic understanding of food security for older adults – one which incorporates an inability or loss of desire to plan, prepare, cook, and eat food (Lee, et al., 2005a; Radermacher, Feldman, & Bird, 2010).

Another article reveals a need for further theoretical development of the relationships between various factors for food security. This Canadian study identified 13 factors that influence food acquisition and preparation activities conducted by older rural women (Neill, et al., 2011). Each of these factors was listed as either a facilitator or a barrier to food security, or indeed both. However, there is only minimal explanation of the five factors which were categorised as both facilitators and barriers: "economics", "valuing a healthy diet", "technology changes", "transportation", and "location and nature of grocery stores" (Neill, et al., 2011, p. 229).

These qualitative studies achieve a comprehensive view of the phenomenon but, like the statistical analyses discussed earlier, this literature has not significantly progressed understandings of the deeply-held meanings of particular factors for food insecurity for older adults, nor the complex, nuanced, and situated relationships which operate between them. The research detailed in this thesis seeks to address this gap.

### **2.5.3 Exploring individual dimensions of food security**

The following section reviews food security research which engages in a more in-depth manner with individual dimensions of food security rather than with multiple dimensions simultaneously. For the purposes of the review, these are grouped into four broad categories: economic, spatial, social, and subjective dimensions.

#### ***Economic dimensions***

Economic factors, and income in particular, hold a central place in efforts to conceptualise and measure experiences of food security. A major review of the economic literature on food security in the United States identified the same inverse relationship between income and food insecurity in all reviewed studies, and concluded that “income is clearly one of the most important determinants of food insecurity and hunger” (Rose, 1999, p. 517S). These findings have been replicated in analyses of national-level survey data in the United States, Australia and New Zealand (Carter, et al., 2011; Nord, Coleman-Jensen, Andrews, & Carlson, 2010; Temple, 2008). In older adults, a similar relationship between income and food insecurity has been identified (Gorton, et al., 2010; Nord, 2002). However, other economic factors are also thought to influence food security in older adults, including housing tenure and medical costs (Quine & Morrell, 2006; Wolfe, et al., 2003).

Government surveys of food insecurity in both the United States and Australia view food insecurity as almost exclusively an outcome of insufficient funds to purchase food. The United States Government’s annual survey of food security asks households 12 questions which all refer to *insufficient money* to purchase food or an *inability to afford* food (Nord, et al., 2010). Similarly, virtually every government survey and quantitative study of the prevalence of food insecurity in Australia has relied on a single question which defines food insecurity in terms of inadequate financial resources: “In the last 12 months, were there any

times that you ran out of food and couldn't *afford to buy* more?" (Foley et al., 2010; Quine & Morrell, 2006; Radimer, Allsopp, Harvey, Firman, & Watson, 1997; Temple, 2006a; Temple, 2008).

While the pre-eminent status of economic factors for food security is perhaps warranted, at times there has been an over-reliance on them at the expense of considering other important dimensions. For research into food security in older adults in particular, this emphasis risks misconstruing the nature of the phenomenon and therefore under-measuring its incidence. Food insecurity is generally thought to be less common in older age groups than in the general population. The latest US Government survey estimates that the prevalence of food insecurity for older adults (7.9 per cent) is well below the national average of 14.5 per cent (Coleman-Jensen, Nord, Andrews, & Carlson, 2011). Although a study of eye health in older Australians found the prevalence of food insecurity was 13 per cent (Russell, Flood, Yeatman, & Mitchell, 2014), most Australian surveys have found prevalence rates in older adults between 1.7 per cent and 2.8 per cent (Quine & Morrell, 2006; Rychetnik, et al., 2003; Temple, 2006a). Again, these prevalence rates are lower than those found in the general population, which has been measured to be around 5 per cent (Rychetnik, et al., 2003).

However, several researchers in Australia and the United States have argued that the actual prevalence of food insecurity for older adults is almost certainly higher than those figures suggest because the survey tools do not adequately reflect the multi-dimensional nature of the phenomenon in older adults (Quine & Morrell, 2006; Radermacher, Feldman, & Bird, 2010; Ramsey, 2011; Temple, 2006a; Wolfe, et al., 2003). One Australian study, which defined food insecurity in terms of financial resources to purchase food, found that just under two per cent of the surveyed population reported food insecurity. However, the authors noted that this may be an underestimate because older adults pride themselves on their self-sufficiency and therefore tend to under-report food insecurity (Quine & Morrell, 2006).

### ***Spatial dimensions***

Research into food security frequently explores the spatial dimensions of the phenomenon, mapping quantifiable measures of distances, and analysing the spatial distribution of food

outlets and residential populations (Wiles, 2005). This research has brought worthwhile attention to the spatial elements of food insecurity, especially with respect to examples of poor access to healthy food in particular locations in the United States. However, this research does not engage thoroughly with the subjective or experiential elements of living in particular places, including rural environments, and their significance for food security.

A recent critical review of 18 spatial studies of food insecurity found mixed evidence of associations between food insecurity and various spatial measures (Carter, Dubois, & Tremblay, 2014). Seven of the eleven studies examined location of residence, and found that living in a rural area was associated with lower rates of food insecurity. For the 18 studies overall, mixed results were found for associations between food insecurity and other spatial measures, including neighbourhood social capital, distance to food stores, and local-level socioeconomic indicators (Carter, et al., 2014). Two studies of food security in older adults analysed Geographic Information Systems (GIS) data on food store availability in the United States and Canada produced differing results (Mercille et al., 2012; Yamashita & Kunkel, 2012). They produced different results: the first study found clear associations between spatial factors and poor food access, while the second study did not (Mercille, et al., 2012; Yamashita & Kunkel, 2012).

During this review, no publications were located which detail Australian studies that have exclusively focused on the spatial dimension of food security in older adults. However, studies which use spatial measures for the general population have been conducted in Australia, and some of their findings are relevant to older adults as well as to the general population. One recent Australian study found that, along with young people, older adults were more likely than other age groups to have inadequate access to a vehicle, which impairs their access to food (Burns, et al., 2011).

Several other Australian studies have employed the concept of a Healthy Food Basket to investigate spatial differences in healthy food costs across urban and rural areas of the states of South Australia and Victoria. These studies have generally reached different conclusions, and some point to other dimensions of food security that might be interacting with its spatial dimensions (Burns, Gibbon, Boak, Baudinette, & Dunbar, 2004; Meedeniya, Smith, & Carter, 2000; Tsang, Ndung'u, Coveney, & O'Dwyer, 2007; Wong et al., 2011).

These spatial studies are conceptually related to a series of studies which examine the nature and consequences of 'food deserts' or pockets of low food access in areas of socioeconomic disadvantage (Cummins & Macintyre, 2002). The actual existence of food deserts is highly contested, such that some researchers argue that the idea of food deserts is actually a factoid – an imagined fact which is not supported by the available evidence (Cummins & Macintyre, 2002). A systematic review of food deserts found spatial disparities in food access in the United States but concluded the evidence for food deserts in other developed countries was “sparse and equivocal” (Beaulac, Kristjansson, & Cummins, 2009, p. 1). One Australian study of food deserts found that living in an area with few food shops did not by itself impose food access difficulties, which were also influenced by relationships with friends and neighbours, as well as government subsidies to overcome transport difficulties (Coveney & O'Dwyer, 2009).

In general, these studies do not closely consider lived experiences of rurality and place. Rurality is often discussed in terms of food availability and travel distances to the nearest supermarket, and does not engage with less tangible but potentially more influential aspects of rural living such as attachment to place. The shops, households, and residents in these sites remain distinct from people's affective and nuanced relationships with the places in which they live.

### ***Social dimensions***

The conceptual models detailed in Section 2.5.1 above reveal a general consensus that social relationships are influential factors in food security in older adults (Lee, et al., 2005b; Locher & Sharkey, 2009; Sylvie, et al., 2013; Wolfe, et al., 1996). As detailed below, these models are informed by research which has found that social relationships and social connectedness are influential for food security in older adults (Dean & Sharkey, 2011; Locher et al., 2005; Turrini et al., 2010).

Research has been conducted in the United States into statistical associations between food security in older adults and selected social factors, including social support, social isolation, and social capital. One of these studies found that higher levels of social isolation were associated with increased nutrition risk (Locher, Ritchie, et al., 2005). Another study found that food insecurity was more likely if people had lower social capital and higher levels of

“perceived personal disparity”, which is defined as their subjective experience of poverty in comparison to other people in their community (Dean & Sharkey, 2011, p. 1456). A European study found that informal social networks influence food security in two groups of older adults – widowed men without prior food shopping experience, and older adults with significant health problems and limited assistance from services (Turrini, et al., 2010).

While these quantitative studies have contributed to a basic understanding of the importance of social relationships for food security in older adults, they have not made significant inroads into understanding the mechanisms through which social relationships influence food security. The results of these studies are often not readily comparable and thus cannot be integrated to build up a comprehensive view of the social aspects of food security. This partly arises from the understandable challenges that researchers have faced in defining and measuring inherently complex and intangible social factors, especially social capital (Dean & Sharkey, 2011).

Several qualitative studies of delivered meals services have also revealed the importance of social relationships for older adults’ experiences of food. In particular, three studies conducted in either Australia or Ireland found that clients valued social contact with meal deliverers, even though this social contact was limited in both duration and quality, and not a very articulated component of the service (Boyer & Orpin, 2007; Grant & Jewell, 2004; Timonen & O'Dwyer, 2010). Similarly, in Australian research into social eating programs for older adults, participants saw the social aspects of organised eating occasions as their primary benefit, over and above any food that was served (Boyer, et al., 2013).

A recent review of food issues in older adults has noted that “the mechanisms by which social relationships influence diet among older people remain poorly understood” (Vesnaver & Keller, 2011, p. 2). In recent years, several researchers have proposed sociological frameworks and approaches for investigating food and eating as a social phenomenon, including Giddens’ structuration theory for eating in families (Delormier, Frohlich, & Potvin, 2009). Others have proposed the development of “*socially engaged* nutrition sciences” which would feature “a more sociological way of thinking about the social dimensions of nutrition” (Schubert, et al., 2012, p. 353).

### ***Subjective dimensions***

As noted above in Section 2.4.1, the genesis of contemporary understandings of food security emerged from research which explored mothers' subjective experiences of food insecurity. That research focused on women's intense negative emotions, physical sensations, and responses to food insecurity. Subsequently, research in the United States and Canada has built on those studies, and has continued to focus on families with dependent children, perhaps because they are perceived as particularly vulnerable to socioeconomic disadvantage and food insecurity.

The most commonly cited of these articles details a study of Canadian households with dependent children (Hamelin, et al., 1999). It identified three subjective consequences of food insecurity: "physical impairment" including hunger, depletion, and illness; "psychological suffering" from going against social norms and one's own values; and "sociofamilial perturbations" (Hamelin, et al., 1999, p. 526S). These "perturbations" include (a) disrupted eating patterns and rituals, such as no longer inviting friends over to dinner; (b) disordered household dynamics, such as feelings of tension and guilt between parents and children; and (c) distorted means of acquiring and managing food, such as parents not eating in order to feed children, poaching animals, or stealing food (Hamelin, et al., 1999).

In this study, experiences of food insecurity were found to include a significant sense of "...powerlessness, inequity and frustration as part of a deep sense of alienation..." (Hamelin, Beaudry, & Habicht, 2002, p. 129). A sense of alienation was thought to arise from "being deprived of access to food and subjected to unmodifiable conditions" (Hamelin, et al., 2002, pp. 123-124). Similarly, a phenomenological study conducted with African American women aged 18 – 60 years categorised food insecurity experiences as either "hunger of the body" which encapsulated painful bodily sensations of physical hunger, or "hunger of the mind" which encapsulated negative feelings of deprivation, depression, and helplessness (Chilton & Booth, 2007, p. 116).

The findings that younger women's experiences of food insecurity are characterised by feelings of alienation and hopelessness is significant because studies into the subjective dimensions of food security in older adults have produced quite different results. In these studies, older adults' experiences of food insecurity are characterised by a prevailing mood

of acceptance and enactment of proactive strategies for acquiring and managing food. One of these studies was conducted with widowed women aged over 70 years in rural America (Quandt, McDonald, Arcury, Bell, & Vitolins, 2000). This study found that two significant experiential elements of food security were common in older women's lives. These elements would only rarely be experienced by younger women with dependent children: the terminal illness of spouses, which changed women's cooking and eating patterns, and the emergence of new social roles and cooking behaviours after spouses had died (Quandt, et al., 2000).

These same researchers further explored meanings of food security for rural older adults in another qualitative study (Quandt, Arcury, McDonald, et al., 2001). The most commonly identified theme was "you can't always get what you want", which conveyed that older adults felt acceptance in the face of less-than-ideal food situations (Quandt, Arcury, McDonald, et al., 2001, p. 363). Values of self-sufficiency and pride in rural older adults contributed to this mood of acceptance, such that they saw compromises in their food situation as neither unexpected nor unendurable (Quandt, Arcury, McDonald, et al., 2001).

Similar results were found in findings from research with low-income older women in Canada (Green-LaPierre et al., 2012). The study identified a large number of factors that influence their food insecurity, but the authors argued that the older women's worldviews was a particularly crucial factor, as none of the women identified themselves as food insecure despite their adverse situations (Green-LaPierre, et al., 2012). These women's worldviews were characterised by "a general contentedness about their diet, their life and general circumstances", which was attributed to their experiences of particular socio-historical events including the Depression and wars (Green-LaPierre, et al., 2012, p. 4).

## **2.6 Food security as dynamic and actively managed**

### **2.6.1 Change over time**

Food security, just like any other experiential aspect of human life, exists within a temporal dimension; it is experienced through time and often changes over time (Ericksen, 2008). An explicit recognition of the dynamic nature of food insecurity is particularly salient to an exploration of the phenomenon among older adults. Ageing is itself a dynamic and evolving

experience (Radermacher, Feldman, & Bird, 2010). It is often characterised by major life transitions such as retirement or the death of a spouse, as well as gradual trajectories such as health declines over many years (Vesnaver & Keller, 2011; Wethington, 2005).

For many older adults, food security is somewhat precarious in nature. Potentially, older adults can be pushed further into food insecurity by one adverse event, such as losing one's driver's licence (Radermacher, Feldman, & Bird, 2010), sudden health crises (Frongillo, Valois, & Wolfe, 2003), or admission to hospital followed by discharge home (Anyanwu, Sharkey, Jackson, & Sahyoun, 2011). As well, the population of community-dwelling older adults is itself quite dynamic because it constantly undergoes change as new people enter the cohort through ageing, and others exit through admission to residential care or by dying.

A clearer view of the role of time in food security and insecurity would be valuable because it would deepen understandings of food insecurity as a *fluid* state which is subject to intervening factors and life events, and therefore experienced by older adults to varying degrees over time. It is also important to measure changes in food security accurately in older adults, because research has shown that food insecurity can worsen over time for this age group, especially among those who face other disadvantages as well (Sharkey, 2005).

A qualitative study of low income households in Canada underlined the dynamic nature of food insecurity. The phenomenon varied in intensity across time: either across the month due to the timing of social security payments, or across the year due to seasonal variations in employment in agricultural areas (Hamelin, et al., 2002). In more recent years, researchers have also utilised quantitative methods to measure food insecurity's temporal dimension, focusing on transitions into food insecurity and intermittent episodes of the phenomenon (Coleman-Jensen, 2010; Howard, 2011).

However, the temporal nature of food security in both the general population and older adults is not terribly well captured in the conceptual models developed by researchers, with none of the models detailed above in Section 2.5.1 addressing issues of time (Lee, et al., 2005a; Locher & Sharkey, 2009; Sylvie, et al., 2013; Wolfe, et al., 1996). Quantitative tools for measuring food security do not capture this temporal dimension terribly well, either. The most widely-used measurement tools classify respondents as either food secure or insecure

according to one episode of food insecurity in the previous 12 months or 30 days, but these tools do not measure the duration or frequency of episodes of food insecurity (Coates et al., 2006).

### **2.6.2 A managed process**

Food security is a managed process that can change in severity in response to people enacting different food acquisition and management strategies. This understanding is important because it disrupts some views of food security as an unmanageable outcome of socioeconomic disadvantage and personal misfortune, which Chilton and Booth labelled “structural and interpersonal violence” (2007, p. 116). Viewing food security as a somewhat manageable experience is particularly valuable in research into the phenomenon in older adults, because this perspective disrupts commonly held views of this age group as especially vulnerable and passive victims of external events and circumstances, who need special care and welfare-focused services.

Perhaps the earliest food security research which drew attention to the managed nature of food insecurity was qualitative interviews conducted with women and dependent children in the United States (Radimer, et al., 1990; Radimer, et al., 1992). Specifically, these mothers used coping tactics to avoid or delay physical hunger in their children, such as obtaining additional food from food pantries, soup kitchens, family and friends; buying less expensive food; and restricting their own food intake via smaller portions or skipping meals (Radimer, et al., 1990; Radimer, et al., 1992). Other studies have shown that older adults also engage in many different strategies to respond to external challenges and manage their food security, including preserving and freezing food, accessing informal support from family and friends (Munoz-Plaza et al., 2013; Quandt, Arcury, McDonald, et al., 2001; Quandt, et al., 2000; Wolfe, et al., 1996). These strategies include: attending community meal programs, shopping for food more frequently, bartering and exchanging food gifts, and growing their own fruit and vegetables (Munoz-Plaza, et al., 2013; Quandt, Arcury, McDonald, et al., 2001; Quandt, et al., 2000; Wolfe, et al., 1996).

## **2.7 Understanding food, security, and ageing**

### **2.7.1 Perspectives from social sciences**

As detailed above, research into food security in older adults is extensive, comprehensive, and rigorously conducted, and there are isolated examples of research which has engaged with older adults' experiences, values, and management strategies in relation to food security. Nevertheless, further opportunities remain for generating a more in-depth and theoretically sound understanding of food security and insecurity in older adults. This thesis sets out to make a contribution to the field by delving more deeply into older adults' experiences, values, and strategies in relation to food, security, and ageing. In particular, it explores the varied meanings older adults ascribe to experiences with respect to the subjective, intersubjective, place, and temporal dimensions of their phenomenological lifeworlds.

The need for more nuanced research into food concerns has been identified by Australian researchers. In 2012, Queensland-based nutritionists called for "...more theoretically informed, qualitatively driven social science research that explores, and contributes to our understanding of, the myriad social dimensions of feeding and eating that play a role in human health in contemporary settings" (Schubert, et al., 2012, pp. 4-5). Similarly, Burns (2009, p. 201) has advocated for observational and interpretative research into food security in older adults:

...we must take the time and work with social scientists because all the evidence indicates that it is meaning and the values we attribute to food that drive our food habits... this will mean understanding the values people bring to old age and how to help them manage the challenges to these values in a way that maintains their dignity and well-being.

Findings from anthropological, sociological, and social gerontological research into older adults' experiences of food, meals, and eating have not yet been adequately incorporated into conceptual models of food security in older adults. This disjuncture may have arisen because such theoretically-informed research into food tends to focus on older adults' social and cultural experiences of food in general and it tends to speak indirectly about food

security. As such, there is a clear opportunity for these kinds of perspectives on food, ageing, and security to be brought together so as to inform deeper understandings of food security in older adults.

### **2.7.2 Perspectives on food**

Fresh perspectives on food could usefully be introduced to inform research into food security in older adults from several interrelated and overlapping branches of social science, including anthropology, sociology, social gerontology, and phenomenology. While food usefully provides human beings with vital nutrients and energy, these branches of social science explicitly acknowledge that food also plays a profound role in human beings' social relationships, personal identities, and emotions.

#### ***Anthropology and sociology***

Anthropological research is particularly interested in exploring how foods' varied meanings are enacted in human beings' day-to-day lives. From this perspective, practices directed towards purchasing, growing, preparing, sharing, and eating food are highly meaningful to individuals and are influential elements of different cultures and societies. Firstly, food carries a symbolic weight that aids in building, maintaining, and conveying human beings' sense of self and personal identity. Ethnographic research has found that eating behaviours are intimately bound up with individual life histories, personal identities, and gender roles (Burns, 2009; Delormier, et al., 2009; Lupton, 1994; Murcott, 2002; Quandt, Arcury, Bell, McDonald, & Vitolins, 2001).

Secondly, food is imbued with social meaning. Eating together and exchanging food reinforces relationships and builds feelings of social and familial belonging, as well as providing a means for cooperating on meeting our daily food needs (Lupton, 1994). Finally, food has important symbolic and emotional meanings, such that preparing and eating particular foods can produce positive feelings of nostalgia, happiness, security, love, and belonging, as well as negative emotions of regret, sadness, insecurity, and loneliness (Locher, Yoels, Maurer, & van Ells, 2005; Lupton, 1994). Eating is viewed as an emotional experience because it involves taking food into the human body, which is where emotions arise from and are expressed (Lupton, 1994; Probyn, 2000). Accordingly:

Food and eating, then are intensely emotional experiences that are intertwined with embodied sensations and strong feelings ranging the spectrum from disgust, hate, fear and anger to pleasure, satisfaction and desire (Lupton, 1994, p. 36).

Across a range of cultures, anthropologists and sociologists have observed an enduring link between sharing food and expressing love, particularly between mothers and babies, and parents and children (Lupton, 1994). Interviews with married women in South Wales found that a cooked meal has a particular emotional resonance as it symbolises “the home, a husband’s relation to it, his wife’s place in it and their relationship to one another” (Murcott, 1983, p. 179). Similarly, ethnographic research with families in the United Kingdom found that preparing meals is inherently relational because women’s decisions about what to cook, how to cook, and when to cook are shaped by the personal food preferences of their husbands and children (DeVault, 1991).

### ***Social gerontology***

These anthropological and sociological perspectives have informed research by social gerontologists into older adults’ experiences of food and daily food-related activities. By way of illustration, some European studies are mentioned in this section, but the brief list does not represent the entirety of social gerontological studies into food and eating which are informed by anthropological and sociological perspectives. Instead, these selected studies are cited to illustrate some of the varied ways that social gerontological research engages with the significance of food-related activities and experiences for older adults’ personal identities, social relationships, and emotions.

These studies include research into the personal meanings that cooking meals holds for older women (Sidenvall, Nydahl, & Fjellström, 2000); how older adults in six European countries interpret and act upon healthy eating messages (Lundkvist, Fjellström, Sidenvall, Lumbers, & Raats, 2010); how women employ strategies to maintain their food-related independence (Gustafsson, Andersson, Andersson, Fjellstrom, & Sidenvall, 2003); how older American males shore up their sense of masculinity through food and eating (Moss, Moss, Kilbride, & Rubinstein, 2007); and how older adults negotiate changes in their food-related

roles within their marriages, in the United States (Atta-Konadu, Keller, & Daly, 2011) and Sweden (Fjellström, Starkenberg, Wesslen, Bäckström, & Faxén-Irving, 2010).

Some of these social gerontological studies have an especially strong anthropological flavour. One example is a study which employed in-depth ethnographic case studies of three older Spaniards to explore how subjective experiences of loneliness and abandonment infuse older adults' experiences of food, effectively extinguishing their desire to prepare nourishing food and diminishing their appetite for both food and life (Bofill, 2004). Studies which heavily employ anthropological perspectives have only rarely been conducted in Australia. Only one isolated example was identified during this literature review. An ethnographic study from almost two decades ago observed how older rural women maintained their personal identities and gender roles while ageing by engaging in food-based social occasions such as morning teas (Walker-Birckhead, 1985).

### ***Philosophy and phenomenology***

This literature review reveals an opportunity to conduct research into food security in older adults which is informed by philosophical perspectives on food and eating. Philosophical interest in food dates back as far as Epicurus (341–270 BCE) and Seneca (c. 4 BCE – 65 CE). However, in contemporary times, major philosophical areas of inquiry including epistemology and metaphysics have paid only scarce attention to food (Heldke, 2013; Kaplan, 2012). Generally, philosophers have focused on two other areas, the first of which is food taste or aesthetics (Kaplan, 2012; Korsmeyer & Sutton, 2011). The second area of interest is food ethics, advanced by Emmanuel Levinas (1906 – 1995) and later progressed by Peter Singer (1946 – ) and other moral philosophers (Goldstein, 2010; Heldke, 2013). Although Levinas' philosophical concerns were primarily directed towards ethical questions, he also developed valuable insights into the implicit meaning of hunger, arguing that this sensation sheds light on the embedded nature of human existence, above and beyond hunger's biological role in supporting bodily survival (Goldstein, 2010).

Similarly, phenomenology has largely disregarded food as a subject for substantial philosophical inquiry. None of its founders and key protagonists, including Husserl, Heidegger, Sartre, and Merleau-Ponty, engaged with experiences of food, meals, and eating. A small number of phenomenologically-informed studies of food security have been

conducted in recent years, but they do not apply phenomenological perspectives or techniques in an especially detailed or comprehensive manner (Chilton & Booth, 2007; Dibsall, Lambert, & Frewer, 2002; Green-LaPierre, et al., 2012; Radimer, et al., 1990; Radimer, et al., 1992).

For example, seminal studies of low-income American women's experiences of food insecurity by Radimer and others (Radimer, et al., 1990; Radimer, et al., 1992) have been labelled phenomenological studies by other researchers (Chilton & Booth, 2007). However, those studies are informed by American rather than European approaches to phenomenology, and consequently their phenomenological content extends only to a general concern with experience (McWilliam, 2010). While the two studies generated insightful findings, neither directly engaged with phenomenological theories or employed phenomenological methods of data analysis and interpretation (Radimer, et al., 1990; Radimer, et al., 1992). Two other phenomenological studies of low-income women's experiences of food insecurity used data analyses approaches that were informed by phenomenology, but neither engaged with phenomenological theories in their discussions of findings (Chilton & Booth, 2007; Dibsall, et al., 2002).

This literature review only uncovered one published study which explicitly applied phenomenological perspectives to experiences of food insecurity in older adults in particular (Green-LaPierre, et al., 2012). Although this study employed a "phenomenological inquiry approach" to uncover various factors for women's food security, it analysed the resultant data in terms of Ecological Systems Theory rather than phenomenological theories (Green-LaPierre, et al., 2012, p. 1).

### **2.7.3 Perspectives on security**

By employing insights from sociology, researchers have attempted to disentangle the multiple meanings woven into contemporary discourses about security, insecurity, and risk. From this perspective, notions of security and risk are viewed as highly bound up with prevailing social values and approaches to life in modern societies. As such, "security is interpreted as a life strategy, that is, a cultural practice of establishing a meaningful life in the face of death" (Huysmans, 1998, p. 234).

Sociological interest in security and risk was prompted by the seminal work of Anthony Giddens, whose structuration theory includes notions of ontological security, which relate to human beings' sense of themselves and their surrounding social and material environments (Giddens, 1979; Giddens, 1990; Giddens, 1991). Other sociologists have critiqued and further developed Giddens' theories, applying his perspectives to various aspects of security and risk, including culturally-informed experiences of anxiety (Wilkinson, 2001), sociocultural aspects of risk and emotion in relation to public health (Lupton, 2013), human experiences of risk in everyday life (Tulloch & Lupton, 2003), and theories of the modern risk society (Beck, 1992).

Sociological theories of security and risk have been applied and critiqued by researchers to various real-world situations, including relations between nation states (Mitzen, 2006), experiences of homelessness (Dupuis & Thorns, 1998) and natural disasters (Hawkins & Maurer, 2011). While Giddens' theories did not address ageing *per se* (Riggs & Turner, 1997), his sociological perspectives have occasionally been applied and critiqued in ageing-related research. These include studies of ontological security and socioeconomic circumstances in older adults (Mansvelt, Breheny, & Stephens, 2013), experiences of bodily ageing (Riggs & Turner, 1997), and how people with dementia negotiate risk and enact resilience in everyday life (Bailey et al., 2013). While there is a small amount of published research which applies theoretical perspectives on security and risk to experiences of food, meals and eating, these studies most commonly focus on specific issues, including food safety in rural areas (Enticott, 2003) and childhood obesity (Chan, Deave, & Greenhalgh, 2010), rather than on food security more broadly.

#### **2.7.4 Perspectives on ageing**

Not all of the published research into food security in older adults closely considers how experiences of ageing might inform experiences of food security and insecurity for this age group. Two social science disciplines which may provide particularly useful insights for additional research into ageing and food security are social gerontology and phenomenology.

### ***Social gerontology***

Social gerontology would bring more optimistic and strengths-based perspectives to food security research. This research field can uncover and acknowledge community-dwelling older adults' resilience and capacity to adapt to ongoing changes in their structural and personal circumstances. Two studies which take this approach have been published in recent years. The first of these studies explored how older women in the United Kingdom reflexively revise their engagement with food and meal preparation while they are ageing (Lane et al., 2013). The second of these studies proposed the term "dietary resilience" to capture the phenomenon of older adults who achieve "an adequate diet despite facing dietary challenges" by employing various resilient strategies (Vesnaver, Keller, Payette, & Shatenstein, 2012, p. 731). These include prioritizing eating well, ensuring they continue to enjoy eating, and employing adaptive strategies to overcome obstacles (Vesnaver, et al., 2012). Social gerontology provides researchers with techniques to build on this foundation and develop a body of evidence about food security in older adults that is more substantial, theoretically rich, and ultimately more optimistic.

Social gerontology's view of human lives as embedded in particular places could help food security researchers to engage more strongly with contextual considerations. New Zealand gerontologist Janine Wiles views place as "a setting which is experienced and which holds meaning, and which shapes the intimate relations between people as well as the bigger social relations and processes that make up society" (2005, p. 101). Places are dynamic rather than static because they are constantly undergoing environmental, economic, and social change. This change is perhaps doubly-felt by older adults because, as they age, their relationships to places undergo constant revision and renegotiation, while those places are themselves also undergoing change (Andrews, Evans, & Wiles, 2013).

The field of social gerontology is interested in people's personal identities and senses of themselves in the context of ageing. These perspectives could usefully draw attention to how older adults' senses of themselves inform the various adaptive strategies they employ for ensuring their food security. Informed by sociology, social gerontology generally views personal identity as formed by meaningful activities which are carried out by older adults in close negotiation with their social relationships and structural circumstances (Giddens,

1979; Hendricks, 2010). From this perspective, older adults' personal identities and senses of themselves are responsive to changing circumstances via reflexivity and human agency, rather than rigidly fixed in place (Hendricks, 2010).

### ***Phenomenology***

In general, philosophers have tended to focus more heavily on human experiences of death rather than ageing (Baars, 2013). However, in more recent years, phenomenologists have increasingly engaged with ageing, in particular through an interest in bodily experiences (Baars, 2012a). Phenomenological research into ageing is primarily concerned with how older adults locate meaning in ageing and enact strategies to preserve their personal identities in the face of significant bodily changes (Ashworth & Ashworth, 2003; Burton, Shaw, & Gibson, 2013; Dumas, 2012; Riggs & Turner, 1997; Tulle, 2008; Turner, 2012; Wainwright & Turner, 2006). These perspectives are relevant to older adults' experiences of food, meals, and eating, but this avenue has yet to be fully explored by researchers.

## **2.8 Conclusion**

This chapter reviews the diverse and multi-disciplinary literature on food security and insecurity in community-dwelling older adults in developed countries. It considers and then sets aside research which takes a nutritional perspective for enquiries into food security in older adults, arguing that its epistemologies and methodologies are not entirely compatible with an exploration of the meanings older adults ascribe to their lived experiences of food, meals, and eating. The review outlines how the food security literature acknowledges – but does not always fully engage with – the subjective, complex, and dynamic nature of the phenomenon. Research has not yet generated substantial findings which contribute to in-depth and theoretically rich understandings of food security and insecurity in older adults. As such, an opportunity exists for additional qualitative research which seeks to explore older adults' experiences of food, meals, and eating, and then considers their significance, in order to develop a deeper understanding of food security and insecurity in older age.

## CHAPTER 3: EXPLORING FOOD SECURITY AND INSECURITY IN OLDER ADULTS

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### 3.1 Introduction

This chapter details the interwoven elements of the methodological framework for the research, including its research aim and questions, strategy, methodology, recruitment and ethics procedures, participant characteristics, fieldwork methods, and data analysis. The strategy for the research entails two key commitments: conducting qualitative research and engaging in methodologically specific research. The research employs phenomenological ethnography to explore experiences of food, meals, and eating in older adults living in rural Tasmania, Australia. Approaches from phenomenological ethnography infuse every aspect of the research, especially the research questions, fieldwork methods, and data analysis. The chapter explains the fundamental perspectives of phenomenological ethnography and identifies four key philosophical insights which inform the research: (a) the nature of human 'being', (b) the significance of experience, (c) the human lifeworld and its structures, and (d) bracketing and interpretation.

This chapter describes the participant selection criteria and the recruitment process, then provides demographic characteristics and biographical sketches of the older adults in the research. This section is followed by an in-depth discussion of the three methods employed in the older adults' home environments: repeated in-depth interviews, walking interviews, and observation. The strengths and limitations of each method are explored, and selected fieldwork experiences with the method are detailed. The research design and fieldwork was guided by four principles of qualitative research: validity through rigour, thoughtfulness, empathy, and flexibility. Each of these guiding principles are explored, highlighting their resonance with phenomenological perspectives. The chapter concludes by detailing the qualitative data analysis methods employed in the research, which were heavily informed by phenomenological theory and practice.

## 3.2 Research aim and questions

### 3.2.1 Research aim

The research was informed by a desire to conduct research in an exploratory, nuanced, and speculative manner, rather than an investigative, exacting, and definitive manner. The research is directed towards uncovering older adults' subjective experiences of food, meals, and eating, rather than towards quantifying any causative factors or nutritional outcomes. The research takes an in-depth and multidimensional approach which seeks to gain deeper understandings of older adults' rich and complex lifeworlds, rather than focusing on the phenomenon of food security in isolation. Accordingly, the aim of this research is:

To explore experiences of food, meals, and eating among community-dwelling rural older adults, in order to develop deeper understandings of food security and insecurity in older adults.

### 3.2.2 Research questions

The research is guided by two main research questions. The first question engages with experiences of food, meals, and eating, and is made up by four parts which focus on the subjective, intersubjective, place, and temporal dimensions of the phenomenological lifeworld. The second question calls for the findings from the first question to be considered with specific reference to food security and insecurity in older adults. These two questions were regularly reviewed and refined during the research, in a reflective process which is detailed in Sections 3.5.1 and 3.5.2 below.

The research questions, expressed in phenomenological terms, are as follows:

1. What is the nature of experiences of food, meals, and eating for older adults living in rural communities?
  - a. What are the *subjective* dimensions of these experiences?
  - b. What are the *intersubjective* dimensions of these experiences?
  - c. What are the *place* dimensions of these experiences?
  - d. What are the *temporal* dimensions of these experiences?
2. How do older adults' experiences of food, meals, and eating inform deeper understandings of food security and insecurity in older adults?

### **3.3 Research strategy and methodology**

#### **3.3.1 Elements of the research strategy**

The research strategy consists of two elements: (a) taking a qualitative research approach in order to explore experiences rather than quantify causative factors or outcomes; and (b) engaging in methodological specificity which allows for ontological and epistemological positions to be clearly articulated for the research. Both of these elements are outlined below.

#### ***Qualitative research***

The research takes a qualitative approach because that is entirely consistent with the aims of the research to be exploratory, nuanced, and speculative; to engage with older adults' own experiences; and gain insights into a phenomenon embedded within rich and complex human lifeworlds. Qualitative research is "a field of inquiry in its own right" which is both complex and adaptable because of its inter-disciplinary nature and the wide variety of terms, concepts, and assumptions it employs (Denzin & Lincoln, 2011a, p. 3). Qualitative research strategies are informed by a range of social science paradigms and philosophical perspectives, including ethnography and phenomenology (Denzin & Lincoln, 2011a, p. 3; Seale, 2004).

Primarily, qualitative research is interpretative rather than descriptive in intent; it is concerned with understanding varied experiences, rather than quantifying or documenting particular facts or circumstances (Swift & Draper, 2011). Qualitative research engages with "...the qualities of entities and on processes and meaning that are not experimentally examined or measured... in terms of quantity, amount, intensity and frequency" (Denzin & Lincoln, 2011a, p. 8). Hence, the questions asked in qualitative research engage with human beings' interpretation of their experiences and the personal meanings they hold (Green & Thorogood, 2009). Research participants are viewed as experts on their own lives, who provide valid and contextualised information about human phenomena which can be elicited through "knowledgeable narratives of people in places" (Williams, 2003, p. 131).

The aim of qualitative research, to explore human beings in their natural contexts, resonates with the intent of the research to understand a phenomenon in relation to the rich and

complex lifeworlds in which it is experienced. In qualitative research, human phenomena are studied in their natural contexts such as their home environments, rather than in experimental settings such as laboratories (Harris et al., 2009). Qualitative researchers are interested in uncovering meanings woven into “the texture and weave of everyday life” as humans go about their daily activities (Mason, 2002, p. 1). Arguably, human experiences of food, meals, and eating cannot be adequately understood if they are considered in isolation from the contexts in which they unfold, because food is obtained from particular places, and it is prepared, shared, and eaten in particular social and cultural settings.

### ***Methodological specificity***

The second element of the research strategy is a commitment to methodological specificity – in this case, phenomenological ethnography. Engaging in methodologically well-defined research allows for consideration of the strengths and weaknesses of a methodology for conducting research on particular topics with particular people (Holloway & Todres, 2003). The research explores food security and food insecurity in older adults through a more clearly articulated methodology than has been undertaken in previous research, as detailed in the literature review in Chapter Two.

Engaging in research that employs specific methodologies helps lay bare the ontologies and epistemologies that are carried into all research endeavours (Holloway & Todres, 2003). An ontological position in research is a stance on what there is to know, while an epistemological position represents a stance on how it is possible to know particular things (Mason, 2002). Articulating these positions provides a sound basis for carefully weaving together the overall approach, research methods, and techniques of analysis, ensuring that they are consistent and compatible at the levels of epistemology and ontology.

The ontological position of the research has two elements. Primarily, it contends that older adults’ understandings, interpretations, experiences, knowledge, and views are meaningful properties of food, meals, and eating in their lives. As well, the activities that take place in particular settings, such as sharing meals in older adults’ homes, are viewed as meaningful and able to provide valid insights into experiences of food, meals, and eating, as well as food security and insecurity. The epistemological position of the research is also multi-stranded. Firstly, it contends that older adults’ spoken words provide useful and valid information

about their lived experiences of phenomena. Secondly, it argues that observing older adults in natural environments such as their homes, rather than experimental settings, provides valuable data for understanding how those older adults live their lives and experience phenomena.

### **3.3.2 Employing phenomenological ethnography**

The decision to employ phenomenological ethnography in the research was informed by the research strategy detailed above. That is, to take a qualitative research approach and committing to methodological specificity, so as to articulate coherent ontological and epistemological positions. As its name implies, phenomenological ethnography is a research methodology which draws upon the two complementary research methodologies of phenomenology and ethnography. Below, these two disciplines are introduced separately and then followed by an explanation of how they are intertwined in phenomenological ethnography. Taken together, the three sections below detail how phenomenological ethnography is fundamentally compatible with the research aim, questions, and strategy articulated above.

### **3.3.3 Phenomenology**

#### ***Phenomenological perspectives***

In the early years of phenomenological philosophy, its practitioners tended to produce discursive, densely argued, and sometimes obtuse texts. However, phenomenological philosophers generated valuable insights into the nature of human experiences which are directly relevant to the research detailed in this thesis. The following outline of phenomenology reveals that it is “complex, differentiated, multi-stranded and indeed contested” (Hockey & Allen-Collinson, 2009, p. 221). The aim of this section is to weave these different and sometimes contested strands carefully together into a coherent phenomenological research approach.

The word ‘phenomenology’ is derived from the Ancient Greek word *phainomenon*, which loosely translates as something showing itself or appearing into view (Ray, 1994). Hence, practicing phenomenology entails bringing to light, or placing in brightness, what is already there but may not be immediately obvious (Moustakas, 1994). Phenomenology was

established as a discipline in the nineteenth century by philosopher and mathematician Edmund Husserl (1859 – 1938), although its roots date back to Ancient Greek philosophy (Moustakas, 1994). In its early years, phenomenology was exclusively concerned with describing the essential elements of how people experience phenomena; this approach is now labelled descriptive or transcendental phenomenology (McWilliam, 2010).

In the early twentieth century, Husserl's student Martin Heidegger (1889 – 1976) developed the interpretative or existential branch of phenomenology, which is concerned with interpreting experiences of phenomena rather than with describing their essential elements (McWilliam, 2010). Both interpretative and descriptive phenomenology inform contemporary methodological approaches to empirical research in diverse disciplines, including neuroscience, nursing, and geography (McWilliam, 2010).

Phenomenological research is concerned with real-world experiences and practices, which makes it highly applicable to research into older adults' practical and grounded experiences of food, meals, and eating. Phenomenology requires 'being there', which entails being present in the places where people live in order to observe their experiences of actual situations (Frykman & Gilje, 2003). From this perspective, human beings' practical activities and everyday relationships hold considerable meaning. As such, they can provide crucial insights into profound ontological questions of the nature of existence (Smith, Flowers, & Larkin, 2009).

### ***The nature of human 'being'***

Phenomenology is explicitly concerned with the nature of human 'being', or to use Heidegger's German term, *Dasein* (Heidegger, 1962). By exclusively applying the concept of *Dasein* to human beings rather than to all living creatures, Heidegger was attempting to draw attention to human beings' unique ability to acknowledge and reflect on their own existence. As such, humans are necessarily confronted with the question of whether, and indeed how, to go on living their lives (Heidegger, 1962; Mulhall, 2005).

According to Heidegger (1962), human existence is characterised by "being out for something" – that is to say, being human entails being motivated outwards and moving towards something or someone outside of one's own self (Backman, 2005, p. 244). Merleau-

Ponty (1945/2012) further developed this view of humans as being highly engaged with their surroundings. In this view, humans' bodily engagement with the world is enacted through various "intentional threads" that are woven together to form ties between human bodies and their environments (Csordas, 2012, p. 60).

### ***The significance of experiences***

Phenomenology resonates with the desire to explore food security and insecurity in older adults from the perspectives of those who have experienced the phenomenon in their day-to-day lives. Phenomenology contends that experiences are valid sources of knowledge, and that people's everyday experiences contain rich insights into phenomena (Becker, 1992). Dutch phenomenologists Frykman and Gilje label this strategy "going to the 'experiencer' ... making experience the starting point" (2003, p. 15).

Accordingly, phenomenology is concerned with the concept of an experience and what it means for humans to experience phenomena. Firstly, experience has a straightforward meaning related to humans' exposure to occurrences outside of themselves. As such, "the term experience denotes the relationship we have with the world in which we are engaged" (Dahlberg, et al., 2008, p. 32). Experiences are meaningful to humans; they are not a succession of seemingly random sensations and impressions (Dahlberg, et al., 2008). Experiences are directly relevant to the project of living; they reveal that "*something is at stake*", whether in terms of the ongoing coherence of life, bodily survival, or transcendence (Kleinman & Kleinman, 1991, p. 170).

Secondly, experience entails an accumulation of knowledge and meaning over time. Inspired by Merleau-Ponty's philosophical theories of embodiment, phenomenology generally views human experience as inherently embodied. It is said to leave a lasting layer of sediment upon human bodies, for example in the form of scars or wrinkles as humans age over time (Desjarlais, 1996; Simonsen, 2013). Heidegger explained experience in terms of movement: "to experience something means to attain it along the way, *by going on a way*" (1971c, p. 73). Phenomenologists view experience as ongoing and highly specific to the context or lifeworld in which it occurs: it is "a lived process, an unfurling of perspectives and meanings, which are unique to the person's embodied and situated relationship to the world" (Smith, et al., 2009, p. 21).

While interior sensations and private emotions are particularly important elements of the concept of experience, it also contains another, more practical and grounded element. The etymology of the word 'experience' provides an important hint – it is derived from the Latin *experiri*, which means to try out or test something (Desjarlais, 1996). Hence, to experience something is not an entirely emotional undertaking; it also involves an active process of practical experimentation with life (Desjarlais, 1996). As the phenomenological anthropologist Ingold has noted:

... for the people who live there, quotidian life is experimental through and through. Inhabitants the world over have grown into the knowledge of how to carry on their lives by trying things out for themselves, often guided by more experienced companions, in the anticipation of what the outcomes might be (2011, p. 15).

Phenomenology also views experience as having hermeneutical depth, such that the multitude of meanings an experience has for humans cannot ever be exhaustively detailed or interpreted (Desjarlais, 1996). This has important implications for research which aims to explore experiences; phenomenology contends that researchers cannot reasonably expect to fully uncover the full extent of the meanings contained within those experiences (Desjarlais, 1996).

Phenomenological ethnographic researchers tend to take slightly different approaches from one another in their exploration of human experiences. Some researchers primarily focus on human beings' experiences of phenomena, and seek to generate detailed and rich descriptions of the essences of those experiences (Finlay, 2009). Other phenomenological ethnographers seek to explore the lifeworlds of the human beings who have experienced a phenomenon, believing that these lifeworlds profoundly shape the meanings that humans ascribe to their experiences (Finlay, 2009). In accordance with an emphasis on interpretative approaches, the research detailed in this thesis employs the latter perspective. Therefore, it explores older adults' experiences of food security and insecurity in specific relation to their personal lifeworlds.

### ***The lifeworld and its structure***

The concept of the human lifeworld is particularly important, because it informs phenomenological approaches to interpretation and provides a framework for analysing human experiences. Phenomenologists view humans as each inhabiting their own lifeworld (*Lebenswelt*). The theory of a human lifeworld was originally proposed by Edmund Husserl (1936/1970) and further developed by other twentieth century philosophers including Heidegger (1962), Merleau-Ponty (1945/2012), and Alfred Schutz (1973).

The lifeworld is a practical, every day or quotidian world, in which humans engage with their material and human environments. It is immediate, spontaneous, practical, and ordinary (Frykman & Gilje, 2003). The lifeworld is “... the whole sphere of everyday experiences, orientations, and actions through which individuals pursue their interests and affairs by manipulating objects, dealing with people, conceiving plans, and carrying them out” (Wagner, 1970, pp. 14-15).

Although the lifeworld is essentially mundane and made up of continuous activity, it is also the site at which human meaning is generated (Frykman and Gilje 2003). Husserl conceptualised the lifeworld as the grounding soil (*Boden*) for human existence, which renders possible all our perceptions and everyday experiences (Berry, 2011; Husserl, 1900/2001). However, phenomenologists argue that the lifeworld is obscured from view by its own immediacy; “it has a veil of obviousness over it” (Frykman & Gilje, 2003, p. 36).

Philosophical attempts to explain the concept of the phenomenological lifeworld have focused on identifying its fundamental themes or structures. Importantly, these themes or structures of the lifeworld are essentially heuristic devices – that is, they provide short-cuts for conceptual thought – rather than being labels for inherently distinct entities (Ashworth, 2003, p. 151). These lifeworld structures naturally overlap and intermingle because they are generated by heuristic distinctions. As such, they should be viewed as “perspectives or analytical moments of a larger whole which is the situated embodiment of the human individual” (Ashworth, 2003, p. 151).

Explanations of the phenomenological lifeworld differ in terminology and the numbers of structures ascribed to it, but these explanations are in basic agreement about the

fundamental nature of the lifeworld as both multidimensional and interwoven. Researchers Todres and Galvin (2010) identified five lifeworld structures: (a) intersubjectivity, in which 'being' is made possible and rendered meaningful by ongoing encounters with other human beings; (b) spatiality, in which 'being' is inextricably embedded in the material and social environments in which humans find themselves; (c) temporality, in which 'being' is lived through chronological time, informed by the past, enacted in the present, and directed toward the future; (d) mood, in which 'being' is characterised by particular orientations toward the world, including intentionality, curiosity, and existential care; and (e) embodiment, in which 'being' is bodily in nature and therefore is personal and situated (Todres & Galvin, 2010).

Psychological phenomenologist Ashworth listed seven structures of the lifeworld, including four of those identified above – sociality, spatiality, temporality and embodiment (2003, p. 147). The other three structures of Ashworth's lifeworld are (a) "selfhood", which refers to a person's social identity, sense of agency, and feelings of their own presence; (b) "project", which refers to a person's ability to carry out activities that are important and meaningful for their life, even in the face of constraints such as illness; and (c) "discourse", which refers to what sort of words a person uses to describe their situation (Ashworth, 2003, pp. 148-150).

The research detailed in this thesis applies the more succinct four-fold structure of the lifeworld developed by phenomenological researcher Max van Manen (1942 - ). Inspired by the work of Merleau-Ponty (1945/2012), it consists of four structures. The first three are: (a) "lived space" which is akin to spatiality, (b) "lived time" which is akin to temporality, and (c) "lived other" which is akin to intersubjectivity (van Manen, 1990, pp. 101-105). The fourth is "lived body", which is akin to a blend of embodiment and mood (Todres & Galvin, 2010) plus the self-oriented structures of selfhood, project, and discourse (Ashworth, 2003).

Together, van Manen's four structures provide a coherent framework for the data analysis, presentation of the findings, and discussion of the research in this thesis. Each of Chapters Four, Five, Six, and Seven engage with one of these lifeworld structures, in order to explore older adults' experiences of food, meals, and eating from phenomenological perspectives. In

this thesis, these structures are referred to as the subjective, intersubjective, place, and temporal dimensions of the lifeworld.

### ***Bracketing and interpretation***

Although the shared concern of all phenomenology is to bring phenomena into clearer view, its branches take different positions on a key method of early phenomenology – bracketing. This method remains a relevant consideration for researchers employing contemporary phenomenological research methods and approaches.

As the progenitor of descriptive phenomenology, Husserl developed bracketing as a method for overcoming humans' natural attitude to the world, characterised by avoiding critical reflection and taking every day experiences for granted (Dahlberg, et al., 2008; Husserl, 1900/2001). Derived from mathematics, bracketing (*epoche*) involves putting aside one's prior and taken-for-granted knowledge in order to form a fresh impression of the phenomenon (Smith, et al., 2009). The method proceeds through a series of reductions and imaginative variations, each time putting aside all constructions, pre-conceptions, and assumptions (Cohen & Omery, 1994; Moustakas, 1994; Tufford & Newman, 2012). Descriptive phenomenologists argue that bracketing achieves a detailed and concrete description of a phenomenon as it is experienced (Cohen & Omery, 1994; Moustakas, 1994).

In contemporary applications of phenomenological methods, bracketing has only rarely been conducted in a highly systematic and detailed manner. Instead, researchers influenced by descriptive phenomenology generally approach bracketing as a guiding principle for identifying, if not standing aside from, their pre-suppositions and prejudices. However, most contemporary phenomenological researchers are more heavily influenced by interpretative phenomenology, and therefore they dismiss the feasibility of identifying, let alone bracketing out, personal preconceptions and prejudices from the research process. This stance is informed by Heidegger's view of human existence as inseparably embedded within its social and environmental contexts (1962). Human beings cannot adequately reflect upon or stand aside from their preconceptions and values, because these arise from the contexts in which humans are themselves embedded (Heidegger, 1962).

Informed by interpretative phenomenology, the research detailed in this thesis takes a restrained approach to bracketing. In my view, bracketing is necessarily limited to approaching phenomena in a curious fashion and identifying at least some of my own preconceptions, while acknowledging that I cannot adequately stand aside from them during the research. In this restrained approach, bracketing is limited to stepping aside from “the ordinary lack of curiosity with which most of life is lived” (LeVasseur, 2003, p. 417). Full and complete bracketing cannot be performed while researchers remain embedded in their own lifeworlds. However, the careful application of “an awakened and passionate curiosity” can support researchers’ efforts to gain insights into human experiences of phenomena (LeVasseur, 2003, p. 418). Hence, I engaged in the research with a sense of energetic curiosity, but without any conviction that I could stand aside from my preconceptions so as to arrive at an accurate description of older adults’ experiences of the phenomena.

### **3.3.4 Ethnography**

Ethnography is a practice-oriented discipline which provides a useful complement to phenomenology’s philosophical concerns and theoretical techniques. Ethnography is both a research method and a textual product of that research (Fetterman, 1989). The discipline seeks “to appreciate what it means to be human in particular social and cultural contexts” (Madden, 2010, p. 17). The practice of ethnography entails writing about particular social, ethnic, or cultural groups of people (Madden, 2010).

Ethnography resonates with phenomenology’s interest in situatedness; it argues that human behaviour can only be understood by specific reference to its situated meanings which are shaped by culture (Boyle, 1994). As such, the practice of ethnography entails obtaining first-hand experiences of particular social or cultural settings over time (Atkinson, Coffey, Delamont, Lofland, & Lofland, 2001). Techniques of observation are central to ethnographic practice because they allow researchers to learn about people and cultures as they carry out their lives in ‘natural’ and relatively unmanaged settings rather than in artificial and controlled environments such as laboratories (Madden, 2010).

Traditionally, ethnography involved examining the culture of small, relatively homogenous and bounded groups of people in exotic locales, within the socio-historical context of the colonial era (LeCompte, 2002). Some of the most famous ethnographic texts of the early

twentieth century were written by anthropologists, who described food and food-related activities of 'exotic' communities, but food was not their primary focus. For example, Bronislaw Malinowski's famous ethnography of Trobriand Islanders of New Guinea, *Argonauts of the Western Pacific*, was primarily concerned with practices of reciprocity and exchange but also included detailed descriptions of yam cultivation and feasting (1922/1961). As well, anthropologist Franz Boas (1858 –1942) included a substantial collection of recipes in his ethnographies of island communities of the Pacific northwest (1921/1962; Mintz, 1996).

In the mid-to-late twentieth century, several anthropologists conducted influential studies that were particularly focused on food. Claude Levi-Strauss (1908 – 2009) developed his structuralist theories by focusing on food in indigenous South American cultures (1969); Mary Douglas (1921 – 2007) considered food taboos and symbolic boundaries (1966) and the meanings of meals (1975); and Sidney Mintz (1922 – ) used anthropological methods in a social and cultural history of sugar production and consumption in Europe, entitled *Sweetness and Power* (1985).

Originally, anthropology sought to uncover the fixed and holistic truth of an entire culture or ethnic group but since the late twentieth century, anthropologists have tended to employ ethnographic techniques in a more reflexive manner, increasingly viewing themselves as "subjective persons who are implicated within research practices" (Berry, 2011, p. 166). Within anthropology, ethnography was traditionally seen as requiring a long-term commitment to fieldwork, often for many months or years (Atkinson, et al., 2001). However, this view is now much less common in contemporary ethnographic research (Madden, 2010). Ethnographic techniques have been adapted by qualitative researchers for more succinct use in research conducted within various social science disciplines, including sociology and geography (Madden, 2010). These methods include participant observation and in-depth interviews conducted in research participants' natural settings (Madden, 2010).

Importantly, ethnographic practices are infused with subtle power relations between researchers and participants. With its origins in anthropological traditions, ethnography has been implicated in colonialist and imperialist practices of scrutinising, essentialising, and

criticising other cultures and ethnic groups (Madden, 2010). The crisis of representation in the social sciences the late 1980s and 1990s questioned the validity of claims that ethnography is capable of fully capturing the lived experiences of others (Denzin & Lincoln, 2011a). Subsequently, phenomenological perspectives have informed postmodern, interpretative, and critical ethnographies, and contemporary researchers have shifted their gaze away from distant and exotic locations towards diverse cultures and cultural practices in multiple and more familiar sites (LeCompte, 2002).

Consequently, many contemporary ethnographers employ phenomenological concepts and methods in research concerned with uncovering experiences of human phenomena, including illness, pain, addiction, and social exclusion (Katz & Csordas, 2003). However, not all contemporary ethnographers who cite phenomenological influences apply descriptive phenomenological methods such as bracketing, and many do not explicitly situate themselves within the discipline of phenomenological ethnography (Katz & Csordas, 2003).

### **3.3.5 Phenomenological ethnography**

Phenomenological ethnography focuses on experiences of subjectivity, intersubjectivity, spatiality, and temporality (Desjarlais & Throop, 2011; Katz & Csordas, 2003). While phenomenological ethnography is concerned with universal dimensions of human experience, it is heavily influenced by interpretative phenomenology and thus aims to explore universal experiences as situated in particular social and cultural settings (Desjarlais & Throop, 2011).

The methodology of phenomenological ethnography makes an important contribution to the research detailed in this thesis because it grounds complex and sometimes obtuse philosophical concepts of phenomenology in empirical data that was sourced from experiences of actual human beings facing real-world situations (Berry, 2011). Some of the early phenomenologists wrote in abstract terms about people, in that they were faceless persons located in unknown worlds where they engaged in activities imagined for the purposes of philosophical explication. With its passionate engagement with people's day-to-day social and cultural lives, phenomenological ethnography provides an invaluable means of exploring complex ontological questions through direct engagement with the complex, nuanced, and rich realities of older adults' lives.

Phenomenological ethnographers engage with universal themes of human existence which are relevant to all human beings but are informed by local cultural, ethnic, and religious contexts. One of the best known phenomenological ethnographers is Clifford Geertz (1926 – 2006), who emphasized the importance of symbols for communicating public meanings within cultures, and advocated “thick description” for uncovering the meanings implicit in human beings’ actions and cultural practices (1973b, pp. 5-6). His essay “Deep Play: Notes on the Balinese Cockfight” applied theories of phenomenological sociology to local concepts of selfhood, time, and behaviour (Geertz, 1973a).

More recently, phenomenological ethnographer Michael D. Jackson (1940 - ) has observed humans’ meaningful day-to-day actions to explore experiences of poverty, religion, and modes of ‘being’ in poor communities of Sierra Leone and in Aboriginal communities of Australia (Jackson, 2005; Jackson, 2013; Jackson, 1996). These ethnographies emphasise fluidity and uncertainty in human lives, focusing on life’s “existential demands, constraints, dilemmas, potentialities, uncertainties” (Desjarlais & Throop, 2011, p. 93). This phenomenological ethnography is concerned with life’s mundane day-to-day happenings but also aims to uncover “its crises, its vernacular and idiomatic character, its biographical particularities, its decisive events and indecisive strategies...” (Jackson, 1996, p. 8).

Although the ethnographies of medical and psychological anthropologist Thomas Csordas are concerned with religious healing, ritual language, and experiences of psychiatric inpatients, his interest in the fluid nature of experiences is highly relevant to research into other life experiences (Csordas, 2012; Katz & Csordas, 2003). Inspired by phenomenology, Csordas’ research strives towards “an attunement to the immediacy of experience” (2012, p. 55). Weaving together phenomenology and ethnography forms what he terms “cultural phenomenology”:

To me, the phrase means on the one hand using phenomenological method, phenomenological concepts, or phenomenological sensibility in the interpretation of ethnographic data, and on the other hand using ethnographic instances as the concrete data for phenomenological reflection (Csordas, 2012, p. 55).

### **3.4 The research setting and older adults**

#### **3.4.1 Overview**

This section turns towards the practical conduct of the study, which was informed by the phenomenological and ethnographic perspectives detailed above. It details the research setting, the number of participants, selection criteria for participants, and the characteristics of the older adults. The fieldwork was conducted in rural areas of Tasmania with 21 male and female older adults aged between 72 and 90 years of age, who are community-dwelling, live in rural areas, and receive either formal or informal assistance with day-to-day activities.

#### **3.4.2 Research setting**

All the research methods of in-depth interviews, walking interviews, and observation was conducted in older adults' home environments in rural areas of Tasmania, Australia.

Tasmania is an island state located 240km south of mainland Australia. It has a population of 495,345 people, and has the highest proportion of older adults of any Australian state with 19.6 per cent of the state's population aged 65 years and older (ABS, 2013). Almost 90 per cent of Tasmania's population was born in either Australia, England, Scotland, or New Zealand (ABS, 2013). Almost half of Tasmania's population lives in the capital city of Hobart; the remainder of the population is scattered across the state in regional cities and rural areas, with the exception of south west Tasmania which is a protected wilderness area (ABS, 2013).

#### **3.4.3 Number of participants**

Originally, I tentatively set the intended number of participants at 15 older adults. During fieldwork, I revised the sample size upwards to 21 when recruitment strategies successfully engaged additional older adults who were keen to participate in the research. This flexible approach to the number of participants is entirely consistent with phenomenological practice which does not require researchers to make definitive decisions on sample sizes until the fieldwork and data analysis is underway (Dahlberg, et al., 2008).

Two main considerations informed my decision to conduct research with a relatively small number of older adults. Firstly, phenomenological ethnographic research aims to achieve an

in-depth understanding of a phenomenon which incorporates nuance, ambiguity, and close consideration of its contextual elements (Smith, et al., 2009). A smaller sample allows researchers to focus on particular details in order to understand a phenomenon in detail – that is, to be idiographic rather than nomothetic or breadth-oriented (Baxter, 2010). Large samples are not necessary to generate rich data in phenomenological studies; typical sample sizes range from one to 10 people, and findings are usually presented as a small number of narratives or case studies (McWilliam, 2010; Smith, 2004; Starks & Trinidad, 2007).

A secondary consideration in this regard relates to the feasibility of completing the fieldwork activities and data analysis within the three-year timeframe of the doctoral research. Travelling to rural and remote sites and conducting multiple in-depth interviews and observation as a solo researcher takes considerable time. As well, qualitative fieldwork activities tend to generate large volumes of rich data which deserve to be given detailed and thoughtful analytical attention. If the sample size is very large, this kind of attention is not feasible for a solo researcher completing a study within a three-year timeframe.

#### **3.4.4 Selection criteria for the older adults**

For the purposes of defining the characteristics of the research participants, I developed eight selection criteria. The first five of these criteria related directly to the aim of the research: aged 75 years or over, community-dwelling, living in rural Tasmania, either male or female, and receiving formal or informal assistance with day-to-day activities. The remaining three selection criteria relate to considerations of ethics and feasibility for conducting research interviews with older adults in particular and human beings in general. These secondary criteria were: understands and speaks English well, does not have a medical condition that is immediately life-threatening, and does not have any major cognitive impairments. All eight of these criteria are detailed below.

##### ***Aged 75 years or over***

The older adults who were recruited for the research were required to be aged 75 years or over at the time of their first interview. There is no internationally agreed definition of an 'older adult' (Productivity Commission, 2011). Instead, my decision was informed by

Australian population data which demonstrates that various contingencies of ageing, including fixed incomes, physical limitations, and greater needs for formal services, arise more frequently in people aged 75 years or over (Productivity Commission, 2011). Although Australians aged 65 years old or over are often labelled 'older adults', many people aged in their late 60s or early 70s are still engaged in the paid workforce and have comparatively fewer physical limitations and chronic conditions than those aged 75 years or over (Productivity Commission, 2011).

### ***Community-dwelling***

In order to properly engage with issues of food security, the older adults were required to be community-dwelling – that is, living in their own homes in the community, regardless of whether they owned, rented, or shared their housing. This criterion excluded all older adults residing in hospitals, rehabilitation facilities, or residential care. As noted in Chapter Two, concepts of food security and insecurity are not readily applicable to highly managed settings where food and meals are provided to residents.

### ***Living in rural Tasmania, Australia***

All the older adults were required to be living in rural Tasmania. The research was originally conceived by researchers from the Centre for Rural Health at the University of Tasmania, which is funded to conduct rural health research in Tasmania. Focusing on rural older adults also provided an opportunity to explore how rural living shapes experiences of food, meals, and eating.

For the purposes of selecting participants, I developed a working definition of rural Tasmania by combining two areas from the Australian Standard Geographical Classification – Remoteness Areas system (Department of Health, 2012). These two areas are Outer Regional areas (RA3) which have “significantly restricted accessibility of goods, services and opportunities for social interaction”; and Remote areas (RA4) which have “very restricted accessibility of goods, services and opportunities for social interaction” (Department of Health, 2012). The Inner Regional areas (RA2) were excluded as they cover the cities of Hobart, Launceston, and Devonport. Very Remote areas (RA5) were also excluded as they cover areas of Tasmania such as Flinders Island and King Island which are inaccessible by

road and they have very small populations. Those two characteristics inform experiences of food security in particular ways that are not relevant to the majority of rural Tasmanians who live on the state's largest and most accessible island.

### ***Either male or female***

The older adults participating in the research could be either male or female; this reflected my decision not to focus on one gender in particular. Earlier published research into food and eating in older adults has found that gender identities and roles are significant for older adults' experiences of food, meals, and eating (Charlton, 1999; Gustafsson, et al., 2003; Hughes, Bennett, & Hetherington, 2004; Lane, et al., 2013). However, the intention of the research was not to engage with food-related experiences through a gender lens, and instead view older adults as sharing a fundamental common ground by virtue of being human. Exclusively focusing on either males or females in the research might risk over-emphasising the gendered dimensions of older adults' experiences of food, meals, and eating at the expense of their shared human experiences.

### ***Receives either formal or informal assistance with day-to-day activities***

To participate in the research, the older adults were required to receive at least some assistance with day-to-day activities, including formal services like delivered meals and home cleaning, or informal services such as food and transport provided by friends and family members. This criterion was designed to exclude the most highly capable and independent older adults who are less likely to face any significant age-related challenges to their food security.

### ***Understands and speaks English well***

In order to participate effectively in in-depth interviews, the older adults were required to understand and speak English well. Interpreting services are expensive and the process of interpreting can complicate qualitative research interviews. This criterion did not exclude many older Tasmanians from the research because less than 8 per cent of the state's population speaks a language other than English at home (ABS, 2013).

***Does not have a medical condition that is immediately life-threatening***

Older adults were required to be free from an advanced medical condition that was immediately life-threatening while participating in the research. People who are close to death are inherently vulnerable and special ethical approval is required from the Human Research Ethics Network (Tasmania, Australia) to conduct research with people in this situation.

***Does not have any major cognitive impairments***

In order to fully engage with in-depth interviews, the older adults were required to be free from any major cognitive impairments. It is not feasible to conduct in-depth qualitative research with older adults with major impairments – arising, for example, from strokes or dementia – who cannot readily talk about their experiences. People with these conditions are inherently vulnerable, and special ethical approval from the Human Research Ethics Network (Tasmania) is required to conduct research with people in this situation.

### **3.5 Ethics approvals and recruitment of participants**

#### **3.5.1 Ethics approvals**

Prior to conducting any recruitment activities, I sought and received ethical approval from the relevant research ethics body, in accordance with the requirements of the University of Tasmania and the Government of Australia. On 26 April 2012, I submitted a Minimal Risk Ethics Application to the Social Science Human Research Ethics Committee (Tasmania) Network and it was approved on 3 May 2012. Refer to Appendix 5 for the Minimal Risk Ethics Application Approval.

Subsequently, I decided to broaden the research aim. This decision is detailed in Sections 3.5.2 and 3.5.3 below. After revising the research aim, I revised the information sheet, consent form, covering letter for the information sheet, letter to services, advertisement, brochure for participants, and consent form. Refer to Appendices 1 and 2 for these revised documents. I submitted an Application for Amendment to Approved Project to the Social Science Human Research Ethics Committee on 26 July 2012 and it was approved on 29 July 2012. Refer to Appendix 5 for the Approval.

### **3.5.2 Original research aim**

Originally, the aim of the research was to explore experiences of food insecurity with predominantly food insecure older adults. I commenced recruiting participants immediately after I received ethics approval in May 2012. Primarily, I employed purposive sampling methods which entail strategically recruiting participants whose characteristics directly support the research aim (Bryman, 2012, p. 427). In order to reach community-dwelling rural older adults, I asked key staff of Government-funded and charitable organisations that provide services to older Tasmanians to approach potential participants on my behalf from among their client bases.

However, recruitment proved to be very slow and by July 2012 only one participant had been successfully recruited to the research. This was surprising because previous research by the Centre for Rural Health at the University of Tasmania, as well as informal consultations with key stakeholders that I conducted in the early stages of the research, had confirmed that food insecurity is a significant issue for older adults in Tasmania.

In July and August 2012, one possible reason for older adults' reluctance to participate in the research was revealed when I received advice from two program managers from a charitable organisation, a public servant from the Tasmanian State Government, and a minister of religion from a rural church. Previously, I had asked each of these people to distribute information about the research to their clients, parishioners, and, in one case, her neighbour. However, each of these people advised me that the focus of the research on food *insecurity* represented a significant obstacle to recruitment of older adults. All of them were reluctant to approach older adults about the research. They were concerned about offending older adults by suggesting that they were food insecure, which they feared would undermine their positive relationships with these people.

### **3.5.3 Revised research aim and renewed recruitment**

Following this feedback, I broadened the aim of the research to explore older adults' experiences of food, meals, and eating, and then consider its significance for deeper understandings of food security and insecurity in this age group. Accordingly, I revised the recruitment materials and the information sheet to reflect this broader focus on older

adults' experiences of food, meals, and eating. Refer to Appendix 1 for the revised Information Sheet and Consent Form for the research participants.

Following University ethical approval for these changes, I re-commenced recruitment activities, placed advertisements in Tasmanian newspapers and rural newsletters, re-contacted aged care organisations, and wrote letters to local community groups based in rural Tasmania, to invite their members to participate in the research. One participant was recruited to the research by a friend, who had a family friend who expressed interest in the research. Refer to Appendix 2 for the Advertisement, Brochure, and Letters.

After potential participants advised their interest, I telephoned them, engaged them in conversation, introduced the research, and conducted an informal screening to ascertain whether or not they met the selection criteria listed in Section 3.4.4 above. The potential participants were asked where they lived, whether or not they were community-dwelling, their age, and whether they received any formal or informal services. During these telephone conversations, I also informally assessed the older adults against the secondary selection criteria – 'does not have significant cognitive impairment', 'understands and speaks English well', and 'does not have a medical condition that is immediately life-threatening'. Refer to Appendix 3 for the Informal Screening Tool.

### **3.5.4 The older adults**

Between August 2012 and February 2013, another 20 older adults were readily recruited to the research, in addition to the first participant who had been recruited in July 2012. One older adult expressed interest in the research and took part in an initial telephone conversation and screening, but he subsequently opted out of the research for health reasons prior to providing written consent.

Accordingly, a total of 21 older adults participated in the research after signing Consent Forms. None of the participants withdrew during the research. This thesis refers to each of the participants by a pseudonym. Table 1 below provides a brief summary of the older adults' basic demographic characteristics. Fifteen older adults participated individually in research activities and three married couples participated jointly. There were 14 female and seven male participants aged between 72 and 90 years of age, which in total represents

1,696 years of life experience. Nineteen of the participants were aged 75 or over at the time of the first interview. One participant turned 75 years old between their first and second interview [Mr Garner]. Another participant was aged only 72 years at the time of her first interview [Miss Roberts]. Miss Roberts was accepted into the research because she has age-related physical limitations, expressed a desire to participate in the interviews, and assisted with recruiting another participant to the research. Refer to Appendix 4 for Biographical Sketches of the Older Adults, which provide richer insights into their lives.

**Table 1: Demographic characteristics of the older adults**

<b>Pseudonym</b>	<b>Age</b>	<b>Place of birth</b>	<b>Marital status</b>	<b>Location in rural Tasmania</b>
Mrs Andrews	84	Australia	Widowed	Town, north west
Mrs Brown	77	Australia	Widowed	Farm, north east
Mrs Court	83	Australia	Married	Hamlet, south
Mr Donald	79	United Kingdom	Married	Town, east coast
Mrs Donald	78	United Kingdom	Married	Town, east coast
Mr Edwards	79	New Zealand	Married	Town, north east coast
Mr Frith	84	United Kingdom	Widowed	Town, north west coast
Mr Garner	74	United Kingdom	Married	Hamlet, north west
Mrs Hughes	77	United Kingdom	Widowed	Town, north east
Mrs Ingram	82	Australia	Widowed	Town, north east coast
Mrs Johnson	78	Australia	Widowed	Town, east coast
Mrs Knight	90	Australia	Widowed	Town, north west coast
Mr Langridge	87	Australia	Married	Town, north west coast
Mrs Langridge	85	Australia	Married	Town, north west coast
Mr Mitchell	77	Australia	Widowed	Farm, Midlands
Mrs Noonan	86	Australia	Widowed	Town, north east
Mrs O'Brien	80	Australia	Married	Town, north east
Mrs Parker	82	Australia	Widowed	Town, north west
Mr Quinn	81	Australia	Married	Town, west
Mrs Quinn	81	Australia	Married	Town, west
Miss Roberts	72	Australia	Never married	Town, north east coast

## 3.6 Research methods and guiding principles

### 3.6.1 Phenomenological research methods

In order to identify suitable qualitative research methods, I investigated the various methods employed by researchers in phenomenology and phenomenological ethnography. As detailed in Section 3.3.3, descriptive phenomenology utilises highly detailed methods of bracketing and reduction (Husserl, 1900/2001; Husserl, 1936/1970; Moustakas, 1994). However, this study is more heavily informed by interpretative phenomenology, which does not employ formal bracketing techniques, because it argues that it is not possible to obtain a pure description of an experience of a phenomenon (McWilliam, 2010). The research methods of interpretative phenomenology are not closely specified. Instead, they are frequently described in broad terms as “a phenomenological *attitude*” which entails developing an attentive orientation toward experience (Hockey & Allen-Collinson, 2009, p. 228).

In philosopher Hans-Georg Gadamer’s famous text *Truth and Method*, he argued against methodological precision in phenomenological research in favour of conducting dialogues and seeking collaborative understandings between researchers and participants (Gadamer, 1960/2005; Walsh, 2012). This methodological reticence somewhat complicates the process of selecting methods for research. Without any explicit instructions, “it is the task of each phenomenological researcher to navigate the abundant and conflicting literature in phenomenology and articulate an appropriate process or method for achieving the aims of a particular project” (Caelli, 2001, p. 275).

While designing the study, I considered various possible methods and assessed them as appropriate to phenomenological research if they were capable of producing “detailed, rich, in-depth, textured, descriptions of participants’ subjective, concrete lived experiences of a phenomenon” (Hockey & Allen-Collinson, 2009, p. 228). Phenomenologists apply quite a few lesser-known qualitative research methods including diary writing, photography, and analyses of poetry (Creswell, 2007). However, after close consideration, I discarded those in favour of three more widely-used methods which resonate more strongly with ethnographic research practice.

### **3.6.2 Integration of the methods**

The research employs three complementary qualitative research methods: (a) repeated in-depth interviews in older adults' homes; (b) 'walking interviews' which are informal interviews with older adults while walking together; and (c) informal observation conducted before, during, and after each interview. Employing multiple methods, which is otherwise known as methodological triangulation, was beneficial to the research because it allowed three separate but interrelated forms of qualitative data to be generated, and each of these shored up and illuminated the findings of the other (Atkinson & Coffey, 2002; Mason, 2002). Each of Sections 3.6.3 to 3.6.5 details one of these qualitative research methods, considers its benefits for fieldwork, and acknowledges its epistemological limitations.

### **3.6.3 Repeated in-depth interviews in older adult's homes**

In total, I conducted 38 interviews with 21 community-dwelling older adults, either as individuals or married couples, over a period of 16 months (July 2012 – October 2013). All the older adults participated in at least two interviews which were conducted approximately six months apart. Two of the older adults participated in three interviews, which arose from attempts to conduct walking interviews during unpredictable weather. After each interview, I sent a handwritten note to the older adult, thanking them for their patience and time. The interviews varied in duration from 29 minutes to 5 hours and 8 minutes, and the total combined duration of all the interviews was 64 hours and 40 minutes. I conducted all the interviews in the older adults' homes, gardens, farms, or neighbourhoods in 13 different rural towns and areas of Tasmania. During the fieldwork, I drove a combined distance of over 11,000 kilometres to and from these rural locations. All the interviews were digitally recorded. Refer to Appendix 6 for the Details of the Interviews.

Prior to the first interview, I developed an interview guide which was informed by the research questions and literature review. I added additional questions to the interview guide as the fieldwork phase progressed and new areas of enquiry emerged from the interview data. By the end of fieldwork, the first interview guide contained 31 questions, but I did not ask all of those questions during each interview. After repeatedly reading transcripts of their previous interviews, I prepared an individualised interview guide for each older adult prior to their second (and sometimes third) interview. Into these individual

guides, I incorporated important questions that I not yet asked them, questions to clarify any important factual matters, and prompts for more in-depth discussions of themes that had arisen in previous interviews.

The interview guides were exploratory in nature rather than highly specified; they were flexible enough to allow spontaneous questions to be asked during interviews so as to engage with any unexpected data (Roulston, 2011). As each interview proceeded, I spontaneously adapted the interview guide, depending on the mood of the interview and the circumstances of the older adults. I did not always ask the questions in the same order and I did not necessarily ask each participant all of the questions. Refer to Appendix 7 for the Interview Guides and Participant Questionnaire.

### ***In-depth interviewing as a research method***

The purpose of the interviews was to elicit rich data by engaging older adults in open and candid communication, built upon relationships of trust and rapport between myself and the older adults. There is evidence that rapport favourably influences the content of interviews and the extent of disclosure within interviews (Hitchings, 2012; Riley & Harvey, 2007).

As a novice interviewer, I entered into the interviews with care and consideration, and even some trepidation. Conducting successful in-depth interviews as part of phenomenological research entails meeting several challenges:

It is a task-focused situation whose outcome depends upon the quality of the researcher-researchee relationship. Also it is structured, yet unstructured. The researcher is prepared and knowledgeable yet open-minded and naïve, immersed in the data but standing back to get an overview of it, and receptively responsive but task oriented. The researcher must be resourcefully responsive without leading, join the other person's lifeworld without intruding, be personally goal oriented, and be flexibly focused (Becker, 1992, p. 41).

Traditionally, qualitative researchers viewed an interviewer's role as largely neutral, requiring an unbiased approach to participants (Randall, Prior, & Skarborn, 2006). However, in recent years, this neutrality has been called into question, and now researchers and

participants are increasingly thought to actively co-construct interview data (Kelly, 2010; Randall, et al., 2006). Certainly, I was not a neutral and passive recipient of data during the interviews, as I essentially directed the overall intent and direction of each of the interviews. As well, the level of rapport I achieved with older adults clearly informed the duration and depth of particular interviews, such that some were notably longer or produced richer and more detailed data than others.

Research interviews are a profoundly social method; they are “personal, interactional, and emotional” for both researchers and participants (Kong, Mahoney, & Plummer, 2001, p. 250). Researchers who conducted lifestory interviews with older adults in Canada for example found the data was heavily informed by unique social interactions during each interview: “...what tellers tell can therefore be profoundly affected by how listeners listen, by the questions listeners ask, and how listeners and tellers interact in general. As a consequence, every interview has very much a life of its own” (Randall, et al., 2006, p. 382). Some researchers have likened qualitative interviews to conversations (Johnson, 2002; Kvale, 1996; Warren, 2002). However, interviews are actually quite different to conversations. They do not conform with the primary social convention of a conversation which anticipates equitable verbal exchange and reciprocity between the parties, who generally seek a degree of balance between roles of questioning, answering, and listening.

Each of the interviews conducted for the research had a unique character of its own. They were shaped by diverse factors, including (a) the environments in which they were conducted; (b) the communication styles of the older adults; (c) the health, mobility, and mood of the older adults (and myself); and (d) the presence of spouses, family members, or neighbours during interviews. The older adults were encouraged to lead the research encounter where feasible. For example, older adults decided where we would sit during the interviews, I let them chat about topics that were not directly relevant to the interview themes such as political issues and family news, and I did not specify particular requirements for the interviews, such as its duration, exact content, and the presence or absence of other people. This approach was consistent with the social conventions of the older adults hosting me in their homes, and it also helped put them at ease so as to generate rich and candid data.

Allowing older adults to shape their own interviews meant the interviews were quite different from each other. For example, two of the older adults provided meals which we ate during the interviews; the home visits varied in duration from 29 minutes to more than five hours; spouses, family members, neighbours, and pets came and went during many of the interviews; and photographs, letters, and books were proffered by older adults and discussed in detail during some of the interviews. The highly variable mood and content of the interviews was in itself a rich source of data, reflecting the rich variety of ways the older adults live and relate to others.

### ***Repeated interviews***

Several considerations informed my decision to conduct at least two interviews, spaced at least six months apart, with each older adult. Researchers have found that conducting repeated interviews builds rapport with participants, generates insights into how people's circumstances change over time, and allows in-depth exploration of themes while avoiding protracted and tiring interviews (Hitchings, 2012; Johnson, 2002). As well, as a novice interviewer, repeated interviews would allow me to build my interviewing skills over repeated encounters and glean further details or insights from participants after reflecting on the data generated from previous interviews. Importantly, conducting repeated interviews is also consistent with phenomenological research approaches. When researchers return to participants for another interview after reflecting on their interpretations of earlier interview data, they are essentially engaging in a hermeneutic method of research and analysis which entails "going round the circle again" (Smith, 2007, p. 9).

Conducting repeated interviews proved to be worthwhile for many of the reasons anticipated. They allowed me to clarify any areas of confusion after considering the data from previous interviews with the same participant, to explore emerging themes from earlier interviews, to confirm data and impressions of older adults generated during earlier interviews, and to make fresh observations of older adults' home environments and rural surroundings. Refer to Appendix 7 for a sample individualised second interview guide.

Four of the second or third interviews that were conducted uncovered significant changes in participants' lives. Between her first and second interviews, Mrs Knight was diagnosed with

advanced cancer and this news informed the mood and content of her second interview, which was understandably more heavily concerned with experiences of health care and life reminiscence. Between their first and second interviews, Mr and Mrs Langridge left the house they shared with their son and family and they moved into a rented home by themselves, and Mrs Langridge was diagnosed with type 2 diabetes and had one of her toes amputated. Both of these events significantly influenced their experiences of food, meals, and eating (as detailed in Chapter Five). Between his first and second interviews, Mr Quinn had a stroke and was admitted to hospital, and the implications of this event for Mr and Mrs Quinn's eating were explored during the second interview. And finally, Mrs Hughes experienced a threatening event related to incursions into her garden by a neighbour's dogs, which significantly lowered her mood and sense of confidence, between her first and second interviews (as detailed in Chapter Six).

### ***Interviewing older adults***

When designing the in-depth interviews, I considered several ethical and practical matters. Researchers often view older adults as vulnerable participants (Liamputtong, 2007; Locher, Bronstein, Robinson, Williams, & Ritchie, 2006; Wenger, 2001). One area of particular concern relates to "therapeutic misconception", in which older adults believe that researchers will provide them with health care or other services in exchange for their participation in research (Locher, et al., 2006, p. 161). Researchers fear that ethical dilemmas might arise if they identify older adults that are at particular risk, raising the dilemma of whether or not to provide assistance to them (Locher, et al., 2006). Other researchers have identified practical issues for conducting qualitative research with older adults, include cognitive impairment, hearing loss, speech difficulties, and mental and physical fatigue (Wenger, 2001).

Accordingly, prior to conducting any of the interviews, I was somewhat concerned about older adults' possible lack of stamina to participate in lengthy interviews, as well as limitations which might arise from their low hearing or poor cognitive functioning. However, all of the interviews were positive experiences, with very little evidence of any adverse effects from their sometimes advanced ages. Many of the older adults engaged in the interview process for extended periods of time and some of them displayed an impressive

ability to recall an earlier question, returning to it after taking a considerable conversational side-track.

Perhaps the only practical challenge I faced during the interviews was in relation to the reduced hearing of some of the older adults; a couple of them found it hard to hear my voice. I employed a couple of strategies to mitigate this, including (a) refraining from asking older adults any questions while they were boiling their kettles for our cups of tea, (b) sitting directly opposite and reasonably close to older adults during interviews, and (c) sometimes asking older adults to turn down the volume of their radios or televisions to minimise background noise. Importantly, none of the older adults displayed significant confusion about my role as a researcher who could not provide them with health care or other assistance.

Some researchers have argued that older adults are more likely than other participants to shape an interview into a social conversation by asking questions of the interviewer (van den Hoonaard, 2005; Wenger, 2001). However, in my experience, all the older adults made a clear distinction between the interviews and any of our conversations. Very few of the older adults asked me any questions about myself until the interview phase of the home visit was quite clearly concluded. For example, after I told Mrs Court we had reached the end of her first interview, she got up and made us a cup of tea. Thereafter, she only gave vague answers to any supplementary questions, and asked me about my family life for the first time. Clearly, Mrs Court was fully cognisant that we had commenced another kind of social encounter which was quite distinct from her earlier interview.

### ***Homes as interview sites***

Deciding upon a setting for the interviews is a great deal more than a practical matter because it expresses core elements of the ontology and epistemology of research (Mason, 2002). The choice of interview site significantly influences the direction, dynamics, and content of an interview; people may present a particular part of their identity in particular places, and the social dynamics of interviews can be profoundly shaped by particular interview sites (Sin, 2003). The interview site produces “micro-geographies” of spatial relations and meaning where “where multiple scales of social relations intersect in the research interview” (Elwood & Martin, 2000, p. 649).

There were several reasons for explicitly choosing older adults' homes as the preferred sites for the interviews and observations. Firstly, homes and their broader settings are potentially sources of significant data (Wenger, 2001). For interviews aimed at exploring an older adult's lifeworld and their food-related activities, much of which is enacted at home, it is highly appropriate to conduct these interviews in their home environments. Importantly, while in their own homes, older adults are naturally surrounded by material possessions such as food items or recipe books that serve as useful interview prompts and provide crucial observational data. Secondly, siting interviews in older adult's homes establishes them as experts on their own lives, thereby encouraging them to talk about their experiences (Elwood & Martin, 2000).

Interviews are sometimes viewed as epitomising unbalanced power relations within research, in which interviewers effectively hold sway over respondents (Elwood & Martin, 2000). However, although interviewers do frame and ask the questions, the power they assert within research interviews is actually quite tenuous. Respondents participate in an interview for their own reasons and determine what they are willing to disclose, thereby shaping the nature and content of the interview (Sankar & Gubrium, 1994). Interviews can potentially be quite empowering for participants, especially if researchers listen attentively and treat respondents as "knowledgeable, capable and reflective participants in the research process" (Wiles, Rosenberg, & Kearns, 2005, p. 90).

During the interviews, I employed various small strategies to enable older adults to exercise some degree of influence over the home visits and interviews. Where possible, I asked open-ended questions which allowed older adults to either interpret them according to their own circumstances or avoid answering them. I also gave older adults small opportunities to temporarily direct the course of interviews by introducing new topics. I listened closely and patiently to everything older adults said, even when it was not always directly relevant to the research. As well, I did not exercise significant control over the duration of interviews, such that if an older adult appeared to be particularly enjoying a home visit, I allowed them to elongate it.

### ***Individual or joint interviews***

During the initial introductory telephone conversations, I invited each older adult to participate in their interviews either as an individual or jointly with their spouse, if applicable. Occasionally, older adults did not make a firm decision on this matter until I arrived at their home for the interview. In one case, we had already commenced an interview when a participant's spouse spontaneously joined the interview dialogue, and at that point I sought and received her verbal consent to participate in the interview, and I subsequently obtained her written consent as well.

The decision to conduct joint interviews when desired by participants was informed by research findings that couples in joint interviews can corroborate, contradict, clarify, or add to each other's stories, which builds the richness and detail of the data (Bjørnholt & Farstad, 2014). This proved to be particularly useful in the interviews, as spouses could ease participants through occasional memory lapses or difficulties with word recall, and provide useful clarifying details or contextualise stories told by participants.

Although these couple interviews were serendipitous rather than explicitly planned, they were highly supportive of the research, because older adults' eating experiences are often intimately interwoven with their spouse's food activities and preferences. The joint interviews provided valuable opportunities for learning from the shared food-related meanings of the couple and produced rich observational data of informal interactions between couples during interviews. These positive benefits of interviewing couples have been noted by other qualitative researchers (Bjørnholt & Farstad, 2014; Taylor & de Vocht, 2011).

### ***Epistemological limits of interviews***

Considerations of epistemology are important for qualitative research because they pertain to what researchers can reasonably regard as knowledge of the social world which is made up of human beings and phenomena (Mason, 2002). Of course, interviews are limited in their capacity to unearth a particular 'truth'; what older adults say in interviews cannot be assumed to give researchers a direct window into their lives, thoughts, and meanings (Kelly, 2010). Participants' stories and representations of themselves and their experiences are

shaped by social interaction during the interview, as well as by their mood, biases, and ideologies (Kelly, 2010).

Some qualitative researchers argue that an interviewee essentially acts out a particular role for the benefit of their audience, and as such, interviews constitute “dynamic oral and aural performances” (Kong, et al., 2001; Sankar & Gubrium, 1994; Wiles, et al., 2005, p. 90).

Occasionally, I formed the impression that an older adult might be enacting a particularly positive and capable version of themselves during home visits. To overcome these tendencies, I employed some small but hopefully worthwhile strategies, including (a) encouraging older adults to be expansive when they touched upon negative moods, rather than always presenting themselves as cheerful and positive; and (b) carefully avoiding any implied criticism of what older adults said in order to convey my uncritical acceptance of them.

#### **3.6.4 Walking interviews**

I conducted 11 walking interviews with older adults, which involved engaging them in an informal interview while walking together. These walks varied in duration from approximately 10 to 50 minutes and were conducted in a variety of settings, including on farmland, alongside rivers, through parkland, along streets, and in domestic gardens. During each walk, I conducted an informal semi-structured interview, which I digitally recorded and later transcribed.

One older adult was reluctant to participate in a walking interview due to her worsening medical condition [Mrs Court]. Another six older adults were unable to participate in walking interviews without significant risk arising from medical conditions [Mr Donald, Mrs Donald, Mrs Langridge, Mrs Knight, Mrs O’Brien, Mrs Quinn]. Two of the older adults did not participate in walking interviews because visitors were present during their second home visits and interviews [Mr Langridge, Mrs Parker]. One older adult did not participate in a walking interview because her second and third home visits were affected by wet or very windy weather [Mrs Noonan]. Importantly, all of these older adults participated in a second or third in-depth interview instead of a walking interview. Refer to Appendix 6 for the Details of Interviews.

### ***Walking interviews as research methods***

A walking interview is an ethnographic research method which combines observation with interviewing. Researchers apply a variety of labels to this method. Perhaps the most common alternative label is “go-alongs” (Carpiano, 2009, p. 63; Kusenbach, 2003, p. 455), but they have also been referred to as “talking whilst walking” or “bimbling” (Anderson, 2004, p. 254), “walk-alongs” (Rose, Degen, & Basdas, 2010, p. 334), “mobile interviewing” (Brown & Durrheim, 2009, p. 911), “walking probes” (De Leon & Cohen, 2005, p. 200), and “pace in place” (Hitchings & Jones, 2004, p. 9).

Walking interviews are highly flexible; they are readily adaptable for different local contexts, research topics, and participants’ needs. They have been used to explore a variety of issues in a range of settings, including people’s experiences of shopping centres in the United Kingdom (Rose et al 2010), health inequalities in Milwaukee (Carpiano, 2009), perceptions of Hollywood neighbourhoods (Kusenbach 2003), experiences of an urban park in Dublin (Moles, 2008), and intersections of race and place in Durban, South Africa (Brown & Durrheim, 2009).

Walking interviews have proven to be feasible and effective in research conducted with people of different ages, including children (Hitchings & Jones, 2004), young people (Anderson & Jones, 2009), and older adults (Gardner, 2008; Riley, 2010; Riley & Harvey, 2007). One of these studies with older adults explored their relationships with local neighbourhoods in Toronto, Canada (Gardner, 2008). Another study was heavily informed by phenomenological conceptions of place; the researchers gathered oral histories from rural older men, accompanying them “in-the-field” while engaged in their usual farming routines (Riley & Harvey, 2007, p. 392).

### ***Merits of walking interviews***

Conducted in-situ, walking interviews deeply engage with concepts of place. They are valuable tools for examining “how physical, social, and mental dimensions of place and space interact within and across time for individuals”, because they help elicit participants’ experiences, interpretations, and practices within their own environments (Carpiano, 2009, p. 264). Research investigating the role of place in health inequalities employed walking

interviews of Milwaukee neighbourhoods which encouraged participants to determine the routes and sites of interest, such that the researcher was “‘walked through’ people’s lived experiences of the neighbourhood” (Carpiano, 2009, p. 264).

Walking interviews support phenomenological concerns with unique relationships between people and particular places (Moles, 2008). These places are not necessarily significant or monumental; some of the most “mundane locations and the events that occur at them can elicit rich responses” (De Leon & Cohen, 2005, p. 203). For sociologist Kusenbach (2003, p. 455) walking interviews are a form of “street phenomenology” because “by exposing the complex and subtle meanings of place in everyday experience and practices, the go-along method brings greater phenomenological sensibility to ethnography”. Informed by phenomenology’s concern with embodied experience, walking interviews are multi-sensory research encounters in which surroundings are seen, pavement or soil is felt underfoot, odours and aromas of gardens, streets, and farms are smelled, and background noises of birds, children playing, or traffic are heard (Ross, Renold, Holland, & Hillman, 2009).

This method also engages with questions of experience, emotion, and affect in relation to place. Walking interviews with people in shopping centres gave researchers insights into participants’ thoughts and feelings, allowing them to “engage, if only temporarily, in their experiential world” (Rose, et al., 2010, p. 340). Researchers have found walking interviews can aid people’s ability to verbalise their “realms of inner expression”, including their emotional ties to particular places, which might otherwise remain inaccessible or hidden during research (Anderson & Jones, 2009; Hitchings & Jones, 2004; Irving, 2010, p. 34).

Walking interviews are epistemologically consistent with phenomenological sociologist Alfred Schutz’s contention that the mechanisms of intersubjectivity can only be fully uncovered by observing people in action rather than by abstraction (Schutz, 1973; Schutz & Wagner, 1970). By requiring side-by-side engagement between researchers and participants, walking interviews develop “we-relationships”, in which people recognise and share each other’s experiences, thereby moving toward deeper intersubjective engagement (Schutz & Wagner, 1970, p. 190).

Walking with research participants appears to 'loosen up' the interviews, so that spontaneous questions arise more often and interviews flow more easily, with fewer awkward gaps in dialogue (De Leon & Cohen, 2005; Evans & Jones, 2011; Riley, 2010; Ross, et al., 2009). Information is more easily elicited during walking interviews, producing a "decidedly spatial and locational discourse of place", in which participants can readily talk about the places they live in (Evans & Jones, 2011, p. 856). Participant's oral histories or personal biographies also unfold more easily during walking interviews because their recollections are grounded in the surrounding environment, such as old buildings or houses of former neighbours (Kusenbach, 2003). This is perhaps especially so for rural older adults, who might have long-standing work and family ties to particular places (Riley & Harvey, 2007). These benefits are sometimes attributed to the physicality and rhythmic character of walking because it engenders a degree of sociability which arises from developing a shared walking rhythm (Lee & Ingold, 2006; Moles, 2008).

Walking interviews also overcome some of the disadvantages of traditional sit-down interviews which take people away from their natural day-to-day activities (Kearns, 2010). Separating people from their life settings risks obscuring some of its experiential depth such that "important aspects of lived experience may either remain invisible, or, if they are noticed, unintelligible. This is especially true for the spatial footings of experience and practices in everyday life" (Kusenbach, 2003, p. 459). By taking participants out of interview rooms, walking interviews "allow the environment and the act of walking itself to move the collection of interview data in productive and sometimes entirely unexpected directions" (Jones, Bunce, Evans, Gibbs, & Ricketts Hein, 2008, p. 8).

Importantly, a walking interview has a prosaic or pedestrian character which can aid a research encounter: "talking on the go, moving through local spaces amidst all the mundane distractions and reassurances of place, has given our interviews an everyday and ordinary quality, both in content and character" (Hall, Coffey, & Lashua, 2009, p. 552). The method thus illuminates the "incidental, trivial, mundane and often dull dimensions" of phenomena which are enacted in place but are not necessarily readily verbalised during traditional interviews (Anderson & Jones, 2009, p. 299).

Walking interviews can also partially disrupt traditional power relations within research, such that participants increasingly become collaborators rather than research subjects (Brown & Durrheim, 2009; Carpiano, 2009; Jones, et al., 2008; Moles, 2008). Walking interviews hand over some power to participants by allowing them to choose walking routes, influence the pace and direction of interviews, and interrupt interviews to talk to neighbours (Hall, et al., 2009; Ross, et al., 2009).

### ***Epistemological limits of walking interviews***

Although researchers have written about walking interviews in very favourable and even glowing terms in recent years, additional rigorous examination of the benefits that mobile methods bring to research encounters is arguably needed, over and above those of more sedentary methods (Ricketts Hein, Evans, & Jones, 2008). Another area that deserves critical examination is the capacity of walking interviews to permit researchers to actually enter into participants' lifeworlds. Some researchers have argued that walking interviews allow them to temporarily share participants' lives or inhabit their bodies (Anderson & Jones, 2009; Pink, 2007; Rose, et al., 2010). This is a significant epistemological claim which provokes questions about whether it is ever possible, even temporarily, to inhabit the body and life of research participants in general, and older adults in particular.

Other researchers make more restrained and readily justifiable claims about the epistemological capacities of walking interviews. Phenomenological researchers Lee and Ingold (2006, p. 67) asserted that "walking does not, in and of itself, yield an experience of embodiment, nor it is necessarily a technique of participation. Both embodiment and participation presuppose some kind of attunement or shared circumstance". While it is not clear that walking interviews can produce fully shared, embodied understandings of others, it is a valuable research method because "it nevertheless opens up the possibility of other types of knowledge and appreciation that do not presuppose commonality" (Irving, 2010, p. 35).

### **3.6.5 Observation**

Before, during, and after the interviews, I engaged in informal and unscheduled observation. This involved observing details of the older adult's house, home décor, garden, and its

setting in the landscape; their dress and physical appearance; and details of any pets or other people present. Before or after each home visit, I also observed older adults' surrounding environments, including any nearby townships. These observations were not conducted in a systematic manner with formalised checklists. Instead, I captured overall impressions and small details which provided insights into older adults' lifeworlds. I wrote field notes of my observations immediately after each home visit, often while still in older adults' neighbourhoods but out of view of their home. I did not write any field notes in the presence of older adults in order to avoid making them feel they were being examined.

The purpose of the observation was to document my impressions and experiences of older adults' home environments and rural settings in order to complement the interview data. Observation is quite a complex research activity as it involves simultaneously conducting multiple tasks, including watching and listening to people's behaviours, expressions, and interactions, while also noting the social setting, location, and context (Hennink, Hutter, & Baitel, 2011). Observation generated some rich and insightful data of older adults' experiences of food, meals, and eating. For example, Mr Frith, Mrs Parker, and Mr Garner spontaneously invited me to look in their pantries, fridges, and freezers; these observations provided valuable data about their preferred foods and cooking equipment. Refer to Box 2 in Chapter Six for these details. Mrs Andrews, Mrs Ingram, and Mrs Johnson served biscuits, cakes, and scones during home visits, thus revealing something of their food preferences, baking skills, and senses of themselves as hosts.

Perhaps the most significant observational data came from meals I shared with participants. Both Mrs Brown and Mr Mitchell spontaneously offered to prepare meals for me during their home visits. During these experiences, I closely observed, participated in, and asked questions about their approaches to deciding ingredients, cooking and preparing food, presenting food on plates, eating meals, and clearing up – while these activities were actually taking place. These experiences provided rich data on these two older adults' food preferences and their techniques for managing their eating on a day-to-day basis. Mrs Brown showed me how she cooks a hearty lunch-time meal of steamed pork and vegetables in only one saucepan, thus saving time and energy on washing dishes. Preparing lunch with Mr Mitchell revealed that he eats simple and enjoyable meals which emphasise fresh

ingredients, he works systematically at meal preparation, and he maintains a very clean and well-organised kitchen.

The observations also provided useful data about the physical functioning of the older adults, such as walking up hill at considerable speed [Mr Mitchell], readily bending down to reach tea cups from her display cabinet [Mrs Andrews], navigating her surroundings well despite low vision [Mrs Parker], and difficulties with standing up from living room chairs or moving around the kitchen [Mrs Donald, Miss Roberts].

This approach to observation was quite different to the experimental observation techniques of checklists and one-way mirrors – instead, I attempted to gain insights into the lifeworlds of participants. This phenomenological approach to observation has been termed “close observation” (van Manen, 1990). It requires researchers to perform a delicate balancing act, in which they develop “an attitude of assuming a relation that is as close as possible while retaining a hermeneutic alertness to situations that allows us to constantly step back and reflect on the meaning of those situations” (van Manen, 1990, p. 69).

Observation entails a degree of participation. During the interviews and home visits, I naturally engaged in some of the everyday interactions and activities which spontaneously occurred in the participants’ home environments (Kearns, 2010). For example, on our way to start our walking interview, Mr Mitchell and I hung out a load of his laundry on his clothesline. During Miss Roberts’ second interview, a young woman came to deliver meat from the local butcher and she stopped for a brief chat with us. During Mr Edwards’ first home visit, his wife had a minor car accident in their driveway and I helped Mr and Mrs Edwards tidy up resultant damage to their garden ornaments.

However, the duration and extent of my participation was clearly limited during home visits. While I engaged in social situations, helped out with tasks, and shared meals while visiting older adults’ homes, I did not deeply or lastingly participate in their embodied experiences of ageing or food. Social gerontologist Graham Rowles has clearly delineated the limits of participation in research with older adults, asserting that “when I grow old I will experience what it is like to be elderly. Until then I can only speculate and seek to understand from the

outside; for experiential awareness is personal and ultimately incommunicable” (Rowles, 1978, p. xviii).

### ***Observation as a research method***

Conducting observation as part of research is consistent with an epistemological view that experiences cannot always be readily articulated, recounted, or constructed in interviews, and observation can produce detailed and rich data which has “depth, complexity, roundedness and multidimensionality” (Elwood & Martin, 2000; Mason, 2002, p. 86). The manner in which older adults inhabit, organise, and decorate their homes with photos and memorabilia, as well as the level of amenity available to them, provided useful insights into their lifeworlds and strategies for living.

Including observation as an explicitly articulated research method allows for thoughtful reflection on the practice of observation, which ensures that it is “a self-conscious, effective, and ethically sound practice” (Kearns, 2010, p. 241). The practice of observation may not be thoughtfully examined by researchers if it treated as an assumed element of the research rather than an explicitly articulated research method. Observation always involves a choice of what to observe, whether or not that choice is conscious or unconscious. As such, observational data is informed by a researcher’s perspectives and orientations (Kearns, 2010). In effect, these observational choices create an “ethnographic gaze” which is shaped by a researcher’s “experiences, predispositions and foibles” (Madden, 2010, p. 100).

Power relations implicit in the practice of observation were also considered in the research because observation can potentially be quite intrusive, particularly when it is conducted in participants’ home environments (Kearns, 2010). Considerable sensitivity and ongoing reflection required me to achieve a balance between a lively curiosity and respect for participants’ physical spaces and psychological boundaries (Madden, 2010). For example, I did not look inside older adults’ kitchen cupboards, pantries, or refrigerators during home visits unless I was invited to do so, and I did not ask detailed questions about personal relationships or the deaths of family members.

### ***Sensory observation***

The observation was multi-sensory in nature; I observed and noted a range of sensory data during home visits. This observation entailed seeing older adults' surroundings, as well as smelling odours of cooking, fresh linen or dust; hearing traffic noise, silence, or televisions; feeling the comfort of older adults' furniture or the temperature of their homes; and tasting food and drinks proffered by older adults, including tea, instant coffee, diabetic lollies, long-life milk, scones, slices of cake, steamed pork, and soup.

This sensory approach to observation was informed by the two methodologies of phenomenology, which emphasises 'being there' during research, and sensory ethnography, which seeks to gather and analyse qualitative data through multi-sensory means (Hansen, 2003; Pink, 2010). Sensory observation is particularly appropriate for research exploring experiences of food because cooking and eating involves humans in activities that actively engage bodily senses of taste, smell, touch, sight, and hearing (Korsmeyer & Sutton, 2011; Longhurst, Johnston, & Ho, 2009; Lupton, 1996). Taking a sensory approach to observation also adds to the credibility of research findings: "believable observation is the outcome of more than simply seeing; rather, it requires cognizance of the full sensory experience of being in place" (Kearns, 2010, p. 257).

### ***Epistemological limits to observation***

Observation is sometimes seen as 'the gold standard' for ethnographic research because, unlike interviews, it provides insights into what people actually do and not just what they say they do (Green & Thorogood, 2009). However, if researchers unquestioningly believe what they see, they risk disregarding crucial events and social structures which may occur out of their lines of sight (Kearns, 2010). These epistemological limits to observation require researchers to continually assess the degree of access they have actually achieved by employing observation. It could be partial or intermittent, which has implications for the validity of the data (Mason, 2002). In this regard, methodological triangulation can be particularly valuable; additional research methods such as repeated interviews can generate data which either support or call into question the data generated by observation.

### **3.6.6 Serendipitous data**

Although the research encounters were thoughtfully planned, and carefully and systematically conducted, many of the home visits threw up small but significant pieces of serendipitous data. For example, in preparation for his first interview, Mr Edwards spontaneously prepared a carefully typed report of a memorable meal. With its spirited distaste for contemporary food fashion, and its cheerful irritation, this document gave some rich insights into Mr Edwards and his experiences of food. Mrs Andrews showed me a published memoir written by her daughter. Mrs Ingram gave me two booklets of poetry she had written on all manner of household matters and social relationships. During her first interview, Mrs Brown shared scores of photographs of family members, and Mrs Knight showed me memorabilia collated for her 90th birthday party, including childhood photographs, correspondence from her father, party invitations, and newspaper articles about her achievements. Refer to Appendix 8 for Samples of Serendipitous Data.

### **3.6.7 Guiding research principles**

I chose four main principles to guide the design and conduct of the research which were inspired by phenomenology in particular and qualitative research in general. These principles are (a) ensuring validity through rigour, (b) being thoughtful and reflective throughout the research process, (c) being empathic towards the participants and their experiences, and (d) conducting research in a flexible manner while maintaining the research strategy. Each of these are detailed below.

#### ***Validity through rigour***

Issues of validity within qualitative research pertain to whether the findings represent a basic honesty or 'truth' about the subject of the research; that is, whether the researchers were successful in exploring the phenomena or concepts they intended to explore (Mason, 2002; Seale, 2004). The validity of qualitative research is judged according to whether it "promotes insight, understanding or dialogue", rather than by quantitative criteria of validity which include considerations of empirical generalisability (Seale, 2004, p. 72).

The criteria outlined for assessing the validity of phenomenological research are often quite nebulous in nature and somewhat difficult to apply. For example, Ray (1994, p. 130) argued

that if the reflective process undertaken during phenomenological research “awakens an inner moral impulse” in the reader, then its description or interpretation of a phenomenon is likely to be accurate. Similarly, van Manen (1990, p. 19) noted that phenomenological research texts should “construct an animating, evocative description... of human actions, behaviors, intentions and experiences”, but he did not specify how to assess whether or not a description is animating or evocative.

However, validity in phenomenological research can actually be demonstrated through the quite tangible criteria of rigour. Valid phenomenological research requires a rigorous approach to methodological design processes, including close attention to the research aims and questions, participant characteristics, methods, and data analysis techniques so as to ensure they are both internally sound and externally consistent (Mason, 2002; Mays & Pope, 1995). Rigour also requires detailed descriptions of the research elements, as well as honest communication about any mis-steps and lessons learnt during the research (Mason, 2002; Mays & Pope, 1995). This thesis provides evidence of the validity of the research by detailing the meticulous and rigorous design process that was undertaken, describing in detail the methodological elements of the research and their application during fieldwork, noting that the interviews and data analysis were reviewed by my research supervisors, and discussing my reflections on participant recruitment and my subsequent revisions to the research aim.

### ***Thoughtfulness***

Thoughtfulness is another important guiding principle for the research. This principle was inspired by reflexivity although this could perhaps most accurately be described as restrained reflexivity. Reflexivity is “a notoriously slippery concept” within qualitative research that has been the subject of much debate (Bryman, 2012, p. 394). However, reflexivity fundamentally entails researchers engaging in a process of “critically reflecting on the self as researcher” (Denzin & Lincoln, 2011b). Like reflexivity, thoughtfulness entails reflecting on the research process. But it is a moderate or restrained reflexivity as it quite explicitly stops short of engaging in lengthy introspection of researchers’ personal identities or life experiences. Engaging in reflexivity to this degree risks falling into “an infinite regress of excessive self-analysis”, and inadvertently marginalises the older adults’ lives,

experiences, and perspectives that the research intends to bring to the fore (Finlay, 2002, p. 532).

The importance of thoughtfulness is also emphasised in phenomenological research. Phenomenological researchers are required to engage in constant thought and reflection – a sort of “thoughtful vigilance” directed towards the participants, research encounters, and data (Dahlberg, et al., 2008, p. 97). Similarly, van Manen emphasized the importance of thoughtfulness to phenomenological research, highlighting its origins in Heideggerian philosophy:

*Phenomenological research is the attentive practice of thoughtfulness.* Indeed, if there is one word which mostly aptly characterizes phenomenology itself, then this world is “thoughtfulness”. In the works of the great phenomenologists, thoughtfulness is described as a minding, a heeding, a caring attunement – a heedful, mindful wondering about the project of life, of living, of what it means to live a life (van Manen, 1990, p. 12).

Throughout the research, I maintained a thoughtful and reflective attitude which required me to consider, acknowledge, and respond to several interrelated considerations. These included: how the phenomenon of food security is filtered through my own interpretative lens which is informed by my life circumstances; how fieldwork experiences were shaped by my pre-suppositions and personal values; and how the older adults were affected by my presence (Allen, 2010). Certainly, the impressions that I formed during fieldwork and my later interpretations of data were shaped in subtle and intangible but influential ways by my own biographical particularities, including my gender, tertiary education, socio-economic circumstances, and origins from mainland Australia. As a middle-class, educated 40-year old woman who has never lived in a rural environment, I am quite different to the older adults. I did have some concerns that these biographical differences might prove to be a potential source of distrust for them during our research encounters.

However, during the fieldwork my overwhelming impression was that I established good, and sometimes excellent, rapport and common ground with the older adults, by listening closely and displaying a strong and supportive interest in their homes, experiences, and

opinions. Some illustrative examples of the rapport I established during interviews include: (a) one participant hugging me and adjusting my coat collar in a motherly fashion at the end of her last home visit [Mrs Parker]; (b) some participants writing friendly letters to me in reply to my thank-you notes [Mrs Andrews, Mrs Knight]; and (c) some participants giving me presents during home visits, including banana passionfruit and frozen mutton birds [Mr Edwards], Jerusalem artichokes [Mrs Johnson], freshly picked raspberries [Mr Mitchell], and two booklets of self-published poetry [Mrs Ingram].

### ***Empathy***

Empathy was an especially important guiding principle for choosing the research methods and conducting the interviews and home visits. Phenomenologists view empathy as a significant element of human intersubjectivity because being empathic requires human beings to experience each other: “...we experience the other directly as a person, as an intentional being whose bodily gestures and actions are expressive of his or her experiences or states of mind” (Overgaard & Zahavi, 2009, p. 203).

Practising empathy within phenomenological research requires researchers to pay close attention to older adults’ lifeworlds, but it does not require researchers to inhabit their minds or bodies (Overgaard & Zahavi, 2009). That is, conducting empathic phenomenological research with older adults did not require me to fully share in their experiences of being old. Instead, seeing them first and foremost as human beings, above and beyond their biological age, allowed me to focus on our shared common ground and hence feel natural empathy towards them.

The tone of the close attention placed on others is important for achieving empathic research practice; phenomenological researchers seek attunement with participants and strive to be open and present during fieldwork encounters (Finlay, 2006). Inspired by Heideggerian concepts of intersubjective understanding, taking an empathic approach in phenomenological research “entails ‘being with’ rather than ‘doing to’” (Finlay, 2006, p. 2). Researchers strive towards empathy by enacting a mood of openness, in which they are curious, open to surprises, and non-judgemental towards others (Dahlberg, et al., 2008; Simonsen, 2013). Empathic research practice also requires researchers to enter a deep state

of “concentrated focus” or attentiveness, such that they are present with others in the research situation “as it presents itself” (Dahlberg, et al., 2008, p. 104).

Considerations of being open and present during fieldwork informed my choice of research methods. Planning the research, I was aware that the topic of food can raise particularly strong feelings of guilt or embarrassment in people. Food carries a significant moral load. Cooking and eating food is associated with parallel notions of (a) virtue which is epitomised by aspirations towards dieting, healthy eating, home cooking, and organic foods; and (b) sin which is epitomised by concerns about greed, obesity, and junk food (Atkinson, 1983; Nettleton & Uprichard, 2011). Although the moral weight of food is informed by contemporary social and economic factors, associations between food and morality probably originate from longstanding cultural associations between food, religion, and spirituality, enacted through feasting and fasting (Delaney & McCarthy, 2014).

The research methods were chosen in part because they could be employed in a manner which would convey acceptance of the older adults with regards to their experiences of food. If the older adults were to feel judged, the resulting distrust might threaten the validity of the data, because older adults might only tell me what they thought was morally acceptable or admirable. For example, I considered, but then discarded, some of the tools used in nutrition and gerontological research, including nutrition screens, food inventory checklists for assessing older adults’ supplies of food, and formal Instrumental Activities of Daily Living (IADL) and Activities of Daily Living (ADL) tests (Anyanwu, et al., 2011). Potentially, these functionally-oriented tools could intrude into older adults’ psychological and physical spaces and might carry implied criticisms if older adults failed to meet the tools’ pre-defined standards. As well, they do not adequately engage with the varied meanings that the achievement of daily activities holds for older adults (Baars, 2012a).

Of all the guiding principles, the principle of empathy was particularly inspiring for my fieldwork practice. Certainly, as noted earlier in this chapter, I did not see it as possible to fully inhabit older adults’ lifeworlds or share in their embodied experience of older age. Instead, I set out to be open and non-judgemental about their perspectives on life, their unique ways of going about daily activities, and their personalities and bodies. Before each home visit, I took a few moments before entering a participant’s neighbourhood or

driveway to sit, breathe, and psychologically 'open myself' to the upcoming intersubjective research experience. During each home visit, I listened attentively and observed closely so as to saturate myself with the sensory and emotional experience of 'being-with' another human being. After each home visit, I found myself quite pre-occupied with the older adult I had just spent time with; the older adult remained vivid in my mind for quite a few hours afterwards while I wrote my field notes, drove home through rural Tasmania, and reflected on the stories they had told me.

### ***Flexibility***

The choice of flexibility as a guiding principle was informed by understanding qualitative research to be a "dynamic and ongoing social process that constantly throws up new relations and issues that require constant attention" (Dowling, 2010, p. 30). A flexible approach allowed me to adapt research methods during fieldwork so as to prioritise the aim of the research at all times, rather than comply with rigidly specified methods (Allen, 2010). Committing to flexibility does not, however, imply that the research was open to changes made on a whim. While the research was flexible and contextual, it was also conducted in a strategic, consistent, and coherent manner, so as to ensure its rigour (Allen, 2010; Holloway & Todres, 2003; Mason, 2002).

The principle of flexibility especially informed the interviews, which were conducted in an open-minded and responsive manner. Responding flexibly to the different circumstances of each research encounter allowed me to focus on achieving rapport and a sense of common ground, in order to generate candid and valid data, rather than being concerned with rigidly implementing highly specified methods. Some of the home visits and interviews involved sharing meals while others involved sharing a cup of tea, some were lengthy encounters while others were relatively brief, and some were conducted in the presence of other family members. The interview guides were not highly specified and older adults were encouraged to choose the locations for sit-down interviews and the routes for walking interviews. During two interviews, I brought the research encounter to an early end when older adults showed marked signs of tiring. On another occasion, I omitted planned questions during an interview when family members who were discussed in the first interview were unexpectedly present at the second interview.

## 3.7 Data analysis

### 3.7.1 Theoretical considerations

Interpretative phenomenological research aims to elicit meanings from experiences, and as such its intent is interpretative rather than descriptive (Willig, 2007). Phenomenological methods of analysis are directed towards illuminating the meanings of lived experiences of phenomena in human beings' lifeworlds (Stoltz, Willman, & Udén, 2006, p. 596).

Phenomenological analysis is a thoughtful and reflective process which begins with immersing oneself in the data and developing a close and detailed knowledge of it (Griffin & May, 2012). However, the exact means by which this illumination could be achieved is not always highly specified and tends to vary somewhat between the branches of phenomenology.

The analytical methods specified in Interpretative Phenomenological Analysis (IPA) informed, but did not constrain, the analytical approach taken in the research. IPA is a particular method for conducting phenomenological research into human lived experience. Developed over the past two decades, IPA emerged from psychological science but it is now applied in other health and social science disciplines, with a particular focus on experiences of illness (Smith, et al., 2009). IPA's methods do not significantly differ from those applied in qualitative research more generally, such as iterative content analysis, thematic content analysis, and applied thematic analysis (Cope, 2004; Green & Thorogood, 2009; Guest, MacQueen, & Namey, 2012).

The methods used in IPA are explicitly informed by phenomenological conceptions of the 'hermeneutic circle'. In *Being and Time*, Heidegger's approach to phenomenology is hermeneutic or recursively interpretative – and indeed, human understanding is itself hermeneutic because understandings of the everyday world are derived from interpretations of it (Dahlberg, et al., 2008; Heidegger, 1971c). Originally, hermeneutics was concerned with the theory of interpreting sacred texts, but Heidegger saw hermeneutical theory as applicable to interpretation of all kinds of written documents and human experiences (Heidegger, 1971c; Willis, 2007).

The hermeneutic circle is concerned with the recursive relationship between a part and a whole, such as a phrase within its wider text, or a single experiential episode within an entire life (Smith, et al., 2009). Heidegger evoked the hermeneutic circle when he noted the recursive nature of enquiry: “and ways of thinking hold within them that mysterious quality that we can walk them forward and backward, and that indeed only the way back will lead us forward” (1971c, p. 12). Therefore, phenomenological methods of data analysis need to be consistent with hermeneutic understandings that partial meanings within texts or experiential narratives can only be fully understood in terms of their role in shaping the meaning of the text in its entirety. To be coherent within this approach, the data analysis needs to be mindful of a ‘back and forth’ movement between particular meanings and the overall sense of a transcript or an experience (Holloway & Todres, 2003). This hermeneutic approach is applied in phenomenological ethnographic techniques of analysis, which employ a cyclical and repeated process of seeking a panoramic view of the data followed by focusing closely on particular details, and then back to a panoramic view, and so on (Fetterman, 1989).

My analytical approach was also informed by social gerontologist Graham Rowles’ (1978) ethical approach to analysing qualitative data, in which he underlined the value of avoiding any distortion or misrepresentation of older adults’ experiences for the purposes of theorising. He noted that there is an inevitable tension between the idiographic and nomothetic aims of qualitative research; this requires a careful balancing act when engaging with the data, in order to stay loyal to “the subtlety and integrity” of older adults’ personal experiences while also developing a broader theoretical framework from the research (Rowles, 1978, p. 39).

### **3.7.2 Analytical techniques**

#### ***Transcription***

Rather than hiring someone, I transcribed all the recorded interviews myself. It is vital for the validity of qualitative research that transcripts of recorded interviews are complete, accurate, and enriched with notes about participants’ laughter, bodily gestures, and facial expressions (Poland, 1995; Poland, 2002). The decision to do all the transcribing myself was also informed by other doctoral research (Gardner, 2008) which employed walking

interviews and home visits with older adults. In that research, the interviews were transcribed by someone who was not present at the interviews, and the researcher noted that the transcripts were accurate but emotionally bland and failed to capture the mood of the research encounters (Gardner, 2008).

I transcribed verbatim each of the recorded interviews into Microsoft Word, incorporating all the hesitations in speech, word repetitions, laughter, and interruptions on the recordings. I inserted notes about remembered facial expressions or gestures into the transcripts at relevant points, which provided additional data about the tone or meaning of oral data. When friends, relatives, or spouses of the older adults spoke during interviews, I did not transcribe their recorded speech but I did insert a note at the relevant point in the transcript which summarised its content if it was relevant to proximate dialogue in the interview.

During the transcription process, I repeatedly listened to the interview recordings, sometimes many times over, in order to transcribe the oral data and then check each typed word for accuracy. This process of transcribing 64 hours of interviews took more than 200 hours to complete – but it was a very valuable process because it allowed me to develop a detailed knowledge of the interview data which aided my recall of the mood and setting of each interview. The transcription process resulted in 38 transcripts, amounting to more than 500,000 words or 1,200 pages of textual data. In the early stages of the fieldwork, my research supervisors reviewed two of these transcripts to check my approach to transcription and to review, discuss, and advise on my interview technique.

### ***Analysis***

Commencing the analysis of the fieldwork data, I started by reading and re-reading the transcripts and fieldwork notes. I initiated this iterative process during the fieldwork phase of the research, during which I reviewed the transcripts of the first round of interviews while preparing for second and sometimes third interviews. I continued to read and re-read the transcripts throughout the fieldwork and the writing phase of the research.

During the analytical process, I identified themes and subthemes in the data and considered how these categories related to one another. The majority of the themes were developed

by paying detailed attention to the data generated by the interviews and observations. These themes were integrated with a small number of themes that I identified while reviewing the research literature. Later, I grouped and re-arranged all these themes according to four structures of the phenomenological lifeworld: its subjective, intersubjective, place, and temporal dimensions. I used Microsoft Word and NVivo software to document themes and sub-themes, illustrate relationships between the categories, and thematically arrange segments of interview transcripts and field notes. During the analysis phase, my research supervisors reviewed the draft list of emerging themes and subthemes to make sure they were coherent and valid.

Separately, I analysed as discrete cases each older adult's transcripts, field notes, and any serendipitous data, in order to develop a biographical sketch of each older adult. These case studies provided valuable context and meaning to the thematic interpretations of the data performed across the cases. Refer to Appendix 4 for Biographical Sketches of the Older Adults.

### ***Presentation of the findings***

The research findings are presented in the following four chapters, each addressing one of the four structures of the human lifeworld as outlined by van Manen (1990). The real names of the older adults and their friends, neighbours, and relatives have been replaced with pseudonyms. Each older adult is referred to by their pseudonymous surname because this conveys respect and is consistent with Australian social norms of addressing older people by their surnames unless invited to do otherwise.

To maintain a commitment to rigour, data are presented within the context of the relevant interview or observation, and in the form of continuous and minimally edited quotations rather than isolated words, wherever possible (Kelly, 2010). Box 1 below outlines the conventions followed for editing quotations from the interview transcripts. In general, older adults' spoken words were minimally edited so as to retain each participant's unique speech patterns and demeanour. Although all repetitions of words and conversational diversions were transcribed verbatim, they are edited out of the quotations in this thesis for brevity and clarity.

### **Box 1: Conventions used in quotations from interview transcripts**

‘ . . . ’ indicates text omitted for reasons of brevity or clarity where its omission does not materially alter the meaning of the quote.

‘ [   ] ’ indicates words inserted either to explain a word, describe a gesture, specify someone’s relationship to an older adult, or describe their tone of voice.

*Italics* are used where words were emphasised by an older adult.

‘ - ’ indicates a sentence which was interrupted by someone else speaking.

### **3.8 Conclusion**

This chapter details the methodological framework of the research. Each of its elements was thoughtfully designed to be internally robust and complementary to the other elements, both ontologically and epistemologically. Throughout, the methodological framework is infused with phenomenological perspectives and heavily informed by phenomenological ethnographic research practice. The research was guided by four principles of validity, thoughtfulness, empathy, and flexibility. The aim of designing and conducting this research was always to generate data which could “usefully contribute to some kind of coherent and convincing argument” about the nature of food security and insecurity for rural older adults (Mason, 2002, p. 36).

## CHAPTER 4: 'BEING', AGEING, AND EATING

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### 4.1 Introduction

This chapter engages with the first part of the first research question which asks – *What are the subjective dimensions of experiences of food, meals, and eating for older adults living in rural communities?* As such, the findings in this chapter explore one of the four phenomenological elements of the human lifeworld – the subjective nature of 'being'. In this chapter, the older adults are revealed to be keeping going with life and shoring up their food security through a myriad of means enacted during their day-to-day lives. These findings demonstrate that older adults' varied approaches to food, meals, and eating are profoundly intertwined with their strategies for living well in old age.

### 4.2 Curiosity and engagement

#### 4.2.1 Engaging with the world

Despite their relative lack of formal education, many of the older adults display considerable curiosity and ongoing engagement with the world. During the older adults' early years, many of them had limited opportunities to complete their formal education. While Mr Garner and Mr Mitchell have post-secondary qualifications, quite a few of the others left high school at a relatively young age. Mrs Brown, Mrs Hughes, and Mrs Johnson were 15 years old; Mrs Noonan was 14 years old; Mrs Court was 12 years old; and Mrs Parker left full-time schooling when she was 9 to care for her ill mother.

The home visits revealed that the older adults were curious about a wide range of topics. For example, two of them keep dictionaries close to hand in their homes – Mrs Knight uses hers to build her Scrabble vocabulary and Mr Frith looks up unfamiliar words he encounters on websites. Others engage with the world in other ways. Mrs Johnson is an avid watcher of BBC Knowledge and Aljazeera News and Mr Garner is teaching himself to speak Japanese. Several of the older adults, including Mr Frith, Mr Garner, Mrs Hughes, and Mrs Ingram are active and enthusiastic users of computers and the internet.

For some of the older adults, an ongoing interest in the world appears to motivate their lives. Mrs O'Brien attributes her desire to go on living despite significant pain and disability to her continued interest in the world and the achievements of her grandchildren. She is not ready to die, because "well, there is so many interesting things!".

#### **4.2.2 Curiosity about food and cooking**

The older adults' continued engagement with the world, manifest in their curiosity and interest in new activities, is also reflected in their engagement with food. Many of the older adults are interested in cooking and eating new and different cuisines and foods. Mr Mitchell collects recipes for cooking newly-available food products such as quinoa, and he keeps pamphlets on different varieties of fruit. Mrs Andrews reads the recipes in *The Examiner* regional newspaper most weeks and Miss Roberts sources new recipes from television cooking shows. Having grown up in Scotland, Mr Frith initially preferred a very plain diet and resisted his wife's attempts to broaden his eating horizons, but he has gradually become more open-minded:

I used to be so set in my ways, you know. I wouldn't try. ... Yeah, I remember one time I came home and the wife, she was always trying to break my habit of eating, to try and get me eating other things, you know, cuisine. She cooked this dish and I couldn't look at it and I opened the window and just did that [mimes scraping food off a plate]. Divorce proceedings! [Laughs]

Over time Mr Frith has developed more varied tastes by buying, cooking, and eating unfamiliar foods:

And sometimes I experiment with different types, what is it you call it? Is it shrimps? ... Prawns. I was over in East Devonport [suburb of regional city] and I bought some fish and they had the prawns and they were cooked. And I said, 'What do I do with them?' The girl in the fish shop, she got them out and showed me. ...Tried a New Zealand fish last week – Hapuka.

In the case of Mr Garner, his desire to experience new tastes has informed his overall approach to culinary life. A trip to Majorca was particularly influential in this regard:

And ... we stayed in this hotel and on the table appeared ... a nice circular cut of what I thought was veal. Which I duly ate with great relish. I really enjoyed it. And then I found out it was octopus. It was a cutlet of octopus! ... If they had brought it out and said 'This is octopus', I don't think I would have eaten it. And that taught me that, no matter what it is, always try it and then you can say, 'I don't like it'. And I've tried to pass this message on to my kids, and my friends, and so on.

After Mr Mitchell and Mr Frith experienced heart attacks, they both taught themselves about healthy cooking and modified their eating habits. Mr Frith experiments with recipes from a book called *Quick Meals, Light Meals* which his grandson, who is a chef, gave him. Mr Frith finds it a useful source of information about new dishes and flavours:

I don't stick to the recipes but it gives you good ideas and that's how I got onto the spices and marinading and that. And I'll say, 'What will I have for tea?' and I will get my book out.

After his heart attack, Mr Mitchell attended a rehabilitation course at a regional hospital and systematically set about learning new skills and habits in relation to food:

I sat down and I said 'What are all of the things they told me will reduce the risk of another heart attack?' And you sit down and flick through all the notes and wrote things down, you see. And that is what I decided I would do.

In contrast to many of the others, Mr Donald has a strong disinclination to eat any unfamiliar food, thus revealing his passionate engagement with familiar or known food. Mr Donald has always been reluctant to expand his eating horizons:

See, the high school I went to was – what? – it would a good 20 minutes or more on the bus to get there and then I would have a bit of a walk. And I used to come home at lunchtime. Get a bus. Come into the house and go have me lunch, boom-boom, back to school. I wouldn't have the school meal. ... I didn't want to try them.

## **4.3 Learning and developing new skills**

### **4.3.1 Learning through practice**

Many of the older adults are quite confident about their capacity to learn throughout their lives, including into old age. At 19, Mrs Noonan taught herself to drive after moving with her new husband to an isolated rural area. Mr Garner taught himself to build a house by watching professional builders and reading books on building techniques. He feels that a certain degree of confidence and an acceptance of imperfection is required for learning:

Try it – okay, sometimes you make a cod's head of it but... I mean, nothing's perfect [gesticulating around the house], but... You have got to think, positively, you know – 'I can do this'.

### **4.3.2 Learning in the kitchen**

The confidence the older adults have in their capacity to learn new skills and affect change is also reflected in their engagement with food. Some of the men are comfortable with learning while cooking in the kitchen. After one of his trips to Japan, Mr Garner conducted a series of kitchen experiments to perfect a recipe for Japanese ginger tea. He has also taught himself to make pastry through trial and error. When complimented on this exacting culinary skill, Mr Garner replied: "It's easy enough. All you've got to do is read a book. ... And believe in yourself".

Mr Frith learnt to cook in his 70s after his wife died. For him, the process has been highly active and achieved through practice. When asked how he learned to cook, Mr Frith replied, "Well, you just cook". Mr Edwards taught himself to cook while working as a commercial fisherman, and although he does not currently cook at home, he is confident that he could cook for himself if his wife was no longer able to perform the role:

[Chuckles] Cooking is no trouble. Simple cooking. Nothing fancy. ... Oh, I don't think there is anything strenuous or complicated about *simple* cooking – you boil the potatoes until they are cooked! Yeah. And, you know, you cook your carrots until they are cooked.

## **4.4 Vibrant and varied opinions**

### **4.4.1 Opinions on the world**

Virtually all the older adults expressed vibrant opinions on many different topics that were not explicitly elicited as part of the interview. These views extended far beyond food to include euthanasia [Mrs Ingram, Mr Garner], forestry [Mrs Ingram, Mr Mitchell], consumerism and waste [Mrs Brown], local development [Mrs Ingram], bringing up children [Mrs Parker, Mrs O'Brien], and marriage [Mr Frith, Mrs Noonan]. In expressing these opinions, an overall sense of energy and spiritedness was clearly discernible in their speech patterns. The older adults spoke quickly and sometimes at length, and their speech was littered with exclamations, laughter, and facial expressions of irritation or delight.

### **4.4.2 Opinions on food**

Most of the older adults also expressed strong opinions about food, including strongly held likes and dislikes of particular foods. Miss Roberts has a particular love of seafood. During her interviews, she detailed several memories of eating seafood, including cooking and eating crayfish on a South Australian beach, sharing scallops with colleagues in a Hobart pub, and eating crayfish and oysters with friends each Christmas. Miss Roberts savours these memories, saying “I can still taste all that” when recalling the meal of crayfish on the beach. A meal she ate in Darwin provoked considerable sensuous enjoyment:

And we used to go to a little funny little Asian restaurant with laminated tables and he used to do a chilli crab that was *to die for*. And it was just served on a big thing and we'd tear it apart with our hands. And he would give us like a handtowel rolled up in a hot bowl thingie and we would just wipe our hands and get stuck into the next one. That was really good.

Mr Garner goes to considerable trouble to obtain a particular brand of Japanese ginger biscuits which he and his wife particularly enjoy. When he goes to Japan on holiday, he takes an empty suitcase with him which he fills with sweet ginger biscuits that he purchases from a food shop in Tokyo. Each time, Mr Garner brings back about 300 biscuits, freezes them and then eats them over 18 months, carefully doling out a ration for himself and his wife every three days.

Some of the older adults enjoy making individual choices about food as part of their experience of ageing, as they are no longer subject to parental dictates and, in some cases, spousal preferences. As a child, Mrs Court ate lot of meat because her uncle, who was a butcher, regularly gave off-cuts of meat to her family. Now, having grown old, Mrs Court feels she has earned the right to refuse red meat:

...for years and years, I used to eat red meat because it was a thing you had to do when you was a child. The food was put there and if you didn't eat it, you didn't get anything else. You had to eat what was put there. And... red meat – I never ever really liked. And so, its came to the stage now when I've beaten everybody else on this earth and now I can have a say – 'I don't eat ruddy red meat!' [Laughs]

Many of the older adults hold strong opinions about food they eat in restaurants and cafes. Mr Edwards has a particularly vehement dislike of the ways modern chefs treat food:

I am pretty fussy with meals – because I describe condiments as contaminants! I have a lot of trouble with contaminants! [Smiling]

And my opinion is that chefs just bugger about with food, give it stupid foreign names and add all sorts of contaminants.

Not all the older adults hold views as strongly as Mr Edwards does, but several others are willing to stand by their views about the food prepared in restaurants, even if that risks the opprobrium of chefs. Miss Roberts has a passionate dislike of reconstituted chip potatoes and she makes her views known on the matter:

I get so *angry* when you go to [a restaurant at a nearby resort] and they serve up those yucky-mucky chip potatoes. I send them back to the chef out there and say [in a firm voice] ‘This is Miss Roberts and I am not eating them!’ And [the chef] sticks her head out the door and says, ‘Should have known!’ Oh no, no. That to me is an insult.

Similarly, Mr Garner has strong views about how his meals should be cooked in a restaurant in his nearest town:

Sent my steak back three times on one night because it wasn’t cooked properly. They used to shiver when I walked in there! I like my steak blue. ... So, I am a real bastard when it comes to those sort of things. I will tell a chef exactly what I think of them if I don’t like what they are doing.

## **4.5 Experiences of delivered meals**

### **4.5.1 Eating delivered meals**

Most of the older adults are markedly unenthusiastic about the delivered meals services that are available to older adults, and some are vehemently opposed to relying on them for themselves. In Tasmania, these services are usually administered by charitable organisations but are funded by government and entail delivering pre-cooked meals to older adults’ homes. The reasons for older adults’ reluctance to eat these meals often vary as they are informed by various personal experiences and preferences, including their opinions of the taste and appearance of delivered meals, what time of day they prefer to eat their meals, or the importance they place on achieving variety in their diet.

When asked her thoughts on delivered meals, Mrs Quinn looked uncomfortable and replied:

[Pause] Oh, all right I s’pose, yes.

Mrs Ingram has never eaten delivered meals but has seen her friends’ delivered meals. She is similarly restrained in her praise:

It is only the convenience really. And the food is acceptable and nourishing. I haven't seen anybody spit it out yet. But I am not there all the time – they might do it after I have left! ... Well, it looks edible, probably is what I would say.

The taste, temperature, and appearance of delivered meals are unappealing to many of the older adults. Mrs Andrews ate delivered meals while recovering from hip replacement surgery but she was not impressed with the temperature of the meals:

It wasn't, you know, it wasn't particularly nice. On Fridays they used to bring fish round and that was cold. I s'pose it was adequate but I wouldn't say I enjoyed it.

Similarly, Mrs Court thinks delivered meals would be more enjoyable if they were served at a hotter temperature:

Especially when there's no steam come up. ... It's a little bit more inviting if the steam comes up but not very often the steam comes up – I haven't actually seen it. And it's sort of half coldish.

Mrs O'Brien and her husband receive delivered meals because Mrs O'Brien has severe osteoporosis and her husband has recently had a stroke. However, they do get a little bored of the flavour of the meals:

Now we eat Meals on Wheels, which we grizzle about constantly but we shouldn't. There is nothing wrong with the meals, but as [my husband] says, after 12 months they all have a similar flavour.

Mrs Brown was less than enamoured with the taste of the delivered meals which she received while recovering from heart surgery:

Pretty bland. [Laughs] ... And of course it all comes around in the one little tray. And not a lot of taste, really. You get a lot more taste with it like this [indicates her own cooking], because all the taste is still there.

The presentation of the delivered meals is quite unappealing to Mrs Court:

And another thing, they would bring it out in those little foil containers, you know, with the little divisions in them – they look *absolutely horrible* in them! I don't know why they put them in them. I've often been going to ask the woman why they put them in those things. It turns you off, when they take the lid off, and you look in there, oh!

Although Mrs Parker has not eaten delivered meals, she did see those eaten by her husband and she was not impressed by the variety offered:

I hope I never have to have one. ... Well, they used to be awful. ... Oh, just mince, mince, mince [meat] all the time.

#### **4.5.2 Delivered meals and eating routines**

For some of the older adults, the primary disadvantage of delivered meals services lies in the rigidity of its routines. Mrs Court lives in an area where delivered meals are cooked by a local hotel according to a rotating weekly schedule. Mr and Mrs Court trialled delivered meals for themselves but Mrs Court found that having a meal routine imposed on them was deeply unappealing:

Well, it's like this. I have never *ever* been one for repetitive meals, you know. ... You couldn't serve Mr Court the same thing every day! ... He likes variety, you know. Because when you get older, if you go into a nursing home, or especially if you get Meals on Wheels and that, they seem to have the same thing on a certain day every week. I don't *like* that.

Mrs Brown received delivered meals after her second heart operation but she did not enjoy the repetitive nature of the meals or the uncertain delivery times:

I had it for six weeks and when the six weeks was up, I just got in touch with them and told them I wouldn't be needing it anymore. ... Different things happened and I thought, well, it wasn't worth it. I got very disinterested in it. And you were getting, on the same day each time, like every Tuesday you would have such-and-such and I

thought, 'Oh, it was only just a meal', you know, there was nothing... I was dissatisfied with it. I know that a lot people love it. But to me, I didn't.

#### 4.5.3 Delivered meals and approaches to ageing

Mr Garner has never eaten delivered meals but his mother received them in her later years:

But she wasn't overly fussed on them. Very bland, I think, probably. Typical sort of mass produced. A bit like my school dinners in the 1940s!

Mr Garner has ruled out ever receiving delivered meals himself, deciding that:

If I get to that stage, I will sort of, I think I *will* commit suicide. Hopefully by then they will have introduced legal euthanasia. When it gets to that stage, *why not?*

Only one older adult was particularly enthusiastic about receiving and eating delivered meals, saying "...it is nothing fancy but it is always very nice". Mrs Noonan took up eating delivered meals after she lost her appetite when her husband died after 59 years of marriage. While grieving, she would sit forlornly in front of her meals or go to the pub for salad and chips. The delivered meals service meets Mrs Noonan's need to continue eating properly in widowhood, and more importantly, the meals are highly congruent with her strongly held preference for plain food:

There is *nothing* wrong with the meal. I have *never* in the time I have been having it– it would be about two years, it might be a bit more – had a meal I have tossed out. Never. So, no, I have no complaints whatsoever. ... Well, I am just a plain person that likes plain food and it's brought to me so I don't know what it is until I take the lid off – and I think, oh yum! ... It is just ordinary food – there is nothing *fancy* about any of it. ... It is all *very nice* and I enjoy it! No complaints – none whatsoever.

Mrs Noonan has developed her own personal approach to widowhood and old age such that she gives herself permission to be what she terms "lazy" in several spheres of her life. She takes great pleasure in sitting in her recliner chair and reading books for much of the day, which is something she never had time to do while bringing up four children and caring

for her husband. Mrs Noonan has someone come in once a fortnight to clean her unit, which to her proves that:

I *really* got lazy. I thought, 'Oh, why not?' I have got to spend my money somehow. So, someone comes in and vacuums and washes the floor – and that is that! Lazy-itis was never any good unless it was well carried out! [Chuckles]

Mrs Noonan has decided she will not travel anymore to visit one of her sons who lives interstate, attributing her decision to "lazy-itis again!". Although she is somewhat abashed about pursuing her own leisure and comfort, and she sometimes chastises herself about it, Mrs Noonan cheerfully concludes that at her age she has earned the right not to work too hard:

And I can sit here all day and I think, 'Oh, you are lazy, Mrs Noonan', but then I think I am old enough, I can well afford to be lazy!

Although Miss Roberts is quite restricted in her mobility, she does not receive delivered meals and she is reluctant to receive them in the future. However, she can imagine arranging a different style of assistance to meet her food needs. This service would be delivered on her terms and would reflect her humorous approach to life:

Maybe I could bribe some young person to drop me off a chicken leg every so often. Or whatever. Or maybe I could find some good looking young man, who wants to practice on grandma! ... Now *there's* a plan. Now that is a *good* plan! Now that is a good plan! ... He'd have to serve all meals without dressing! [Laughs] Oh, dear!

## **4.6 Setting personal standards**

### **4.6.1 Standards for living**

One way in which the older adults manage their lives is to regularly set and strive towards achieving standards for themselves. The content of these standards varies between older adults because they are deeply informed by particular life experiences and values. An avid poetry writer and former medical secretary, Mrs Ingram has written a poem about her conscience, which propels her to meet her personal standards:

All people have aortas – without them they'd be dead –  
To take the blood from heart and lungs and also to the head:  
But I have a U-ORTA to help me with my life  
“You ought to this, you ought to that”, she's almost like a wife.

The standards the older adults have set themselves vary across several aspects of their lives, including mental tasks, physical achievement, and housekeeping. They strive towards achieving these standards despite the sometimes significant physical and cognitive limitations placed on them by ageing and encroaching medical conditions. With the exception of one participant, all of the older adults, including the widowed males, live in notably tidy and clean homes, suggesting that most weeks they engage in several hours of disciplined tidying and light cleaning.

Despite sudden and severe vision loss caused by macular degeneration, Mrs Parker continues to keep a beautifully clean home as a means of maintaining some continuity with her earlier sighted self. Talking about her low vision, she says:

But it is not so bad. You get used to it. And I go over my cupboards every morning, wiping them and everything. ... I am trying to *keep* it that way because I have always been used to being clean.

Others set physical performance standards for themselves. Every day, Mrs Andrews and Mrs Parker both go for lengthy walks, and every year, Mr Edwards walks up to the summit of Mount Gower on Lord Howe Island, sections of which require ropes for climbing. Every second day, Mr Mitchell walks 1.3km up a steep hill on his farm. He has been doing this walk for around 20 years but he took up doing it more regularly after his heart attack. Mr Mitchell keeps a record of how long it takes him to get to the top of the hill. He used to be able to reach the top in 19 minutes but on one recent occasion it took him 29 minutes. However, this time was recorded on a very hot day in which the top temperature in Hobart [the closest city] was 41 degrees Celsius. When Mr Mitchell and I recorded another slow time while walking up the hill during his walking interview, he was noticeably disappointed and raised the matter twice during the remainder of the home visit.

Mrs Parker finds that walking back and forth inside her unit supports her ability to cope with painful emotions that have arisen since both her husband and adult daughter died:

But if it is raining in the winter, I still do my walking. I am going to wear this carpet out some time...

Setting standards appears to be an explicit strategy employed by these older adults to assist them to maintain continuity in their sense of self despite age-related change in their bodies and lives. Indeed, a lack of care or lowering standards is seen by the older adults as commensurate with not fully engaging with life. About one of her elderly neighbours, Mrs Hughes said:

... I don't think he copes very well. I hear from his next-door neighbours that, you know, he just doesn't worry about anything – he is just surviving.

For the past two years, Mr Langridge, aged 83, has considered himself 'old'. He does not attribute this feeling to bodily ageing but rather to his encroaching failure to meet his own standards of tidiness. Pointing to some very small piles of papers and books in this living room, he said:

My hatred is in that... from there to there is my hatred! ... It is all up here, you know. [Points to his head.] This is when I say, you know, *I am getting old*, because of this. It is a *nuisance* because [my wife] will want something, I will have to get up and look because I can't say 'Look, it could be there or there'. Did I put it in that drawer or that drawer? I used to be pretty good once, I used to keep, you know, everything used to be in order...

#### **4.6.2 Standards for food, meals, and eating**

Many of the older adults set and strive towards achieving personal standards in relation to food, meals, and eating. Some of these standards were explicitly articulated by the older adults, while others are not reflected upon but are implicit in their day-to-day activities. For some, these standards relate to hospitality and presentation of meals. Both Mr Mitchell and Mrs Brown provided me with meals during their interviews and home visits. Before each

home visit, they had both set their dining tables with placemats and fabric serviettes. Clearly, both Mr Mitchell and Mrs Brown aspire to meet a particular standard for the presentation of meals that are to be shared with visitors.

Cooking meals regularly is another area which shows clear evidence of standard-setting. Mr Mitchell, who has been widowed twice and now lives alone much of the time, has set himself a rule of cooking a meal of meat and vegetables every night. Similarly, for many of the widowed female participants, cooking meals regularly is a standard or discipline they have set themselves rather than an actual pleasure. For Mrs Andrews, cooking is not an important part of her sense of self:

Ah, um, I think heaven would be a lovely place if you didn't have to cook! [Laughs]... But no, cooking as such, making stews and casseroles and all the rest of it, has never been a madly pursued career for me, I've just cooked because I had too. Because that was part of the job.

Similarly, for Mrs Ingram the discipline of daily cooking was learnt through many decades of married life. She "hated" and "loathed" cooking while married but saw it as necessary part of her role as a wife and mother. She still does not really enjoy doing it:

It is a chore. It is a chore. I didn't enjoy it at all – it was just the job. You do the job.

Mrs Ingram and Mrs Andrews cooked a great deal as wives and mothers, and despite now having grown-up children and being widowed in older age, they often cook meals for themselves. Mrs Andrews still cooks regularly because she keeps an eye on herself:

In fact it could nearly, if I am not careful, swing to the other side when I think, 'Oh bust it, I am not going to cook anything for tea tonight, I can't be bothered'. It's not a good one.

Mrs Hughes is also widowed. She says she tries to eat healthily, making vegetable soup and choosing wholemeal bread, but she finds that cooking is a discipline she has to impose on herself:

I find it a *chore* ... I like a nice Shepherd's Pie, which is my favourite and I make a good Shepherd's Pie. I get about four helpings out of it, so I freeze it. But sometimes I have got to force myself to... If I have got something out of the freezer and you know, I lose interest! I have to *force* myself to cook it – like this morning. I had some leftover mince and I made a curry out of it.

Older adults also set standards for themselves in relation to their bodies. Mr Garner is very enthusiastic about food but he tries to eat in moderation and he appears to be a healthy weight. When asked if moderation comes naturally to him, Mr Garner recalled a time when he gained around 18 kilograms:

I [pause]. Deathly pause at this stage! When I was in the Royal Australian Air Force, I put on quite a considerable amount. ... And sort of getting that weight off was a bit of a problem. ... I know my wife calls me a miserable sod when it comes to dealing out potatoes!

Similarly, Mrs Hughes is often tempted by the indulgent afternoon tea, which she describes as “this big lavish spread”, that is offered at one of the social occasions for older adults in her town. But she has put limits on herself in order to avoid gaining weight:

And so I do try to control it. ... I try to have three items now – not seven. [Looks embarrassed.] Cream cake. That is my biggest weakness. They know I like cream cake. And they make cream cakes. I don't make cream cakes.

## **4.7 Managing uncertainty**

### **4.7.1 Coping with life's contingencies**

Most of the older adults have experienced at least one significant and painful loss during their adult years. One of Mrs Brown's babies was stillborn and one of her grandchildren committed suicide, and one of Mrs Court's children died at only 8 months of age. Over half of the older adults are widowed, including two older adults who were widowed in their 50s. Mr Frith was widowed twice – his first wife was killed in a car accident and his second wife

died from breast cancer, leaving him with two young children. Both Mrs Parker and Mr Frith have had an adult child die.

Many of the older adults have developed quiet coping strategies for those times when their losses are particularly keenly felt. Mr Frith is widowed and one of his adult sons has also died. While he says “I have had my moments”, he tries to focus on keeping going and thinking positively:

Think of the good things. There is no use of thinking the glass is half empty – the glass is always half full. That is my endeavour – I don’t always achieve it.

Recently, Mr Frith’s brother also lost an adult son and Mr Frith has given him advice on various strategies for keeping going while grieving, including learning to use a computer, buying a mobile phone, and taking regular walks in his neighbourhood. Mr Frith sees living well in the face of loss as a delicate balance between reminiscing and living in the present. He advises his brother – “Keep your memories but you have got to live today”.

Another common strategy employed by some of the older adults entails keeping active and busy. Grieving the recent loss of her adult daughter, Mrs Parker spends a bit of time sitting down and laughing about memories of her daughter. When I referred to this as ‘reminiscing’ or ‘looking back’ during her interview, Mrs Parker reluctantly agreed but she emphasised – “But I go *forward*”. Mrs Ingram was widowed less than two years before her first home visit, and she appears to miss her husband a great deal. However, she is very engaged with voluntary and advocacy work in her township and she also regularly attends exercise and adult education classes. After I observed that she appears to be quite busy, Mrs Ingram replied to me: “*Exactly. Exactly.* You have got to keep busy. Get something to get up for in the morning, Alexandra”.

The older adults’ quiet application of coping strategies is also directed towards meeting their standards of preparing and eating well during times of grief and eating alone. Mrs Ingram always cooked meals for her husband, and although she is now widowed and eats most of her meals alone, she still cooks two portions of her evening meals. The first night, she eats one portion and then the next night she reheats the other portion, thereby

removing the necessity to cook from scratch each night while ensuring she eats a proper meal every night.

Both widowed, Mrs Ingram and Mrs Johnson have developed simple recipes for those times when they do not feel like cooking a full meal. They combine rice or pasta with a small tin of tuna and a few other simple ingredients to make a meal that is quick to prepare but nutritious and enjoyable to eat. Mr Mitchell is also widowed and eats alone most of the time. He has tried eating packaged convenience meals but he is not convinced of their merits, preferring to go to the effort of cooking a satisfying meal for himself:

Well, they might be a good substitute but they are nothing like the real thing! ... Nutritionally, I think they could possibly convince people that they were good, but I still don't think that there is anything better than good old meat and vegetables. ... I have tried a couple of these packaged meals – just to see what they were like – and you would have to be a sparrow to eat some of them. [Chuckles] They don't satisfy me, if I can put it that way.

#### **4.7.2 Coping with bodily contingencies**

The determination of these older adults is also evident in their courageous persistence in the face of significant uncertainties and threats to their bodily selves. Three quarters of the older adults have one or more major and medical conditions, including cardiovascular disease, type 2 diabetes, cancer, severe osteoporosis, and macular degeneration. As well, several of them have undergone significant medical interventions, including heart surgery, hip and knee replacements, bowel surgery, and prostate surgery.

Many of the older adults experience significant physical challenges and pain arising from these medical conditions, but their stoicism was notable during the interview, with many of them rebuffing my spontaneous expressions of sympathy or pity. On a monthly basis, Mrs Parker has a needle inserted in her eye as part of her treatment for macular degeneration. When asked if this was an unpleasant experience, Mrs Parker replied in a dismissive tone, "Oh, you get used to it. It is not that bad – no really, it is not". Expressions of sympathy were also rebuffed during an interview with Mrs Quinn:

Mrs Quinn: I am not much good at doing things because I have a very bad leg but, anyway, I just-

Interviewer: [Sympathetic tone] Is it painful?

Mrs Quinn: Oh, it is just one of those things, you know. You learn to live with it, really.

During her first interview, Mrs O'Brien said "I have gone downhill". She has chronic osteoporosis and she can only take a few steps at a time with the aid of a walking frame. Although Mrs O'Brien is very aware that her health is now severely diminished, she has absolutely no intention of giving up on life and resents those who suggest otherwise, including a hospital physiotherapist:

And [the physiotherapist] said 'You have got so many terrible things wrong with you', and he said, 'And you are too bloody minded to die'. And I thought, really, you know, is this T.L.C. [tender loving care] I am getting here? Not the right approach, I thought, but anyway. He said to me when I went in this time, 'I've watched you struggle for years and you won't give up'. And said, 'Well, I don't know how to! What do you want me to do – throw myself down and breathe my last? Or what?' It was ridiculous – stupid man!

After her hip replacement operation, Mrs Andrews was determined to recover on her own terms and confound others' low expectations of her post-operative functioning:

Easter came round, and I thought, I am going to go to church for Easter Sunday. So I went, and I deliberately left my crutches home because everyone had been telling me, you know, 'You won't walk for six months, could be 12 months before you drive a car' [and I thought] 'Oh come on!' So I went to church, deliberately left my crutches home, went up for Communion, deliberately knelt down when I knew I shouldn't... And [my friend] said, 'You were showing off!' ... I said, 'I wasn't exactly showing off, I was just telling them not to be so jolly silly and coddle people when there's nothing wrong with them!' [Laughs]

At her second home visit, it was apparent that Mrs Court's thyroid condition and heart disease had progressed and her health was poor, but she was continuing to participate in volunteer activities and social occasions:

I mean the main thing is, don't give in to it and just keep going, you know. You have got to *push* yourself every day.

Despite her very low vision, Mrs Parker has persisted in keeping the weeds down in the raised communal garden beds next to her housing unit, which requires her to cope in a potentially risky environment:

.... I was standing out there and then I thought to myself, 'Now, how the hell are you are going to get down, Mrs Parker?' And I thought, well I got up here – I have got to get down. And I thought well, if I put one foot down and the other foot slips, I am going to go onto the concrete. So, I thought 'Oh well, get towards the end, give it a little kick and you will know where you are'. So I got right to the edge – and jumped! I didn't know I could jump but I jumped. ... I managed. I managed. Yeah, I was right.

Mrs Brown experiences quite significant physical limitations arising from back pain but she tries to keep herself busy with tasks she can undertake while seated for much of her day:

So, I work my life as it will allow me to, if you know what I mean? Because it is the only way you can do it. ... As you know, I can't sit and just sit. I do a lot of sitting, but I am knitting. And when I am knitting, I try to keep moving my feet, exercising them. You can do, you know, all that sort of thing. And I think that is what we have got to do. It is a matter of working out, finding out what you can do and keeping doing it. You know what I mean?

Many of the older adults who face physical difficulties have developed quite explicit strategies to support their ability to go on cooking and eating well. For some, this entails persisting with the status quo even in the face of considerable difficulties. Mr Donald is receiving chemotherapy for bowel cancer and his appetite is diminished but he is disciplining himself to eat:

Well, myself, I enjoy the odd meal but I am more or less just eating to stay alive. I am eating because I have to eat. Some of the meals I really enjoy but others are just, as I say, to keep me going.

Mrs O'Brien's determination to live is also reflected in her approach to eating. In fact, eating is one of her explicit survival strategies. After experiencing serious haemorrhaging which resulted in a hospital admission between her first and second interviews, Mrs O'Brien set about eating well in order to build her strength back up because, "Well, I didn't want to die". She did not enjoy eating but she felt she had to do it in order to survive:

No, in the beginning I had to *push* every mouthful in but I could *see* that if I *didn't* I would never get any strength. So I just made up my mind that I would eat whether I wanted to or not. ... Well, I know I was 41 kilograms or something. You know, it was ridiculous. And there is little point in saying you don't want to eat, because it is *necessary*.

Mrs O'Brien's determined eating appears to have been quite successful. At her second interview, her husband noted that she was eating more than before her hospital admission and Mrs O'Brien happily reported "...I *am* feeling better and I am getting stronger".

Mrs Knight told a story that reveals that she was remarkably committed to continuing on with daily activities, including shopping for food, even in the midst of an acute and life threatening haemorrhage which culminated in an emergency hospital admission:

But anyway, I must have coughed and blood, bright blood came out. And I thought, 'Oh'. I mean, I have never had that before, you know. It gave me a bit of a shock. ... So, anyway, so when I felt all right, I just walked across the road, posted the letters, came back and felt alright, went into Woolworths [supermarket] and I had got three things and I had six things to get, I had three things to go, and I was right down near the meat thing and everything, and I coughed and then I had another one. ... And anyway, a lady that I know came along and said 'Can she help me?' And I said she could go and get my other three things. I told her what I wanted and she got them and brought them back.

For some of the older adults, dogged persistence with tasks in the face of considerable physical difficulties was inculcated in them earlier in their lives. Mrs Brown laughingly remembers how her family expected her to keep going with Christmas Day food preparation tasks, despite being in labour with her first child:

I went into labour the night before Christmas Day. In the morning, [my husband] asked me to milk the cows for him while he was butchering a pig for Christmas – he liked ham with his Christmas dinner. I had trouble with the milking but I got it done and then I stuffed a goose for lunch. Then my mother-in-law arrived and asked me to ice her biscuits and ice the Christmas cake, which I did. I left for the hospital at 3.30pm and the baby arrived by 5pm. I liked to say – “I had goose for lunch, a daughter for afternoon tea and turkey for tea!” [Paraphrased from an unrecorded telephone conversation.]

Many of the older adults have developed strategies of adaptation or modification which allow them to continue with cooking and eating well. Mrs Knight employs two strategies to cope with regular night-time vomiting caused by an oesophageal disorder: she does not eat after six o'clock at night and she sleeps in a special bed which keeps her head raised. Mrs Knight sees herself as a very active participant in her own health, simultaneously balancing her optimism with an acceptance of her health problems:

So I mean, I can manage. ... If it can't be cured, which mine can't be, well I mean you have got to *live* and you've got to make the best of life and everything like that.

Since losing most of her vision, Mrs Parker has modified her cooking. As she can no longer read her recipe books, she has memorised many of her favourite recipes and improvises new dishes. To avoid using sharp knives, Mrs Parker buys beef strips rather than steak from the butcher and asks a friend to cut her pumpkin up into smaller pieces. She has also changed the way she prepares and serves her meals, to ensure that she can find and eat all the food on her plate, despite not being able to see it clearly. Mrs Parker explains:

So, I put all my vegetables on the steamer on the top of the potatoes, and when I get it off I tip the water out of the potatoes, I mash those and then I tip my vegetables in

and mash. I know it sounds baby-ish but they stay hot. ... But when they are mixed together, I just put a little bit of milk in after I have done them. I do the potatoes, mash them, and then just empty the veg in, mash them, put a little bit of milk in, no butter, salt and pepper, and then, yes. Do it like that.

At the time of her second home visit, Mrs Langridge was recovering from foot surgery and Mr Langridge was helping with general household tasks but not doing any cooking. Mrs Langridge has developed several strategies to avoid standing up in the kitchen for long periods, while still meeting her standards of preparing a cooked meal for herself and Mr Langridge. She makes what she calls “quick meals”:

I just heated them [chicken pieces] up and instead of doing mashed potato and having all different saucepans, I did it all in the... big frypan. I just cut up the potatoes rather thin and a bit of a pumpkin and put them all in the one pan, with the chicken to re-heat. And just did some peas. So, you know, I went the *easy way*. And then I had a piece of sponge in the freezer and I got that out and cut a piece of that. And I had some apple that I had thawed out and put in the fridge so I just heated that up, and we had apple sponge and custard. So, I mean there was no cooking there – it was already done. It was just a matter of heating. ... But, you know, if there is a short-cut, I will find it somewhere!

In recent years, Mr and Mrs Donald have stopped eating all their meals at the dining table. At first, they seemed a little dismayed about this apparent failure to meet their long-held eating standards. However, as Mrs Donald continued to talk, she acknowledged that changing where they eat has proven to be a positive strategy because it helps her to keep using cutlery despite low vision and osteoarthritis:

Mrs Donald: Until this, up until this – we’ve always sat at the table.

Mr Donald: Right over there. [Gestures towards their dining table.]

Mrs Donald: Just the last few months when it’s been so cold, we just have my tray and that’s it, you know. Yeah, it’s [pause], it’s queer. Even all my life we’ve never ever eaten sitting in a chair. Never.

Mr Donald: No.

Mrs Donald: We've always sat at the table, you know. But we're just lazy, now.

[Chuckles.] It's more comfortable, and I can negotiate my plate better, here. ....

Because when I am at the table... I just sometimes, I have a problem, you know, and I might miss the plate... If there's anything that is to be cut up, I cut it up before I sit here, you know. And I use my fork and that's all. Because a knife and a fork, it all, you know, gets in a mess sometimes.

## **4.8 Conclusion**

This chapter explores how older adults' personal identity, senses of themselves, and life strategies are intertwined with their varied approaches to food, meals, and eating. The older adults' active engagement with the world around them is evident through their curiosity towards the world, their passionate views on food, and the standards they set and strive to achieve for life and eating. These strategies vary between individuals because they are shaped by each person's unique and idiosyncratic personalities, preferences, and life experiences. However, these older adults tackle their lives with a shared fundamental purpose, which is to persevere in their own 'being'.

## CHAPTER 5: RELATING, AGEING, AND EATING

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### 5.1 Introduction

This chapter engages with the second part of the first question, which asks – *What are the intersubjective dimensions of experiences of food, meals, and eating for older adults living in rural communities?* As such, this chapter is concerned with the second phenomenological dimension of the lifeworld – the intersubjective nature of ‘being’. These findings are grounded in the premise that human beings are necessarily intersubjective beings – that is, human existence is not possible without reference to others. Interactions with others is formative for human beings’ basic sense of meaning and security, as well as for experiences of food, meals, and eating. This chapter details empirical data from interviews and observations to argue that the social aspects of older adults’ lives and their approaches to food are intimately and inseparably intertwined. As well, it reveals that many different social relationships of varying degrees of intensity and duration shape older adults’ food and eating.

### 5.2 Intermingled food and relationships

#### 5.2.1 Segues between food and families

The interviews revealed how closely social relationships and food are intertwined in older adults’ minds and lives. Sometimes, while an older adult was seemingly talking about relationships, food would suddenly crop up. By the same token, while they were seemingly talking about food, family relationships would leap to the forefront of an interview.

While talking about how Mrs Brown had come to terms with some difficult times in her family during her childhood, she unexpectedly segued from letting go of past hurts to staying true to her childhood tastes in food:

And now, my cousins and I will talk about it and say, ‘Weren’t they terrible people? Didn’t they do dreadful things to us?’ ‘Yes they did!’ No, it was [pause], we were lucky. But I still don’t like parsnips, and I am not going to eat those little cabbages. I won’t do it!

Mrs Andrews' explanation of who cooks the family's dinner at Christmas and Easter swiftly transformed from a straight-forward story about relinquishing her cooking role to become a declaration of her approach to mothering adult children:

And then when my husband died, my eldest child, she said 'I'm doing Christmas this year mum, because you've done it all these years, I'm doing Christmas dinner'. ... I mean I've had gatherings of them here...on Easter Day or something like that. Well, it's not an essential as some mothers think, to always having their children 'doing as I say'. I don't do that because I think that ruins people's lives. I have known some mothers who expect their children to do as she says. Still! And I don't go along with that one. No, I don't do that at all.

Similarly, when Mrs Court, who is a great-great grandmother, was asked if she cooks for her family at Christmas-time, she replied with a long explanation of how she feels that with the addition of each new generation, her role in the family has diminished over time, such that she now feels "you're back here and you're left behind".

When Mrs Andrews was asked whether her mother taught her to cook as a child, she gave an unexpected answer which related to her perceived place within the family's affections, sandwiched as she sees it between her prettier older sister and her youngest sister. Talking about her mother, Mrs Andrews said:

She perhaps taught me by example. But I don't know that she ever sat down because she was too busy, you know... And I was her fifth daughter. She must have been sick of daughters by the time she got to me! I've always thought that, because I was a plain, fat little girl... the sister that was older than me had lovely blue eyes and wavy hair and I've never forgiven her for it! [Laughs]... And the one that was younger was four years younger than me, and mum had had time to have a bit of a rest, and Beatrice was the spoilt one of the family.

## 5.3 Being married or widowed

### 5.3.1 Being a wife or husband

For almost all the older adults, being part of a married couple – for up to 60 years, in some cases – has profoundly shaped their experiences of food, meals, and eating. Only one of the older adults has never been married [Miss Roberts]. Accommodating the different tastes of spouses has been, and sometimes still is, seen as a necessary aspect of their marriages. Accordingly, their marriages shape what they cook and grow in their gardens:

I did never ever did get into stir fries. My husband used to like meat and vegetables – if he had meat and vegetables he was happy. So, that was what he was brought up on, and so was I, so you just got on with it. [Mrs Noonan]

... we have grown pumpkin from time to time, but [my wife] is not so keen on pumpkin. So we don't grow that any more. Similarly with broad beans. I have to pander to her, you see! [Laughs] [Mr Garner]

Although Mrs Parker has been widowed for many years, she still has clear memories of her husband's food dislikes, which she tried to accommodate during their marriage. He would eat "anything but boiled meat!" because of his childhood eating experiences:

[His] grandma used to have boiled flap, curried flap, baked flap, all this type of thing! Everything was flap. I don't know how many different types of flap! But that's all he had. Yeah. And he didn't like silverside – only now and again. And he hated black pudding whereas I loved it. [Cheerful tones]

For some, their marriages broadened their eating horizons. Mrs Hughes was born in England but her husband lived in Argentina as a child and after they married he encouraged her to eat more adventurously:

I eat everything now. When I got married, my husband kind of guided me into things to eat and ... He used to like Italian foods – spaghetti. I never ate that when I was a kid. I don't think I ate that until I came out here [to Australia].

Some of the older adults see their role as the family's cook as inseparably interrelated with their role as a wife. Mrs Noonan was prepared to stare down social disapproval in order to cook meals for her husband to eat when working in the bush, away from home:

Although as I said, he had camped away – he would go on Monday mornings and come back Friday afternoon. And people used to say to me, 'But you don't come to church, Mrs Noonan'. I said [in determined voice] 'That is my cooking day and I am not going to church!' It didn't do anything for me, anyway. ... So, I would cook a hot meal... and then I would set to work and cook so he took fresh cake and biscuits and what have you. Yeah, that was my cooking day, and I didn't think church did anything for me.

Although Mr Garner and his wife eat lunch apart during the week because Mrs Garner works in a nearby town, they still manage to share their lunch ingredients each day. This ensures they eat a wide variety of fruit each day and also provides a sensation of shared eating:

Usually between five and six fruits. ... I pack my wife's lunch for her and so she gets half an apple, I get the other half, she gets half a pear, half a banana, half of this, half of that.

During this home visit and interview, there were three half pieces of fruit on Mr Garner's kitchen bench, which presumably would be eaten by Mr Garner at lunchtime later that day.

For some of the older adults, taking an uncritical attitude toward the meals cooked by their spouses provides a form of emotional support during difficult times. Just prior to her second home visit, one of Mrs Langridge's toes was surgically removed. During their second interview, Mr Langridge clearly refrained from criticising his wife's modified approach to preparing meals. When asked if he had noticed any difference in their meals since Mrs Langridge's operation, Mr Langridge looked terribly uncomfortable, paused, and was finally unwilling to pass critical judgement:

Mr Langridge: No, it's... we will just roll *along*.

Mrs Langridge: He is one of the easiest men you could have, really.

Mr Langridge: Oh, I am very flexible, you know. As long as someone else can do it, I will enjoy it.

Mrs Langridge: You will put anything in front of him, within reason of course, and he will eat it.

Even after Mrs Parker's husband was admitted to hospital before he died, she went to the hospital every day and ate with him, continuing their routine of shared meals:

He was in hospital for three months... But I went up *every day* at nine o'clock, came home at half past five after I had fed him.

One of the older adults told a story which explores the possibility that having a new spouse may pose a threat to good dietary habits and health in older age. Mr Mitchell had a heart attack in his 60s, which he partly attributes to changes in his eating habits during his second marriage to a considerably younger woman:

Well, it's one of those things – that you change your habits. Suddenly you are with someone quite different, together, doing things together. ... When I grew up, there wasn't all this coffee business and fast food and all this sort of thing, and during my first marriage if I went off for the day, I would make myself a sandwich at home and take the thermos of tea and everything and have it all with me. But with [my second wife] when we went off, we would stop for a coffee here, and I used to try to make sandwiches. 'No don't do that, we will get something on the way', you know. Grab a bit of fast food and all this sort of thing. ...And then you get into the habit of getting a pack of chips or something to see you home. And cappuccino. And I think that was the problem. So...!

### **5.3.2 Being widowed or eating alone**

The death of a spouse was a significant event in the lives of many of the older adults. Bereavement brought negative changes to their experiences of food, including a loss of appetite, reduced motivation to cook, or difficulty with eating meals at their previously shared dining tables. However, many older adults consciously and determinedly

implemented personal strategies which facilitated their successful transition to a new stage of life in which they plan, prepare, and eat most of their meals by themselves.

After her husband died, Mrs Parker continued to cook herself a hot meal at lunchtime but she stopped eating at their dining table during the early phase of her grieving. Now, she has made the transition back to eating her meals at the dining table that she once shared with her husband:

Oh yes, I was determined. But there was only one thing that I could not do; and that was for about a year I could not sit at the table. ... No, I could not sit at the table on my own. It took me about a year – around about a year. Mmm. ... Now, I wouldn't sit anywhere else but the table.

Over time, Mrs Johnson has adjusted emotionally to eating most of her meals by herself, which she now finds to be a peaceful experience:

I don't mind, actually. ... It is very relaxing to eat by yourself sometimes because you don't have to worry about what's going on or what to eat or strange combinations or whatever, but then on the other hand it is lovely to have friends here and eat and talk for a couple of hours. So, no, I have been widowed for 19 years. So I am used to living on my own.

Several of the widowed women employ particular strategies for cooking and eating most of their meals alone. Both Mrs Andrews and Mrs Parker cook and freeze extra portions of soup and casserole for themselves. When Mrs Ingram was asked how her eating changed after her husband went into residential care, she described the adjustment process she undertook. More than a year after his death, she continues to follow this revised routine:

In terms of food, I was *brilliant*. Actually, when he went into care, he and I were both doing apprenticeships. Me for the next life... Sorry, *him* for the next life and me for widowhood. We both got the same job on the same day. I am doing brilliantly.

So, as part of my apprenticeship, I kept on making the two meals and putting one on a microwave-safe plate and putting it in there and two days hence, have that. And

then Monday becomes Wednesday and Tuesday becomes Thursday and Wednesday becomes Friday, and Saturday and Sunday you can go out or have [my daughter] here or something.

For Mrs Ingram, widowhood has allowed her to focus solely on her own food tastes.

Following the death of her husband, she no longer eats fresh fish:

He used to enjoy it but I didn't. He used to smell trees and flowers and say, 'Oh, yes that smells like vegetation'. I used to smell fish and he said, 'Can't you tell the difference between this fish and this fish?'. 'No I can't – it just smells like fish'. So I don't eat fish anymore. ... So that's it. Yes, I don't feel compelled to eat fish anymore. ... Oh, it feels good. I don't linger on things that don't suit me. Get over it! Ignore it.

## **5.4 Being part of a family**

### **5.4.1 The importance of family**

In general, the interviews and home visits revealed that the older adults strongly identify with their relatives and they deeply value their families. Many of the older adults are members of large extended families. Mrs Parker and Mrs Court are great-great grandmothers, Mrs Hughes and Mrs Noonan are great grandmothers, and Mrs Andrews, Mr Garner, Mr Mitchell, Mr Edwards, and Mr and Mrs Langridge are grandparents. The only older adults who have no children or grandchildren are Mr and Mrs Donald and Miss Roberts.

All of the older adults, with the exception of Mr and Mrs Donald, Mr Mitchell, and Miss Roberts, have a prominent display of photographs of family members in their living rooms or dining areas. These are often positioned on small tables or buffets, as well as on nearby shelves, usually within sight of where they eat their meals. During the home visits, several older adults spent considerable time sharing these photographs, naming each person, detailing their relationship with each of them, and considering the physical likeness of various family members.

At the time of her first interview, Mrs Parker was grieving for her adult daughter who had died recently after a short illness. Mrs Parker reflected that:

*Family is most important.* And I tell my children, that they must not fight, or if they have a few bad words together they must not part.

Like many of the older adults, Mrs Noonan appears to take her family for granted at one level because she has never really imagined her life without them. When asked how she would manage without her adult children, Mrs Noonan replied:

Oh, I have no idea. I never think of that. *They are there.* [Chuckles] I have had them since I was 21, so...! Yeah, it has been wonderful, it really has.

#### **5.4.2 Food gift-giving in families**

For many of the older adults, family relationships are enacted through food, meals, and eating even though very few of their family members live in the same town and some live interstate or overseas. Preparing food to family members, even if only occasionally, is seen as a special form of gift-giving which provides a chance to convey enduring parental care for middle-aged offspring. Although Mrs Andrews only cooks for herself as a matter of discipline, she enjoys cooking for her married sons when they visit on Sundays. Decades after they moved out of home, she continues to cater to their individual preferences in food, seemingly with pleasure:

And I always have three vegetables, I always have baked vegetables and parsnips for one son and potatoes for my other son. I've got to remember which is which...

Similarly, Mrs Andrews also takes pleasure in being asked by her grandchildren to cook for them:

My grandchildren all believe that I am the only person in the world that can make a good baked dinner, so it doesn't matter whether... it's the height of summer, if they come home, I get a phone call, 'I'm home Nan, and we'll be there on Sunday, and um...' And I'll say, 'Yes, and you want a baked dinner'.

Despite their sometimes limited incomes, several of the older adults, including Mrs Hughes and Mrs Noonan, enjoy paying for meals in restaurants for their children and grandchildren, particularly on special family occasions. For others, a proper cooked meal is synonymous with family closeness. Here, Mrs Court links changes in intergenerational relationships to older adults' eating:

Yes, like the olden days, you stayed with your family and you had the family meal, the family roast. And you had the kids and your daughter and your husband around or something like that. And you – they made sure you got a nice nourishing meal. ... And it's a different thing – it's a *family* sort of a thing. But now of course, they don't do that, they don't do that anymore.

During their home visits, Mrs Johnson, Mr Frith, and Mr Mitchell spontaneously showed me their recipe books, which proved to be a source of rich evidence about how experiences of food and cooking are deeply imbued with older adults' intersubjective relationships. Some of these recipe books were published books which the older adults' had received as gifts, while others were personally compiled collections, consisting of recipes from friends, mothers, and other relatives, as well as newspapers and magazines. Often, particular recipes were associated with particular family members, either because that person had provided the recipe or because the dish was a particular favourite of theirs.

Adult children are also a valued source of food gifts and shared meals for the older adults. Every now and again, Mrs Andrews' son-in-law and Mrs Brown's son stocks up their freezers with meat they have had butchered. Every Friday, Mrs Noonan's daughter drops in before work to bring her a sandwich for lunch and she regularly invites Mrs Noonan to her home for a weekend meal. One of Mr Mitchell's sisters occasionally drives approximately 130km from Hobart to have lunch with Mr Mitchell, bringing lots of food for his fridge. Mrs Johnson enjoys regular meals with her brother, her sister-in-law, and her niece who live nearby. When one of Mrs Johnson's sons visits from interstate, he brings her some of her favourite brand of dark chocolate which is not available in Tasmania.

### 5.4.3 Potential sites of food-related tension

Although it might be assumed that living in intergenerational households would be highly supportive of older adults' eating, Mr and Mrs Langridge's experiences draw attention to some potential disadvantages of those arrangements. During their first home visit and interview, Mr and Mrs Langridge were living with their son, granddaughter, and daughter-in-law. One of the benefits was that their daughter-in-law did most of the supermarket shopping. However, the different work routines of members of the family placed somewhat of a strain on Mr and Mrs Langridge's eating routines. Until that time, their dinner-time routines had endured for decades, since their children were young. Mrs Langridge attributes her loss of appetite to the changes in their eating routines:

Mr Langridge: And of course the situation we are in here, my son and daughter-in-law are used to meal-times like that [gestures to indicate all over the place]. ... Eight o'clock of night, having a meal.

Mrs Langridge: We have always eaten between five and six. Especially when the children were very little, I used to like us all eating together, kids and never put the kids to bed before [Mr Langridge] got home or anything you like that, and so we'd have tea around five or half past five at the latest and then the boys would go to bed, you know. But as they got older of course it was different but we got into the habit and we still had early meals.

Mr Langridge: Six o'clock generally was nearly always our meal time.

Mrs Langridge: ...I sort of like tea around six o'clock, but if [my son] is on a day shift he doesn't get home until 6.30 so between half past six and seven we are eating, and sometimes by then I have gone past it. I think, oh I don't feel like it.

Mr Langridge: This is one of the things that has changed our eating.

In this intergenerational living arrangement, cooking and providing meals could sometimes be tricky for Mr and Mrs Langridge because so many different palates need to be considered and different dining and kitchen routines need to be negotiated:

Mrs Langridge: Sometimes I think I will have such and such but that's no good because [my granddaughter] won't eat that or [my daughter-in-law] is not keen on curry. We all like curry, well except my granddaughter and daughter-in-law, but [my son] and us we like curries. So if I do a curry I either have to do things separate and then just I think I can't be bothered. So I think food and what we eat might be a bit different [when we live by ourselves again in future]. Not all that much, you know – just a change of food, I s'pose – a change of menus. [Chuckles]

Mr Langridge: I think what it is though, is we will get back to doing: this, this, this.

Mrs Langridge: *Our* way.

Mr Langridge: And know that you know – bang, bang, bang. ... And everything like, you stop and you think, who is doing what? ... And one of the big things that *irk* me – I hate to see dishes stacked. I like when you have your meal, you finish, you wash up and wipe up and put it away. But [my daughter-in-law] will leave them to dry.

Mrs Langridge: Or [my daughter-in-law] will start washing up before you have finished serving tea. ... Two people in the kitchen – two *women* in the kitchen doesn't work, you know.

#### 5.4.4 Being mothered and mothering into old age

Although the older adults' mothers have died, often many decades ago, these mothers' influence clearly endures and is reflected in the older adults' current food values and strategies. Most of them expressed considerable admiration for their mother's hard work feeding their families during times of significant food constraints and economic hardship, including the later years of the Depression and World War II food rationing in Australia and the United Kingdom.

Everything. She cooked everything. She made her own sauces and pickles and relishes. ... She was a *wonderful* cook... [Mr Quinn]

And my mum – she used to make *everything* herself, too. She made all the sauces and jams and pickles. She was *always* busy. [Mrs Quinn]

Yeah, she was a good cook. She could make anything out of anything. [Mrs Andrews]

...the more I look back on what my mother was able to provide – it was amazing. Just amazing. [Mrs O'Brien]

Well, my mum was an expert cook. Expert sewer and everything. And she really would make some fantastic meals out of the most mundane sort of food, you know. And I learnt a hell of a lot from her, you know. To make do and make a nourishing meal... [Mrs Court]

For many of the older adults, their own past role of mothering young children is influential in their current values and actions. Mrs Andrews, Mrs Johnson, and Mrs Knight all expressed pride in the considerable work they performed while cooking for their children over many years, which was a task undertaken with varying degrees of enjoyment as part of their mothering role. Mrs Andrews was not an enthusiastic cook when her children were young but in her understated way she says that feeding her three children, “I did quite all right...”.

For many of these women, food and eating was an important site for exercising parental authority. Quite a few of the older adults commented unfavourably on contemporary approaches to feeding children in which they are allowed to choose what they eat. For Mrs Noonan, food and eating has changed “all out of sight” since she was a child. She laments that, now:

The kids say, ‘Oh, I don’t want that’. Well, if you did that at my home, you wouldn’t have got anything else. You were just brought up to eat what mum cooked and put on the table. And there was no ifs and buts and maybes because there was nothing else.

## **5.5 Being a friend and community member**

### **5.5.1 Eating with friends**

The home visits and interviews revealed that many of the older adults are actively engaged in relationships with spouses, friends, acquaintances, and neighbours. Although the frequencies and intensities of their social engagements vary between older adults, only Mr and Mrs Donald are significantly socially isolated, reporting that they have no regular social contact with anyone.

Many of the older adults, and especially those that are widowed, seek out or orchestrate and take pleasure from opportunities to eat and drink with friends and acquaintances. After Mrs Brown was widowed, she formed a social eating group for other widows which meets every second month at restaurants in rural Tasmania, and she has done this for 27 years. Mrs Brown is the unofficial convenor of the group, which currently has 24 members. She organises the venue, decides the menu and seating plans, plans the games to be played after dinner, and makes gifts and prizes for the guests including crochet flowers and certificates. Mrs Brown says the women really enjoy dressing up and being waited on by staff at the restaurant – “we are people for the day”.

Every Monday morning for the past 10 or 12 years, Mr Frith has driven 20km to the regional city of Devonport to attend an informal catch-up in a café with other United Kingdom migrants: “those that have coffee, we have that and we will have a drink and maybe buy a cookie and sit there and solve the problems of the world”. They also occasionally meet up for Sunday lunch at one of their homes. At their coffee mornings, they discuss the menu for these forthcoming lunches and try to agree on a flavour of soup, aiming to “try and please everybody”.

For others, their social eating engagements are less structured and regular, but are no less pleasurable for it:

I have a friend with a spa, around the street there. There, we sit in the spa and have our glass of gin and lime! ... With some biscuits or some nuts. ... Set the world to rights for an hour or so. [Mrs Johnson]

Unfortunately, Miss Roberts’ physical limitations are beginning to impinge on her social eating opportunities. Until recently, she took turns hosting dinners with a friend but her encroaching immobility has put an end to this arrangement:

In fact, my friend Tom and I would have this thing... where he’d come up one Sunday night and I would go to his place one Sunday. But it got to be three courses and I would spend all Monday washing up! And I thought, ‘No, what’s the...? God, get a life!’ So, I said to him, ‘No, it is too much effort’.

### 5.5.2 Food and information from others

While social relationships generate valued opportunities for commensality or shared eating for the older adults, they also provide several pragmatic food-related benefits. These include new information about food and ideas for meals, as well as food gifts. For Mrs Johnson and Mr Frith, contact with friends generates new eating experiences and approaches to food:

So you cannot go and visit people and say, 'Well, I am not going to eat that' – [because they might say] 'Well, there's the door'. [Mr Frith]

Someone has just given me a juicer – a friend – with the instructions that if I make carrot, apple, celery and ginger juice I will live forever, or something! I don't know! [Laughs] [Mrs Johnson]

Mr Frith also finds that his daughter-in-law, who lives in another house on his small block of land, is a useful source of advice on cooking techniques:

And the fact that they are so close is a big help. If in doubt you go and ask. I might go and ask, 'I am going to so and so, how would you do that?', in regards to cooking. And she'll describe it.

Friends are also important sources of food during difficult times. In the month prior to Mrs O'Brien's first interview and home visit, she had two hospital admissions and her husband had a stroke. While they recovered, their neighbours brought them meals including a much enjoyed dish of Austrian savoury pancakes. Miss Roberts describes the fruit and vegetables available in her town as "a bit sad" and she is physically constrained by back pain and not owning a car. Somewhat resourcefully, with cheerful good charm, Miss Roberts often utilises her network of friends – many of whom are younger and more mobile than her – in order to obtain good quality and low cost fruit and vegetables from other towns and regional centres:

And most of my young friends like Tom and Elise and all those – when they go up to [a regional city], they might ring me up and say, 'Blueberries are up here, girl – what

do you reckon?', and I will say, 'Oh, bring us a bucket!' And they bring me back that sort of thing, you know. I love blueberries.

Although Miss Roberts seems quite pleased with these arrangements, she sometimes finds her reliance on others for fruit and vegetables a little frustrating because she has lost control over her own decision-making:

If I want a mango that's \$4 or \$5, I think that is a good size mango for that price. I mean, Elise, she won't. At one stage we were getting mangoes off somewhere or other for \$2 and they were good value. They were massive, massive mangoes. And I said to Elise, 'The next time you go up to town, grab a couple of mangoes for me'. And she said, 'Oh they weren't that big and they were \$4 so I didn't buy them'. But I would have, if you know what I mean?

After having a transient ischaemic attack, Mrs Ingram chose not to arrange delivered meals and her friends gave her home-cooked meals instead. These were gifts that were socially acceptable and almost expected during a difficult time:

And of course, friends and neighbours brought all sorts of casseroles and that, which they do.

### **5.5.3 Neighbours and acquaintances**

Relationships with neighbours and acquaintances provide the older adults with a valuable point of comparison – a sort of a benchmark for their own performance in relation to food and eating. After observing that many people in their local towns were overweight, both Mrs Hughes and Mr Garner modified their eating and attempted to lose weight.

Many of the older adults spontaneously talked about bartering food with their neighbours and acquaintances, explaining they had previously engaged in bartering during World War II-era food rationing in Australia and the United Kingdom. It was a time of significant food shortages that were managed as best as possible through personal relationships:

But people were pretty good, you know. Chap down the street had fruit or that. Oft times, you know, people would walk up and say, 'Can you use this? Can you use that?' [Mr Langridge]

... a mate of my own brother who used to live with us and he went into the Army as a cook and when he came out on leave he often brought mum home a bit of butter or a bit of this or that so it did help to supplement, you know. [Mrs Langridge]

On the farm, it wasn't so much rationing as bartering. ... We had our own cows – made our own butter. But we drank an awful lot of tea. So the butter coupons were sent off there and somebody else who didn't like tea much would give us tea coupons in exchange. And sugar coupons, because Mum, she bottled a lot and made a lot of jam with fruit from the orchards so needed lots of sugar. [Mrs Johnson]

And when the war was on my husband used to bring in homemade butter and eggs and things like that and swap them with people for petrol. [Mrs Parker]

Several older adults, especially those with vegetable gardens, have continued bartering into old age, thereby reaping benefits from one another's food growing efforts. Mr Quinn exchanges home-grown vegetables with his neighbour over his back fence:

We have a board nailed over the top of the paling fence and he's got surplus there, it goes onto the bartering. ... He has supplied us with all our tomatoes for tomato sauce and chutney.

For Mr Garner, pragmatic benefits arise from bartering his fruit and vegetables. It helps him cope with occasional over-production, and he also enjoys drinking free coffees at a café in his local town, which he receives in exchange for fresh produce:

Same as I ended up with lots of tomatoes this year and I ended up taking those down to the coffee shop in Ulverstone next to [my wife's] shop and exchanging those for cups of coffee. ... Bit of sweet corn, bit of this, bit of that. ... I would just take the stuff in. [And I would say] 'You let me know when I have to start paying for my coffee next time'.

Mrs Johnson enthusiastically engages in bartering in order to overcome her limited access to desirable food in her small rural town:

The 'shackie' [person who owns a shack or holiday house] who comes up here, he is a very keen fisherman, so... I quite often give them some apples or some apricots in the hope I will get some fish back! But you don't say, 'I will give you some apricots if you give me a fish'. Mmm.

These bartering arrangements usually involve a direct exchange of foodstuffs, particularly with respect to fresh fruit and vegetables. Less commonly, these arrangements involve exchanging labour for food. Mr Edwards prunes the fruit trees of an elderly widowed neighbour in exchange for helping himself to fruit from her trees. Miss Roberts' neighbour has hit upon a way to avoid the labour of cooking while still enjoying a cooked meal, shared with another neighbour:

And she pulled a chook out of the fridge the other day and she looked at it and thought 'I can't be bothered cooking this', so she took it up to Alan who lives two doors up... and said 'If you put some vegetables with this I will come over for dinner tonight'! And I thought, what a good idea!

Similarly, Mrs Court invited two of her granddaughters over for Mother's Day one year, promising them apple and quince crumble for dessert but telling them [in a cheerful and cheeky voice] "You can come and cook Mother's Day dinner".

In another type of bartering arrangement, Mr Quinn made a deal with an acquaintance to obtain some cheap meat:

The annex to the [caravan], I sold. The chap I sold it to, he had beasts. And I said, 'I will let you have that canopy there, that side awning, for half a beast.'

As well, some of the older adults also receive food gifts in circumstances where there is no expectation of reciprocity. In Miss Robert's case, these gifts are left on her back veranda, thereby removing any obligation for reciprocity or expressions of gratitude:

Strangely enough, [a neighbour] leaves me little secret plastic bags out on the chair which is usually some sort of veg, occasionally. ... I came home the other night and there was half a pumpkin sitting on the chair. No idea who dropped it. No one has said to me, 'Did you get your pumpkin?' It is half eaten now.

#### **5.5.4 The social aspects of food shopping**

Some of the older adults appear to derive social enjoyment from food shopping experiences, as in these smaller rural communities, a visit to the supermarket often entails chatting with long-standing friends or acquaintances:

It is so nice and friendly here – you know. ... if you meet someone in the street, you have got to add in 10 minutes to allow for the time for standing and chatting. [Mrs Hughes]

I thoroughly enjoy going up to the top IGA [supermarket]. ... And they know me up there. ... The staff – they are all old friends, actually. [Mrs Ingram]

Two of the older adults particularly see the staff in their local shops as sources of support for managing their food and eating. Living in smaller rural communities perhaps makes this kind of personal attention easier to obtain, as these two older adults are well-known by their local shopkeepers. Mrs Parker has very low vision and lives alone, which poses a potential risk to her ability to buy food. However, she resourcefully asks staff to tell her what food is on special and to help her select fruit and vegetables. Mrs Parker explains:

...the greengrocer up there, he comes up to me if he sees me. And he will say, 'How are we today?', 'Same as yesterday – on top of the world', you know and he says, 'What do we want today, mate?' and he gets it. Because I got some tomatoes once and he said, 'Never, ever choose something for yourself because you can't see if they are going off a little bit.'

Similarly, Miss Roberts relies on her personal relationship with the owner of her local supermarket to facilitate her access to food that would otherwise be constrained by her low mobility and sometimes constrained finances. Miss Roberts explains:

If I ring them up before lunch. Don [the supermarket owner] comes up and I will just say, 'I have got \$50 or \$100' or I'll say 'I haven't got any money today but I need it' and he will say, 'Oh, don't leave town' [jovial tone].

## **5.6 Conclusion**

This chapter notes that intersubjectivity and eating are so closely and subtly woven together that during interviews about food and eating, relationships frequently came up in older adults' talk, and when they talked about relationships, food often entered older adults' stories. This chapter reveals that older adults' food, meals, and eating are profoundly shaped by their varied social relationships, including close ties of marriage and children, as well as looser but no less important ties of friendship, neighbourliness, and community. However, the actual effect of those relationships on food and eating is often idiosyncratic or unique to each individual, arising from an entirely personal blend of intersubjective desires, circumstances, and experiences. Many of these relationships have shaped older adults' food and eating for the better, providing a loving motivation to cook for others, valued opportunities for commensality, and gifts of food. However, at other times, the same types of relationships have subtly affected older adults' food and eating in negative ways, such as introducing them to less healthy eating regimes or imposing uncomfortable meal times.

## CHAPTER 6: AGEING AND EATING IN PLACE

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### 6.1 Introduction

This chapter engages with the third part question of the first question, which asks – *What are the place dimensions of experiences of food, meals, and eating for older adults living in rural communities?* This chapter engages with the third phenomenological element of the lifeworld – experiences of place. This perspective is informed by an understanding of rural places as multilayered sites of human ‘being’, rather than quantifiable and mappable spaces defined by impermeable geographic boundaries. In this chapter, older adults’ experiences of place, ageing, and eating are explored at three different scales: (a) intimately lived-in home worlds, (b) familiar local rural environments, and (c) distant and sometimes quite foreign cities and countries. The findings reveal that at each of these scales, older adults maintain complex, varied, nuanced, and sometimes ineffable relationships with places, and significantly, these are woven into rural older adults’ experiences of ageing and eating.

### 6.2 Ageing and eating at home

#### 6.2.1 Cooking and eating

The older adults live in a range of different housing types, including compact three-room units in retirement villages [Mrs Hughes, Mrs Parker, Miss Roberts], newer houses built on blocks of land shared with children [Mr Frith, Mrs Brown], houses purchased for their retirement years [Mrs Johnson, Mrs Hughes, Mr Edwards, Mrs Knight], and longstanding family homes [Mrs Andrews, Mrs Court, Mr Mitchell].

The home visits revealed that, with the notable exception of Mr Mitchell, most of the older adults live in relatively simple housing circumstances, with many homes having only one living area and one bathroom, for example. However, all of these homes meet the basic minimum requirements of adequate housing, providing shelter and protection from the elements, security and privacy from other people, sanitation, and functional areas for food preparation and eating. All the homes have functional kitchens which incorporate a fridge and freezer, a stove, and quite often a microwave as well; reachable and vermin-free cupboards or pantries; benches for food preparation; and dining tables for eating meals.

Importantly, it was also evident from the home visits that the older adults' houses have a sense of 'homeyness', which is to say that each house is decorated and inhabited in personally unique ways which effectively turns it into a home. For example, with the exception of Miss Roberts and Mr and Mrs Donald, all the homes have prominent tableaux of framed photographs in their living areas, which were frequently referred to during the interviews and home visits. Mrs Parker has a collection of decorative teaspoons from her travels displayed on one wall near her dining table. During the home visits, Mrs Brown's home was cheerfully noisy with the television turned up loud, and her living room was cosy and cluttered with pillows, cushions, and current knitting projects draped over her comfortable couches. At the second home visit with Mr Mitchell, his ute [farm vehicle] was parked directly outside his front door, alongside a neatly placed pair of men's work boots.

Similarly, the older adults' kitchens and dining rooms clearly represent more than merely functional spaces. They effectively convey a sense of home and provide useful insights into how each older adult eats and lives at home. In most cases, their kitchens are simple and functional but two of the older adults have quite generous kitchens – Mr Mitchell's is freshly renovated and has stone benches and an expensive Aga stove, and Mr Garner's is spacious with large expanses of bench space including a big island bench. Almost all the kitchens were noteworthy for their cleanliness and sense of order during home visits, with very little evidence of unwashed dishes or unwiped surfaces. Mrs Knight had a clean and pressed tea towel hanging on her oven door, and Mr Garner's kitchen had a series of matching spice jars stored in a custom-made wall rack. However, not all the kitchens were completely neat and tidy. Mrs Brown's was cluttered with fruit, snacks, and household items, and on her first home visit, Miss Roberts' benches were crowded with preserving jars awaiting sterilisation.

For those older adults who shared the contents of their fridges, freezers, and pantries during home visits, it was evident that they had an adequate quantity of interesting and varied foodstuffs and owned useful cooking equipment. As well, the storage places in their kitchen – or in Mr Edwards' case, in one of his garden sheds – were rich repositories of data about older adults' personal food preferences and their individually enacted strategies for purchasing and eating food. Below, Box 2 contains illustrative data of the contents of three older adults' pantries, fridges, and freezers. These three older adults were the only three who offered to reveal the contents of the pantries, fridges, or freezers during their home

visits – and where this was not offered, it was not enquired about. This box does not represent a comprehensive list of every food item in their kitchens but instead details those items that were either observed or listed by the older adults.

## **Box 2: Cooking ingredients and equipment in older adults' kitchens**

### **Mr Frith**

**Pantry:** garlic, mixed herbs, rosemary, coriander, cinnamon, cumin, chives, all spice, cayenne pepper, turmeric, basil leaves, marjoram, noodles, tinned soup, tomato paste, tinned beans and sardines. A slow cooker, an electric frypan, and saucepans.

### **Mr Garner**

**Pantry:** wooden ear fungus, dried shrimp, *Ochai* – brown Japanese tea, *kit ken mai* Japanese tea with puffed rice grains, *Mochi Chai* – barley tea, shitake mushrooms, *Fujitoro* – seaweed, *adzuki* – beans, *dashi* – fish stock, homemade jam, preserved beetroot, duck sauce, soy sauce, and vinegar. A grinder for making Indian spice blends, a rice cooker, frypans, and two bread makers.

**Chest freezer:** meals cooked by Mr Garner, including tarragon chicken, Malaysian curries, Japanese dishes, and homemade pork pies.

### **Mrs Parker**

**Pantry:** barbeque sauce, sweet chilli sauce, satay sauce, golden syrup, plum sauce, pudding mix, Weet-Bix, tea bags, noodles, long-life cream, tomato sauce, breadcrumbs, and muesli bars.

**Two freezers:** pita bread, loaf of bread, schnitzel, crumbed fish, pork chops, steak, beef mince, lamb's fry, fruit bread, apple pie, icy poles, raspberries, broad beans, pre-cut mixed vegetables, and pre-cut broccoli.

**Fridge:** 'Proactive' brand milk, pumpkin, swedes, carrots, cauliflower, red capsicum, lemons, salami, eggs, yoghurt, apples, and relish.

### **6.2.2 Adapting cooking environments**

Many of the older adults have adapted their kitchens so as to ensure they can continue with cooking and food preparation into old age. Mrs Hughes cheerfully advises that with her children's encouragement, she is "spending their inheritance" by buying a new oven and hotplates for her kitchen. Since developing very low vision, Mrs Parker uses a device which beeps when she pours sufficient hot water into a tea cup, and she has placed raised stickers on her stovetop so she can feel how far to turn the knobs. The older adults' adaptive strategies also extend to the ways in which they use their kitchens. For example, Mrs Brown uses as few saucepans as possible in order to reduce the time she has to spend standing up to wash her dishes, and Mrs Court sits down in an armchair with a chopping board on her lap while she cuts up apples and quinces for dessert.

### **6.2.3 Staying close to home**

Some of the older adults are notably less mobile than others. Mrs Brown and Miss Roberts experience significant musculoskeletal pain and now only walk around their homes and gardens; Mrs O'Brien has severe osteoporosis and can only take a few cautious steps inside her home with the aid of a walking frame; and Mrs Donald has osteoarthritis and low vision and avoids walking as much as possible, both inside and outside. Between their first and second interviews, Mrs Court and Mrs Langridge both experienced a marked drop in their mobility, arising from medical conditions.

For many of the less mobile older adults, their physical engagement with their homes is concentrated on their living rooms and recliner chairs. Mrs Brown's recliner chair is positioned in front of her television, and she sits there to crochet, talk on the telephone, do her daily exercises, and play with her dog. Mrs Donald has set herself up so that she hardly has to move during the day. Indicating the small table beside her chair which contains paper and pens, notebook, television remote control, bills, and her telephone book, Mrs Donald said:

...this is instead of me getting up for everything I want. ... The things I use all the time. I never move, you know. ... Just things I know I use every day. It's such a drag, isn't it? Having to get up and go to the toilet, you know. [Laughs]

For some of the older adults, their recliner chairs have also become a place for eating meals: Mr and Mrs Donald no longer eat at their dining table and instead eat all their meals in their living room chairs, and both Mrs Knight and Miss Roberts eat their light evening meals in their living room chairs while watching their favourite TV shows.

A few of the older adults are not readily able to travel any significant distance from their homes, which constrains their ability to purchase food independently. Mrs Langridge has recently stopped driving due to difficulties driving her husband's new car, and she now relies on her family to drive her to the supermarket. Miss Roberts no longer drives and her ability to walk around her town is significantly restricted: her back and knee pain combined with the marked hilliness of her town means she is physically unable to walk to her local food shops. Instead, Miss Roberts relies on her friends, local buses, community transport services, and a supermarket's delivery service to maintain her mobility and ensure her access to food within her town and beyond.

Mrs Brown decided to stop driving after her second heart operation and now ventures no further than her letterbox at the end of her driveway, which is estimated to be 25 metres long. She leaves her home around once a fortnight, escorted by a carer who drives her into the nearby town so she can shop for food. Mrs Brown employs various strategies to manage the significant constraints on her ability to access food independently. These include buying long-life milk and frozen vegetables, and freezing all her meat, which ensures that her food does not spoil between her fortnightly food shopping opportunities.

Mrs Brown has fond memories of her past mobility as a farmer but appears to have come to terms with her experiences of relative immobility in her old age:

But I was able to get out on the farm and walk around. And it is such a *free*, beautiful way. You know. You just walk out there. Sometimes after tea, we would just walk around and check all the paddocks and make sure we were going all right and each paddock was ready for its next cycle and that. And we'd walk around and they were the most beautiful times. Just the two of us and we'd just walk around and look at the paddock and check on the fences and then we'd go back and, you know, probably have a hot drink and go to bed, sort of thing. It was a relaxing, sort of a

curing sort of a time, if you know what I mean? It would sort of take all the tiredness out of you and you was looking at it with different eyes and you are seeing the beauty of it. And I miss doing that now. Because I used to love that. But now I can't walk around – but I can still look out and see it. And I look out and see those paddocks, and they bring me alive.

Despite her physical immobility, Mrs Brown continues to be highly active in terms of maintaining strong social relationships with family and friends. She talks on the phone regularly and spends considerable time, sometimes up to eight hours a day, crocheting bedspreads and clothes for family members to mark special events such as weddings and new babies. She also exchanges letters, photographs, and homemade cards with relatives in Tasmania and New Zealand.

Mrs Parker has been determined not to withdraw from her previously enjoyed activities, despite losing most of her vision. She can no longer drive but she says she still enjoys being taken on scenic drives by her children. Despite not being able to see her television well, Mrs Parker gets dressed in her supporter's scarf and beanie, and she barracks loudly when Australian Football League (AFL) matches are televised. In a similar vein, Mrs Parker is also determined to continue with food shopping activities despite her very low vision. Walking up the steep hill to her local food shops, she counts her footsteps in order to keep her bearings and remind herself where she is in relation to previously visible landmarks in her town.

Some of the other older adults feel they have freely chosen to stick closer to home and do not feel as though this situation has been thrust upon them by ageing. In these cases, their immobility tends to be relatively modest and does not pose any significant risk to their ability to continue obtaining food for themselves. Mrs Hughes still walks to her local supermarket to buy her groceries, but she has decided she will not travel to the United Kingdom again, as she finds international airports too large and intimidating. Similarly, Mrs Noonan walks to her local food shops but has decided she will not travel interstate anymore to visit her son. Instead, she experiences vicarious pleasure and pride from the travels of her children and grandchildren, who send her postcards and fridge magnets from places as far away as Scotland, Switzerland, Thailand, Dubai, and Christmas Island.

During his working life as a commercial fisherman, mutton birder, and farmer, Mr Edwards lived in many rural and remote parts of Tasmania. About five years ago, he and his wife moved to a much smaller block of land in a seaside town in preparation for their old age. Although Mr Edwards does not travel around Tasmania as much as he did in the past and he has moved to a much smaller landholding, he has managed to maintain a degree of continuity with his rural past by turning his home and garden into a site of ongoing work. Mr Edwards' efforts are now concentrated on a smaller site but are no less meaningful for it. When asked how he feels about retiring, Mr Edwards replied:

Who said I had retired? [Chuckles] ... I started here underneath the house and I moved hundreds of barrel loads of dirt underneath. I cemented it underneath and I have built cupboards and shelves and everything under there and I built a carport on the other side to put the ute in, to get that undercover, and then I extended the veranda and made a workshop under that, built a glasshouse, built a bird-proof and wallaby-proof orchard and garden. What do I do in my spare time?

## **6.3 Ageing and eating in rural places**

### **6.3.1 Overview**

Although all the older adults live in rural areas, their residential settings are actually quite heterogeneous in nature. The home visits did not reveal a uniquely rural form of residential living that shapes shared experiences of food, meals, and eating. These diverse settings range from populated streets of residential neighbourhoods in large towns and coastal villages, hamlets or clusters of houses along winding country roads in quiet farming areas, and, in one case, a farmhouse tucked away down the end of a long driveway that leads off a minor rural road. These rural places also vary in terms of the type and extent of change they are undergoing, ranging between gradual decline, basic stability, and growth arising from construction of holiday houses or influxes of new residents such as retirees and people embracing alternative lifestyles.

In addition to these diverse rural settings, there is also a wide range in the intensities of older adults' attachments to the rural places they live in. These emotions range from deep feelings of love, more restrained expressions of enthusiasm informed by pragmatic

considerations such as the availability of particular services or food shops in their locales, and finally, rare but deep feelings of disappointment in particular rural places.

### **6.3.2 Being 'nourished' by rural places**

In two cases, the older adults' strong and positive attachment to the places they live in transcends any immediately practical considerations such as the ready availability of fresh food. For both of these older adults, their attachment to the place they live has been informed by the sheer duration of time they have lived there and by their close engagement with their land as farmers. Mrs Brown has lived on her dairy farm since 1959 when she moved there as a young bride. Engaging in constant work on the farm alongside her husband has bonded her to the farm land and has given her life meaning on a day-to-day level:

Everything is with you. As a farmer you learn a lot about nature. I have done it so many times. You pick up some dirt in your hands and smell it and it's got a beautiful smell. Everything shows what it is if you look for it. ... So, when you're on a farm, the land, everything, the water, you know what's healthy. You can smell it's fresh. And with the animals. You've got to have a sleek coat. You watch for those things. ... You get so much joy out of each of those things like that, that give you. As you can see, it's gorgeous, isn't it?

Mrs Brown wonders whether she might one day have to move into a nearby town but she feels deeply connected at emotional and sensory levels to her farmland and she worries that she could not replicate those feelings if she were living in a town. When asked if she could imagine moving away from her farm, she replied:

I don't want to. I don't want to imagine it. I have got to the stage at times when I have thought, 'How much longer can I stay?' And I have to have the land around me, I have to be able to feel it. It is life to me. I have got very used to looking after it and seeing that it was healthy. It's like your family, everything, you know – you're watching it and knowing what to do... And there is a real love in it. ... You get strength from it. Everything is part of you.

Like Mrs Brown, Mr Mitchell is a retired farmer who still lives on the land he farmed. Although he did not actually verbalise a strong sentimental attachment to where he lives, the interviews and home visits revealed that Mr Mitchell is a long-time observer and custodian of his land, which he has farmed for over 40 years. Mr Mitchell's farm has been held in his family since the late-1800s and includes a homestead of historical significance. Mr Mitchell visited this farm as a child but did not move there until taking over the management of its operations when aged in his twenties. When he first moved there, he walked around the entire property over many weeks, in an effort to learn the features of the land. As well as concerning himself with the performance of the farm's crops and herds, Mr Mitchell maintains a keen interest in the wildlife and bushland on his property and he makes his land available for research by environmental scientists. Although he is retired from full-time farming and has handed over day-to-day management of the farm to one of his sons, Mr Mitchell continues to work hard to maintain this significant place, including supervising the restoration of his ancestral home and garden.

Some of the other older adults were farmers or agricultural workers during their working lives but they no longer live on the land they farmed and have retired to nearby towns [Mrs Knight, Mrs Johnson, Mr Edwards, Mr Quinn]. However, these older adults still see themselves as deeply rural people. Mrs Johnson lives in a coastal town but grew up on a farm and then farmed alongside her husband for several decades. Living in rural areas has shaped who she is and where she wants to live:

Well, I am a country girl – born and bred on the farm. So I would feel very bad about living in Hobart [Tasmania's capital city] and even worse about living in Melbourne [a large capital city on the Australian mainland]. [Chuckles] I wouldn't like it *at all*.

Several of the rural older adults who participated in the research had never been farmers or agricultural workers [Mr Garner, Mrs Court, Mrs Andrews, Mrs Ingram, Mrs Parker, Mr and Mrs Langridge, Mrs Hughes]. Still others took up living in rural areas relatively late in life, following their retirement from working in urban areas [Mr and Mrs Donald, Miss Roberts, Mr Frith]. Two of the older adults who had not been former farmers expressed passionate views about the importance of rural places in their lives. Mrs Hughes ran a small rural business with her husband and worked for a federal government agency, and Mr Garner

was a rural high school science teacher – but they both emphasised their strong desire to remain living in rural areas. They went so far as to link their rural place of residence with their will to go on living:

I couldn't go back and live in a city. I think that would be one of the turning points to my death! ... The mental situation would be such, I don't know. I don't know. I am saying that but I don't know whether it would. ... Nothing there – bloody houses. You can't see anything else but houses and shops and stuff. [Mr Garner]

Well, I wouldn't [leave]. No. I have made up my mind about that. ... I wouldn't want to leave. No, I wouldn't want to leave. Yeah. Mmm. I will tell you something you haven't asked me. I believe in euthanasia. I *do*! Mmm. Yeah. [Mrs Hughes]

### **6.3.3 Living and eating in rural places**

For some of the older adults, their attachments to particular rural places are somewhat less passionate and more heavily informed by pragmatic considerations. Mrs Andrews has lived in the same town since she married in 1950 but she does not feel terribly warm towards her surrounds, describing it as “just an ordinary, an ordinary country town”. Similarly, Mr Frith says about the large town where he has lived for 14 years, “it is alright. You have got to put your head down somewhere”. Mrs Parker says she values her town because it is well-resourced to meet the needs of older adults, with a hospital, two aged care facilities, an ambulance service, an Elderly Citizens Club and an aged care day centre – “So you have got *everything*”.

For others, the weather in their local area provides a source of daily enjoyment and even pride. Mrs Ingram enjoys the slightly milder weather in her coastal town:

And it's been just a marvellous place to live. The climate is just so marvellous. I always say it is the Riviera of the Southern Hemisphere.

Despite living in rural areas, very few of the older adults face significant constraints in their ability to access good quality fresh food. All of the older adults live within a 20-minute drive of a supermarket, and many of them can and do walk to their local food shops [Mr and Mrs Donald, Mr Edwards, Mr Frith, Mrs Hughes, Mrs Johnson, Mrs Knight, Mrs Noonan, Mrs

O'Brien and Mrs Parker]. For more than half of the older adults, their local food store is either a Woolworths or Coles supermarket, and therefore it is part of one of Australia's two largest supermarket chains that usually sell good quality fresh fruit and vegetables, meat, and groceries at reasonably competitive prices. For other older adults, their local supermarket is part of a chain of smaller, independent IGA supermarkets which tend to have higher prices and sometimes stock less satisfactory fruit and vegetables.

Some of the older adults lamented the high cost and poor availability of fresh fish and seafood in their towns, despite living in coastal fishing villages [Mr and Mrs Donald, Mrs Johnson, Miss Roberts]. Miss Roberts is particularly enthusiastic about eating fish and seafood but she is disappointed that she can no longer buy fresh fish from the fisherman who docked at her local wharf:

They would say, 'Give us a fiver, Miss Roberts or give us ten dollars or whatever. Like, that crayfish, there are a few legs off that, you can have it for \$20'. Or it might have had a good crack in the shell. It was quite okay. You would come home and you'd find it had a bit of a mark in the flesh and you would cut that out and it was lovely.

[Now] the boat comes in and then they have to load it onto a truck, it goes down to Hobart [Tasmania's capital city], it's flown from Hobart to Melbourne [capital city on the Australian mainland] to the fish markets, sold in Melbourne, flown back to Hobart and redistributed up this way. And then they have big signs out saying "Fresh Fish". ... *At least* a week old. ... It has more miles under it than I have, you know!

Miss Roberts lives in a relatively isolated coastal town with two small supermarkets that stock a limited range of higher-priced fresh fruit and vegetables. She no longer drives but she has developed an explicit strategy, which is built on her warm social relationships, to obtain desired food from beyond her town. When Miss Robert's friends drive her to nearby large towns and regional centres, she buys fresh fish, fruit, and vegetables in bulk and then she freezes them for later consumption.

Despite mostly living in small rural towns, many of the older adults do not feel constrained by the relatively limited choice of eating venues available to them. Reflecting on his town which has a population of around 6,500 people, Mr Langridge enthused:

This place is full of eating houses! ... you have a look up that main street and see how many eating places!

Similarly, Mrs Noonan enjoys the eating opportunities available in her small town, including pre-made food items that were not available during her childhood, such as pizza and curries. Mrs Andrews' second home visit included a shared meal at a cafe near her home after the interview finished. Her stove had recently broken and she was awaiting the delivery of a new one later that week; this situation appeared to give Mrs Andrews implicit permission to eat out rather than cook yet another meal for herself.

However, not all of the older adults are completely enamoured of the dining-out options available in their rural areas. The relative geographic isolation of the older adults does not significantly constrain their engagement in social eating occasions with neighbours, friends, and acquaintances. Mrs Johnson sometimes drives around 75 kilometres to the capital city of Hobart to find restaurants that she really enjoys. Mr Garner lives in a very small rural township but he maintains a busy social eating calendar by regularly driving over 30 kilometres to his nearest town for restaurant meals with friends, and also inviting friends and neighbours to dinner parties that he hosts at home.

In contrast, both Mrs Parker and Mrs Noonan live in circumstances that might superficially appear to be more conducive to social interaction and shared meals, but in fact neither have a wide circle of friends with whom to share meals. Mrs Parker's unit is located in a complex of 29 aged care units only two blocks away from the centre of her town. However, Mrs Parker finds her neighbours a bit stand-offish and cliquey, and her social contact with them extends only to brief greetings. Fortunately, Mrs Parker's brother visits occasionally from another country town, and she enjoys preparing and eating two-course meals for him. Similarly, Mrs Noonan lives in an aged care village of more than 50 units but she shares regular meals with only one other resident. On Friday nights during summer, Mrs Noonan and her friend walk to their nearby Returned Servicemen's League (RSL) Club, where Mrs Noonan orders a glass of white wine and fish or meat, chips, and salad. In contrast to Mrs Parker, Mrs Noonan is quite content with the relatively small size of her social eating circle, having consciously decided after her husband died to stop attending social functions organised by her retirement village.

For some of the older adults, regular social eating occasions organised by community organisations provide another valued opportunity for sharing meals with others. Twice a week, Mr and Mrs Quinn attend a lunchtime meal program for older adults which is provided at a community aged care centre in the next town, and both Mrs Johnson and Mrs Andrews attend less frequent social meals hosted by their local aged care centres. Mr and Mrs Donald do not regularly share meals with friends but they do attend special meals put on at Easter and Christmas by local church and community groups.

#### **6.3.4 When rural living turns sour**

For a small minority of the older adults, their enjoyment of rural places of residence has diminished considerably over time. In both cases, this sense of disappointment does not relate to pragmatic considerations such as the ready availability of food. Instead, older adults' negative feelings appear to have arisen from more intangible but no less important declines in their sense of belonging and security.

Mr Donald holds a globally negative view of his home town, baldly stating that "it's dead for us now". He and Mrs Donald are deeply perplexed and hurt because their friendships dwindled after they developed serious illnesses and they stopped attending locally organised social activities. Mrs Donald also sees the growth of the town as detrimental to the friendliness of its residents:

I don't know, there are a lot of people here from the mainland [Australia] now. I mean, when we first came you knew *everybody* in the street and they all spoke to you, didn't they? And in the shops, you knew everybody. But now, you are lucky if you see one person that you know.

Mrs Hughes is not critical of every aspect of her town; she thoroughly enjoys its scenic surrounds and her proximity to cows, which are visible over her back fence. Instead, like Mr and Mrs Donald, her disappointment is related to her unmet social needs. Since the death of two of her close friends, Mrs Hughes has felt increasingly frustrated by the limited opportunities the town offers for conversation and friendship with like-minded women:

I think they are just so set in their ways and insular. They haven't got *a clue* what's happening outside of Tasmania.

For Mrs Hughes, the social drawbacks of living in her town became more starkly delineated between her first and second homes visits. During that time, "the neighbour from hell" moved in next door and this change significantly diminished her sense of rural amenity:

And she has got two dogs. Now, I am the *biggest dog lover there is*. I have always had a dog – Dobermans, German Shepherds. This one is an American Pit Bull, you know – a huge thing. But I love her to bits. She is called Nina. The other one I don't like so much, she is one of those yappy little ones. [My neighbour] goes away and leaves them. ... She is away at the moment. ... After dark, they just start barking. It was after midnight last week. And she [Nina] can jump my front fence. ...It is just getting too much. I am getting really sick of it.

Mrs Hughes experiences these noisy and sometimes intrusive dogs as quite significant threats to her sense of physical integrity and general well-being:

I am feeling weaker. Before – it is six months, isn't it, since you were here – yeah, I was quite confident then. Mmm. So, I suppose I am losing confidence a bit. Having to deal with the dog the other day when she was showing her teeth and I was trying to hold onto the two palings [of my fence] and she was pushing them through.

## **6.4 Eating away from home**

### **6.4.1 Migration**

More than half of the older adults were born in Australia. Of those who migrated from overseas, all of them came from English-speaking countries and most were from the United Kingdom [Mr and Mrs Donald, Mr Frith, Mr Garner, and Mrs Hughes]. Some of these migrants brought their Anglo Saxon food preferences with them. Mr Frith remains very fond of porridge which was a staple menu item during his childhood years in Scotland; Mr and Mrs Donald eschew garlic, herbs and spices, as these were not ingredients of British meals in their childhood; and several older adults waxed lyrical about eating bread and dripping.

Paradoxically, some of these migrants are also markedly unenthusiastic about other aspects of British cuisine, and have taught themselves recipes and cooking techniques sourced from more exotic locales.

#### 6.4.2 International travel

Several older adults have travelled overseas in their later years, taking trips which have exposed them to a wide range of cuisines. Mrs Johnson recently went to France with a friend, Mrs Hughes has travelled to England to visit her siblings, and Mr Garner travels to Japan every second year, primarily in order to explore Japanese cuisine. Mrs Knight has travelled overseas 22 times since her husband died, visiting places as diverse as the United States, Chile, Brazil, French Guyana, West Indies, Malaysia, China, Japan, and Thailand. Reflecting on her many eating experiences during her travels, Mrs Knight concludes that her favourite Asian cuisine is perhaps Thai food.

For others, international travel is now further back in their pasts, but those memories still shape their views about food. Mr and Mrs Donald migrated from England but they have eaten meals in many other countries. Mr Donald travelled to Africa and Europe while in the air force, and both he and Mrs Donald travelled to various countries while working for an airline. They both have fond memories of meals in the United States:

Mr Donald: The catering in America is fabulous. ... You don't have to wait around. As soon as you sit down, they are over with the coffee and a glass of iced water.

Mrs Donald: Salt gets put on your table. Everything you want, you know.

Mr Donald: 'And what would you like on your salad?' What dressing, you know. Half a dozen different dressings. The catering is fabulous.

In contrast, Miss Roberts, who is also well-travelled, takes a very dim view of eating experiences in the United States:

The Americans eat the worst in the world, I think. Oh, the food is dreadful over there. It is just *awful*. They sort of give you this little salad with everything but a lot of squeezed cheeses and a lot of chemical *stuff*. ... And it is just *awful*. And *huge* serves. I am talking about... [indicates with hands]. It is no wonder they are big.

In her forties, Mrs Johnson travelled overland from Europe to Australia with her husband and ate some meals that were very different to those consumed during her rural Australian childhood:

In India, the food was pretty good, in Pakistan it wasn't great and in Afghanistan it was pretty terrible! ... And Turkey ... in those days you went into the kitchen and looked in the pots and said, 'I will have some of that and some of that'. Which was kind of tomato-y vegetable-y stews and really great stuff like that. And then of course we went to Italy so we got onto proper pasta and things. We went to England, but I wouldn't say I have learnt a lot there! [Small snort.]

With perhaps the exception of her time in England, those eating experiences inspired Mrs Johnson to expand her own previously fairly narrow cooking repertoire – "I came back from that with lots of good ideas, about curries and all sorts of good things". Mrs Johnson also fondly recalls a recent meal she ate at a Michelin-starred restaurant in France:

Well, it was just beautiful – everything was beautifully served. There was a soufflé for dessert and there was a little *amuse bouche* served before you started and there were little sorbets between courses, and I think it was salmon was the main thing I had. But the whole thing was a feast for the eyes, as well as for the taste [buds]. It was beautiful.

Mr Garner has also eaten a lot of meals in overseas locations. Somewhat surprisingly, one of his most memorable meals was eaten on an airplane during an international holiday with his wife:

We stayed at a hotel there [in Agra, India]. ... And we went in for dinner one night... and as we came out, there were a couple of... lackeys for want of a better word, who had a couple of trays. And they said, 'Would you like a mouth cleanser? Sir, madam?', 'Oh well, what are they?', 'This one's sweet and this one's savoury'. ... And I thought, 'Well, I am not going to be one of these wimpy white men' and I chewed on this thing. It was bloody horrible! And I ended up swallowing some of the stuff. ... The next day we boarded the plane to fly to Europe and I spent the whole of that flight sitting down – of course you know where! And I thought, 'Oh God, I have

picked up Delhi belly or something like that'. ... And eventually I was on the plane going across to Calgary, or to Ottawa, and I had my first meal in three weeks that I enjoyed. I said, 'Oh yes, I'll have the omelette', expecting to be able to... [makes a face like he is reluctantly eating food]. Yuck. And [when I tasted it] I thought, wow! This is good! Woo-hoo!

#### **6.4.3 Interstate and intrastate travel**

Several older adults regularly undertake interstate trips, sometimes for extended periods of time, and as such they eat quite a few of their meals a long way from their rural homes. Some of them travel to other Australian states, including Victoria, Queensland, and Western Australia, in order to stay with and share meals with family members [Mrs Parker, Mrs Hughes, Mr Garner, and Mr Frith]. When Mrs Parker visits her daughter in Western Australia, she enjoys watching her daughter prepare meals for dinner parties while simultaneously entertaining her guests. Two of the older adults take regular holidays to subtropical or tropical islands where they eat quite different meals to those prepared at home, including lots of fish and salads [Mrs Johnson, Mr Edwards]. Until recently, Mr and Mrs Quinn had undertaken extended caravan trips on the Australian mainland, enjoying simple meals of barbequed meat along the way.

Many of the older adults, including Mr Mitchell, Mr Garner, and Mrs Hughes, also travel within Tasmania quite regularly, and as such, their food shopping and dining out options are not constrained by the venues located in their local rural areas. Up to twice a week, Mr Mitchell drives 60 kilometres to a regional city, and while there he often does his supermarket shopping to take advantage of lower prices and fresher food. Mr Garner often drives almost 40 kilometres to another regional city, where he buys Asian cooking ingredients from a wholesaler, and Mrs Hughes regularly drives over 60 kilometres to visit friends and attend bowls tournaments elsewhere in Tasmania.

#### **6.5 Conclusion**

This chapter uncovers how the older adults' nuanced relationships with various places are interwoven in rich and complex ways with their experiences of food, meals, and eating. These places range from intimately lived-in home environments to local rural environments,

and also extend to distant places from which the older adults migrated or places they travel to in later life. Clearly, the relationships the older adults have with rural places vary in terms of their duration, emotional intensity, and degrees of mobility at local, state, national, and international scales. As such, these influential relationships with place appear to be shaped by individual personality characteristics and biographical circumstances.

## CHAPTER 7: AGEING AND EATING THROUGH TIME

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### 7.1 Introduction

This chapter engages with the fourth part of the first question, which asks – *What are the temporal dimensions of experiences of food, meals, and eating for older adults living in rural communities?* This chapter explores how the fourth phenomenological element of the human lifeworld – the temporal nature of ‘being’ – shapes older adults’ experiences of food, meals, and eating. This perspective is informed by understandings that human lives are lived through time, which is commonly expressed through units of time, such as hours, days, and weeks, but can also be viewed in terms of human beings’ past, present, and future lives. This chapter explores how the older adults’ memories of the past, routines and events in the present, and hopes and fears for the future, intermingle to shape their food, meals, and eating, as well as their experiences of ageing. Interviews and home visits revealed several different but interrelated temporal elements in older lives. Vivid memories of the past shape current food values and strategies, explicit strategies are employed for day-to-day living and eating in the present, and fears and hopes for the future both motivate and disquiet the present.

### 7.2 Past experiences and enduring values

#### 7.2.1 Overview

Many of the older adults told stories of growing up in constrained financial circumstances, which extended in some cases to quite significant poverty, ongoing uncertainty about the fate of family members and friends who were either serving overseas during war-time or suffering significant ill health, and the sparseness of food and frequent food-related boredom during war-time food rationing. These experiences continue to inform their current food values and life strategies, including resourcefulness and frugality, managing money well, investing effort in obtaining food for themselves, and aiming for variety and enjoyment in their eating.

#### 7.2.2 Coping with uncertainty in childhood

Many of the older adults’ memories of childhood are of very uncertain and sometimes unsafe times during World War II. For these children, the safety and security of their lives could not

be taken for granted. Mrs Hughes grew up in Manchester in the United Kingdom and she experienced regular Axis bombing raids. The bombing put both her parents in direct danger, because Mrs Hughes' mother worked in an industrial area of Manchester that was targeted for bombing, and her father was an auxiliary fireman who responded to bombing raids. Mrs Hughes' childhood and home life were far from carefree:

And we used to stand at the window and look across, you know, extensive fields. You could see all the bombs dropping and the flames and the explosions, and that's where my mother was working at the time.

For Mrs Hughes, seemingly comforting household items such as her family's kitchen table, with its promise of home-cooked food and shared meals, took on a more sombre weight during these bombing raids:

I remembered my grandmother moving about the room. And we were under a big iron table which we had in the kitchen, in case we missed the siren and couldn't get to the shelter.

The older adults who grew up in Australia did not experience immediate danger during war-time, but most of them were affected in some way by the two world wars. Mrs Andrews' father lost an eye and two of her uncles were killed serving in World War I. Mrs Parker's father was also injured during World War I; as a child, Mrs Parker remembers seeing a large wound in his back. Mrs Brown missed her father terribly when he served overseas during and after World War II:

You only saw him about every 12 months or 18 months, it was a very hard life. ... Like, dad went off to war but every night he was with you in your thoughts, we worried about him. Because we used to go to the pictures. And they'd have the shorts [newsreels] on... And you'd see them bombing and that. And you'd always think, you know, you never knew if he was safe. And it is very hard on children.

As well as growing up in times of war, many of the older adults also faced significant challenges arising from poverty and difficult family circumstances during their childhoods.

With perhaps the exception of Mr Mitchell, the older adults grew up in fairly simple economic circumstances and some experienced significant poverty. For many, these childhoods were uncertain and sometimes quite challenging. Mr Frith grew up in a two-room house in Scotland, such that he and his seven siblings shared one bedroom, with the boys in one bed and the girls in the other. His parents slept in a pull-out bed in the only other room, which apparently was not uncommon among families in his neighbourhood. Many of the older adults, including Mrs O'Brien and Mr Quinn, remembered that a sibling or friend contracted polio during the mid-twentieth century epidemics in Australia.

Mrs Court grew up in rural Tasmania and her parents struggled to feed her and her nine siblings because her father, who was a forestry worker, suffered repeated bouts of pneumonia. Her father would go hunting for kangaroo meat which her mother made into meat patties and soup. Her mother also employed a variety of strategies to ensure the family had sufficient and nourishing food, including growing fruit and vegetables, raising a cow for dairy products, cooking skilful meals and harvesting food that grew wild in the Australian countryside:

In a good year we'd have plenty of vegetables. And also we'd have some fruit like strawberries and raspberries – and the wild blackberries that we used to pick. All that kind of thing was beautiful.

At the age of 12, Mrs Court left home by herself and moved to Tasmania's capital city of Hobart because her parents "just could not put up with any more mouths to feed, sort of thing, and we all had to get out". Once there, she obtained work and lodgings in a guest house. She never lived at home again, and only visited her parents "once in a blue moon" when time and funds permitted. Mrs Court remembers Hobart as a somewhat risky place for a lone girl during World War II because there were brothels operating in the city's wharf area that recruited girls. However, Mrs Court felt she was well-protected by the owners of the guest house and some of its guests, saying, "they used to take us to the theatre and everything. And it was good."

Other older adults played a significant role in their family's food preparation at a relatively young age. At the age of nine, Mrs Parker stopped attending school full-time in order to care

for her mother who was suffering from what Mrs Parker thinks was probably depression. Mrs Parker's role was to "make sure my mother didn't do anything silly", care for two younger siblings, clean the house, and prepare meals for her family. A neighbour taught Mrs Parker various housekeeping skills, including how to wash floors, use the copper to wash clothes, and make suet dumplings and bread.

Mrs Knight attended school full-time, but by the time she was 13 or 14, her weekends were occupied with cooking and other family tasks:

I mean on the Saturday when I'd be at home, I had to do the cooking for my brother and I for our school lunches for the week and make all that and cook the Sunday roast on the Saturday night because you didn't cook on Sundays. And then on Sunday we had to walk three miles to church with grandfather. And then come home again and get the dinner and put the vegetables, cooked the day before, in a frying pan. ... And then take my brother to Sunday School on the back of the bike. I was allowed to do that! [Laughs]

### **7.2.3 Eating during times of food rationing and scarcity**

Rationing of food and other resources during World War II was a significant feature of all the older adults' childhoods. During those years, they ate a fairly restricted and uninspiring diet, and experienced regular compromises in the quality and quantity of desired food items. This was particularly the case for those who lived in the United Kingdom during World War II. Mr Garner remembers eating, but not enjoying, powdered egg and dry hash made from corned beef mixed with potatoes and "maybe a few green vegetables if they were available". Mr Hughes described the food shortages in the United Kingdom during her childhood as a source of continuing difficulty:

The rations were a nightmare, I remember the rations. ... Well, you couldn't get enough. We were hungry at times, then. We were allowed so many points or so many ounces of butter and it worked out at less than a teaspoon a day.

Older adults who grew up in Australia during the war also experienced rationing but it was less severe than in the United Kingdom. As well, for many of these children, the effects of

rationing were buffered by living in rural areas which meant their families had access to land for growing vegetables and producing meat and dairy products.

With the exception of Mrs Hughes, none of the older adults could recollect experiencing significant hunger during their childhoods. Food was not always plentiful and was often lacking in variety – especially for those growing up in the United Kingdom – but it was almost always sufficient. Mrs Andrews, Mr Donald, Mrs Langridge, and Mrs Parker said they were never hungry to the point of starving. Similarly, Mr Garner and Mrs O’Brien do not remember going hungry, although the lack of variety sometimes wore thin:

I don’t ever remember being hungry. Bored – yes! But never hungry. ....No. No. We always managed to find enough. [Mr Garner]

No. We were never short of food but we were extremely bored by it! [Mrs O’Brien]

Certainly, war-time conditions meant that the children were expected to eat food they did not necessarily like. For two of the older adults, these food dislikes have endured into adulthood and old age. At the age of six or seven, the war meant Mrs Hughes was forced to move to the countryside to live with relatives, which required her to comply with their food preferences:

I do remember, my sister and I were evacuated to the country to our auntie’s place during the bombing and she made us eat porridge. And I have had an aversion to porridge ever since.

Similarly, Mr Frith’s memory of tripe as a key ingredient of his war-time childhood diet means that he cannot enjoy eating it during adulthood:

Arrrgh, tripe, which I utterly and totally detest! I can’t look at it now!

For Mr Quinn, his only memories of childhood hunger arose from times when he missed a meal in punishment for a misdemeanour:

No, I honestly can say that I don’t ever remember going without a meal. Unless I was a naughty boy and sent to bed without my tea!

For all the older adults, eating pre-made or indulgent food was a rare and special experience during childhood. Mrs Parker has fond memories of devouring warm jam donuts bought from a stall at Victoria Market in Melbourne, and Mrs Quinn used to occasionally buy “a great big packet” of broken biscuits as a treat. Similarly, Mrs O’Brien and her brother found occasional pleasure in eating bought food from a shop near their primary school:

The only highlight of our lives was... *very* occasionally we were allowed to buy our lunch, which would be a pie or a pastie. And neither my brother nor I *ever* forgot those pies. ... Oh, they were good. Oh, they were good. That was a rare event.

The rarity of these indulgent eating occasions added to their enjoyment and value. Mrs O’Brien had an aunt who was in domestic service but would bake occasional treats for her family:

... she ‘knew her onions’ and she would make, on special occasions, you know butterfly cakes and all those wonderful cakes. So... we did know that there was another life somewhere, where people ate these wonderful things but we wouldn’t have remembered them had we had them all the time. You know, they were a treat.

The stories told here reveal that these older adults experienced childhoods with by significant uncertainty and sometimes danger. As well, their food situation was restrained and often boring due to food rationing, scarcities, and sometimes poverty – although these limitations were occasionally relieved by highly valued pleasurable eating experiences. These older adults grew up during challenging times for Australia and the United Kingdom, and these times shaped their values in relation to food and to life in general, and many of those values have endured into old age.

#### **7.2.4 Enduring value: Being resourceful and avoiding waste**

Growing up during a time of relative scarcity, rationing, and sometimes poverty, required adults and children to be creative, to manage resources carefully, and to work hard at household management and food production. For example, Mrs Brown recalls:

It didn't matter what it was, you used it. We had a few chooks, and when you did your vegies, the peelings went in, you cooked them, you mixed it up with pollard and bran, and the chooks laid eggs. Everything was utilised.

The older adults espoused and enacted these values during the home visits. Mrs Knight gestured toward a pile of used envelopes which she intends to re-use, Miss Roberts had a part-knitted jumper in a basket beside her recliner chair which she is knitting from wool from an unravelled jumper, and Mr Edwards built several of his garden sheds from materials that he sourced from his local rubbish tip. Older adults' approaches to food also reflected these values of being resourceful and avoiding waste. Some of them disregard the recommended practice of throwing food out once it has reached its use-by date [Mrs Brown, Mr Frith] and others freeze or preserve food to avoid throwing out leftovers and surplus home-grown produce [Mr Edwards, Mrs Ingram, Mrs Johnson, Mrs Hughes].

#### **7.2.5 Enduring value: Being careful with money**

The older adults espouse and enact another value that has endured from their childhood – managing money well. Many of the older adults live in quite small and relatively simply furnished homes, but for many, these homes are sources of considerable pleasure, revealing that their expectations for their living conditions are quite moderate, particularly in comparison to younger generations of Australians. For example, Mrs Noonan and Mrs Parker both live in small three-room units which consist of a combined kitchen, living and dining area; a bedroom; and combined bathroom and laundry. Although Mr and Mrs Quinn live in a very simply furnished home, which has a small dining table and basic living room furniture, Mrs Quinn feels they are “very, very lucky. Very lucky”.

Mrs Parker believes it is important to manage her money well, and she is somewhat critical of those who complain about the difficulties of living on pensions:

Oh, a lot of them growl. But I say to them, you should be thankful because you should be able to manage. I pay for all my eye treatments, so I mean that comes out of the pension. So if I can do *that*, they should be able to. And I don't mean that to be rude to them. ... You have got to be able to manage. I don't smoke and I don't go to the casinos. I only go out to dinner now and again.

Mrs Johnson can afford to travel interstate and internationally and she describes herself as “comfortable” but nevertheless she tries to avoid wasting money, especially when it arises from her own avoidance of cooking tasks:

It started because I have got a new stove and the old one just wouldn't cook anything so I thought, well, I won't cook then! ... Although, I went down here to [a café in my town] because I knew I had people coming for coffee and someone coming for lunch the next day, and I bought three slices of carrot cake and three slices of lemon coconut slice – *it was \$30*. I thought, 'Oh God, *something has got to be done about this!*

Several of the older adults appear to enjoy shopping for food specials. Mrs Donald reads the supermarket catalogues each week and writes down any particularly appealing specials for her husband to purchase. Each time Mr Garner goes shopping for food he takes a notebook and pen in order to compare the specials in two different supermarkets before deciding where to make his purchases. Mrs Brown, Mrs Hughes, Mrs Knight, and Mr Mitchell buy food on special whenever they can.

#### **7.2.6 Enduring value: Investing effort in obtaining food**

The substantial contribution the older adults made in childhood to their family's food-related work has informed a third enduring value – investing effort in obtaining food. For many of them, hunting for food was a normal, everyday activity of childhood. Mr Quinn's parents were farm labourers and he and his siblings made a significant contribution to the family's meat supplies:

Oh yes, rabbits. I tell you what, rabbits were our main diet. ... And us kids, we all had shanghais [sling-shots] – and not blowing out of turn but we got pretty good with them. So about Wednesday night, mum would say, 'The [meat] safe is getting down – I want one of you boys or two of you boys to go and get rabbits', and this would be either trap, take the dogs, or shanghai or whatever. Yeah. As long as you got, say, half a dozen rabbits.

Obtaining food from the natural environment often required curiosity, ingenuity, energy, and persistence, as Mr Edward's recollection reveals:

I remember we took home what used to be mutton fish – they are abalone now. We were wading around the rocks at low tide, found these big shells and kicked them off and took them home and mum had never seen them before. She said, 'I don't know if they are any good to eat. I had better go and ask Mrs Marshall next door.' So she walked over next door and she said, 'Oh they are all right, but they are tough. You have got to bash them to make them tender'. So we didn't have anything square but a round log that we chopped the wood on. So we lay the abalone on that and hit it with the back of the axe – and of course, being slippery, they'd fly off into the scrub. We'd drag it back and scrape the dirt and leaves off it, hit it again – and away it went again! So mum overcame the problem by [using] the old hand mincer that screwed to the side of the table and cutting it into strips and mince it and made patties – it was beautiful.

Although it was more common among those who grew up in rural areas, some of those who grew up in urban areas also hunted for food during their childhoods. Mrs Quinn was a "town girl" who grew up in inner-city Hobart but she has fond memories of her father taking her hunting and fishing in bushland on the outskirts of the city:

Oh yes, we walked for *miles*. ... Oh, it was a good life. It was a really good life. It really was.

Most families also grew fruit and vegetables, and in fact some of these families grew or made almost all their food. Mr Quinn and Mrs Noonan both grew up in a rural areas and do not remember their families buying much food at all as there was no need to do so when they could hunt, grow, or make everything themselves. Although Mrs Quinn and Mrs Brown spent at least some of their childhoods in urban areas of Tasmania, both had families who were able to maintain significant vegetable gardens which kept the families in fresh food.

Even for those families who did not hunt or grow much food, obtaining food was still an effortful exercise for the children. Below, Mrs Parker describes her childhood shopping responsibilities in the city of Melbourne, Australia:

We used to go to the Victoria Market to get the vegetables and the meat, because it was cheaper. And we had ... an old wicker pram and my big brother and myself... we had to go all the back lanes. We walked from... near the train line in Preston to the Victoria Market and back [for approximately 20 kilometres]. My mother used to go by tram, of course.

For many of the older adults, an enthusiasm for home food production has continued into later life. The older adults currently grow many different types of fruit, vegetables, and herbs. Refer to Box 3 on the following page for a list of the fruit and vegetables that the older adults grow. For some of them, including Miss Roberts and Mrs Ingram, these fruit and vegetables supplement food purchased from shops. Home-grown tomatoes are particularly popular among the older adults, who were almost unanimous in lamenting the texture and flavour of commercially available tomatoes. For others, such as Mr Edwards, Mr Garner, and Mr Quinn, their growing efforts produce enough fruit and vegetables to meet almost all of their fruit and vegetable needs.

### Box 3: Fruit and vegetables grown at home

**Mrs Andrews** – None.

**Mrs Brown** – None.

**Mrs Court** – Quinces. Stopped growing vegetables in recent years.

**Mr and Mrs Donald** – Plums. Previously grew tomatoes – stopped in recent years.

**Mr Edwards** – Scarlet runner beans, silverbeet, tomatoes, carrots, raspberries, apples, artichokes, pumpkins, green beans, peas, corn, and broad beans.

**Mr Frith** – None.

**Mr Garner** – Onions, garlic, peas, beans, carrots, tomatoes, potatoes, sweetcorn, asparagus, broccoli, raspberries, strawberries, blackcurrants, gooseberries, Nashi pears, apples, cherries, apricots, limes, marjoram, sage, and parsley.

**Mrs Hughes** – Unknown.

**Mrs Ingram** – Cauliflowers, dwarf peaches, strawberries, carrots, potatoes, tomatoes, beans, beetroot, and spinach.

**Mrs Johnson** – Artichokes, silverbeet, avocado, lettuce, spinach, tomatoes, Oka (Maori potato), chard, miniature cabbages, miniature cauliflowers, sage, marjoram, mint, rosemary, oregano, tarragon, parsley, basil, dill, chives, limes, lemons, grapefruit, pomegranates, apricots, and apples.

**Mrs Knight** – Silverbeet. Stopped growing vegetables in recent years.

**Mr and Mrs Langridge** – Tomatoes. Stopped growing vegetables in recent years.

**Mr Mitchell** – Raspberries, pears, asparagus, and globe artichokes.

**Mrs Noonan** – None.

**Mrs O'Brien** – Unknown.

**Mrs Parker** – None.

**Mr and Mrs Quinn** – Broad beans, garlic, onions, carrots, red spinach lettuces, tomatoes, potatoes, pumpkins, parsnips, nectarines, peaches, Nashi pears, plums, and apples.

**Miss Roberts** – Oregano, parsley, thyme, mint, chard, rhubarb, and tomatoes.

In recent years, some of the older adults have stopped growing vegetables due to medical conditions. For example, Mrs Noonan's husband stopped growing vegetables when his prostate cancer progressed, and Mrs Parker stopped gardening when she was diagnosed with terminal cancer. Mr Langridge has stopped growing them too, because of the demands vegetable growing places on his time and energy.

### **7.2.7 Enduring value: Achieving variety and enjoyment**

Although memories of actual hunger appear not to have shaped these older adults' contemporary food values or eating behaviours significantly, their memories of eating a monotonous diet have shaped one of their enduring food values – achieving variety and enjoyment. During their interviews, Mr Mitchell, Mrs Ingram, Mrs Hughes, Mrs Knight, Mr Garner, and Mr Frith all spontaneously underlined how important variety in their diet was to them, both for enjoyment and for physical health. Mr Frith says he tries to achieve “a reasonable variety in my eating habits and I will just sort of keep going with that”. Mrs Parker varies her breakfast cereal over three days, rotating through ‘Weet-Bix’, ‘Special K’, and porridge so as not to become bored. Mr Garner has developed a systematic method for ensuring variety in his and his wife's diet, rotating meals and treats throughout the week:

So, one day we have carrot cake ... The next day we have ginger biscuits. And then the third day we have raspberries and strawberries. And then we go back to carrot cake, you see. ... It is just for the variety of it. In the same way as one day we have pork pie for lunch, the next day is ham, the next day is egg spread or chicken liver spread or something like that. It gives you a bit of variety, so you are not eating the same thing day after day. But, you know, they are things that we like but we are not eating them continually. If that makes sense?

## **7.3 Living in the present**

### **7.3.1 Using routines to ‘keep going’**

The findings presented in this section relate to another aspect of the temporal dimension of older adults' lifeworlds – activities and strategies enacted in the present. Daily and weekly routines help many of the older adults keep going with their lives. Rather than being evidence of older adults becoming ‘stuck in their ways’, maintenance of regular routines appears to

help them to manage their day-to-day lives and eating, in a responsive and flexible manner. Furthermore, these routines provide the older adults with a sense of structure and coherence at a time of life when the routines of school, work, and family life have all but disappeared.

Mr Mitchell, a retired farmer, gets up at six o'clock each morning, except on the weekends when he sometimes "allows" himself a lie-in. He makes his bed every morning – a routine which was instilled in him by his mother. Mrs Knight organises her day around a schedule of activities and tasks. She sees her routine as highly supportive of her busy life and wellbeing:

I go to bed at the same time every night. And I wake up exactly on the tick of 20 past six every morning, and now everything I do, I am very routine. As I say, when I got to bed at night, I start getting ready, cleaning teeth and mucking about and setting up for my breakfast in the morning and ... So therefore, I am in bed at exactly the same time and I sleep [thumps table for emphasis] *all night*.

For many of the older adults, their engagement in routines also extends to their food, meals, and eating. All of the older adults maintain a regular routine of eating three meals per day and almost all of them eat at least one cooked meal every day, either at lunch time or dinner time. Several of the widowed older adults have taken up watching television while they eat their meals. The regular timing of television programs serves as a useful cue to ensure that their meals are eaten at regular times. Mrs Ingram and Mrs Knight both eat dinner while watching the television quiz show 'Egg Heads' at five o'clock, while Mr Mitchell aims to have his evening meal prepared in time to eat while watching the seven o'clock news.

Others employ routines or rituals for reasons of pleasure and comfort. At mid-morning each day, Mrs Parker drinks a cup of tea on a chair in the sun on her veranda, and Mrs Hughes enjoys a glass of wine and some nuts at five o'clock every day, thereby replicating a small ritual she engaged in with her husband for many years prior to his death. Mrs Knight has a standing lunch reservation every Thursday at her local Chinese restaurant, which she enjoys visiting before her weekly Scrabble meeting.

However, not all the older adults employ routines as part of their daily lives. Mrs Brown, who like Mrs Knight, was a dairy farmer, does not want to be too restricted by routines and time

pressures now that she has retired from farming. She revels in her freedom from commitments and routines:

I went all my life where you had to be home in time to milk, in time to do this. You had those things you had to do. ... And it was *controlled* all day because oh, if you are going in to do your shopping, you have got to be back by about quarter past four, to start milking and so on. And so you were always running to time and [after I retired] different ones said, 'Why don't you do this? Why don't you do that?' I said, 'I *don't* want to be regulated – I want to be able to do something I want to do when I want to do it'. You know what I mean?

### **7.3.2 Using time well**

The interviews and observations revealed that many of the older adults are leading very busy lives well into old age. Mrs Knight has recently cut back from two daily activities to one after being diagnosed with terminal lung cancer. She is a member of 13 community organisations, runs the local Scrabble Club, and is an active member of her local branches of Probus, Legacy, and the Anglican Ladies' Guild. Mrs Knight also attends church every Sunday, swims and walks regularly, and volunteers every second Sunday at her local tourist information centre. Her second interview was squeezed in between her engagements for the day.

Mr Garner is the voluntary Secretary of four Freemasons' Lodges, cooks all of his and his wife's meals, maintains a large and productive vegetable garden, and meticulously plans their trips to Japan. Mr Garner likes to take an afternoon nap occasionally but says there is not always time. He maintains a list of tasks for each day – "But anyway, there are many days I just don't have enough time in the day to complete my tasks I have set myself".

Mrs Ingram has something on every day. She attends exercise classes and her local School for Seniors on a weekly basis. She also volunteers regularly, reading books onto compact discs for vision impaired people, doing literacy tutoring, and helping to collate a local information booklet for her town. She is also a member of the local Seafarers' Mission, Probus Club, and church council.

Mr Mitchell is busy with cooking for himself, establishing a garden around his house, supervising renovations of his house, and assisting his son with farming. He regards rural living as something that helps him keep occupied, even after retirement from full-time farming:

No, I feel very sorry for people who actually retire and do nothing. And that's where you are very lucky in the country, actually, in that there is always things to do.

After her husband died, Mrs Andrews became a Church minister at age 65 and she only retired from this role in her early 80s. She has also been President of her local branch of Legacy for the past 16 years. Similarly, Mrs Court is busy working in the community – she and her husband do voluntary work with three aged care organisations, and Mrs Court also participates in advocacy and consultations on various community issues. Their voluntary work extends to preparing and sharing food with others – until recently, Mr and Mrs Court hosted functions at their home for up to 40 people from their Senior Citizens' Club:

We've sat forty people out there [points to covered patio area attached to house].

...Yeah, we've cooked a baked meal. On that little old stove. ... A garden party we call it – we have a garden party. They all walk around the garden. We have tables and chairs set up, and seats and that and they love it. ...They used to absolutely love it.

Although the overwhelming impression gained during fieldwork was that these older adults were highly active and engaged, Mrs Donald was noteworthy for her very low levels of activity. Mrs Donald has had a stroke and now has low vision and very poor mobility due to osteoarthritis. She only leaves their unit every few days at most, and relies on her husband, who has lung and bowel cancer, to shop for their food and cook most of their meals. Mrs Donald spends virtually all day sitting in a chair in her living room, watching television and eating her meals there. These days, she has to work herself up in order to achieve relatively minor self-care tasks:

I am all right when I get out but it is such an effort to get ready, you know? It [sighs] getting changed and [sighs]. I mean I knew I had to have a shower and wash my hair for the doctor's tomorrow and I was going to do it tonight and I was going to do it last

night and then I went this afternoon and I *did* it! So I am clean at least for the doctors.  
[Chuckles]

Mrs O'Brien is significantly disabled by osteoporosis and can no longer participate in many activities outside her home, but she maintains a notable level of home-based mental activity. During the home visits and interviews, she expressed articulate and well-developed opinions on current social issues and political events, discussed the content of recently-aired TV documentaries about medical science, and on the second home visit she had a historical novel close to hand on the small table beside her chair. Mrs O'Brien's body no longer allows her to be physically active or socially engaged outside her home – a situation she describes as “enormously frustrating” – but she is clearly committed to using her time to keep her mind busy.

### **7.3.3 Not feeling or acting their age**

Although some of the older adults cheerfully acknowledged their age during the interviews – Mrs Brown called herself “an old boiling chook” – many of them do not feel their chronological age and resist external pressures to act their age. Mrs Parker is 82 years old but feels like she is about 25 years old and does not dwell on her chronological age – “I never think of being old”. Similarly, at 84 years of age, Mr Frith knows that he is old but he does not actually feel old:

As said, well, I was talking to my sister on the phone last night. Well, you don't talk, you listen with my sister! ... And she's 80 and I says, 'And how do you feel? You know, do you feel?' and she says, 'Oh, I can't do the things I would *like* to do but no, my mind [is fine]'. I says, 'I am the same. I still feel I am 21, 22. I want to go out dancing but you know you can't'.

Mr Garner has noticed some minor physical changes but does not feel any different to how he did as a young man:

I feel no different from what I did, inside, you know – mentally and so on. Probably I still think I can do things that I did twenty years ago except when it comes to the

muscular side of it. I think my brain is still reasonably working well. But no, I don't feel any older, I don't feel any different...

Some of the older adults had prior experiences of living outside of the social expectations of particular chronological ages, either as children or adults. Mrs Court entered a grown-up world at the age of 12 when she left home and moved 85 kilometres away to find work in Hobart. Mrs Court felt older than she actually was because she had adult responsibilities:

So anyway, down I went. There was a lady who was a manager of where I went to. She said, 'Where are you working now?', because she thought I was ridiculously *young*, you know, which I was. But I didn't *feel* young. Because I had a big responsibility to look after myself and I was doing it for my family because they just could not put up with any more mouths to feed, sort of thing, and we all had to get out, sort of thing. ... I was only young – but I was on the ball! [Laughs]

Acting or feeling old – as opposed to being old as a result of the years lived – was almost universally seen by the older adults as profoundly negative and undesirable. It was often associated with having a negative mindset, feeling resentful, or complaining to others:

Sometimes I suppose I am negative. [My friend] says that sometimes I am negative. ... So you know, I suppose, you do have your days when you get older that you are negative I suppose, but there is not much future in being negative, is there? [Miss Roberts]

... I laugh at [my granddaughter]. She says to me, 'You know Nan, you are real modern. You don't *think* old'. I said, 'I am not old, either!' [Mrs Parker]

Mrs Ingram said that she does not feel old, has never felt old, and she does not think she will ever feel old – at least “not while I am as well as I am”. However, she thinks she will begin to feel old if she ever loses her mobility or her mind:

If they cut off my wheels again and if I started going do-lally – you know, saying the same things over and over again.

Many of the older adults believe they can avoid becoming old in this negative sense by exercising strength of will. To this end, they consciously employ strategies to avoid entering this state, even as they continue to age chronologically. Mrs Parker dresses like a younger person in jeans and sneakers. She enjoys the reaction of her peers when they find out she enjoys eating spicy food – “People say to me, ‘How can you eat hot salami at your age?’”. Her enjoyment of spicy food is not a consequence of her physiological make-up or her childhood eating experiences; but rather it is one element of a strategy to dress, talk, and eat in a manner which situates herself outside her chronological age bracket.

For Mr Garner, avoiding becoming old entails enjoying life in the present while also looking forward to his future:

I think age is a matter of mentality. If you think you are old, that is the way it is. ... I just look on it, okay, I might be gone tomorrow, but while I am still around I am going to do what I want to do and I will enjoy it.

Despite being 84 years old, Mrs Court does not class herself as old and believes she does not act her age. To her, being old entails excusing yourself from life, disengaging from activities, and not keeping yourself busy:

Oh, I don't know, when you are crabby and you admit you're old and you can't do this and you can't do that because you're old, you know. ... Give excuses because they say 'I can't do that because I am too old'. That's ridiculous. I shouldn't be doing what I am doing now if it comes to that, then! [Laughs] No, no, I am going to keep on going until the day I drop. [Laughs]

Likewise, Mrs Andrews does not feel old. But she is not terribly resistant to getting old either, just so long as she does not become “a helpless person, you know, and a burden on my children”.

## 7.4 Looking towards the future

### 7.4.1 Keeping going

The following findings relate to the third aspect of the temporal dimension of older adults' lifeworlds – their futures. Although the older adults' thoughts about their future lives are imbued with the certainty of their eventual deaths, and some are preparing emotionally or practically for the end of their lives, all of the older adults are also strongly committed to the prospect of living – and living well – into the future. There is no sense that any of them have 'turned their face to the wall', as it were. All of these older adults are employing individual strategies which reflect a shared aim of keeping going with their lives and their eating.

This strategy is characterised by the phrase 'keeping going', which conveys a sense of determined persistence and avoidance of excessive introspection. In the following comments, Mrs Brown, Mr Frith, and Mr Garner explain how they will continue with cooking and eating well in their old age:

Just keeping going! [Mr Frith]

I think I'll just go along while I can. [Mrs Brown]

But while we are physically capable of doing it, I will just keep going the way I am, expanding the horizon. [Mr Garner]

Mr Garner's desire to keep expanding his culinary horizons is informed by his specific plans to consume exotic foods he has not eaten before, such as snake. For him, the prospect of experiencing culinary novelty is highly motivating – it pulls him towards his own independent eating future.

Another future-directed strategy that most, if not all, of the older adults employ involves eating for a healthy future. Many of them regularly consume particular foods for health reasons, including low fat yoghurt [Mrs Parker], low fat beef mince [Mrs Hughes], low salt tinned food [Mr Mitchell], sugar free lollies [Mrs Brown], and nuts [Mrs Ingram]. Others discipline themselves to eat foods which they do not particularly enjoy eating but are believed to be healthy. For example, Mrs Knight tries to eat an egg each week, even though she does not really like them.

Others intend to employ adaptive strategies and make compromises in order to shore up their food, meals, and eating as they age. Mrs Johnson reflects:

Well, I see my future as still here. ... So I see myself staying here until I drop dead or need a nursing home. So in that case, I probably would get Meals on Wheels and Home Help and all the things that are going. But, yeah – I would stop making all my own jams and all that sort of thing. I would have to compromise a bit. ... But, no, I think it is probably just a matter of probably making slow changes as you need to.

#### **7.4.2 Eating in residential care**

When asked about their future years in relation to food, meals, and eating, the older adults' answers revealed that they think about their food futures in the broader context of where they will be living. For many, the prospect of residential care is looming large, with many feeling dread at the thought of it. Mrs Court has ruled out residential care as an option for herself, unless she has become completely dependent or has lost her sense of self:

Oh, I am never going in a home. Unless I go senile or something. When I can't fend for myself or I don't know what's going on around me, then they can put me in a home. But they won't get me in there while I am sane. That's if I am sane! [Laughs] ... I am not against homes. It's just that, okay, they are not for me, you know.

In particular, residential aged care would pose a significant threat to their ability to manage their own meal times and personal routines, as both Mrs Andrews and Mrs Langridge explain:

Well, I have just one dread – of going into a nursing home. Because I visit and go down to see them and then I think 'Oh'. So, I have told my children that if, if I ever develop dementia of any sort and get so bad I can't be on my own – I will forget who I am anyway – they can put me, as I say, behind bars, but apart from that I don't want to. [Mrs Andrews]

I think it is because, like, their main meal of course is lunchtime but with our sort of lifestyle we are out a lot through the day. We would still try and keep some of our activities going here. So, like bowls for instance, that starts at 1.30pm. Well, I don't

know what time their lunch is so we'd either have to miss lunch to get there on time or miss bowls. [Mrs Langridge]

Many of the older adults have had first-hand exposure to residential age care gleaned through visiting friends. The apparent loss of autonomy and independence of their friends alarms them:

Well, I can't see it working for us because we ... do have funny ways of doing things, you know. ... I don't like being too – 'It's 7 o'clock' [bossy tone]. Well, 8 o'clock – you are still having breakfast! You know – anything like that. [Mr Langridge]

Almost universally, the older adults were less than enthusiastic about the food and eating experiences offered in residential aged care settings. Mrs Johnson described how one nearby residential aged care facility in Tasmania provides poor-quality meals, which she attributes to its rural location:

Mind you, sometimes the food is awful. ... I visited a friend up there – she died earlier this year, but I visited her for 12 years. And it varied. I mean, in a small town, it is so hard to get a decent cook. ... I remember once – she actually had multiple sclerosis so you had to feed her – and she said, she'd say, 'You taste it'. [Makes a face of disgust.] Yeah, once it was fish that was still raw in the middle, and you know. All those awful things.

Mrs Hughes identified the pace at which meals are served in residential aged care as problematic, seeing this as detrimental to the residents' enjoyment of meal-times and capacity to eat sufficient food:

You know, how quickly we eat normally. And, well, the older person doesn't, you know, it just takes her time and *physically* she is not able to eat quickly. So then when it is time for the domestic staff – they are only employed for so many hours. ... The plates are whipped away. They say, 'Oh, aren't you going to finish this?' ... if they'd been given more time. Well, the patients, they have all the time in the world. But because of the staff problems, they are not allowed that time.

### 7.4.3 Facing up to the proximity of death

For most of the older adults, their chronological age means that regardless of their health, their inevitable death is looming larger on their horizon. The only uncertainty is its exact nature and its timing. A seemingly innocuous statement about scheduling the second interview for six months' after the first interview prompted several older adults to make good-humoured comments about whether they would still be alive at that time:

If I am still alive, yeah! [Mr Edwards]

Well, if I am still around! [Mr Frith]

That is if I am still here! [Mrs Noonan]

Geez, I could be dead by then! [Mr Quinn]

These four older adults were in good health at the time they made these statements, and Mr Edwards and Mr Frith are two of the most physically fit of the older adults. Perhaps they can well afford to make light of their possible death, but for others whose health is more precarious, their impending death is a more serious matter. Mrs Knight, Mr Donald, and Mrs O'Brien have serious and potentially life threatening medical conditions. At the first interview, Mrs O'Brien said she hoped to be alive for her second interview. With severe and disabling osteoporosis, she has become increasingly frail but at her first interview she said she was trying to "hang on" for the birth of her first great grandchild and her granddaughter's wedding.

Certainly, for most of them, reaching old age has meant that they have experienced many deaths among their own families. None of them have a surviving parent. Some have experienced the death of a sibling during childhood [Mrs Parker, Mr Frith, Mrs Noonan], while ten of them have lost spouses [Mrs Andrews, Mrs Brown, Mr Frith, Mrs Hughes, Mrs Ingram, Mrs Johnson, Mrs Knight, Mr Mitchell – twice, Mrs Noonan, and Mrs Parker]. At least two of have lost an adult child [Mr Frith and Mrs Parker], and many have lost a large number of siblings [Mr Frith – six have died, and Mrs Parker – eight have died]. Mrs O'Brien is quite close to her cousins but these days they are all "dropping off the twigs like crazy". At this stage in their lives, their friends and acquaintances are dying more and more frequently as well – at

his first interview, Mr Langridge noted that he had outlived seven or eight members of his church. Over the last eight years, Mrs Hughes has experienced the death or precipitous decline of many friends:

I have got a bit upset about my closest friends in [my town], just a couple of doors down – a man and his wife. She is 80 and he's 88 and he has always been very strong and he's gone downhill in the last three or four weeks and it has happened so quickly. And he is sleeping all the time. And so I have got a horrible feeling about that. Mmm. I have had quite a few funerals. You have to cater for all these funerals. ... Four in six weeks.

The interviews revealed that cooking and making food for funerals has become an increasingly common feature of their food preparation activities; and the older adults are planning for their own deaths. Although Mrs Parker is in good general health, she has already organised and paid for the catering for her funeral. Upon overhearing her report this during her second interview, Mrs Parker's brother cheerfully announced that he hoped to outlive Mrs Parker, purely in order to enjoy eating the catered food at her wake. To which Mrs Parker replied affectionately – "Oh, you are awful!" Similarly, Mrs Knight has organised and paid for the food to be served at her anticipated funeral.

The overriding impression was that these older adults do not actually dread the prospect of their own death. Although few felt ready to die just yet, many have engaged with the prospect at a pragmatic level, including organising their funerals or, in the case of Mr Garner and his wife, going through the process of donating their bodies to medical science. For Mrs Noonan, facing her own death has involved reaching a level of acceptance, which is not necessarily shared by her daughter:

I am well. *That is the main thing.* ... And if I can keep that, that will be fine, but if it happens it happens and that's fine too because time has run out. I can hear my daughter saying, 'Don't talk like that mum'. But you have to be practical.

However, almost universally, the older adults' stories and opinions were filled with a palpable sense of dread about the prospect of becoming very unwell or demented, consigned to

residential care against their will, or kept alive through medical intervention in a state of frailty and acute dependence. To many, this was a fate worse than death:

As I said, I will be 86 tomorrow. That is a good age. My mother had gone before that but my father lived to be almost 94 and people say, 'Yeah, well you could live as long' and I say, 'Well if I feel like I do now, that will be all right. If I am not, I will be gone'. ... I have got a cousin over there, over in the hospital and I think – no, I don't want to live like that, I really *don't*. [Mrs Noonan]

#### **7.4.4 Choosing the end of their time**

Surprisingly, several of the older adults spontaneously raised the issue of euthanasia in the context of exploring their food and eating into the future. When the possibility was raised that Mr Garner might one day need Meals on Wheels, he reacted with horror and referred back to an earlier-narrated experience of being poisoned in India (pages 177-8), which left him unwell for several weeks:

You are talking about when I get so decrepit. I think I will go back to India and have another one of those things that will kill me!

In her first interview, Mrs Hughes pointed out she had not been asked about euthanasia yet, even though the clearly stated theme of the interview was food and eating. A believer in euthanasia, she would like it to be available to her if necessary:

Well, if the state that my friend was in, the one who died last year, I wouldn't want to get to that stage. Completely helpless and dependent and you know, having to be fed and toilet changed and that. Not able to move from out of bed, into bed. So yeah, I would definitely... Mmm. Yeah.

Mrs Ingram also raised the topic of euthanasia during her first interview and was keen to discuss it again during her second interview:

And it is that sort of thing – I would like to leave the space that I am taking up for somebody else to use! The only reason if I would like to go, if I am impaired. To leave

the area. Just a waste of space, I am – so let me go! Let somebody else use the space!  
... Not yet – but when I become, to my mind, a waste of space, I would like to go.

Similarly, Miss Roberts does not want any heroic measures undertaken to keep her alive if she becomes very unwell. Instead, she would prefer to be eased out gently, still enjoying one of the simple pleasures of her life:

There's a lady up here who's 92 and they are going to do *massive* heart surgery on her. Now, I think – you don't know if it was you, you don't know – but I think if it was me, I would be saying, 'Just make me comfortable and take me home and give me a long straw and a cask of red!'

## 7.5 Conclusion

This chapter details the ways in which the older adults' experiences of food, meals, and eating are infused with time, which flows from the past to the present and into the future in human lives. The older adults espouse and enact several enduring food values informed by childhood experiences of war-time uncertainty and scarcity. These values entail being resourceful and avoiding waste, being careful with their money, investing effort in obtaining food, and achieving variety and enjoyment in their eating. In the present, the older adults employ the rhythms of daily and weekly routines for eating and living, use their time well by engaging in meaningful activities, and resist feeling or acting their chronological age. These older adults also engage with their uncertain futures, expressed in positive strategies of eating for future health, making preparations for their own deaths, and feeling fearful about entering residential care and losing control over their eating lives.

## CHAPTER 8: FOOD SECURITY AND ONTOLOGICAL SECURITY

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### 8.1 Introduction

This chapter engages with the research questions by discussing and interpreting the research findings detailed in Chapters Four, Five, Six, and Seven. Initially, it responds to the first research question – *What is the nature of experiences of food, meals, and eating for older adults living in rural communities?* It then explores the second research question – *How do older adults' experiences of food, meals, and eating inform deeper understandings of food security and insecurity in older adults?*

Before addressing those questions, the chapter opens with a reflection on the nature of the research findings, emphasising that their significance relates to the meanings implicit within them, rather than to any generalisable empirical content (refer to Section 8.2). From there, the chapter engages with the first question by exploring the implicit meanings of the older adults' experiences of food, meals, and eating. The findings are interpreted with specific reference to four dimensions of the phenomenological lifeworld: subjective, intersubjective, place, and temporal (refer to Sections 8.3 – 8.6).

Building on these insights, the remainder of the chapter (Section 8.7 onwards) engages with the second question. It proceeds by drawing on empirical and theoretical understandings of ontological security, anxiety, and risk in order to elucidate a fresh perspective on food security and insecurity in older adults. In responding to this question, a theoretical perspective is developed which contends that the environments, values, and actions which underpin older adults' sense of food security are closely related in a circular and reciprocal manner to the environments, values, and actions that underpin older adults' sense of ontological security.

### 8.2 Orientation to the findings

#### 8.2.1 Overview

The findings of the previous four chapters generally have a positive tone. This reveals that the older adults who participated in the research are capable, determined, and resourceful actors

in their own, sometimes challenging, lives. Importantly, all of the older adults in the study also appear to be food secure. However, the thesis does *not* seek to generalise these positive findings to a wider population of rural older adults; instead it draws on insights from them in order to develop a theoretical argument about food security.

### **8.2.2 Confident, capable, and food secure older adults**

As discussed in Chapter Three, the original intention of the research was to focus on experiences of food *insecurity* in older adults, but the research was subsequently broadened to explore older adults' experiences of food, meals, and eating, and then consider the significance of these experiences for food security and insecurity. Accordingly, the intention was to conduct research with older adults who were either food secure or insecure.

During the fieldwork, the overall impression was that, by and large, all of the older adults who participated in the research are food secure. That is, they experience “the ready availability of nutritionally adequate and safe foods and the assured ability to acquire food in socially acceptable ways” (Kendall & Kennedy, 1998, p. 337). However, it is important to note that the research did not set out to measure or assess older adults' food security status. As such, it does not generate detailed empirical findings about whether particular older adults in the research are in fact food secure or insecure.

However, the observations during home visits provided empirical data to inform an overall impression that all the older adults in the research were fundamentally food secure. Their pantries, fridges, and freezers were well-stocked with a variety of food, which supported their assurances that they usually eat nourishing and enjoyable meals. The older adults were observed engaging capably in a wide variety of food related activities, including preparing meals, making drinks and snacks, preparing fruit for preserving, clearing away dishes after a meal, and harvesting vegetables from their own gardens. As well, the home visits revealed that the older adults' surrounding environments are largely supportive of their food security. All of them have stable and adequate housing and functional kitchens that support food storage, food preserving and meal preparation, and in many cases they also have fruit trees and vegetable gardens.

Further impressions of these older adults' food security were forthcoming in their spoken words, garnered during the interviews. None of the older adults expressed or conveyed any anxieties about their ability to access and acquire sufficient nutritious and enjoyable food for themselves into the future. The older adults overwhelmingly spoke about their current and future food situations with confidence and assuredness. In fact, as detailed in Chapter Seven, the only substantial fear articulated by more than one older adult during the interviews was about the possible threat of having to move into residential aged care in the future.

Many of these older adults espouse and enact food values which are supportive of their food security. These include resourcefulness and frugality, managing money well, investing effort in obtaining food, and achieving variety and enjoyment. These values have informed a wide range of personally meaningful food strategies which they employ successfully to manage risks to their food security. These strategies include: developing new cooking methods to adapt to widowhood or physical limitations, finding ways to enjoy meals after the death of a spouse, travelling to overcome limited access to preferred foods, keeping busy with food preparation tasks, and relying on meal routines.

The older adults in the research are also clearly engaged with food. They display considerable curiosity about new food and cooking techniques, have a basic sense of confidence in their own capacities to learn food-related information and skills, and hold strong opinions on food, including delivered meals programs. The older adults' varied actions reveal their strong determination to nourish themselves, and cope with life events and bodily contingencies of ageing, and thus persevere with their own 'being'.

However, the picture is not entirely rosy – the food security of some of the older adults would potentially be at risk if sudden events were to occur in their lives. For example, Miss Roberts sometimes receives credit from her local grocery store for food purchases. If those arrangements were to end, she might experience food insecurity from an inability to pay for food. Mrs Donald's potential vulnerability to heightened food insecurity arises from her husband's cancer; she has low vision and poor mobility, and she relies on Mr Donald to shop for food and cook most of their meals. If he were to die or become incapacitated, her food security might come under significant threat.

Notably, all of the older adults in the research see the task of ensuring their own food security as a relatively manageable life challenge. Most of them consider their current food environment to be quite comfortable and favourable, especially in comparison to more challenging childhood experiences of food rationing, food scarcity, and sometimes significant poverty in particular families. With life in Australia after World War II characterised by peace and relative prosperity, as well as the introduction of social security and universal healthcare systems, these older adults apparently feel fortunate in comparison to earlier generations, and overall they experience food as plentiful, affordable, varied, and enjoyable.

### **8.2.3 Theoretical perspectives informed by idiographic data**

As noted in Chapter Three, phenomenological ethnography does not require that research be conducted with a representative sample of the population being studied. Indeed, it appears that the older adults who participated in the research may well not be representative of older rural Tasmanians. For example, at least four of the older adults have an adult child who currently works as a cook or chef [Mr Frith, Mr Garner, Mrs Hughes and Mrs Johnson] and two of the older adults have themselves worked as cooks [Mr Garner, Mrs Parker]. This suggests that these older adults have a higher level of interest in food, and therefore may be more active in maintaining their own food security, than would be the case in the general older adult population of rural Tasmania. As well, it is quite possible that these older adults are unusually capable and confident in relation to food, as most of them effectively selected themselves for the research by responding to recruitment advertisements. Their desire to participate in the research might reflect a higher degree of confidence about their food-related lives than that held by most other rural older adults.

Accordingly, the findings and impressions are not employed in this thesis to argue that most rural older adults are highly capable, determined, and resourceful. Although that is an appealing argument, the research findings do not provide generalisable evidence for that case. Similarly, in relation to food security, the positive mood of these findings *do not* constitute empirical evidence that most rural older adults in Tasmania are food secure. Therefore, the research does not challenge other research which has uncovered significant experiences of food insecurity among rural older adults, either in Tasmania or elsewhere. Instead, the significance of the research lies in the insights it generates for developing a fresh

theoretical perspective on food security and food insecurity in older adults. As such, the discussion in the remainder of the chapter takes an explicitly interpretative stance, aiming to uncover the implicit meanings in the research findings, rather than to advance an argument by generalising the empirical findings. In the next four sections of this chapter, the findings pertaining to the first research question are interpreted through direct reference to four elements of the phenomenological lifeworld: subjective, intersubjective, place, and temporal dimensions.

### **8.3 Subjective dimensions of older adults' lifeworlds**

#### **8.3.1 Overview**

The findings from Chapter Four on the subjective dimensions of older adults' lifeworlds are interpreted in this section by reference to three perspectives. These are phenomenological notions of intentionality and perseverance with 'being', anthropological views on the importance of food for personal identity, and social gerontological theories of resilience in older adults. The findings reveal that the older adults continue to be highly engaged in their own lifeworlds – including experiences of food, meals, and eating – well into old age. As well, the older adults are actively engaged in developing and implementing psychological strategies and practical actions which support their ongoing ability to live into old age, cope with life's uncertainties, eat well, and enjoy food. Ageing is a time that can be beset by uncertainty. But for these older adults at least, it also appears to be a time of committed engagement, intentionality, perseverance, and resilience.

#### **8.3.2 Engagement and intentionality**

The findings reveal substantial evidence of the older adults' curiosity and engagement with their surrounding social and material environments, including food and meals. By and large, the older adults are curious and interested in the world around them. They are confident in their abilities to learn new skills and to enact change in their kitchens. They hold strong opinions on food, including delivered meals. They regularly set standards and strive to meet them, for their own lives in general and for their eating in particular.

Reflecting on the phenomenological notion of human intentionality sheds additional light on the nature of the older adults' curiosity and engagement in relation to food. Introduced by

the German philosopher and psychologist Franz Brentano (1838 –1917), intentionality views humans as closely engaged with the world through their bodies, and therefore concerned with arranging their immediate material environments to support their bodily actions (Dahlberg, et al., 2008). Building on this idea, Heidegger viewed human ‘being-in-the-world’ (*In-der-welt-sein*) in terms of ‘tarrying’, which extends beyond intentions to encapsulate practical engagement with physical objects and other people (Heidegger, 1962; Turner, 2012).

Certainly, the research findings reveal older adults who are actively engaged in learning and executing food-related skills for application in their physical and social worlds. For example, they learn new cooking techniques, travel to buy preferred ingredients, cook meals for themselves and others, stock their pantries, and clean their kitchens. In this sense, cooking quite clearly represents a form of “active engagement” for the older adults with their surrounding material environment (Erich, Yngve, & Wahlqvist, 2012). The phenomenological notion of ‘taking care’ (*Sorge*) is also relevant to these activities, because it denotes a form of engagement in which humans take care of their material and social environments (Baars, 2012a). Heidegger identified two kinds of existential care: ‘intervening’ takes place in the present, while ‘anticipating’ is concerned with the future (Csordas, 2012; Heidegger, 1962). From this perspective, the older adults can be viewed as intervening in their present food-related lives, via such day-to-day actions as cooking meals and maintaining eating routines. As well, they are anticipating their future eating lives, for example by growing vegetables and preserving food for eating in forthcoming months or years.

Besides ‘tarrying’, the notion of intentionality also incorporates another, less physically active but no less important element – a mood of curiosity and interest which in phenomenological terms is viewed as a sort of ‘going-out’ to the world (Csordas, 2012; Simonsen, 2013). This outward orientation is not an unthinking tropism – that is, a reflexive orientation determined by biology similar to how a sunflower turns towards the sun – but instead, it is a tropism that is related to a vitality that is inherent to human ‘being’ (Csordas, 2012). Phenomenological philosopher Maurice Merleau-Ponty (1945/2012) argued that intentionality contains an important element of interrogation, which he saw as a questioning sort of attitude that is motivated by a broader concern for one’s being and therefore inspires questions about whether and how one is to live (Csordas, 2012).

Again, the research findings resonate with these phenomenological perspectives. They reveal older adults who are energetically engaged in the world and food, such that they are 'going-out' to meet them, sometimes in the face of significant physical limitations. This is evident in their curiosity about new foods and cuisines, their spirited opinions on particular foods, and their reluctance to tolerate disappointing food from restaurants and delivered meal services. For these older adults, there is no sense that ageing entails a diminished or passive engagement with food or indeed with their lives in a more general sense. The findings are also consistent with social gerontological research with older women in the United Kingdom, which found that older women's engagement with food preparation was characterised by active management and "dynamic adaptability" rather than passive withdrawal (Lane, et al., 2013, p. 1). Despite their increasing frailty, the women maintained the elements of food preparation and meals that were most meaningful to them (Lane, et al., 2013, p. 1).

Phenomenological views of the human body also provide a useful perspective for interpreting the findings on the subjective dimensions of older adults' lifeworlds. As detailed in Chapter Three, phenomenologists view 'being' as profoundly embodied, such that the body is not merely the means through which humans perceive the world, but embodiment is considered to be a necessary condition of human existence. Accordingly, Merleau-Ponty contended that "the body is our general means of having a world" (1945/2012, p. 147) and ethnographic phenomenologist Thomas Csordas similarly saw human embodiment as "the essential ground of existence and experience" (2012, p. 60).

Bodily realities of ageing have certainly intruded into the lives of the older adults. Coping with chronic diseases and physical limitations provides them with daily reminders of the bodily nature of their existence. These reminders come in a range of forms, including taking several different medications every day, managing their diets to comply with medical advice, and pacing themselves through the day in order to complete food-related tasks and other essential activities. At the same time, for some of the older adults, the embodied reality of their lives also appears to provide a source of reassurance and support in their ageing. For example, Mrs Parker has very low vision but she walks regularly as an explicit means of coping with grief, and Mrs Brown has heart disease, type 2 diabetes, and a painful back condition, but she still does daily exercises while seated in her favourite armchair.

Phenomenological perspectives on the human drive to persist with life helps to illuminate the determination and commitment of the older adults. Built on concepts developed by the Ancient Greek philosopher Aristotle, these ideas were later progressed by the French philosopher Jean-Paul Sartre, who used the term *conatus* to refer to the human drive to persevere with one's own 'being' (Millett, 2011; Noble, 2004). This survival strategy calls on human beings to understand the situation they find themselves in and to master their own capacities: "we strive in this way so as to achieve a greater understanding of the world, to control our passions and importantly, to ensure that we live securely and healthily" (Noble, 2004, p. 236).

Viewed through this phenomenological lens, the older adults' day-to-day food-related activities, including the sometimes mundane tasks of shopping for food and cooking meals, can actually be seen as quite profound strategies of survival. Importantly, these strategies not only ensure the older adults' basic physical existence by supporting their acquisition and consumption of adequate food, but they also help to secure the older adults' presence in personally meaningful lifeworlds. Through setting and striving to meet personal standards in relation to food, meals, and eating, the older adults continually shore up a sense of themselves as capable actors in a basically coherent and somewhat manageable world. Hence, when Mr Mitchell makes time to set the table before a visitor comes to eat, and Mrs Hughes cooks herself a meal irrespective of whether or not she feels like it, these older adults are feeding themselves and others, but perhaps more significantly, they are also engaging in acts which support their own 'being' in old age.

Ethnographic perspectives on older adults' food and eating are also valuable for interpreting these findings. Like phenomenology, ethnography also views seemingly mundane activities as having considerable meaning, enabling humans to shore up their personal identities. As canvassed in Chapter One, some ethnographers see food-related activities like eating and cooking as highly influential in shaping and maintaining personal identities (Belasco, 2008; Fischler, 1988; Lupton, 1996; Mintz, 1996).

In particular, ethnographic research with older men attending a diabetes clinic in the United States found that one older man continued to prepare and eat indulgent meals because food was essential to his basic sense of self: "preparing the meal, seeing and eating the meal, he

comes into contact with who he was, who he is, and who he wants to be” (Ferzacca, 2004, p. 58). These findings help to illuminate the research findings about Mr Garner. His intense engagement with food, cooking, and eating is reflected in his deep, almost lifelong, commitment to learning about, cooking, and eating new and interesting food. When Mr Garner’s love of exotic food is interpreted as being crucial to his ongoing sense of self, then his statement, as quoted in Chapter Four, that he might end his life rather than eat delivered meals, appears less melodramatic and more revelatory as to what motivates Mr Garner to persevere with his own ‘being’.

### **8.3.4 Resilience**

Perspectives on vulnerability and resilience from social gerontology are particularly relevant to the findings detailed in Chapter Four. Although the concept of resilience was originally developed in relation to children and conceived as a largely fixed personality characteristic, in more recent times it has also been applied to older adults, and viewed as a dynamic and unfolding phenomenon that is grounded in contextual environments (Wiles, Wild, Kerse, & Allen, 2012). Focusing on resilience is especially useful in gerontological research because it draws attention to the small, daily acts which older adults perform, and which constitute “the ‘ordinary’ magic of human adaptation” (Wiles, Wild, et al., 2012, p. 5).

Experiences of vulnerability are significant for all older adults, but perhaps especially so for those living independently in the community rather than in residential care (Wiles, Wild, et al., 2012). Some gerontologists see vulnerability and its associated need for care as being profoundly undesirable and damaging to older adults (Schroder-Butterfill & Marianti, 2006a; Schroder-Butterfill & Marianti, 2006b).

However, another more optimistic perspective on vulnerability is more relevant to the findings detailed in Chapter Four. Vulnerability can be viewed as a state which opens up possibilities for older adults to enact resilient strategies and engage in deepened relationships of care with others (Wiles, Wild, et al., 2012). Qualitative research with older adults in New Zealand found that while resilience is shaped by external resources, older adults view resilience as also being enacted via highly individual strategies, labelled as “having a good attitude”, “counting one’s blessings”, and “maintaining a sense of purpose” (Wiles, Wild, et al., 2012, pp. 418-419).

Similarly, other ethnographic research into experiences of frailty found that enacting daily routines, such as eating meals and calling friends at particular times, helps older adults to ground themselves in the present and maintain social relationships (Nicholson, Meyer, Flatley, & Holman, 2013). Viewed from this perspective, seemingly minor routines – such as Mrs Hughes enjoying a glass of wine at five o'clock, Miss Roberts speaking on the phone to a close friend every day, and Mrs Knight eating at her local Chinese restaurant every Thursday at lunchtime – can be interpreted as strategies of coherence and resilience.

In another study of resilience, Swedish older adults employed various strategies to shore up their sense of control and independence. These were described as (a) “continuing to struggle and keep busy”, (b) “adapting to circumstances”, (c) “getting help from several sources”, (d) “receiving and giving services in return”, and (e) “surrendering responsibility” (Duner & Nordstrom, 2005, p. 440). Certainly, the older Tasmanians in this research have employed all five of these strategies at various times in response to different challenges: (a) Mrs Parker, Mrs Knight, and Mrs Hughes focus on keeping busy; (b) Miss Roberts has adapted to not owning a car by asking her friends to buy her fresh food; (c) Mrs Andrews and Mrs Brown accepted delivered meals and help from their family while recovering from operations; (d) Mrs Johnson exchanges food and meals with neighbours and family members; and (e) Mrs Noonan has happily surrendered responsibility for cooking after many years of cooking for her husband.

Importantly, resilience in the face of uncertainty or vulnerability can be enacted by older adults at both emotional and practical levels. Ethnographic observations of older women's daily lives in rural Finland informed an argument that quiet endurance, expressed through a daily commitment to getting through the day, is a form of resilience that deserves to sit alongside more action-oriented strategies (Honkasalo, 2008). From this perspective, acceptance and endurance can be viewed as important components of a nuanced and flexible form of resilience, which is accumulated throughout older adults' lives and entails ongoing adaptation in relation to their relationships with other people and places (Wiles, 2011; Wiles, Wild, et al., 2012).

This perspective provides insights into the findings detailed in Chapter Four. Certainly, of all the older adults' various actions aimed at keeping going with life and food, meals, and eating,

not all are outwardly impressive – but they are no less meaningful for it. For example, Mrs Brown washes her dishes in short sessions throughout the day in order to cope with back pain, and Mrs Roberts studies supermarket catalogues for food specials so she can stretch her small food budget further. Engaging in these strategies, these older adults are behaving in a resilient manner which achieves food-related ends. Importantly, these actions also shore up their capacity to cope with life's contingencies such as medical conditions or financial constraints.

## **8.4 Intersubjective dimensions of older adults' lifeworlds**

### **8.4.1 Overview**

The following section explores older adults' experiences of food, meals, and eating in relation to intersubjective dimensions of their lifeworlds. These findings are interpreted with reference to two perspectives from social sciences: phenomenological perspectives, which hold that other people are profoundly significant in human lives, and ethnographic perspectives, which examine how food informs and maintains humans' social roles and relationships.

### **8.4.2 The primacy of human relationships**

The interviews and home visits provided numerous insights into older adults' past and present relationships which are quite closely interwoven with their experiences of food, meals, and eating. Asking older adults about their experiences of food revealed that older adults' day-to-day lives are carried out in relationship with other human beings. Sometimes, these relationships are with people who live far away, but their crucial role in older adults' eating lives was nevertheless apparent. These findings emphasise that human lives – and thus experiences of food, meals, and eating – are inextricably woven with relationships with other humans, regardless of a person's age.

Originally, philosophers' phenomenological perspectives on social relationships were not developed in reference to experiences of food, meals, and eating. But these perspectives do in fact provide useful insights into why human beings' experiences of food are always populated by other human beings. Heidegger (1962) argued that because human beings are 'thrown' into a pre-established world that is already populated by others, human existence

can only be understood in reference to relationships with other human beings (Turner, 2012). From this perspective, human beings are not solitary agents who act separately within their social worlds. Instead, encounters with others constantly inform experiences in human lives. The primary point is not just that human beings are pragmatically reliant on others for shelter, food and security; rather that human existence is primarily and utterly reliant upon a basic acknowledgment and understanding of other human beings (Turner, 2012).

These Heideggerian theories of intersubjectivity were extended by Alfred Schutz's phenomenological sociology, which was concerned with how humans live in interactional involvement with others, thereby forming complex webs of social relationships (Schutz, 1973). Schutz' theories were also informed by Max Weber's view that humans have a basic ability to understand the meaningful conduct of other people (*Verstehen*) – that is, all human action is meaningfully directed outwards and therefore this meaning is graspable by others (Wagner 1970). Similarly, Merleau-Ponty's concept of embodied sociality argued that, because human bodies can be viewed by others, they are essentially public and therefore human existence is inherently social in nature (Merleau-Ponty, 1945/2012; Romdenh-Romluc, 2011). Hence, for phenomenologists, human beings are inherently social beings.

The profound importance of relationships for human lives – and their intimate intertwining with food – was reflected in some of the interviews, in which older adults segued from talking about food to talk about relationships, or segued from talking about relationships to talk about food. It was as though the two topics were somehow inseparable in the older adults' minds. For example, in one breath, Mrs Andrews spoke about her mother's cooking and her emotional place within her family; and Mrs O'Brien began talking about her childhood experiences of family, but ended by talking about her dislike of parsnips.

These 'slippages' between food and family are remarkably similar to those observed in several other ethnographies of food. These have also noted that, when people were asked about relationships and identities, they often spoke about food; and conversely, when they were asked about food, they often spoke about relationships and social identities (Burgoyne & Clarke, 1983; Nettleton & Uprichard, 2011; Probyn, 2000). Similarly, in research into older Australians' experiences of food, researchers have noted that up to one quarter of each interview transcript was made up of data about family relationships, even though the older

adults had not been asked about their families, suggesting that familial relationships are significant for older adults' food-related experiences, strategies, and activities (Radermacher, Feldman, Lorains, & Bird, 2010).

#### **8.4.3 Enduring and responsive relationships and social roles**

The research findings also reveal older adults who are engaged in a large variety of social relationships and roles that are enacted, at least in part, through food-related activities. These older adults have valued social roles as mothers, grandmothers, fathers, grandfathers, wives, husbands, sisters, brothers, aunts, uncles, lifelong friends, neighbours, community leaders, volunteers, and acquaintances. On a daily basis, the older adults' engagement with food naturally intertwines with their varied social roles and relationships, such as when Mr Frith visits his grandson at the café where he works, Mrs Langridge cooks a meal for her husband while she is recovering from foot surgery, and Mr Mitchell buys extra milk and juice when his sons come home from boarding school.

These findings are consistent with anthropological research which has found that, across a wide range of cultures, food preparation and provisioning activities give human beings valuable opportunities to express and confirm their social roles. Social anthropologist Anne Murcott's research interviews with married women in Wales found that a cooked meal had a particular resonance within marriage – it “symbolises the home, a husband's relation to it, his wife's place in it and their relationship to one another” (Murcott, 1983, p. 179). Viewed from this perspective, Mrs Noonan's willingness to risk social disapproval – by skipping church on Sundays in order to cook for her husband – can be seen as a quietly determined affirmation of the importance of her marriage and social role as a wife.

Ethnographic perspectives view mothering as a particularly influential social role for experiences of food, meals, and eating. Across a range of cultures, anthropologists have observed enduring conceptual connections between acts of sharing food and expressing love, particularly between mothers and babies, and parents and children (Lupton, 1994). Similarly, De Vault's ethnographic research with families in the United Kingdom found that meal preparation is an inherently relational activity, such that women's decisions about what to cook, how to cook, and when to cook are heavily informed by negotiations around family members' varying food preferences and tastes (DeVault, 1991). Viewed from this perspective,

when Mrs Andrews thoughtfully serves each of her adult sons their preferred vegetables with the Sunday roast, her behaviour can be viewed as a loving act which evokes the maternal care and attention she extended to them when they were children.

Enduring desires to cook and feed others into old age was also found in another ethnographic study of older women living in rural Australia (Walker-Birckhead, 1985). Although these women no longer had children living at home and were mostly widowed, they were observed spending a great deal of time on food-related activities including shopping, cooking, eating, and talking about food. For these women, their extensive engagement with food was highly supportive of their sense of themselves as feeders and nurturers of others, sometimes decades after the end of their active mothering days:

For these women, food continues to be an idiom for expressing relationships and their identities as competent and nurturant women. The food domain provides them with ways to nurture themselves literally and symbolically, directly and indirectly. As a consequence, feminine identity remains resilient and meaningful in old age (Walker-Birckhead, 1985, p. 112).

Similarly, some ethnographic research conducted in northern Europe also found that food plays an important role in women's gendered identities as givers and nurturers. For these women, a meal is a gift for others, and as such, cooking is a social duty imbued with loving generosity (Sidenvall, et al., 2000). Research with older Swedish women found that those who were no longer able to perform their traditional food preparation roles due to illness or disability developed feelings of loss, guilt, and shame that arose from the diminishment of their everyday social role as a giving person (Gustafsson, et al., 2003). Hence, from this perspective, when Mrs Brown cooks lunch during her home visits, she is feeding us both, but she is also confirming to herself and to me that her social role as a nurturant feeder of others has endured into old age, regardless of her significant physical limitations.

However, the older adults do not just carry out enduring social roles; they have also developed new food-related social roles in response to sometimes sudden changes in their social worlds. For example, during his time as a married man, Mr Frith never cooked meals. But after his wife died unexpectedly he took up cooking for himself and has, over time,

developed quite a large repertoire of recipes. Likewise, when Mrs Parker's children were young she cooked them many meals, but these days she enjoys being fed and nurtured by her daughter when Mrs Parker visits her interstate home.

Phenomenological perspectives on intersubjectivity or *Verstehen* provide insights into how social relationships and roles can respond to changes in human lives. Intersubjectivity is viewed as an active and ongoing process rather than a static and permanently secured achievement. As Pagis stated (2010, p. 314), "it is a complex experience cultivated in the micro levels of existence, from social interactions to individuals' minds. It is, therefore, a process requiring constant production and maintenance, in which a constant dialectic between self and other takes place". Hence, phenomenology contends that human beings do not maintain fixed social roles over their lifetimes, but instead make ongoing negotiations and adjustments to these roles in response to shifts in their understandings of each other's intentions and actions. Human beings are inherently dynamic because of this intersubjectivity:

We are, therefore, not stable or set pieces, with established and immutable essences, destinies, or identities; we are constantly changing, formed and reformed, in the course of our relationships with others and our struggle for whatever helps us sustain and find fulfilment in life (Jackson, 2013, p. 5).

Hence, the older adults' valued relationships and social roles, as well as their expression of these roles via food-related activities, can somewhat paradoxically be seen as both enduring *and* responsive in old age. These older adults continue to seek experiences that are sustaining and fulfilling, both literally in terms of food, and metaphorically in terms of the multiple social meanings that life holds.

## **8.5 Place dimensions of older adults' lifeworlds**

### **8.5.1 Overview**

The research findings in Chapter Six reveal that older adults' engagement with various places, including their home environments, the rural places where they live, and the sometimes distant places they visit or remember, are closely interwoven with their experiences of food,

meals, and eating. Perspectives from social gerontology, phenomenology, and geography help to illuminate these findings and emphasize the profound meanings of homes and other places for human lives in general and older adults' lives in particular.

### **8.5.2 Ageing and eating at home**

The findings reveal that many of the older adults deeply appreciate and value their home environments as sites of belonging, safety, and security. Indeed, some of the older adults appear to actually revel in the opportunities presented by older age to stay closer to home. For example, Mrs Brown breathes a sigh of relief when she catches a glimpse of her home in the distance as she travels back from her fortnightly food shopping trip into town, and Mr Quinn looks over his fence at the surrounding paddocks and cannot imagine ever wanting to live anywhere else.

These findings resonate with gerontological research that is concerned with how older adults form meaningful attachments to their homes over time, a process the phenomenological geographer Yi-Fu Tuan termed “the steady accretion of sentiment over the years” (1977, p. 33). In a qualitative study in New Zealand, older adults saw their homes as places of refuge, providing experiences of familiarity, safety, and security that support their personal autonomy and independence while they are ageing (Wiles, Leibing, et al., 2012). Similarly, another study with older women in northern Italy found that their kitchens had increasingly become the centre of their homes, permeating a sense of security that was generated through the rhythmical preparation and consumption of meals. Accordingly, the study's authors concluded that home had become “the emotional centre of women's lives. It is a territory of meaning...” (Cristoforetti, Gennai, & Rodeschini, 2011, pp. 227-228).

Phenomenology is also deeply engaged with questions of how human beings live – or in its terminology, ‘dwell’ – in the world, including in their homes. This interest in place is informed by Heidegger's view of human ‘thrownness’ (*Geworfenheit*), in which humans are thrown into a pre-existing, rich and complex social and material world. Indeed, much of Heidegger's late work was concerned with philosophical notions of dwelling and homelessness (Todres & Galvin, 2010; Young, 2000). Phenomenologists view immersion in the surrounding world, what Heidegger termed ‘being-in-the-world’, as inherent to the human condition and thus inescapable (Malpas, 2012). ‘Dwelling’ is an essential element of each person's humanity; as

Heidegger says, “to be a human being means to be on the earth as a mortal. It means to dwell” (Heidegger, 1971a, p. 147).

However, the research findings reveal that the older adults’ engagement with their home environments is not quite as passive as might be suggested by the verb ‘to dwell’. As well as having a strong sentimental attachment to their homes, the older adults also invest considerable time, energy, and sometimes financial resources, in maintaining and cultivating their home environments. For example, Mrs Parker regularly dusts her window ledges even though she cannot see the dust because she has very low vision, and Mrs Brown has recently purchased both a substantial fence for her property and a large pile of mulch for her garden. These older adults’ care and concern also extends to the food they grow and prepare, as well as the meals they eat at home. This is evidenced by their frequently tidy and clean kitchens, generously stocked pantries and freezers, and kitchens that are well equipped with useful tools for cooking.

These findings accord with phenomenology’s view of human engagement with the world as inherently practical in nature, such that self and place are interconnected through work-like practices (Casey, 2001). In Heidegger’s essay *Building Dwelling Thinking*, the metaphorical notion of ‘being at home’ in the world is not just informed by sentiment but also has a highly practical element, too (Heidegger, 1971a). For humans, the experience of ‘being at home’ entails “having practical knowledge of the situation and knowing how to act” (2011, p. 294). This metaphorical notion of ‘being at home’ or ‘dwelling’ can be applied to human beings’ actual experiences of their home environments, thus revealing that their homes are similarly infused with practical action. Jacobson (2009, p. 362) writes:

We are not simply given a home and all that it entails. We are *responsible* for making our home, for making ourselves at home and this is something we must learn how to do, and that we learn to do with and through other persons. ... Though it is a passive dimension of our experience, home is an accomplishment – that is, it is dependent upon our action.

Viewed from this perspective, the older adults who are less mobile than others can be considered less sympathetically as unfortunately ‘homebound’ and more optimistically as still able to engage in practical home-based activities that support day-to-day meaning and eating.

In their homes, these older adults continue to engage in meaningful and nourishing food-related activities, including growing bumper crops of fruit, vegetables and herbs; preserving food and baking cakes; and cooking meals for themselves and others.

As well as continuing to be practically engaged with life, some of the older adults in the research appear to appreciate the chance to stay home and engage with their immediate surroundings. This resonates with phenomenological research into meanings of mobility and dwelling, which found older adults had developed a particularly settled sense of being at home, which prioritised their sensory enjoyment of rural landscapes over and above their physical mobility (Todres & Galvin, 2012). Hence, the restrictions on Mrs Brown's mobility arising from her physical limitations can be seen – as indeed they are by Mrs Brown herself – as providing her with valuable opportunities for taking sensory pleasure in her beloved farmland and dairy cows.

The findings detailed in Chapter Six also reveal how some of the older adults employ strategies to continue to engage social and geographical worlds beyond their homes. For example, Mr Frith engages with his interstate grandchildren via Facebook and email, Mrs Brown calls her friends on the telephone because she can no longer drive to visit them, Mr Garner uses the internet to research Japanese train timetables for a forthcoming trip, and Mrs Hughes watches televised soccer matches from her birth country of England.

These findings resonate with those of seminal social gerontological research conducted in the 1970s with seemingly isolated older adults, which found that instead of being 'prisoners of space' these older adults were actually engaged in 'beyond spaces' which extended beyond the limits of their home environments (Rowles, 1978). More recently, other gerontological research has also found that many older adults continue to be mentally and emotionally active in spaces beyond their homes, even when they are no longer able to be physically engaged in the wider world (Wiles et al., 2009).

### **8.5.3 Ageing and eating in rural places**

The findings in Chapter Six also reveal that many of the older adults are significantly engaged with the rural places where they live. This is evidenced by their participation in social and community activities in their towns and surrounding areas, including: playing bowls and

Scrabble in local competitions; participating in local organisations such as charitable groups, Freemasons' Lodges, and churches; engaging with community issues in their towns; and staying in touch with their neighbours and local traders. The extent of older adults' engagement with their places of residence was also apparent in many of their food-related activities, including shopping for food in their town's main street, eating out in local cafés and restaurants, and sharing meals and home grown produce with their neighbours.

The research did not explore whether the older adults' attachments to places had changed over time, and as such, the findings neither support nor challenge the widely held view within social gerontology that older adults' attachment to places strengthens as they age (Wiles, et al., 2009). However, the findings in Chapter Six *do* support the view that the older adults' engagement with rural places and 'beyond spaces' provides them with positive experiences of food plus an important sense of meaning in their day-to-day lives, both of which are important resources for maintaining health and wellbeing while 'ageing in place' (Wiles, Leibing, et al., 2012).

#### **8.5.4 Ageing and eating in distant places**

The findings in Chapter Six reveal that many of the older adults have travelled, and indeed many still do travel, considerable distances on local, state-wide, interstate, and international scales. Migration and travel has exposed these older adults to new food experiences which shape their food preferences and values, and inspires new cooking techniques and cuisines. As well as influencing the meals they eat at home, the mobility of some of these older adults also means that they eat quite a few of their meals in places distant from and quite different to their home environments. With friends and relatives living in other places, these older adults' engagement with places is not restricted to their immediate home environments or their local towns. As such, their communities and sites of meaning – which support their eating and their overall sense of security – are dispersed across a wide geographical area.

The "new mobilities paradigm" within social science helps to shed light on the multiplicity of ways in which extensive and interwoven movements of people, goods, and information effectively shape many aspects of human lives, including older adults' experiences of food, meals, and eating (Sheller & Urry, 2006, p. 207). The research detailed in this thesis found that heightened mobilities shape the eating lives of rural older adults. These findings support

emerging critiques of research which conceptualises rural places as homogenous, geographically remote, socially isolated, and culturally static sites (Milbourne & Kitchen, 2014).

## **8.6 Temporal dimensions of older adults' lifeworlds**

### **8.6.1 Overview**

The findings detailed in Chapter Seven share a common thread. In different ways, they all emphasise the significance of time in human lives, and reveal how the passage of time shapes older adults' values, strategies, and actions in relation to food, meals, and eating. Many of the stories told by the older adults were permeated with notions of time – whether in terms of quotidian, day-to-day matters and activities or the grand sweep of each older adult's life from childhood to old age.

### **8.6.2 The flow of time**

These findings shore up theoretical notions advanced in phenomenology about the profound role of time in human lives. Indeed, in *Being and Time* (1926), Heidegger argued that human life cannot be understood without reference to its temporal nature – that is, life spans across time from birth to death (Baars, 2012b; Heidegger, 1962; Turner, 2012). Social gerontologist Jan Baars (2012a, p. 228) has argued that for human beings, “the present has deep temporal layers that are filled with references to the past and anticipations of the future”. Similarly, for ethnographic phenomenologists Desjarlais and Throop (2011, p. 88), human existence is “temporally structured in such a way that our past experience is always retained in a present moment that is feeding forward to anticipate future horizons of experience”.

Social gerontologists have acknowledged the significance of time in experiences of ageing by applying perspectives from narrative theory in their research, emphasising the hermeneutic and interdisciplinary nature of autobiographical stories told by participants during interviews (Andrews, Kearns, Kontos, & Wilson, 2006; Baars, 2012b; Phoenix & Sparkes, 2009; Randall, 2013). In relation to food, two ethnographers have theorised that human beings make sense of the relationship between food and time by weaving together memories of food with recollections of lifecourse events and relationships, thereby forming “food narratives” (Nettleton & Uprichard, 2011, p. 1360). Such food narratives were regularly told by the older

adults. For example, Mr Quinn recalled being sent to bed by his parents without any dinner if he was “a naughty boy”, Mrs Andrews remembered baking birthday cakes for her children many decades earlier, and Mr Garner cheerfully recounted a detailed anecdote about suffering food poisoning in India. For the older adults, these stories were of course about the food they have eaten, missed out on, or cooked for others – but these stories were also inseparably about the interesting lives each of them has lived.

### **8.6.3 Enduring food values**

The findings in Chapter Seven also add to an established body of research within social gerontology which treats old age as a lifelong process rather than a discrete, stand-alone experience that only takes place at the end of life. This perspective is informed by the interrelated theoretical frameworks of life course theory and phenomenologically-inspired sociological perspectives on human lives, which are discussed below.

The life course perspective contains five theories which each emphasise the significance of time in human lives: (a) ageing is a life-long process rather than a phenomenon that occurs toward the end of life, (b) human lives are closely linked to others through social networks, (c) the timing of transitional events in human lives is significant, (d) the historical time and place that each person lives in shapes their life, and (e) humans have a degree of personal agency to determine the nature of their own lifecourse (Phillips, Ajrouch, & Hillcoat-Nalletamby, 2010).

Taking up the fourth element for further discussion, the research findings do support the life course theory that human lives are shaped by the historical time and place in which they are located. The older adults’ vivid memories of food and eating as children, and the strategies their families employed to obtain food, have informed their current values for living life and eating well in old age. They grew up in an uncertain and resource-constrained time for society and many also experienced considerable poverty and personal challenges within their own families. During those times, the safety and security of their lives, and even their food supplies, were often quite uncertain. In the present, these older adults almost universally enact, or at least espouse, enduring values which inform their approaches to food and eating – resourcefulness and frugality, being moderate and managing money well, investing effort in obtaining food, and pursuing variety and enjoyment in their eating.

Social gerontologist Vern Bengtson labels this concept the “cohort effect”, arguing that:

Birth cohorts share a social and cultural history, experiencing events and cultural moods when they are at the same stage of life. Characteristics of a birth cohort and events that the cohort experiences combine to affect members in distinctive ways, influencing their attitudes, behaviours, and outcomes across the entire lifecourse (Bengtson, Elder, & Putney, 2005, p. 495).

Although not specifically directed towards food, social gerontological perspectives on the role of values in shaping older adults’ lives are also relevant to these theories. Values can be understood as securitising constructs which give direction, provide guidelines, and set standards for an older adult’s day-to-day choices and actions (Kaufman, 1986). Importantly, the enactment of values plays an important social role for humans, as it conveys their conformity to shared values. As such, values “...clearly fix the individual in a historical-cultural cohort...” (Kaufman, 1986, p. 114). Hence, when Mrs Knight saves used envelopes for later re-use and never throws out food, she is confirming to herself and those around her that she values thrift and eschews waste, just as she did in her younger days as a rural nurse and dairy farmer.

Two European studies have also found that older adults’ current actions and attributes were shaped by childhood experiences. A study of 644 older Europeans found that their current food habits and activities were informed by childhood experiences of constrained food resources and engaging in considerable foodwork such as hunting, growing food, and preserving food (Sydner, Sidenvall, Fjellstrom, Raats, & Lumbers, 2007). Another European study resonates with the findings detailed in this thesis, even though its findings were not focused on food (Sixsmith, Sixsmith, Callender, & Corr, 2013). This study found that older adults’ past experiences of World War II informed their current values and aptitudes which were supportive of ageing well, including their financial management skills, resilience, adaptability, and independent living skills (Sixsmith, et al., 2013).

According to the life course perspective, trajectories – defined as each person’s feelings, strategies, and actions that persist over time – work to shape food choices in life. In this view, a human being’s past is highly influential for their present eating behaviour, such that “each

time they choose food, people bring their past food choices, events, and experiences to the table" (Devine, 2005, p. 121). The research findings supported this claim. Each time that an older adult refuses to eat a particular food because they were made to eat it during childhood [Mr Frith, Mrs Court, Mrs Hughes] or they cook dishes inspired by overseas trips they took decades earlier [Mr Garner, Mrs Johnson], it was apparent that preferences, happenings, and experiences of the past naturally project forwards in time to inform experiences of food in the present.

Although socio-historical timing is influential in shaping food values and actions, the research findings reveal that idiosyncratic elements are at work in human lives, too. These elements are characterised by personally unique experiences and biographies, which have informed older adults' approaches to food. For example, Mrs Hughes says she was a finicky eater as a child and she may well have continued to be so into old age, except that she married a man who spent part of his childhood in Argentina and he encouraged her to try different tastes and cuisines. Mrs Johnson's taste for Asian cuisine was shaped by two events in her life – a long overland trip she and her husband took through Asia, and her son's marriage to a woman born in Thailand. But perhaps Mr Mitchell provides the most striking example of unique life events shaping an older adult's food and eating. After being widowed, he married for a second time and fathered two more children when he was aged in his sixties. Now aged in his seventies, he is widowed again, and, unlike most others in his age cohort, he still needs to shop for food and cook meals for his teenage sons when they visit from boarding school.

These findings are highly consistent with the theories of phenomenological sociologist Alfred Schutz, although these were not directed towards experiences of food in particular (Schutz & Wagner, 1970). Schutz saw a person's life situation as an episode that was entirely embedded in an ongoing life, such that, "he stands in it, having gone through the long chain of his prior life experience" (Wagner, 1970, p. 15). Schutz's theory has two important implications. Firstly, these links across time imply that past experiences necessarily inform present experiences, and secondly, in each human life, the pattern and sequence of these links is unique, so that at any particular time, a human being finds themselves to be in a "biographically determined situation" (Schutz, 1973, p. 243).

#### 8.6.4 Using time well

The interviews and home visits revealed that the older adults employ several shared strategies, albeit coloured by their own temperaments and living arrangements, which are directed towards managing their lives and eating well in the present. These include 'employing the rhythms of time' through daily and weekly routines, 'using time well' by keeping themselves busy, and 'not acting their chronological age'.

The first of these strategies, 'employing the rhythms of time', entails developing daily or weekly routines for living, cooking, and eating. Phenomenology identifies the importance of routines in human lives. German historian and philosopher Wilhelm Dilthey (1833 – 1911) applied phenomenological concepts to the notion of time, using the German term *Erfahrung* which literally translates as 'experience', to refer to the "quotidian unfolding of life's routines" (Willen & Seeman, 2012, p. 4). There is not a great deal of empirical research into the implicit meanings of eating routines for human beings. Researchers have found that eating practices are embedded within lives as a whole, and eating routines are informed by a human being's need for predictability and stability in life (Jastran, Bisogni, Sobal, Blake, & Devine, 2009). In relation to older adults, a mixed methods study of meal patterns among rural older adults found that preparing and eating cooked meals provided them with a valuable sense of regularity and rhythm (Quandt, Vitolins, DeWalt, & Roos, 1997).

The second common strategy employed by the older adults is 'using time well' by keeping themselves busy. However, the underlying reasons for keeping busy vary somewhat between the older adults. For example, widowed and with low vision, Mrs Parker keeps busy with housework, walking, and cooking herself good meals so as to make time go faster. Mr Garner is constantly occupied because there is so much he wants to achieve and eat, Mr Frith spends quite a bit of time staying in touch with his large networks of family and friends, and Mr Mitchell's days are full with tasks directed towards improving and maintaining his historic home, garden, and farm. There is very little published research on why and in what specific ways older adults keep busy with their own personal projects. The exception is a large body of research informed by notions of 'productive ageing' which investigates older adults' engagement in voluntary work, care of grandchildren, education, and paid work, but it does

not engage with older adults' day-to-day activities such as food shopping and cooking (Morrow-Howell & Mui, 2013).

The third temporal strategy employed by the older adults is 'not acting your chronological age'. For some of the older adults, this strategy appears to be a form of resistance to prevailing social views about how older people should look, function, and behave. It is a fundamentally positive strategy which stands in opposition to the gloomy dictates that ageing entails ever-encroaching personal negativity, resignation, acquiescence and withdrawal. For example, Mrs Parker's enjoyment of spicy food is not merely a product of her physiological make-up or her childhood eating experiences. Rather, it is one element in an actively enacted strategy to dress, talk, and eat in a manner that situates herself outside her own chronological age bracket. These findings echo those of recent qualitative research into representations of old age. This research found that older women unanimously rejected views of themselves as dependent, fragile, or socially isolated (Quéniart and Charpentier, 2012).

#### **8.6.5 Living well into the future**

The research findings reveal that the older adults – as well as being shaped by their pasts and living in the present – are also quite clearly oriented toward their own futures. Many of them engage both pragmatically and emotionally with their futures, employing two future-directed strategies of 'eating for a healthy future' and 'keeping going'. These findings go some way towards balancing out social gerontology's prevailing concern with the importance of childhood experiences and reminiscence for older adults' lives, perhaps at the expense of fully acknowledging older adults' continued engagement with their future lives (Baars, 2012).

The findings pertaining to the older adults 'eating for a healthy future' build upon research findings elsewhere. Although older adults may have variable levels of nutrition knowledge, they are often found to be highly motivated to eat healthily, which is informed by a desire to protect their independence into the future (Brownie and Coutts, 2013; Lundkvist et al., 2010). The individualistic flavour of healthy eating messages have been criticised as potentially shaming for older adults who become unwell in later life (Fjellstrom & Sydner, 2013). However, the impression gleaned from the research was that the older adults generally saw healthy eating strategies as inspiring and empowering, allowing them to maintain some degree of perceived control over their health trajectories.

Key elements of this strategy of ‘keeping going’ have also been identified in other qualitative research into ageing experiences. For example, one study with older adults in England found that they praised other older adults for working hard, continuing with physical activities in the face of medical conditions, and remaining cheerful in the face of adversity – and they censured those who gave up (Townsend, Godfrey and Denby, 2006). Researchers have also found that the specific ageing strategy of ‘keeping going’ is also enacted by older adults experiencing chronic health conditions, including joint pain (Richardson, Grime, & Ong, 2013).

As well as these social gerontological perspectives, interpretative phenomenology usefully acknowledges the importance of the past but underlines the primacy of the future in human lives. Heidegger saw human existence as “being-ahead-of-oneself” – that is, always and inevitably moving into the future and its possibilities (Heidegger, 1962). Phenomenological philosopher Backman concurred:

Human being is essentially ahead of itself, futural – life is lived ahead, life always gains present sense or meaning from the future, from the possibilities and goal at which it is oriented, and sees its past, its already-being-lived as meaningful through the possibilities it opens up for the future (2005, p. 244).

The findings detailed in Chapter Seven that the flow of time infuses older adults’ lives echoes the findings of an interpretative phenomenological study of eight older women living at home with dementia (De Witt, Ploeg, & Black, 2010). Several temporal meanings were identified in these women’s lives, including two which were future-oriented: “limited time” which reflected their awareness of the proximity of their death; and “dreaded time”, which reflected their fear of becoming dependent on others (De Witt, et al., 2010, p. 1698). These temporal meanings are very similar to those held by many of the older adults in the research in this thesis. Their preparations for their own funerals and dread of entering residential care both reveal their acknowledgement of the limited time left in their lives and the prospect of future dependence on others.

However, the research findings reveal that not all of the older adults’ orientations toward the future are negative in tone. As detailed above, many of them are actively pursuing optimistic strategies for their future eating lives. The hopeful and determined mood with which the

older adults enact their life activities is highly consistent with the work of social gerontologist Jan Baars (2012a). Baars views experiences of ageing as located in the present but primarily oriented toward the future, such that life experiences continue to motivate the achievement of future goals in older adults, even for those who are very old (2012a). Hence, meaning and motivation endures throughout older adults' lives, despite – or perhaps because of – their impending deaths (Baars, 2012a). This view was informed by the philosopher Ernst Bloch (1885 – 1977), who argued that living in time entails constantly encountering new possibilities and challenges, such that human beings never experience life as a meaningless repetition of units of time, regardless of how many years they might live (Baars, 2012a, p. 167).

## **8.7 Circularity of food security and ontological security**

### **8.7.1 Overview**

Sections 8.3 to 8.6 of this chapter interpret older adults' experiences of food, meals, and eating according to four dimensions of the phenomenological lifeworld. The remainder of this chapter engages with the second research question – *How do older adults' experiences of food, meals and eating inform deeper understandings of food security and insecurity in older adults?* Below, theoretical notions of ontological security and insecurity provide an organising principle for weaving together these four sets of findings, thereby forming a unified perspective on the phenomenon of food security and insecurity.

Of course, as with food security, experiences of ontological security or insecurity actually lie on a continuum rather than as two separate and dichotomous states of complete security or complete insecurity (Bondi, 2014). Nevertheless, it is useful to discuss experiences of ontological security and insecurity somewhat separately. In part, this is because security and insecurity are often presented as two distinct phenomena in the research and theoretical literature. The other, more substantial, reason for presenting security and insecurity as separate phenomena is that – somewhat paradoxically – doing so draws attention to the fact that food security and insecurity are mirrored concepts that are inextricably bound together.

It is possible to make a case that older adults' active engagement with food and hence food security is interrelated with ontological security because the two support each other in a carefully balanced circle of reciprocity (Sections 8.7.2 and 8.7.3). In other words, older adults'

food-related values, actions, and experiences support and shape their sense of confidence in their ongoing existence and in the reliability of their surrounding environments. Conversely, older adults' basic confidence in their ongoing existence as human beings and the reliability of their surrounding environments provides vital foundational support for their efforts to attain positive experiences of food and maintain adequate food security.

Subsequently, a mirrored perspective is developed which considers how experiences of ontological insecurity impact on an older adult's sense of themselves and, by inference, their food security (Section 8.7.4). The research did not uncover any experiences of food anxieties, food insecurity, or ontological insecurity in older adults' lives. However, somewhat unexpectedly, the research *did* uncover experiences of risk, anxiety, and ontological insecurity on topics unrelated to food. These were: commonly expressed fears about entering residential aged care, and one older adult's anxieties arising from the threat of a neighbour's dogs intruding into her peaceful home environment. These two examples provide a basis for some speculations about how events or circumstances that diminish or weaken an older adult's ontological security, including those prompted by unmanageable contingencies of ageing, may deepen or intensify their experiences of food insecurity.

### **8.7.2 Elements of ontological security**

Philosophical interest in ontology dates back to the Ancient Greek philosophers who were concerned with questions of 'being' (Craig, 2013). The term 'ontological' relates to the concept of existence, including what it means for something or someone to exist (Craig, 2013). The concept of ontological security was further developed in the 1950s within the field of psychoanalysis, including by the controversial psychiatrist R.D. Laing. He argued that experiences of psychosis and schizophrenia constitute a significant threat to a person's sense of themselves as "a real, alive, whole, and in a temporal sense, continuous person" (Laing, 1959/1965, p. 39).

The sociologist Anthony Giddens (1938 – ) subsequently progressed the concept of ontological security from a sociological perspective, defining it as:

...the confidence that most human beings have in the continuity of their self-identity and in the constancy of the surrounding social and material environments of action. A

sense of the reliability of persons and things, so central to the notion of trust, is basic to feelings of ontological security... (1990, p. 92).

Ontological security is considered crucial to the experience of human existence, which is understood in phenomenological terms as being fully embedded in local contexts or 'being-in-the-world' (Giddens, 1991). This view of ontological security was also informed by the phenomenological method of bracketing which allows the formation of the 'natural attitude' in everyday life, such that certain fundamentals are assumed or taken for granted (Giddens, 1991). As such, ontological security can be viewed as "a basic protective cocoon" that "brackets out potential occurrences which, were the individual seriously to contemplate them, would produce a paralysis of will, or feelings of engulfment" (Giddens, 1991, p. 3).

Experiencing a basic sense of ontological security is important for humans because it generates "that 'leap into faith' which practical engagement demands" (Giddens, 1991, p. 3). Ontological security underpins agency because it "enables and motivates action and choice" such that, if a person is ontologically secure, they know how to be themselves and act in the world (Mitzen, 2006, p. 345). Importantly, ontological awareness is enacted through real-world thought and practical activity (Giddens, 1991). As such, by performing everyday actions of living, humans effectively answer the question of their own 'being' (Giddens, 1991). Although ontological security is achieved in infancy, it is subsequently maintained through life-long engagement in everyday actions (Giddens, 1976). Thus, ontological security is "an active process" (Dillon, 1996, p. 124) and "an ongoing accomplishment" (Giddens, 1976, p. 117).

Routines are considered to be crucial for maintaining ontological security, because they support human beings' striving toward certainty and provide an ongoing supportive framework of basic coherence in daily life (Giddens, 1991). Housing researchers Dupuis and Thorns referred to routines as "familiar time-space paths" that generate patterns of living and a degree of predictability in daily life (1998, p. 28). Similarly, routines have been likened to a limited form of phenomenological bracketing by political scientist Mitzen, who explained:

...routines are not chosen in any meaningful sense but are taken-for-granted; reflection is suppressed. In fact, this suppression is the source of their security-

generating power. By giving actors automatic responses to stimuli, routines pacify the cognitive environment, bounding the arena of deliberative choice. Routines thus serve the cognitive function of providing individuals with ways of knowing the world and how to act, giving them a felt certainty that enables purposive choice. They also serve the important emotional function of ‘inoculating’ individuals against the paralytic, deep fear of chaos (Mitzen, 2006, p. 347).

Possessing a basic level of ontological security allows humans to “bring uncertainty within tolerable limits”, even in the context of considerable external threats (Mitzen, 2006, p. 346). Hence, like food security, ontological security is subjectively felt and does not necessarily arise from an objective assessment of the external environment. The highly subjective content of ontological security is reflected in the various ways theorists and researchers define the concept. It has been variously defined as: “the *feeling* of well-being that arises from *a sense* of constancy in one’s social and material environment” (Padgett, 2007, p. 1926); “a *sense* of confidence and trust in the world as it appears to be” (Dupuis & Thorns, 1998, p. 27); and an “*experience* of oneself as a whole, continuous person in time” [emphasis added] (Mitzen, 2006, p. 342).

Although ontological security is conceived of as a universal human need that transcends different cultural and socio-political contexts, it is informed by local contexts and understandings and therefore it can be expressed in subtly different ways (Dupuis & Thorns, 1998). For example, research with Cambodian survivors of trauma found that they share a unique view of their ontological security, derived from a Cambodian sense of self comprised of several concentric, protective layers (Hinton, Hinton, Pich, Loeum, & Pollack, 2009). Japanese older adults also conceive of ontological security in a culturally distinct manner, placing a much greater emphasis on ideals of certainty and predictability over western ideals of choice and independence (Hashimoto, 2000).

Continuity theory from social gerontology particularly resonates with theories of ontological security. It assumes that the enduring patterns of behaviour in older adults arise from specifically chosen investments of time and energy (Atchley, 1989; Atchley, 1999). Patterns of internal and external continuity are viewed as important elements of older adults’ sense of certainty (Atchley, 1989; Atchley, 1999). Interestingly, they mirror the two elements of

ontological security in a human being, which entail a basic sense of confidence in both the continuity of their personal identity and the constancy of their surrounding environment (Giddens, 1990). Internal continuity is a subjectively-defined and consistent structure of ideas that a human being has about themselves and what they perceive, while external continuity is a human being's perception of the enduring consistency of their activities, environments, and relationships (Atchley, 1989; Atchley, 1999).

### **8.7.3 Contributory factors for ontological security**

There are several core factors which sustain older adults' ontological security and significantly, each of these also supports their food security. They include: a sense of oneself as a basically capable actor, meaningful social relationships, valued home environments and places, and a sense of oneself as having lived through time (Dupuis & Thorns, 1998; Fagerström, Gustafson, Jakobsson, Johansson, & Vartiainen, 2011; Kay, 2012; Mansvelt, et al., 2013; Noble, 2004; Padgett, 2007). Below, these supportive elements are discussed in relation to the research findings.

#### ***Sense of self as a capable actor***

The findings provide ample evidence that each of the older adults in the study understands themselves to be a distinct person with their own thoughts, experiences, and capacities. During the interviews and home visits, they expressed and enacted vibrant and distinct opinions, values, and perspectives on the world, which often extended far beyond food – and they told stories about themselves as having undergone unique personal experiences, including those which involved food.

Importantly, the older adults also have a sense of their own capacity to act and affect change in response to most of the external events that have occurred and will occur in their lives, perhaps with the exception of profound disability or death. Their confidence about day-to-day matters was reflected in the absence of any significant anxiety about their ongoing capacity to acquire nutritious and enjoyable food, even in the face of economic constraints and encroaching physical limitations. Even those older adults who are less financially comfortable than others do not appear to experience incapacitating anxiety about their ability to afford to buy adequate food now and into the future [Mr and Mrs Quinn, Mr and Mrs Donald, Miss

Roberts]. This certainly appears to arise from a view of themselves as capable of managing these economic risks to their food security.

For example, Mr and Mrs Donald face significant economic risks to their sense of security. They are reliant on a government pension, rent their house in the private rental market, and incur regular health care costs which are not fully reimbursed by Australia's health care system. They can no longer afford to undertake intrastate travel or purchase new clothing, and their fortnightly pension payments just cover their basic living costs. Despite this situation, Mr and Mrs Donald have successfully maintained a sense of security in relation to food by enacting several agentic strategies. They closely read the supermarket specials catalogue each week and stock up on particular food items when they are on special, they buy household items such as toilet paper from a discount store which frees up funds for food, and they keep a close eye on fruit and vegetable prices in their local supermarkets, planning their meals according to these price fluctuations. Mr and Mrs Donald do not see themselves as financially comfortable, but they do see themselves as capable of managing their potentially risky situation in relation to food. Mrs Donald learnt her household management skills from her mother, who had also managed significant economic risks to her food security and broader life, in her case during the Depression and World War II.

Similar findings were found in recent qualitative research into the economic circumstances and ontological security of older adults living in New Zealand. While having a secure income and owning assets were found to be generally supportive of older adults' overall sense of security, those older adults with lower levels of economic resources did not actually experience higher levels of insecurity than others (Mansvelt, et al., 2013). The older adults' sense of ontological security was grounded in "the knowledge that they would continue to cope with financial uncertainty", just as they had done in the past (Mansvelt, et al., 2013, p. 10).

### ***Relationships***

The findings reveal that a wide variety of social relationships inform and create opportunities for older adults' engagement with others – and thus support both their ontological security and food security. Being widowed is often cited in the literature as a potential threat to older adults' food security (Neill, et al., 2011; Sylvie, et al., 2013; Wolfe, et al., 1996). In the research

detailed in this thesis, the experience of being widowed certainly called on many of the older adults' reserves of resilience and courage, and they enacted practical strategies to manage this risk to their food insecurity. Furthermore, the research uncovered other social roles that also influence older adults' eating lives, including being a mother, family member, friend, or community member.

Social relationships are crucial to ontological security; this basic sense of security is believed to be formed through relationships of trust between infants and carers (Giddens, 1991). However, social relationships continue to be fundamentally important to humans' ontological security throughout life (Giddens, 1991). Indeed, the research reveals that older adults continue to initiate and nurture relationships in old age which support their sense of ontological security. For example, Mrs Knight deeply values the many birthday cards she received from friends and family for her 90<sup>th</sup> birthday – by displaying them on her side table, she provides herself with a visual confirmation of her place in a web of social relationships. Mr Frith told a joyful story about attending an interstate wedding, at which he took to the dance floor with a group of young people aged almost 50 years his junior, thereby confirming his place in a warm and fun-loving social circle that traverses several generations.

Two European studies also found that social relationships were important for ontological security in older adults. An ethnographic study in post-socialist rural Russia found that the older adults' "emotional interactions and exchanges of care" – such as recognition, respect, and opportunities to socialise – were important to their ontological security as they provided "a sense of having an understandable place in the world and that there is a logical relationship between past, present and future" (Kay, 2012, p. 64). Another study found that the converse is also true: older adults in Sweden and Finland with a weak sense of trust in family and friends tended to experience stronger feelings of insecurity (Fagerström, et al., 2011).

Although not all of the older adults maintain large social networks, almost all of them are engaged in at least one or two deeply valued social relationships. Mrs Noonan does not attend many social occasions, but she feels loved when daughter invites her over for lunch on the weekend, and she looks forward to phone calls from her interstate son and grandchildren.

Only Mr and Mrs Donald are significantly socially isolated, having lost touch with others in their community after they both developed serious medical conditions.

### ***Houses, homes, and rural places***

Secure housing is believed to be critical for a sense of ontological security, as it generates a degree of constancy in humans' social and material environments (Dupuis & Thorns, 1998; Kearns, Hiscock, Ellaway, & Macintyre, 2000; Padgett, 2007). In this research, all the older adults live in safe and comfortable housing which provides a minimal foundation for both their food security and ontological security. The majority of the older adults own their own homes, which provides them with a sense of assurance about their ongoing ability to live where they choose. For those who rent their housing, the majority live in church-run aged housing developments, which offer security of tenure and therefore provide a similar level of assurance to home ownership. Only Mr and Mrs Donald and Mr and Mrs Langridge live in homes that are rented in the private housing market, although neither of these two couples expressed any anxiety about their relative lack of housing security.

For all the older adults, their homes function as unique sites for ontological security, providing them with ongoing material evidence of their continuous existence via the accumulation and layering of household objects, such as ornaments, souvenirs, and photographs. Hence, change and continuity across a lifespan are manifest in the physical environment of their homes, where they are held in daily balance (Noble, 2004). The accumulation of objects displayed in their homes also provides these older adults with proof of their ongoing existence as human beings. In this way, the home is "a grounded space in which to realize our desire to persevere in our being" (Noble, 2004, p. 236) and "the home-space becomes a site of ontological security" (Milligan, 2003, pp. 461-462).

Beyond the home, the research also found that particular places are highly supportive of sensations of belonging, meaning, and security felt by many of the older adults. While some of the older adults merely feel that they are living in places that are convenient or satisfactory, for others, the places they live are deeply important to them and highly valued. These places variously evoke memories from long lives, promote enjoyment of natural environments, and provide meaningful settings for undertaking daily activities.

These findings confirm emerging perspectives from geographical gerontology which explore how older adults' varying levels of attachment and dynamic meanings combine with the physical features and the social and economic activities of rural communities, thus forming multi-layered experiences of ageing in place (Andrews, et al., 2013; Wiles, Leibing, et al., 2012). In these studies, an older adult's attachments to a place was identified as a vital source of meaning, security, and identity in old age, such that the attachment is "not just an internal or emotional state, it has a material impact; it is a tangible resource for aging in place" (Wiles, Leibing, et al., 2012, p. 365). Similarly, ethnographic research into health inequalities in north west England found that belonging to a place and an affinity with others who share that place are important for human beings' health and wellbeing and their sense of ontological security (Popay et al., 2003).

However, it is noteworthy that most of the older adults in the research have also spent time visiting other places that are often markedly distant and different from their rural home environments, including intrastate, interstate and overseas locations. With friends and relatives living in other places, these older adults' engagement with places is not restricted to their immediate home environments or their local towns. Older adults' communities and sites of meaning that support their ontological security and their food security are in fact dispersed across a wide geographical area.

### ***Living through time***

Informed by phenomenological perspectives and narrative theory, social gerontologists theorise that human beings make sense of their lives by weaving together biographies or narratives of past events, current happenings, and anticipations and fears for the future (Andrews, et al., 2006; Phoenix, Smith, & Sparkes, 2010; Randall, 2013; Schafer, Mustillo, & Ferraro, 2013). From this perspective, storytelling can be viewed as an ontological activity, because it helps structure "our experiences and make sense of actions in our lives" (Phoenix & Sparkes, 2009, p. 221). In particular, researchers have identified a distinction between two types of stories told by older adults: "big stories" detailing significant life events and "small stories" about mundane happenings in everyday settings (Phoenix & Sparkes, 2009, p. 219).

The older adults in the research certainly told "big stories" about important life events, such as losing a spouse [Mr Frith, Mrs Brown], family members going to war [Mrs Andrews, Mrs

Brown], or having to leave a childhood home [Mrs Court]. However, the older adults also told many “small stories” which revealed a great deal about their experiences of food, meals, and eating – and thus their lives as a whole. Illuminating stories were told, for example, about interactions in local supermarkets [Mrs Hughes, Miss Roberts], meals eaten in local restaurants or distant locations [Mr Edwards, Mr Garner, Mrs Johnson], and particular meals they have cooked [Mrs Brown, Miss Roberts]. These stories were no less illuminating for being “small” – they provide vivid evidence that the older adults see themselves as people who have lived through time, accumulating along the way varied experiences of food and life which can be told as stories.

#### **8.7.4 Ontological insecurity and anxiety**

The concept of ontological insecurity is naturally interwoven with notions of risk and anxiety. Risk is viewed in modern society as pertaining exclusively to danger rather than to the chance of an event occurring which is either good or bad in its implications (Douglas, 1990; Lupton, 1993). From this perspective, sociologists see risk perception and management as meaningful for two main reasons. Firstly, risk perception and management is tied to human agency, because “it involves choices among various possibilities” (Ruston, 2009, p. 258). Secondly, risk perception and management is informed by socially held values about life: “... risks are related directly and indirectly to cultural definitions and standards of a tolerable or intolerable life” (Beck, 2000, p. 215).

Some sociologists have viewed contemporary society as uniquely preoccupied with risk and risk management, such that “...the concept of risk becomes fundamental to the way both lay actors and technical specialists organise the social world” (Giddens, 1991, p. 3). In particular, this modern “risk culture” is thought to pose a particular threat to human beings’ ontological security because it undermines a basic sense of trust in themselves and their surrounding environments (Giddens, 1991, p. 3). However, other sociologists have argued more persuasively that risk management practices are not purely determined by modern social conditions (Tulloch & Lupton, 2003). Instead, they are highly contextual, local and individual, and therefore change over time in response to varying social and economic circumstances (Tulloch & Lupton, 2003).

Sociological conceptions of anxiety also provide useful insights into states of profound anxiety or ontological insecurity. It can be likened to philosopher Søren Kierkegaard's view of dread as an emotion experienced by humans when faced with "the prospect of being overwhelmed by anxieties that reach into the very roots of our coherent sense of 'being in the world'" (Giddens, 1991, p. 37). Building on this sociological perspective, theorists and researchers have argued that ontological insecurity can be induced by particular experiences, including rape (Mitzen, 2006), terrorist attacks (Mitzen, 2006), natural disasters (Hawkins & Maurer, 2011), homelessness (Dupuis & Thorns, 1998; Padgett, 2007), being a refugee (Waite, Valentine, & Lewis, 2014), and social and economic change (Chan, et al., 2010).

Through studies of rural communities in southern Italy, an anthropologist generated ethnographic findings that resonate with notions of ontological insecurity (Honkasalo, 2009). Ernesto de Martino proposed that experiences of illness, psychological disturbance, poverty, or economic crises could provoke "*la crisi della presenza*" [the crisis of presence], which entails a profound disruption to a person's sense of their own capacity to affect change in the world (quoted in Honkasalo, 2009, p. 493). More recently, Bondi has argued that ontological insecurity can be experienced fleetingly by people living their "ordinary everyday lives", as well as by those who are living through times of crisis (Bondi, 2014, p. 2).

Phenomenologists Heidegger and Merleau-Ponty developed philosophical theories of human anxiety which inform those sociological conceptions of ontological security. For Heidegger, deep-seated human anxiety (*Angst*) arises from the temporal and finite nature of human 'being' itself, such that life is lived forward through time and ends in death, and humans' awareness of their finitude renders them 'beings-untoward-death' (Baars, 2012a; Heidegger, 1962). Merleau-Ponty also engaged with issues of human anxiety, focusing on the bodily effects of the experience. He emphasised that in humans, insecurity is a bodily experience as it produces "not only the intellectual experience of disorder, but the vital experience of giddiness and nausea, which is the awareness of our contingency, and the horror with which it fills us" (Merleau-Ponty, 1945/2012, p. 254).

Building on Heidegger's notion of anxiety as an experience of an abyss, some phenomenologists have conceptualised anxiety in spatial terms in which an anxious person experiences a sensation of groundlessness:

Disorientation is a bodily feeling that can shape insecurity and shatter one's sense of confidence in the ground of one's existence. It is a situation which can make bodies react defensively, as they reach out for support or search for a place to reground and re-orientate their relation to the world. The feeling of being shattered might persist and become a crisis, or it passes if the ground returns or one returns to the ground (Simonsen, 2013, p. 20).

Psychological and sociological perspectives on anxiety are valuable, because they generate insights into why the older adults in the research do not experience significant insecurities and anxieties related to food. In existential psychology, anxiety is related to humans' striving for personal meaning in life, such that it naturally arises in the face of experiences which threaten the security of self and personality (May, 1977). Similarly, in sociological terms, anxiety is understood to arise from inadequate knowledge about how to respond to threats: "...we are only kept in anxiety for so long as we remain overwhelmed by the sense that we lack a sufficient means of knowing how to keep ourselves from harm's way" (Wilkinson, 2001, p. 17). In this uncertain state, "we are left struggling to identify a clear course of action which might lead to us feeling more secure and 'at home' in the world" (Wilkinson, 2001, p. 87).

According to these perspectives, profound anxiety or insecurity arises from a person's lack of knowledge about how to manage risks to their security; this freezes their ability to protect themselves from potential harm. For the older adults in the research, feeling paralysed by uncertainty in the face of risks appears to be a fairly rare experience. In relation to food, these older adults *know* how to manage risks to their food security, and armed with this knowledge, they are confident in their ongoing capacity to pursue courses of action which shore up their food security in old age.

Of course, the older adults have not lived lives that have been somehow immune from significant threats to their sense of bodily self and ontological security. All of them have experienced these significant events or "fateful moments" which have required them to "sit up and take notice of new demands as well as new possibilities" (Giddens, 1991, pp. 142-143). Many of the older adults have experienced at least one and sometimes many significant threats in their lives, including the loss of a spouse, child, grandchild or close friend [Mrs Hughes, Mr Quinn, Mrs Donald, Mrs Parker, Mrs Knight]; and medical crises such as

haemorrhages, heart attacks, strokes, or significant vision loss [Mr Quinn, Mrs Donald, Mrs Parker, Mrs Knight, Mrs O'Brien, Mr Mitchell, Mr Frith]. As well, quite a few of the older adults live with considerable ongoing bodily uncertainty, facing threats from pain and physical degeneration arising from encroaching illness [Mrs O'Brien, Miss Roberts, Mrs Knight, Mrs Langridge, Mr Langridge].

Revealingly, during their interviews, most of these older adults only mentioned their experiences of loss, threat, and risk to illustrate the ways in which they have come to terms with or managed them. These potential threats to their ontological security are no longer experienced by the older adults as significant threats. Over time, they have employed adaptive strategies on both psychological and practical levels that have allowed them to re-establish a sense of equilibrium or ontological security and thus go on with life.

However, two recent experiences of insecurity or anxiety in the older adults' lives were uncovered by the research. The first is a particular life experience which is detailed in Chapter Six and pertains to the incursion of dogs into Mrs Hughes' peaceful home environment. The decline in Mrs Hughes' mood and confidence took place between the first home visit before the dogs had moved in next door, and the second home visit after the dogs had begun intruding into her garden. At the second home interview, Mrs Hughes reported feeling less confident and strong in herself and she was obviously anxious about her situation. Her anxiety rested on her uncertainty about how to proceed with managing the risks that the dogs posed without creating new risks to her relationship with her neighbours. Mrs Hughes' lack of knowledge and assuredness meant she was, at least at the time of the second home visit, unable to act decisively to secure her home environment or her overall sense of security.

Significantly, the interview data revealed that Mrs Hughes' weakened ontological security had affected her experiences of food. During her second interview, she reported that she was cooking fewer meals and eating more sweet comfort foods than usual and was gaining weight as a consequence. If the threat of the dogs cannot be managed, and Mrs Hughes lack of confidence to cope with life and keep going with healthy eating diminishes further, it may become increasingly apparent that her sensations of ontological insecurity undermine her food-related values and actions and her long-term sense of food security.

The other topic that caused a mood of ontological insecurity to infuse the older adults' spoken words was the potential threat of residential care. As detailed in Chapter Seven, many of the older adults spontaneously expressed dread at the possibility of feeling forced to enter residential aged care, especially high-dependency care. For these older adults, their dread is oriented toward the institutional nature of residential care, as well as any significant physical or cognitive decline they might experience which would precipitate their move into residential care. Their talk was imbued with anxieties about potential loss of freedom, control and dignity, and for some of the older adults, those losses were feared more than death. As community-dwelling older adults, the research participants have not yet experienced a reluctant move into residential aged care, so it is not possible to draw on those experiences to illustrate how such a threat to their ontological security might undermine their desire to go on eating.

While the looming possibility of incapacity and dependency in aged care represents a significant potential threat to older adults' ontological security, this threat actually motivates many of them to go on coping with life and food, to ensure that they can stay in their own homes and 'age in place'. When Mr Foster takes out his recipe book and resolves to cook himself a healthy meal, when Mrs Andrews takes herself for an hour-long walk in her neighbourhood, and when Mr Mitchell limits his intake of full-cream milk cappuccinos and potato chips, they are all motivated by the significant threat that declining health would pose to their senses of themselves as independent and capable people. These examples reveal that ontological risks – if they can be adequately managed – have the potential to actually support older adults to live well in old age, in aspects including but not restricted to their food security.

The philosopher Soren Kierkegaard and contemporary sociologists have acknowledged that experiences of insecurity and anxiety are disturbing and unsettling, but also potentially helpful; they enable humans to reflect on all of life's possibilities, make deliberate choices, and engage in adaptive responses and novel initiatives (Giddens, 1991; Jackson & Everts, 2010). Similarly, Heidegger (1962) saw anxiety as both highly unpleasant and a form of positive attunement which can "open up a path of movement" toward future possibilities, people, and projects, thus providing "an energising potential that can itself be felt as well-being" (Todres & Galvin, 2010, p. 3).

### 8.7.5 Exercising agency in old age

As noted earlier in this chapter, the research uncovered no evidence of significant food-related anxieties or food insecurity among the older adults. At first glance, this might be considered somewhat surprising because, as noted in Chapter One, anxieties in general and food-related concerns in particular are highly intensified in contemporary societies (Beardsworth & Keil, 1997; Fischler, 1988). However, the research findings provide varied illustrations of older adults who are continuing to face up to and manage various uncertainties, risks, and anxieties in their lives on a daily basis, including those risks which pertain to food.

Informed by the French philosopher Jean-Paul Sartre's (1905-1980) phenomenological theories, the research reveals older adults as capable actors within their own lives (1943/2003). In his famous existential text, *Being and Nothingness*, Sartre saw life as ongoing and unfolding rather than ever reaching a fixed point of experience (1943/2003). Therefore, human existence is understood to be highly action oriented and deeply engaged with the world (Sartre, 1943/2003). While acknowledging the complexity of human agency, Sartre argued that because human beings are forever in the process of becoming, they retain a vital capacity to choose what to become and can therefore shape their own lives (1943/2003).

This phenomenological view of human agency was informed by Heidegger's concept of 'thrownness' (*Geworfenheit*), in which humans – by virtue of their gender, ethnicity or the time and place of their birth – are thrown into an already predetermined world (Heidegger, 1962). Importantly, this facet of human existence does not preclude humans from being active agents in their own lives, despite not choosing the particular circumstances into which they were born (Heidegger, 1962).

These findings can also be interpreted with reference to sociological theories of human agency. Definitions of agency are debated in the sociological literature, but agency can be understood as having choices and the capacity to intervene in one's world to change things, notwithstanding the constraints of economic and social structures (Giddens, 1984; Honkasalo, 2009). The concept of agency is an important thread in interpretative sociology, which was heavily influenced by phenomenology and symbolic interactionism (Grenier & Phillipson, 2013). Informed by Heideggerian notions of 'thrownness', Giddens viewed agency as "a

*continuous flow of conduct*” that is situated within particular places, times, and social structures (1979, p. 55).

Sociologists Gubrium and Holstein argued that agency is enacted through meanings found in everyday, ordinary practices which create and sustain the self: “contemporary agency is as concrete and varied as the everyday practices and sites that call forth and supply its meanings” (1995, p. 566). In their view, human agency arises from several sources: meanings of self which are shared within particular cultures or settings, “the biographical particulars of individual lives”, and everyday objects particular to human beings’ individual material circumstances (Gubrium & Holstein, 1995, p. 561).

However, agency has been labelled a “slippery concept”, as it is defined in different ways by different sociologists, and its significance for understanding social action is debated within the field (Hitlin & Elder, 2007, p. 171). In recent years, concepts of agency for older adults have also been criticised by gerontologists because “the majority of available definitions and uses of agency continue to be rooted in versions of choice, strength and independent control that are problematic for older people with impairments” (Grenier & Phillipson, 2013, p. 67). This draws attention to the opportunity for more nuanced views of agency which take into account different forms of agentic practice that are enacted by older adults with significant physical limitations (Grenier & Phillipson, 2013).

In the older adults’ spirited engagement with the world, there is certainly no sense of significant paralysis of will or action. They actively engage in a range of strategies to manage various risks to their longevity, economic security, and wellbeing – thereby demonstrating their personal agency. These acts extend across many areas of their lives, including food, meals, and eating. For example, these older adults frequently budget carefully for food expenditures, discipline themselves to cook meals for themselves and others, and engage in social eating opportunities outside their homes. They also strive to secure their eating futures through many different measures, including growing fruit and vegetables, preserving food and freezing meals for a later date, eating low-fat and low-salt foods to invest in their future health, even making arrangements for the food to be served at their own funerals.

Clearly, not all of these actions are dramatic in terms of achieving significant and sudden transformations in either the older adults or their circumstances; as such, they could be termed “small” acts of agency (Honkasalo, 2009, p. 498). During Honkasalo’s ethnographic research in Finland, she observed older women engaging in domestic activities of knitting, cleaning, baking, and cooking regular daily meals (2009). These small acts of agency were directed towards day-to-day coping and were characterised by “repetition, practical quotidian acting, without a visible aim to change, but rather to keep the fragile stability of the living situation, to hold on to it...” (Honkasalo, 2008, p. 498). While these acts are “small”, they are valuable because they support older adults’ day-to-day well-being and they accumulate over time to provide a sense of continuity and purpose.

Although not conceptualised in contemporary terms, phenomenological perspectives on human action are also relevant to understandings of how human agency exists in the lives of older adults. In this regard, the notion of ‘levels’ is highly relevant because although it was originally explored in relation to visual perception, it can also be applied to other aspects of human lives (Merleau-Ponty, 1945/2012). Arising from human beings’ attunement with their surroundings, these levels or positions of understanding allow human beings to cope on a daily basis and manage risks that arise in their lifeworlds (Crossley, 2012). Human beings’ levels are reached by applying sequences of unconscious bodily actions or schema, as well as consciously skilful actions or techniques, in order to accomplish particular life activities (Crossley, 2012).

From this phenomenological perspective, it is possible to see how the older adults employ a large number of schema and techniques to carry out complex food-related activities, such as food shopping, cooking, serving meals, and washing dishes. So, for example, when Mr Edwards works in his vegetable garden and apple orchard, he produces fresh food by engaging in basic bodily schema such as bending down and kneeling on the ground, as well as more skilful techniques of propagating seedlings and pruning trees. At a more profound level, through applying these schema and techniques, Mr Edwards also achieves a ‘level’ or perspective for himself that facilitates his agentic engagement with his lifeworld.

However, this view of older adults as employing schema and techniques for day-to-day living is not intended to imply that their enduring values, repeated actions, and long-held skills are

rigidly enacted or unchanging over time. As continuity theory argues, the fundamental continuity that is evident in older adults' lives is not evidence of stasis or stagnation, but instead reflects the fact that older adults constantly engage in flexible acts of adaptation in response to changing external environments (Atchley, 1989; Atchley, 1999).

To this end, the notion of phenomenological modification is useful for understanding the findings of the research, because it draws attention to the ways in which human beings continuously adjust their thoughts and actions in response to changes in their social and material environments. While Husserl argued that some human activities are undertaken without any substantial conscious reflection, he also argued that humans also engage in more reflective modes of existence where they reflect upon and develop theoretical stances towards their own actions as well as those of others (Desjarlais & Throop, 2011). Human beings' capacity to develop new perspectives on situations and phenomena – Merleau-Ponty might refer to these perspectives as 'levels' – is valuable because it gives human beings' regular opportunities to adjust their actions throughout their lives (Desjarlais & Throop, 2011).

The research detailed in this thesis illustrates the human capacity to develop new perspectives on situations and adjust one's actions continues throughout life, including into old age. This responsive, agentic capacity is remarkably evident in numerous examples, including Mrs Parker placing raised stickers on her stove-top so she can feel the dials that she can no longer see, Mrs Brown accepting paid help with her food shopping once she stopped driving into a nearby town, and Mrs Langridge developing new cooking techniques so she can keep cooking hot meals for herself and her husband while she is recovering from surgery.

## **8.8 Conclusion**

This chapter has traversed considerable ground in order to interpret the research findings in relation to phenomenological conceptions of human 'being' and sociological theories of food security and ontological security. In doing so, the chapter has drawn attention to the parallels evident in the concepts of food security and ontological security. Of course, this is not to imply that food security and ontological security are somehow synonymous. Instead, the chapter advances a theoretical argument that the experiential elements and meanings of

food security and ontological security are almost inextricably woven together in older adults' lifeworlds. To maintain one's food security as older adult, one needs to be at least minimally ontologically secure – and in order to be ontologically secure, one needs to be at least minimally food secure. In this sense, these two experiences of human security are delicately intertwined in a reciprocal circle that revolves throughout one's life, including into very old age.

## CHAPTER 9: CONCLUSIONS, IMPLICATIONS, AND FUTURE DIRECTIONS

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### 9.1 Introduction

This chapter provides a conclusion to the phenomenological ethnographic study of food security and insecurity in older adults. Reflecting on the aim and intent of the research outlined in Chapter One, this chapter draws together various elements of the research: the literature review in Chapter Two; research methodology in Chapter Three; qualitative findings from Chapter Four, Five, Six, and Seven; and the discussion and theoretical perspectives in Chapter Eight. This final chapter proceeds through four main considerations which highlight the coherence, integrity, and value of the research. The first section reflects on the contribution of the research (Section 9.2), the second revisits some of the key ideas within the research literature so as to compare and contrast them to this study's findings (Section 9.3), the third considers this study's implications for policy and practice (Section 9.4), and the fourth reflects on its limitations and proposes some areas for future research (Section 9.5).

### 9.2 Contribution of the research

#### 9.2.1 Research aim and questions

This study has fulfilled the research aim to *explore rural older adults' experiences of food, meals, and eating and consider their significance for developing a deeper understanding of the phenomenon of food security and insecurity in older adults*. The study uncovers particular lived experiences, goes some way towards unravelling their complexity, and considers their depth and substance for human lives. Ordinary food-related experiences and the lifeworlds in which they occur are rendered in rich and lively detail, and interpreted in a manner which uncovers their underlying significance for food security and insecurity.

The findings and discussion commences by engaging with the first research question – *What is the nature of experiences of food, meals, and eating for older adults living in rural communities?* The research findings are interpreted in relation to four structures of the phenomenological lifeworld: subjective, intersubjective, place, and temporal dimensions. Together, these four perspectives on older adults' lives provide a lens through which to view multiple and rich dimensions of people's day-to-day lived experiences in relation to their

sense of themselves, their relationships with others, their affective and practical engagement with rural and distant places, and the flow of time through their lives.

From there, the thesis engages with the second research question – *How do older adults' experiences of food, meals, and eating inform deeper understandings of food security and insecurity in older adults?* The significance of the findings from the first question are considered in order to develop a deeper understanding of food security and insecurity in older adults. Drawing on theoretical perspectives from phenomenology, sociology, and social gerontology, the research weaves these together with the empirical research findings to propose an argument that food security and ontological security are closely intertwined in older adults' lives.

### **9.2.2 Research intent**

As detailed in Chapter One, the intent of the research consists of three commitments, which are to engage with the complexity of the phenomenon, seek in-depth and substantial understandings, and initiate a dialogue or conversation with others about the phenomenon. By exploring multiple dimensions of older adults' lifeworlds and seeking to understand how these dimensions weave together to shape experiences of food security, the research engages with complexity. By considering theoretical perspectives from phenomenology and ethnography, the research uncovers in-depth and substantial understandings of food security and insecurity in older adults. And finally, by presenting the findings in a speculative and discursive manner, leaving room for other perspectives to be considered, the research has indirectly initiated an open-minded dialogue with researchers, policy makers, service providers, and of course, older adults themselves.

### **9.2.3 Employing phenomenological ethnography**

As best as can be ascertained, this study represents one of the first substantial phenomenological ethnographic studies of food security and insecurity in older adults living in developed countries. Empirical and theoretical perspectives from phenomenology and phenomenological ethnography were employed to inform each element of the research, including the aim, questions, intent, fieldwork methods, qualitative data analysis, and discussion. Phenomenological ethnographers have provided a test of the quality of qualitative

research informed by philosophical perspectives, asking: “does it end in conclusions which, when they are referred back to ordinary life-experiences and their predicaments, render them more significant, more luminous to us, and make our dealings with them more fruitful?” (Desjarlais & Throop, 2011, p. 97). The aim of the research findings and interpretations detailed in this thesis is to shed additional light on older adults’ ordinary life experiences and predicaments in relation to food and eating, thereby rendering them more amenable to innovative theorising and reflecting on its implications for policy and practice.

### **9.3 New perspectives on food insecurity in older adults**

#### **9.3.1 Overview**

The findings of this study – detailed in Chapters Four, Five, Six, and Seven and interpreted in Chapter Eight – do not significantly contradict the overall themes identified in the literature on food security in older adults. Overall, the study confirms the basic understandings of other researchers that food security in older adults is (a) subjective and experiential; (b) complex, multi-dimensional, and interwoven; and (c) dynamic and managed over time. The research findings and new theoretical perspectives in this study build on those preliminary understandings. In combination, these findings and theory provide a clearer view of food security and insecurity which is able to engage with its depth and substance, and its significance for older adults’ lives.

In particular, the research highlights the value of conducting food security research which engages with human experience. This phenomenological ethnographic approach differs in two important ways from studies which apply either ‘vulnerability’ or nutritional perspectives to older adults’ food, meals, and eating. Firstly, this study generates deeper understandings of how experiences of food, meals, and eating, and food security are intertwined in older adults’ lifeworlds and their overall senses of security. Secondly, this study also provides a more optimistic view of older adults than some of the current literature on food security for this age group. This study reveals older adults to be capable, resilient, and agentic – and neither inherently vulnerable nor necessarily needful of care. These two areas are discussed in further detail below.

### **9.3.2 Food security as intertwined with life experiences**

The research findings reveal that rural older adults' experiences of food, meals, and eating are inseparably intertwined with their lifeworlds. These findings do not constitute a radical rupture from the findings of previous research. Instead, they provide rich idiographic data and introduce a phenomenological framework which allow for a clearer and more nuanced illustration of the complex and subtle ways in which food and living are woven together in four dimensions of older adults' lives. Each of these dimensions are discussed below, with specific reference to the existing literature.

Exploring the subjective dimensions of older adults' lifeworlds has generated findings which build upon previous studies that have uncovered the ways older adults actively manage their food security. Rich data of older Tasmanians preserving and freezing food, cooking meals for later consumption, and growing fruit and vegetables supports the findings of earlier research which is reviewed in Chapter Two (see, for example Munoz-Plaza, et al., 2013; Quandt, Arcury, McDonald, et al., 2001; Quandt, et al., 2000; Wolfe, et al., 1996). Importantly, the research findings also provide a clearer view of how older adults' strategies for 'keeping going' with life inform their strategies and actions in relation to food.

Exploring the intersubjective dimensions of older adults' lifeworlds has generated findings which build upon previous research that has drawn attention to the vital importance of social relationships for older adults' experiences of food (Dean & Sharkey, 2011; Lee, et al., 2005b; Locher, Ritchie, et al., 2005; Sylvie, et al., 2013; Wolfe, et al., 1996). However, the flavour of some of that research is particularly negative, focusing on social isolation, low social capital, and widowhood as significant factors for food insecurity. The research detailed in this thesis provides a more positive perspective, providing illustrative examples of older adults' capacity to adjust to eating alone in widowhood, the supportive role of other relationships besides spouse and immediate family, and older adults' enactment of positive strategies of bartering food with others.

Exploring the place dimensions of older adults' lifeworlds has generated findings that are perhaps more nuanced and speculative than those in previous research into rural places and food security. The findings detailed in this thesis do not support the view that food security is at greater risk in rural places because of reduced access to food shops (Burns, et al., 2004;

Meedeniya, et al., 2000; Mercille, et al., 2012; Tsang, et al., 2007; Wong, et al., 2011; Yamashita & Kunkel, 2012). Instead, many of the older adults in the research have good access to food shops and several also benefit from sufficient rural land upon which to grow large quantities of fruit and vegetables. Importantly, as noted in Chapter Eight, these findings are probably not generalisable to the general population of rural older adults, and may in fact reflect their good fortune and gardening skills. However, the research makes a contribution in another way. In noting the heterogeneous nature of rural living of the older adults and the varied and spatially dispersed relationships older adults maintain with places beyond their rural environments, the research indirectly raises questions about the continued focus on issues of rurality in research into food security and older adults.

Exploring the temporal dimensions of older adults' lifeworlds has generated findings that confirm some earlier research and build on these through engaging closely with older adults' thoughts and feelings about their futures. The research provided further confirmation of earlier findings that particular socio-historical events and circumstances, such as food rationing in Australia and the United Kingdom after World War II, have shaped older adults' present-day strategies for food security (Green-LaPierre, et al., 2012; Wolfe, et al., 2003; Wolfe, et al., 1996). However, the temporal research findings are interpreted somewhat more positively in this thesis than in earlier research which argued that older adults might minimise or fail to acknowledge their food insecurity because of past experiences of hardship. Instead, this thesis shows that older adults' experiences of hardship and restrained food access can inform their enduring food values and actions which support their food security.

Another way in which the research has built upon temporal understandings of food security relates to older adults' engagement with their food-related futures. Conceptual models and previous research have generally focused on older adults' past experiences and present day threats to their food security, rather than older adults' orientation toward their eating futures (Green-LaPierre, et al., 2012; Lee, et al., 2005b; Sylvie, et al., 2013; Wolfe, et al., 2003; Wolfe, et al., 1996). The only exception to this is occasional references to freezing, preserving, or storing food for later consumption (Neill, et al., 2011; Quandt, Arcury, McDonald, et al., 2001). A focus on the past and present has perhaps come at the expense of deeper understandings of how older adults' hopes and fears for the future inform their experiences

of food, meals, and eating, and also inspire future-directed strategies such as ‘eating for a healthy future’ and ‘keeping going’.

### **9.3.3 Older adults as potentially capable, resilient, and agentic**

The research builds on earlier research which views older adults as active in managing their own food security, rather than merely being needy recipients of care and food. The research provides rich details of older adults’ curiosity about the world. These include learning new information and skills about food, forming and expressing vibrant and varied opinions about food and life, setting personal standards for themselves and striving to meet them, and persisting with life in a determined manner. Although some of these attributes and strategies have been touched upon in previous food security research with older adults, they have not been explored in any significant detail nor theorised in terms of their profound significance for human lives, extending beyond issues of food security (Green-LaPierre, et al., 2012; Lee, et al., 2005b; Sylvie, et al., 2013; Wolfe, et al., 2003; Wolfe, et al., 1996).

The research reveals that older adults have the potential to be capable, resilient, and agentic well into very old age – even in the face of the social and bodily contingencies of ageing. This does not somehow imply that *all* older adults are capable, resilient, and agentic. Rather, the research has generated in-depth idiographic illustrations of the lives of particular older adults, which are interpreted in terms of the human desire to persist in ‘being’. This confirms that all older adults, by virtue of being human, have at least the potential to enact these positive attributes and strategies. A human being’s chronological age does not necessarily render them incapable, vulnerable, withdrawn, and passive – whether in relation to food or everyday life.

## **9.4 Implications for policy and practice**

### **9.4.1 Overview**

The research documented in this thesis has generated new theoretical perspectives on experiences of food security for older adults. Phenomenological research does not have an explicitly critical agenda, in the sense of a drive to generate social or political change (Caelli, 2001; Smith, 2007). However, new understandings generated by phenomenological research

can and do inform changes in policy and practice in areas such as health care and education, and potentially in this particular case, community-based aged care (Caelli, 2001; Smith, 2007).

The insights from this research have implications for policies and services directed towards food security in older adults who are 'ageing in place'. These implications are paradigmatic rather than operational in nature as they engage with experiential matters and lived realities of human lifeworlds, rather than with issues of "instrumental action, efficiency or technical efficacy" within particular programs (van Manen, 2007, p. 13). These implications open up a conversation about society's normative values in relation to older adults and care, and the ways these values are enacted in food security programs for older adults. The following section engages with these issues at a theoretical level, and outlines some more grounded perspectives in relation to delivered meals programs, which is a type of food security service that is commonly directed towards older adults.

#### **9.4.2 Care directed towards older adults**

The discussion of the findings in Chapter Eight reveals the profound importance of ontological security in older adults' lives and its intimate intertwining with experiences of food security. When viewed from this perspective, it is clear that it is important to ensure that initiatives to support older adults' food security do not inadvertently threaten their ontological security, and especially their sense of themselves as capable and agentic actors in their own lifeworlds. However, as discussed below, the underlying beliefs and values of some current food security policies and programs for older adults do appear to pose a potential threat to their ontological security, because of their dominant paradigm of providing direct care and food.

Certainly, providing care to human beings who are perceived to be vulnerable is laden with meaning for both care givers and recipients. Care is understood as "the provision of practical or emotional support" which extends beyond the usual relations of reciprocity enacted by human beings in their day-to-day lives (Wiles, 2011, p. 574). The social gerontological literature on older adults' experiences of receiving care has found that older adults only feel entirely comfortable about receiving care if it is warranted because of particular events such as acute illness, or if they can reciprocate the care at a later date (Allen & Wiles, 2013; Lloyd, Calnan, Cameron, Seymour, & Smith, 2014). Thus, they will tend to resist receiving one-sided care which implies they have become incapable or dependent (Allen & Wiles, 2013; Lloyd, et

al., 2014). Qualitative research has also found that older adults who frequently receive care try to resist being categorised as “dependent, frail, or vulnerable” and they revise their personal identities to incorporate emerging physical or cognitive limitations (Beard, Knauss, & Moyer, 2009; Wiles, 2011, p. 576).

These findings suggest that older adults sometimes experience care – whether it is delivered by services or given by family and friends – as a potential threat to their sense of being a capable person. Indeed, there is evidence from gerontological research that older adults who receive greater amounts of care tend to perceive ageing more negatively, and this negative perception is associated with increased depressive symptoms in subsequent years (Kwak, Ingersoll-Dayton, & Burgard, 2014). Although the effects of care on older adults is not definitively negative, older adults can be quite uncomfortable about acknowledging the care they do receive – which again suggests that receiving care is not an entirely positive experience for them. In just one example, qualitative research conducted in rural Russia found that older adults consistently downplayed the care they received and preferred to talk about the care they provided to others (Kay, 2012).

Viewing care as a potential threat to older adults’ personal identity and ontological security allows some insights into why some older adults resist various policies, programs, and services directed towards ensuring their health and wellbeing. Older adults’ reluctance to engage with aged care services is sometimes seen as evidence of denial or crankiness, and labelled “service refusal” or “help-avoidance” (Howse, Ebrahim, & Gooberman-Hill, 2004, pp. 65-66). However, by taking a theoretical perspective which proposes a link between care and ontological security, older adults’ reluctance to receive care can instead be viewed as deeply informed by their desire to persist with ‘being’ into old age.

There is empirical evidence which supports this view. Research in the United Kingdom found that older adults resisted a program of government advice on home heating that was specifically directed towards them (Day & Hitchings, 2011). This was because the advice indirectly represented old age as entailing bodily decline (Day & Hitchings, 2011). Accordingly, the authors concluded:

Rather than this resistance being about lack of understanding, or sticking to old-fashioned ways, we argue that it was connected to a sophisticated negotiation of identities, both personal and social; the management of the sense of self and the portrayal of this to the outside world (Day & Hitchings, 2011, p. 892).

#### **9.4.3 Food-related care of older adults**

Arguably, the weight of meaning that care practices carry for older adults is even greater when they are specifically directed towards food-related concerns than to other concerns, such as heating in the example above. As discussed in Chapter Eight, relationships of love and care are often enacted through food, such that “food exchanges between individuals can be used to symbolize their mutual interdependence and reciprocity” (Beardsworth & Keil, 1997, p. 52). However, food-based relationships also have a “dark side”, which is enacted through familial feeding relationships, such as those between parents and children, which can generate “negative consequences for those defined as ‘dependent’” (Crotty, 1993, p. 116). Certainly, the findings in this thesis reveal that when food-related services provided to older adults are not embedded within reciprocal relationships of care they have the potential to generate discomforting emotions for the recipients.

Empirical research into food insecurity in other populations has found that human beings can find meaning and reassurance in managing their food security through means other than relying on care or services. Research with Cheyenne Indian communities in the United States found that households which employed more complex, unpredictable, and cumbersome food provisioning strategies actually experienced less stress than those households which relied on government welfare in the form of Food Stamps (Whiting & Ward, 2010). The researchers proposed that, although securing food through multiple means entailed extra work and greater uncertainty, the households which pursued those strategies experienced psychological benefits. This was because they were still able to participate in Cheyenne Indian norms of food sharing between families, and could thus continue to confirm their cultural identity despite experiencing food insecurity (Whiting & Ward, 2010).

#### **9.4.4 The meaning of delivered meals**

In the previous two sections, a theoretical perspective proposes that some older adults may experience food-related care as a potential threat to their ontological security. In this section, this proposition is explored in relation to delivered meals services for older adults. As detailed in Chapter Four, the older adults in the research were found to be quite actively engaged with delivered meal services, rather than being passive recipients of care and feeding. Their active engagement was evident in the fact that many had tried delivered meals at one time or another, formed explicit judgements on the service, whether favourable or critical, and consciously decided whether or not to continue with it. The older adults arrived at these decisions by considering whether or not the delivered meals service was resonant with their strongly-held food values, and whether or not it was supportive of their continuing strategies for food, meals, and eating into old age.

It is important to note that the meanings that delivered meal services carry for older adults are specific to individuals' particular values and strategies for living. Therefore, delivered meal services certainly do not represent a threat to all older adults. As described in Chapter Four, Mrs Parker feels comforted by having her meals arrive at her door, hot and ready to eat, and these feelings are entirely consistent with her less active approach towards food and daily life as she ages. In contrast, the same service is potentially discomforting to others, albeit for different reasons. While recovering from her hip replacement, Mrs Andrews viewed delivered meals as a symbol of her physical incapacity, and she was keen to recover and dispense with the meals; and Mrs Brown did not like the taste of the meals that were delivered and sensual enjoyment of life is very important to her. In Mr Garner's case, the potential threat of delivered meals lies in their sedate flavours and conservative menus, which are antithetical to the exotic flavours and interesting dishes that he enthusiastically cooks and eats for himself.

### **9.5 Limitations and possibilities for further research**

#### **9.5.1 Overview**

As discussed in Chapter Eight, the idiographic nature of phenomenological ethnographic research means that the findings of the research, which pertain to 21 rural older adults, are not readily generalisable to wider populations of older adults, either in Tasmania, Australia or

elsewhere in the world. However, the research has uncovered rich and in-depth idiographic data on older adults' experiences of food, meals, and eating, as well as their strategies for living well in old age. These findings illuminate pathways for an argument that food security and ontological security are closely intertwined in older adults' lives. This theoretical perspective is likely to be relevant to conceptions of food security and insecurity for older adults living in other places and different circumstances. Accordingly, the following two sections do not address issues of the generalisability of the research. Instead, two other limitations are discussed. These pertain to the epistemological issues inherent in attempts to understand the feelings and actions of other human beings, and whether or not phenomenology adequately engages with the structural aspect of human experience.

### **9.5.2 Understanding others**

The choice of methodologies employed in the research is built upon an epistemological assumption that meaningful data about older adults' thoughts, experiences, and actions can be obtained by visiting them at home and engaging them in interviews. At various times, phenomenological ethnographers have questioned the strength of this assumption, focusing on the unresolved question: "can we ever really know what another person is thinking or feeling...?" (Desjarlais & Throop, 2011, p. 95).

Certainly, the home visits and interviews have not provided an unrestricted view of older adults or entirely fulsome access to their thoughts, experiences, and actions.

Phenomenological ethnographer Michael D. Jackson lamented that "even with the best will in the world, human beings seldom speak their minds or say exactly what is in their hearts" (2013, p. 7). From this perspective, the insights that are generated by qualitative research are inherently partial. However, these limitations relate less to the weaknesses of qualitative methods and more to the natural limits faced by all humans who are seeking to understand others.

By referring back to Alfred Schutz' arguments about intersubjectivity, researchers can avoid slipping into a form of solipsism in which they conclude that nothing can be reliably known about other human beings. Schutz argued that human beings' knowledge of others' thoughts, experiences, and actions are incomplete but nevertheless sufficiently discernable and meaningful so as to achieve intersubjectivity or *Verstehen* (1973; Schutz & Wagner, 1970). Is

phenomenological belief in human intersubjectivity allows researchers to be satisfied that people's thoughts, experiences, and actions uncovered during research are comprehensible and meaningful. And as such, they are sufficient for building new understandings of how human beings experience particular phenomena.

### **9.5.3 Structural aspects of human experience**

As detailed in Chapter Three, a particular strength of phenomenological ethnography is its ability to generate detailed attention on subjective and experiential elements of human lives. However, this focused attention is also seen by others as a potential weakness. Occasionally, phenomenological ethnographic research has been criticised for disregarding structural aspects of human lives, including individual socioeconomic circumstances and broader political and economic settings (Desjarlais & Throop, 2011).

Certainly, the research has focused on the older adults' experiences and subjective meanings of food, meals, and eating. However, throughout the research, this lifeworld focus reveals the ways in which those personal experiences are shaped by the broader structural realities of older adults' socioeconomic contexts, including their housing arrangements, food prices and limited incomes, and the availability of charitable and government services. As well, the discussion of the research findings extends well beyond individual experiences, to engage with sociological conceptions of security, risk, and anxiety in contemporary societies. The idiographic stories and experiences in this research are situated within particular socioeconomic circumstances and interpreted in relation to prevailing contemporary social values and perspectives. As such, while the research is not heavily informed by perspectives from critical gerontology, it does consistently weave together older adults' experiences and lifeworlds with their broader "systemic worlds" (Baars, 1991; Baars, 2012b, p. 143).

### **9.5.4 Possibilities for further research**

The literature review in Chapter Two notes that a significant tranche of the published research into food-related concerns in older adults, including some studies of food insecurity, is heavily informed by nutritional perspectives. Nutrition status is readily measurable, generalisable to different settings, and useful for understanding the physiological harms that might accrue to older adults from undernutrition. However, employed in isolation, the

epistemologies and methodologies of nutrition science do not assist researchers to generate in-depth insights into the rich, complex, and contextual nature of older adults' experiences of food, meals, and eating. Researchers and policy makers seeking these kinds of in-depth insights might benefit from employing qualitative perspectives and research methods more frequently, inspired by various social sciences including phenomenological ethnography, social gerontology, and sociology. Qualitative perspectives and methods could be employed either in isolation or in conjunction with quantitative methods in mixed methods studies.

Several different aspects of food security in older adults might benefit from additional research which employs qualitative perspectives. Perhaps the most obvious opportunity for such research lies in exploring older adults' experiences of food *insecurity* rather than food *security*. Although the original aim of the research was to explore food insecurity in older adults, it was later broadened to include experiences of food security. All the older adults who were eventually recruited to the study appeared to be food secure, and during the research they did not relate any experiences of significant food insecurity, either in the past or present. Future research efforts could be directed towards experiences of food insecurity with new cohorts of older adults, such as Baby Boomers, whose post-war experiences of relative security and prosperity might inform quite different experiences of food insecurity and ageing. Another avenue for additional research lies in exploring the interplay between experiences of food security and ontological security, in particular how threats to older adults' ontological security might undermine their desire to eat well in old age.

However, successfully recruiting food insecure older adults to participate in such studies is a considerable challenge. The difficulty lies in finding older adults who are willing to acknowledge their food insecurity and communicate about their experiences to others. This reluctance to be labelled as food insecure suggests that there might be a degree of shame associated with the experience during a time when food is abundant in wider Australian society. Engaging food insecure older adults in studies requires researchers to develop innovative recruitment methods which support rather than disrupt an older adult's dignity and sense themselves as capable and agentic in later life.

Future research could also engage fruitfully with older adults from 'minority' cultural backgrounds. All the older adults who participated in the research were born in Australia,

New Zealand, or the United Kingdom. As noted in Chapter Three, the very high proportion of older adults from English-speaking backgrounds is similar to the characteristics of the general population of older adults living in Tasmania, Australia. However, the relative cultural uniformity of the older adults did not allow an exploration of the ways in which food and cooking are vitally important to older adults' cultural identities, particularly following migration from countries with quite different cultures, languages, and religions (Longhurst, et al., 2009). Nor did it allow an exploration of any culturally-informed variations in care and feeding of older adults by their children and grandchildren (Hashimoto, 2000; Radermacher, Feldman, Lorains, et al., 2010).

Researchers could also conduct studies which explore policy and practice directed towards food security in older adults who are 'ageing in place'. As noted in Chapter One, these services are generally dominated by a welfare or service delivery paradigm which focuses on providing food directly to older adults through delivered meals or social eating programs. There are emerging examples of services which are employing more flexible and strengths-based approaches to food concerns in older adults. One Australian example of a service which reflects these emerging approaches is the 'Good Food Matters' program, run by a charitable organisation in Victoria, Australia, which assists older adults with a disability to shop for food and cook meals for themselves at home (Brotherhood of St Laurence, 2013). Another Australian example of service innovation is the 'Flexible Food' program piloted in the rural region of the Hunter Valley in New South Wales, which takes a holistic approach to older adults' food and social needs, encapsulated by its motto "More Than Just a Meal" (Orpin & Boyer, 2012, p. 4). Additional practice-oriented research could inform the development of new models for services which enable older adults to have nourishing, nutritious, and enjoyable experiences of food, meals, and eating while living in their own homes.

## **9.6 Conclusion**

Informed by phenomenological perspectives on ageing, the social gerontologist Jan Baars has argued that "the lack of positive and negative certainties turns life into an adventure; we cannot live easily with insecurity, but we could not live without it either" (Baars, 2012a, p. 205). At first glance, this appears to be an intriguing proposition – how is it that we could not live without insecurity, given that it is such an unpleasant experience?

Certainly, there is no denying that food insecurity is an inherently undesirable state because it entails human suffering, and as such, no one could reasonably wish for older adults to experience it. However, the research detailed in this thesis has shown that the mere *possibility* of insecurity, whether that is related to food security or ontological security, has significant motivating potential in older adults' lives. It inspires them to develop psychological and practical strategies informed by enduring values, and to undertake agentic actions on a daily basis which are directed towards securing their futures, in relation to food in particular and life in general.

For older adults, threats of insecurity and resultant feelings of anxiety may arise from a variety of circumstances, such as physical limitations due to medical conditions, difficulties with enjoying meals after losing a spouse, or the daily struggles of paying rent and buying food on limited incomes. However, the older adults in this study continue to see themselves as capable of managing threats to their security, and they act accordingly. As such, they are resilient, capable, and agentic actors in their own lifeworlds despite their advanced ages.

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## APPENDIX 1: INFORMATION SHEET & CONSENT FORM

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## **“Experiences of Food, Meals and Eating for Rural Older Adults”**

### **Participant Information Sheet**

#### **1. What is the purpose of this study?**

The purpose of this study is to gain a more in-depth understanding of experiences of food, meals and eating for older adults living in rural and regional Tasmania. Your experience and stories will help us to advise on effective policies and programs to meet the expectations and needs of older Tasmanians in relation to food.

#### **2. Why have I been invited to participate?**

You have been invited to participate in this study because you are aged 75 years or older, you live in the community rather than in residential care, and you live in a rural area of Tasmania.

You were identified as a potential participant in this study by [<insert name here>](#).

Your involvement in this study is entirely voluntary. There are no consequences as to whether you decide to participate or not in this study, including in relation to any services you receive.

#### **3. What will I be asked to do?**

You will be asked to participate in the following activities over a period of approximately 12-18 months:

- **Two face-to-face interviews of approximately one hour each.** I would like to visit you in your home to conduct these interviews. The first interview

will include a short questionnaire which will take approximately 10-15 minutes to complete.

- **One short walking (or mobile) interview – but only if you feel comfortable to do so.** During this time we will take a walk together, perhaps in your garden, on your farm or in your local town. You may choose our route and whether to bring along any of your pets. I will ask you some questions during this walking (or mobile) interview. You are welcome to use any mobility aid you may have, including a wheelchair or walker. Of course, you are welcome to refrain from participating in this activity and we can replace it with a few more questions during one of the interviews conducted in your home.

With your permission, I will record all of these interviews with a digital voice recorder. These recordings will later be transcribed. Upon request, you are welcome to listen to the recordings or read the transcripts to check them for accuracy. The transcript of the first interview will be shown to you prior to the conduct of the second interview.

For any of these sessions, you may choose to have someone of your choosing with you, such as a friend or family member.

Please let me know if you would like to participate in this study but you have any concerns about me visiting your home. We may be able to make arrangements to meet your needs.

If you decide to participate, the interviews will be conducted on dates and at times that suits you.

Here are some examples of questions I might ask you:

1. Could you tell me about some of your most memorable eating experiences?
2. What are the differences for you between an enjoyable meal and a not so enjoyable meal?
3. How do you see your future years in relation to food, meals and eating?

At any time you may choose not to answer any of the questions that I ask you. You do not need to give me a reason for not answering a question.

You can finish an interview at any time. For example, you might feel tired, need to attend to other tasks or be concerned that others might overhear you.

#### **4. Are there any possible benefits from participating in this study?**

The potential benefits to you personally from participating in this study are small. You may enjoy the social contact of my visits to your home and you may enjoy the chance to reflect upon your life experiences and contribute to useful social research.

I hope that this study will be useful to society more generally. A better understanding of the experience of food, meals and eating for older people will inform programs and policies which better meet the needs and expectations of older people in relation to food security.

#### **5. Are there any possible risks from participation in this study?**

The possible risks to you from participating in this study are low. One possible risk is that you may become upset while recalling or discussing your experiences.

If you do experience any distress, I will stop the interview. If you ask for my assistance, I can provide you with information about support services, such as counselling or welfare assistance, which will be relevant to your needs and, where possible, reasonably accessible from your place of residence.

If you do experience any distress, you may prefer to contact a support service directly. Your General Practitioner or Medical Clinic can advise you about that.

If you have any concerns while participating in this study, please feel free to contact me or my Primary Supervisor using the contact details on pages 1 and 5 of this Information Sheet.

#### **6. What if I change my mind during or after the interviews?**

Your participation is entirely voluntary and you are free to withdraw your participation at any time without any effect. Upon your request, any information that you provide for this study can also be withdrawn at any time

up until it becomes unfeasible for me to withdraw your data, such as when your data has been merged with other people's data. If you have any concerns about your participation in this study you are encouraged to contact me or my Primary Supervisor at the earliest opportunity so that we can discuss your concerns. However, you do not have to provide a reason for withdrawing either yourself or your information from this study if that is what you decide to do.

## **7. What will happen to the information when this study is over?**

The audio files, typed transcripts and field notes will be kept for five years after the publication of the findings of the study. Your data will be treated in a confidential manner. It will be kept in a locked filing cabinet at the University Department of Rural Health at the University of Tasmania and saved to a secure area of the University's computer system.

## **8. How will the results of the study be published?**

The results of this study will be published in the form of a PhD thesis. After I graduate, this document will be publically available on the internet at: <http://eprints.utas.edu.au/>.

Should you wish, after I graduate I can provide you with a summary of my thesis for you to keep.

Some of the results of the study may also be published in academic journals which will be available to other students and researchers.

You will not be identifiable in any of the published results. If I quote anything you said, or write about you, I will use a pseudonym or a made-up name for you. In consultation with you, I may also disguise any other identifying details about you, such as the town or locality you live in.

## **9. What if I have questions about this study?**

You and your family members or close friends are very welcome to ask me questions about this study at any time. Please refer to my contact details provided on page 1 of this letter.

Alternatively, you can contact my Primary Supervisor:

Dr. Peter Orpin  
Senior Research Fellow  
University Department of Rural Health, University of Tasmania  
Phone: 6226 7344  
Email: [peter.orpin@utas.edu.au](mailto:peter.orpin@utas.edu.au)  
Mail: UDRH, Private Bag 103, University of Tasmania, Hobart TAS 7001

This study has been approved by the Tasmanian Social Sciences Human Research Ethics Committee. If you have concerns or complaints about the conduct of this study, please contact the Executive Officer of the HREC (Tasmania) Network on (03) 6226 7479 or email [human.ethics@utas.edu.au](mailto:human.ethics@utas.edu.au). The Executive Officer is the person nominated to receive complaints from research participants. Please quote ethics reference number H0012467.

## **10. What do I need to do now?**

If you do not wish to participate in this research – you don't need to do anything. You will receive no further correspondence from me. Thank you for taking the time to read my letter and this Information Sheet.

If you would like to participate in this research – please advise your interest to the person who gave you this letter or contact me directly using the details on page 1. I can make a time to meet you in person to talk more about this study.

A Consent Form is enclosed with this letter. It states that you understand what your participation will involve and any risks or benefits that may accrue to you. If you decide to participate in this research I will ask you to sign this Consent Form before we do any interviews.

## **“Experiences of Food, Meals and Eating for Rural Older Adults”**

### **Participant Consent Form**

1. I agree to take part in this research study.
2. I have read and understood the Participant Information Sheet for this study.
3. The activities and possible effects of the study have been explained to me.
4. I understand that the study involves: participating in two interviews in my home, including answering a brief questionnaire, and participating in a walking interview on my property or in my local area, if I am able to do so comfortably. The interviews will be recorded using a digital audio recorder. I will be given an opportunity to read the transcript of the first interview prior to the second interview. I understand that the total time commitment required of me will be approximately 3 hours, which will be spread over 2-3 sessions during a 12-18 month period.
5. I understand that if I become at all upset by being asked to recall and discuss my experiences, the interviewer will cease the interview. I can ask for the interview to be stopped at any time.
6. I understand that all research data will be securely stored on the University of Tasmania’s premises for five years from the publication of the study results and will then be destroyed.
7. Any questions that I have asked have been answered to my satisfaction.

8. I understand that the researcher will maintain confidentiality and that any information I supply to the researcher will be used only for the purposes of the research.
9. I understand that the results of the study will be published in a manner that ensures I cannot be identified as a participant.
10. I understand that my participation in this study is voluntary. If I do agree to participate, I may withdraw at any time from further participation in the study without any effect. Upon my request, any information that I provide for this study can also be withdrawn at any time until it becomes unfeasible for the researcher to withdraw my data, such as when my data has been merged with other people's data. I understand that if I have any concerns about my participation in this study I am encouraged to communicate with the researcher or her supervisors at the earliest opportunity.

Participant's name:

---

Participant's signature:

---

Date:

---

### Statement by Investigator

☐ I have explained the project and the implications of participation in it to this volunteer and I believe that the consent is informed and that he/she understands the implications of participation.

If the Investigator has not had an opportunity to talk to participants prior to them participating, the following must be ticked.

☐ The participant has received the Information Sheet where my details have been provided so participants have had the opportunity to contact me prior to consenting to participate in this project.

Investigator's name:

---

Investigator's signature:

---

Date:

---

## **APPENDIX 2: ADVERTISEMENT, BROCHURE, LETTERS**

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# Experiences of food, meals and eating

## for rural older adults

The University of Tasmania is conducting research into the experience of food, eating and meals for older adults living in rural Tasmania.

**If you are aged 75 or over and you live in rural Tasmania, you may be able to help us.**

Your experience and stories will help us to inform the development of effective programs to meet the expectations and needs of older Tasmanians in relation to food.

**We'd love to hear from you!**

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### **Please contact:**

Ms Alexandra King, PhD Candidate

University Department of Rural Health

**Mail:** Private Bag 103, University of Tasmania,  
Hobart TAS 7001

**Phone:** 6226 7374

**Email:** [alexandra.king@utas.edu.au](mailto:alexandra.king@utas.edu.au)



# EXPERIENCES OF FOOD, MEALS AND EATING FOR RURAL OLDER ADULTS

The University of Tasmania is conducting research into experiences of food, eating and meals for older adults living in rural Tasmania.

**If you are aged 75 years or over and you live in rural or regional Tasmania, you may be able to help us.**

We are looking for older Tasmanians who can participate in 2-3 interviews in their own home over 12-18 months.

We will ask you about your experiences of food, meals and eating as an older person. We will also ask you about your experiences of food, meals and eating when you were a younger person.

Your experience and stories will help us to advise on the development of effective policies and programs to meet the expectations and needs of older Tasmanians in relation to food security.

**If you are interested in participating in this research:**

- **please advise the person who gave you this brochure; or**
- **contact the study's researcher at the University of Tasmania.**



## RESEARCHER

Alexandra King

PhD Student, University of Tasmania

**Phone:** 6226 7374

**Email:** alexandra.king@utas.edu.au

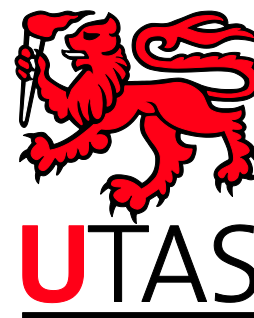
**Mail:** Private Bag 103, Hobart TAS 7001

FACULTY OF HEALTH SCIENCE  
UNIVERSITY OF TASMANIA



UNIVERSITY DEPARTMENT OF RURAL HEALTH

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 Email rural.health@utas.edu.au  
 Web www.utas.edu.au/ruralhealth



UNIVERSITY DEPARTMENT OF RURAL HEALTH

## “Experiences of Food, Meals and Eating for Rural Older Adults”



### Alexandra King, PhD Student

University Department of Rural Health, University of Tasmania

**Phone:** 6226 7374

**Email:** alexandra.king@utas.edu.au

**Office:** 5<sup>th</sup> Floor, CML Building, 18 Elizabeth St, Hobart TAS 7000

**Mail:** Private Bag 103, University of Tasmania, Hobart TAS 7001

Dear <title> <surname>

My name is Alexandra King. I am a mature age postgraduate student undertaking research for a Doctor of Philosophy (PhD) in Rural Health in the University Department of Rural Health at the University of Tasmania.

I am inviting you to participate in a study which explores experiences of food, meals and eating for older adults living in rural Tasmania. This is a social research study. This study is supervised by Dr. Peter Orpin, Dr. Jessica Woodroffe and Ms Kim Boyer from the University of Tasmania. It is funded by an Elite Research Scholarship from the University of Tasmania.

On the following pages there is some information about this study.

Thank you for reading this letter and considering whether you would like to participate in this study.

If you have any questions at all please don't hesitate to contact me.

Yours sincerely,

**Alexandra King**

Private Bag 103, Hobart  
Level 5, CML Building, 18 Elizabeth Street, Hobart  
Tasmania Australia 7001  
Telephone (03) 6226 7374  
Email: alexandra.king@utas.edu.au  
Web: www.utas.edu.au/ruralhealth



UNIVERSITY DEPARTMENT OF RURAL HEALTH

UNIVERSITY OF TASMANIA

<date>

<Address>

Dear <title><surname>

**Re: Research into experiences of food, meals and eating for rural older adults**

My name is Alexandra King. I am undertaking a Doctor of Philosophy (PhD) degree in the University Department of Rural Health at the University of Tasmania. My research is funded by an Elite Research Scholarship. I am supervised by Ms Kim Boyer, Dr Peter Orpin and Dr Jessica Woodroffe.

I am conducting qualitative social research which explores the experience of food, meals and eating for older people who live in rural and regional Tasmania. I would really appreciate your assistance in identifying and contacting potential participants for the study, if possible.

The study entails me visiting and interviewing a sample of community-dwelling people aged 75 years old or above who live in rural areas of Tasmania. Enclosed with this letter is a two-page summary of my research activities and a list of the characteristics of research participants.

If you thought it was appropriate and feasible, it would be very helpful if you or your colleagues would be able to identify clients of your services who may be suitable research participants and then provide them with a brochure about the study. A copy of this brochure is enclosed with this letter. I can easily provide you with additional copies of the brochure, if needed.

If you have any questions at all, please don't hesitate to contact me via telephone or email. I am also very happy to come to <place name> to meet with you, your colleagues or potential research participants to discuss the research further.

Thank you very much for any assistance you can provide to this study. I look forward to hearing from you, when you have a chance to reply.

Yours sincerely,

**Alexandra King**

## APPENDIX 3: INFORMAL SCREENING TOOL

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## INFORMAL SCREENING TOOL

### **Telephone script:**

Thank you for calling me. Are you interested in participating in our research?

Would you mind if I asked you some questions so I can check if you might be able to help with our research?

1. Do you live in a nursing home or assisted living facility? *[If yes – then go to Response A below.]*
2. Are you 75 years old or older? *[If no – then go to Response A below.]*
3. Where do you live in Tasmania? *[If not rural or lives on King or Flinders Island – then go to Response A below.]*
4. (a) Do you receive HACC or similar services, such as home help or Meals on Wheels, or do you attend a social meals program? *[If no – then go to 4b below.]*  
(b) Do you receive assistance with your day-to-day activities from family, neighbours or friends? *[If no to both 4a and 4b, then go to Response A below.]*
5. Do you have a major illness? *[If yes and it is life-threatening and advanced – then go to Response A below.]*

NB: The other three screening criteria – “English-speaking”, “able to hear speech and speak audibly”, and “no major cognitive impairment” – will be assessed informally during the phone conversation rather than enquired about directly.

### **Response A:**

Thank you for taking the time to call me but I am afraid your situation does not quite fit our study. Thank you very much for your interest, though.

### **Response B:**

Thank you for answering all those questions! I would like to invite you to participate in my study. Would you like me to tell you a bit more about the study? Would you like me to come to your home or town for an initial visit before you decide whether or not you want to participate? Or perhaps we can arrange a time now for us to conduct the first interview at your home? Would you like me to send you some information about this study?

## **APPENDIX 4: BIOGRAPHICAL SKETCHES OF THE OLDER ADULTS**

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## **BIOGRAPHICAL SKETCHES OF THE OLDER ADULTS**

### **Mrs Andrews**

Mrs Andrews has an air of quiet determination and she speaks in a thoughtful and cautious manner. She grew up in a remote area on the west coast of Tasmania but now lives in a large town in the north west. She moved into her current home around 63 years ago, soon after getting married. Mrs Andrews's husband was permanently incapacitated by his service in World War II. After he died, she became a minister of religion in her 60s and she has only recently retired, aged in her early 80s. Mrs Andrews has three children and several grandchildren, all of whom live in Tasmania. Aged 84, she is in very good health. Mrs Andrews goes for regular walks in her town and she has fond memories of going for more intrepid walks in the nearby mountains prior to having hip replacement surgery.

### **Mrs Brown**

Mrs Brown is a hospitable and talkative 77-year old woman who cheerfully describes herself as "an old boiling chook". Alongside her husband, she was a dairy farmer in north east Tasmania for 45 years. Widowed 24 years ago, Mrs Brown lives alone in a house on her farm that was built for her when she retired. Mrs Brown has several serious medical conditions including heart disease and type 2 diabetes, and she now rarely walks further than her letterbox at the end of her short driveway. Her son lives in the farm's homestead and her daughter lives in a neighbouring house, both of which are within sight of Mrs Brown's house. She runs a social eating group for rural widows that has met regularly for more than 25 years.

### **Mrs Clark**

Working with her husband, Mrs Clark is a very active volunteer and advocate on aged care and ageing issues. She has lived in rural areas for many years, although she did live alone in Hobart from the age of 12 for several years in order to support herself. Mrs Clark raised four children and one grandchild, and she now has great-great grandchildren. At 83, Mrs Clark has thyroid disease and a heart condition, and her health markedly worsened between her first and second home visits.

### **Mr and Mrs Donald**

Mr and Mrs Donald live in rental accommodation in the centre of a coastal holiday town on the east coast of Tasmania. They migrated together from the United Kingdom to Australia. In his younger years, Mr Donald travelled to countries in Europe, Africa, and the Pacific while in the Air Force. They have no children and no other relatives in Australia. Aged 78 and 79 years old respectively, Mr and Mrs Donald both have significant medical conditions – Mr Donald is undergoing chemotherapy for bowel and lung cancer, and Mrs Donald has osteoarthritis and low vision, and she had a stroke a few years ago. They have no regular social contact with friends or neighbours.

### **Mr Edwards**

Mr Edwards is a slightly gruff but kind man who is very active, both mentally and physically. He is looking forward to turning 80 years old at his next birthday when, he says, he will receive his O.B.E. award – “Over Bloody Eighty!” He lives with his wife in a coastal town of eastern Tasmania. He has three adult children and grandchildren. He worked as a commercial cray fisherman, mutton birder, and sheep farmer and still does not think of himself as retired. Each year, he goes to Lord Howe Island in NSW, where he works as a volunteer weeder and climbs Mount Gower. Mr Edwards writes poetry, records his life experiences, and works on a lot of gardening and handyman projects. He has had heart surgery but is otherwise in reasonably good health. Mr Edwards is a friend and neighbour of Miss Roberts.

### **Mr Frith**

Mr Frith has a broad smile and tells engaging stories. He grew up in relative poverty in a family of 10 in Scotland. After World War II, Mr Frith migrated to Tasmania and lived in the city of Hobart for almost 40 years, where he worked as a building manager and engineer. After his wife died, Mr Frith moved to a north west coastal town to be closer to one of his sons. His other son died in adulthood. Mr Frith has a large and sociable extended family, including great grandchildren, whom he enjoys visiting in southern Tasmania and interstate. Aged 84, Mr Frith has had heart surgery but he is in reasonably good health. He goes for long walks several times a week. Mr Frith is an active Freemason, teaches himself how to use computers, does architectural drafting, and regularly borrows novels from his local library.

### **Mr Garner**

Mr Garner is an enthusiastic and industrious retiree. He lives with his wife in a farming area located about 15 kilometres from a coastal town in north west Tasmania. Aged 74, he has two adult children, as well as grandchildren. Mr Garner migrated from the United Kingdom with his wife. A former school teacher, he lives on a government pension plus a small income earned by his wife, but they budget carefully in order to afford a trip to Japan every second year. Mr Garner is a voluntary secretary for four Freemasons' Lodges, cooks all the meals for himself and his wife, and he maintains a large and productive vegetable garden. He knows Mr Frith, and Mr and Mrs Langridge.

### **Mrs Hughes**

Mrs Hughes migrated from Manchester in the United Kingdom to Tasmania as a young bride. After she was widowed, Mrs Hughes moved from a farming area to a rural town in northern Tasmania. During her first interview, Mrs Hughes describes herself as "content but not happy – I can't be happy without my husband". Aged 77, she has four adult children, three of whom live in Tasmania, as well as several grandchildren. Mrs Hughes uses the internet regularly and she maintains a lifelong interest in world politics and English football. Between her first and second home visits, Mrs Hughes began experiencing difficulties with intrusive dogs owned by her next-door neighbour.

### **Mrs Ingram**

Mrs Ingram speaks in a rather proper accent but has a robust sense of humour. She likes adventures – two years ago she took a ride over her town in a gyro-copter to mark her 80<sup>th</sup> birthday. Mrs Ingram grew up in an urban area of South Australia but she has lived in rural Tasmania for several decades. She lives in an industrial coastal town in a home that is part of a Church-run housing estate. She is widowed and has two adult children – one lives in northern Tasmania and the other has lived overseas for many years. Mrs Hughes has had a hip replacement and a stroke, but she is a very active volunteer and writes many letters and poems.

### **Mrs Johnson**

Mrs Johnson grew up on a sheep and cropping farm in Tasmania and farmed alongside her husband for many years. She was widowed more than 15 years ago. Now aged 78 years, she is

retired from farming and lives in a coastal town. Her brother, sister-in-law, and niece live in the same town, and at the time of her second home visit, one of her sons was preparing to retire and move to the town as well. Mrs Johnson goes on holidays to Queensland each winter and also travels overseas fairly regularly. Reserved and thoughtful, she is an enthusiastic gardener. At the second home visit, Mrs Johnson was recovering from recent cataract surgery.

### **Mrs Knight**

At 90 years, Mrs Knight is a highly energetic, alert, and talkative woman. After growing up in rural Victoria, she moved to Tasmania as a young woman and worked as a remote bush nurse. After her marriage, Mrs Knight worked as a dairy farmer and foster parent in rural Tasmania. After her husband died, she sold their farm and travelled overseas many times. Mrs Knight lives in a group of units near the centre of a rural town in north west Tasmania. Her son also lives in the region. She is very active, participating in 13 different voluntary and social groups. Mrs Knight was diagnosed with lung cancer between her first and second home visits.

### **Mr and Mrs Langridge**

After growing up in Sydney, Mr and Mrs Langridge married and moved to Tasmania. They have moved regularly since then, living in around 11 different houses. At the first home visit, Mr and Mrs Langridge were sharing a rented house with their son, daughter-in-law, and granddaughter. Prior to their second home visit, Mr and Mrs Langridge moved into another rental property in the same town. Aged 85, Mrs Langridge was treated in hospital for type 2 diabetes between their two home visits, including having one of her toes amputated. Aged 87, Mr Langridge experiences pain in one knee and has recently been diagnosed with dementia. He is an active member of a Freemasons' Lodge, and they both attend a local church.

### **Mr Mitchell**

Mr Mitchell is an inquisitive and well-educated man who tells detailed and lively stories. He has farmed sheep and crops on his family's land for over 50 years. He and his four sisters grew up in the city of Hobart until he moved to his farm aged in his twenties. Now aged 77, Mr Mitchell has been widowed twice. He has three adult children plus two teenage children who attend a Tasmanian boarding school and come home on many weekends. One of Mr

Mitchell's adult sons lives with his wife and children a couple of kilometres away on the same farm. Mr Mitchell keeps busy restoring his historically significant garden and house. He has had a heart attack and has hearing problems, but he is otherwise in good health and is very physically active. Every second day, he goes for a lengthy walk on his farm.

### **Mrs Noonan**

Mrs Noonan is a calm, kind, and gentle lady who says she enjoys "being lazy" in her old age. The most common phrase she uses during her interviews is "never mind". She grew up in rural Tasmania and has lived in more than 10 rural places around Tasmania. Aged 86, Mrs Noonan is widowed and lives in retirement housing in a north east Tasmanian town. She has four adult children, three of whom live in Tasmania. Her daughter lives nearby and visits every Friday on her way to work. Mrs Noonan receives delivered meals five days per week, which she thoroughly enjoys eating.

### **Mrs O'Brien**

Mrs O'Brien grew up in fairly poor circumstances in rural Tasmania. She is an opinionated, lively, and amusing conversationalist with an enduring interest in education. Aged 80, she has very low mobility due to severe osteoporosis. Between her first and second home visits, Mrs O'Brien experienced an emergency hospital admission due to unexplained haemorrhaging. During her admission, Mr O'Brien was involved in a car accident which resulted in court action. Mrs O'Brien receives personal care, cleaning, and delivered meals from an aged care service, and very reluctantly, she is intending to access occasional respite care. Mrs O'Brien has two adult sons living nearby and her first great grandchild was born recently.

### **Mrs Parker**

Mrs Parker is a petite and energetic lady who dresses neatly in jeans, sneakers, and fashionable t-shirts. She has very low vision due to macular degeneration but she is otherwise in very good health. Mrs Parker grew up in Tasmania and urban Victoria and now lives in a north western town. She left full-time schooling at nine years of age to care for her ill mother and her younger siblings. At the time of her first home visit, one of Mrs Parker's adult children had recently died following a short illness. Aged 82, Mrs Parker enjoys talking with her children and grandchildren and she is a great grandmother, too. Mrs Parker's brother lives in

rural Tasmania and he visits occasionally when a family member has time to drive him to her home.

### **Mr and Mrs Quinn**

Both 81 years old, Mr and Mrs Quinn live in a small rural town in western Tasmania. Mr Quinn is a cheerful and cheeky communicator, while Mrs Quinn is more reserved and considered. Mr Quinn grew up in rural Tasmania while Mrs Quinn grew up in the city of Hobart. For both of them, this is their second marriage. Both Mr and Mrs Quinn have type 2 diabetes and Mrs Quinn is relatively immobile due to leg pain. Between their first and second home visits, Mr Quinn also suffered a stroke. They have adult children and grandchildren living in Tasmania. They both enjoy attending a weekly social meals program.

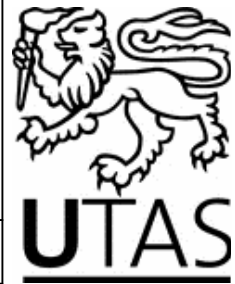
### **Miss Roberts**

Miss Roberts is a talkative and warm woman. She never married and had no children, instead working as a radio announcer and truck driver. She grew up in rural Queensland and moved to Tasmania as an adult. Aged 72, Miss Roberts finds walking difficult and she no longer drives due to knee and back pain. She maintains an active interest in Australian politics and plays online Scrabble regularly. Miss Roberts has a network of friends who live locally and elsewhere in Tasmania, including one friend with whom she speaks every day on the telephone.

## **APPENDIX 5: ETHICS APPLICATION APPROVAL & APPROVAL FOR AMENDMENT**

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Social Science Ethics Officer  
Private Bag 01 Hobart  
Tasmania 7001 Australia  
Tel: (03) 6226 2763  
Fax: (03) 6226 7148  
Katherine.Shaw@utas.edu.au



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HUMAN RESEARCH ETHICS COMMITTEE (TASMANIA) NETWORK

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3 May 2012

Dr Peter Orpin  
University Department of Rural Health  
University of Tasmania  
Private Bag 103  
Hobart Tasmania

Student Researcher: Alexandra King

Dear Dr Orpin

Re: MINIMAL RISK ETHICS APPLICATION APPROVAL  
Ethics Ref: **H0012467 - The Experience of Food Insecurity for Older People Living in Rural Tasmania**

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We are pleased to advise that acting on a mandate from the Tasmania Social Sciences HREC, the Chair of the committee considered and approved the above project on 03 May 2012.

This approval constitutes ethical clearance by the Tasmania Social Sciences Human Research Ethics Committee. The decision and authority to commence the associated research may be dependent on factors beyond the remit of the ethics review process. For example, your research may need ethics clearance from other organisations or review by your research governance coordinator or Head of Department. It is your responsibility to find out if the approval of other bodies or authorities is required. It is recommended that the proposed research should not commence until you have satisfied these requirements.

Please note that this approval is for four years and is conditional upon receipt of an annual Progress Report. Ethics approval for this project will lapse if a Progress Report is not submitted.

The following conditions apply to this approval. Failure to abide by these conditions may result in suspension or discontinuation of approval.

1. It is the responsibility of the Chief Investigator to ensure that all investigators are aware of the terms of approval, to ensure the project is conducted as approved by the Ethics Committee, and to notify the Committee if any investigators are added to, or cease involvement with, the project.

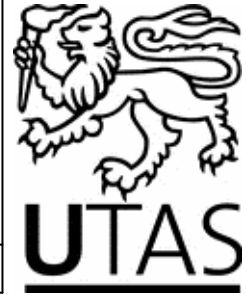
2. Complaints: If any complaints are received or ethical issues arise during the course of the project, investigators should advise the Executive Officer of the Ethics Committee on 03 6226 7479 or [human.ethics@utas.edu.au](mailto:human.ethics@utas.edu.au).
3. Incidents or adverse effects: Investigators should notify the Ethics Committee immediately of any serious or unexpected adverse effects on participants or unforeseen events affecting the ethical acceptability of the project.
4. Amendments to Project: Modifications to the project must not proceed until approval is obtained from the Ethics Committee. Please submit an Amendment Form (available on our website) to notify the Ethics Committee of the proposed modifications.
5. Annual Report: Continued approval for this project is dependent on the submission of a Progress Report by the anniversary date of your approval. You will be sent a courtesy reminder closer to this date. **Failure to submit a Progress Report will mean that ethics approval for this project will lapse.**
6. Final Report: A Final Report and a copy of any published material arising from the project, either in full or abstract, must be provided at the end of the project.

Yours sincerely



Katherine Shaw  
Ethics Officer  
Tasmania Social Sciences HREC

Social Science Ethics Officer  
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Tasmania 7001 Australia  
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Human.ethics@utas.edu.au



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HUMAN RESEARCH ETHICS COMMITTEE (TASMANIA) NETWORK

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30 July 2012

Dr Peter Orpin  
Rural Health  
Private Bag 23

*Sent via email*

Dear Dr Orpin

Re: APPROVAL FOR AMENDMENT TO CURRENT PROJECT

Ethics Ref: H0012467 - The Experience of Food Insecurity for Older People Living in Rural Tasmania

Amendment : Revised brochure for participants. Revised information sheet. Revised consent form. Revised interview schedule. Revised introductory letter. Revised questionnaire. Revised screening questionnaire. Revised letter to services.

Addition of new selection criteria: receives a HACC or similar service, attends a social meals program or receives regular informal support from family, friends or neighbours for Activities of Daily Living. Revised advertisement.

Project information for services.

Revised project aim and research questions. Change of project title to 'Experiences of Food, Meals and Eating for Rural Older Adults'. Remove one of the selection criteria for research participants: food insecure.

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We are pleased to advise that the Chair of the Tasmania Social Sciences Human Research Ethics Committee approved the Amendment to the above project on 27/7/2012.

Lauren Townsend  
Ethics Administrator  
Office of Research Services  
Tel: +61 (0)3 6226 2764  
Email: [Lauren.Townsend@utas.edu.au](mailto:Lauren.Townsend@utas.edu.au)  
University of Tasmania, Private Bag 01 Hobart Tas 7001

## APPENDIX 6: DETAILS OF INTERVIEWS

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## DETAILS OF INTERVIEWS

Older Adult	Age at first interview	Number of in-depth interviews	Number of walking interviews	Reason for not engaging in a walking interview	Total number of interviews (home visits)	Combined length of interviews (hours: mins)
Mrs Andrews	84	1	1	-	2	2:00
Mrs Brown	77	1	1	-	2	5:13
Mrs Court	83	2	0	medical condition	2	3:11
Mr Donald	79	2 *	0	medical condition	2 *	2:44
Mrs Donald	78		0	medical condition		
Mr Edwards	79	1	1	-	2	2:54
Mr Frith	84	2	1	-	3	6:08
Mr Garner	74	1	1	-	2	2:44
Mrs Hughes	77	1	1	-	2	3:38
Mrs Ingram	82	1	1	-	2	2:48
Mrs Johnson	78	1	1	-	2	2:03
Mrs Knight	90	2	0	medical condition	2	4:27
Mr Langridge	87	2 *	0	visitors	2 *	3:22
Mrs Langridge	85			medical condition		
Mr Mitchell	77	1	1	-	2	8:02
Mrs Noonan	86	3	0	wet or windy weather	3	3:29
Mrs O'Brien	80	2	0	medical condition	2	2:39
Mrs Parker	82	2	0	visitor	2	3:36
Mr Quinn	81	1 *	1	-	2 *	1:30
Mrs Quinn	81		0	medical condition		
Miss Roberts	72	1	1	-	2	4:12
<b>TOTAL</b>	-	<b>27</b>	<b>11</b>	-	<b>38</b>	<b>64:40</b>

\* These were joint interviews.

## APPENDIX 7: INTERVIEW GUIDE, INDIVIDUAL GUIDE & QUESTIONNAIRE

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## INTERVIEW GUIDE

### INTRODUCTORY SESSION IMMEDIATELY PRIOR TO FIRST INTERVIEW

- Greetings and chat about interviewer's journey or participant's home or pets. Provide small gift of flowers from own garden or home-baked food.
- Introduce myself – mature age student, living in Hobart, mother of two, etc.
- Introduce research – purpose, data management, outcomes of research.
- Ethical issues – confidentiality and anonymity, reminder of audio recording.
- Ask if they want to ask me any questions.
- Obtain written consent.
- Invite participant to suggest a site for the interview – a room or in the garden or in the shed while they fix something, for example.
- Ask if there is anything they need to do before we get started.

### FIRST INTERVIEW

#### Introduction:

- Turn on the audio-recorder – try to put participant at ease about recording.
- Give participant an overview of the process and possible duration of the interview.

Indicative introductory blurb (adapted from Hennink, et al., 2011):

*"I am recording our interview so that I can remember what you say to me and can type it up afterwards. I don't have a terribly good memory! The questions I would like to ask you relate to your experiences with food, eating, and meals – both as an older person and earlier in your life. I think it's interesting to talk about food – and I hope you think so too! There are no right and wrong answers – I am very interested to hear what you have to say about this topic. I imagine this interview might take around one hour but we can take as little or as much time as you like. You can take a break at any time during the interview if you feel uncomfortable or tired. We can stop for the day at any time, too. Would you like to ask me any questions before we begin?"*

## Opening questions

Topic	Question	Probe
Life history	Can you tell me a bit about your life?	Example: When we filled out the questionnaire, you told me you were born in Poland. Can you tell me about life in Poland? And what brought you to Australia?  Example: When we filled out the questionnaire, you told me you live with your wife. Can you tell me a little about your life together?
Values in relation to food	What are some of your favourite foods?	Why?
	Can you tell me what importance food, meals and eating has in your life?	Why or why not? Has this changed over your life?
Memories of food and eating	Could you tell me about some of your most memorable eating experiences?	Why were they memorable? Do you remember the smells, tastes and texture of the food or the presence of others?
	Are there things from the past that are important to you in terms of food and eating?	
	Has there been times in your past, perhaps in your childhood, when you or your family were short of food? Had to eat poor-quality food? Were uncertain whether you could get more food? Ate food that was unacceptable for any reason?	Can you tell me about that experience? How did you feel about it at the time?
Memories of food and eating [continued]	How has food, eating and meals changed over your lifetime?	For society more broadly? For you in relation to those broader social changes?
	What were some of your favourite cookbooks? Where else did you find recipes?	Were any books or recipes passed down through the family?
	Who or what do you miss from the past that is associated with food?	Example of pricked lemon pudding.

## Key questions

Topic	Question	Probe
Current food and eating practices and experiences	What is the experience of eating like for you?	For example – can you tell me about eating last night's dinner?
	Can you tell me about your daily meals?	When do you eat them? What do you usually eat? How many and what sort of meals/snacks/drinks?
	How do you obtain your food and meals?	What are your shopping and cooking routines or habits? What about visiting cafés or restaurants? Has your pattern of obtaining food and meals changed over time? How? Why?
	Do you eat out at restaurants and hotels? What about eating take away meals?	Can you tell me about that?
	If you prepare some of your own meals, can you tell me a bit about what you cook and why?	
	What affects your meals and eating?	What is the nature of the effect? Has this changed over time?
	Are some of your meals are provided by a service or family or friends?	Can you tell me more about that? Do they people who deliver the food eat with you? What do you think of the meals they provide?
	Where in your home you do prefer to eat your meals?	Has this changed over time? Why?
	Who do you eat your meals with?	Has this changed over time? Why?
	What sort of gifts of food do you give or receive, if any?	When? Are the food gifts you receive important in your overall diet?
	Do you sometimes eat meals with family members or neighbours or friends?	With whom? How often might that occur? Can you describe those meals?
	What about meals when you have been unwell or recovering from an operation, for example?	
	What did you cook for your husband or wife when he or she was alive?  Where did you sit to eat your meals together?	

Topic	Question	Probe
Current food and eating practices and experiences [continued]	What do you think about eating with others or eating alone?	
	What are the differences between an enjoyable and a not so enjoyable meal, for you?	
	Is there anything you would like to change about your food or eating?	If so – what would you like to change and why?
	What are some health messages you have been given about food?	Who gave those to you?
	Do you diet or watch your weight?	
	Outdoor eating – picnics, camping, bushwalking, barbeques	
	Has the need to take medication changed the way you eat or what you eat?	
	Do you enjoy having a drink of alcohol with your meals or at other times?	

### Closing question

Topic	Question	Probe
Food and eating into the future	How do you see your future years in relation to food, meals and eating?	What do you think might change? Why?  What do you feel about your future in relation to food, meals and eating?

### Closing discussion

- Ask if the participant wants to ask any questions of me, either about the research or about myself.
- Thank the participant for today's interview.
- Ask the participant "How was that interview for you?".
- Discuss the likely timing of my next visit.
- Advise the participant they are welcome to contact me at any time before my next visit.

## SECOND INTERVIEW

The primary aim of the second interview is for us to delve deeper into the topics raised in the first interview. It also provides me with an opportunity to ask questions in this interview guide but were not asked in the first interview due to time or other constraints. I will also seek clarification on anything raised in the first interview.

I will develop the questions in this second interview after the first interview has been conducted and I have reviewed the audio-recording of the interview. As such, the second interview will be different for each participant. One key question will be the same for all second interviews:

“Has anything changed in relation to food, meals or eating for you since our last interview? Can you tell me about that?”.

### Closing discussion

- Provide an opportunity for the participant to ask any questions of me.
- Thank the participant for today’s interview.
- If not already conducted, discuss timing of the walking interview, which may be held during the same visit or at another time, according to the needs of the participant.
- Advise the participant they are welcome to contact me at any time before my next visit.

## WALKING INTERVIEW

This interview will be more informal than the other two interviews. The questions asked during this interview will primarily be developed spontaneously during the walk, as they will be informed by the context of the walk and might include general conversation about the physical and natural setting. The example questions below are indicative only.

Topic	Question	Probe
Place	Can you tell me about your home and garden?	How long have you lived here? How do you feel about living here?
	How long have you lived here in this house/region/country Tasmania?	What brought you here?
	What memories does this place hold for you?	
	How do you feel about the people who live near you?	

Topic	Question	Probe
Place [continued]	Is there anything about your home, garden or local area that you wish were different?	What? Why?
	Does anything about living here affect the meals and food you eat?	In what way?
Food – if we walk in their garden and look at their vegie patch, for example	Can you tell me what sort of food you grow?	
	What did you grow in the past?	Why did this change?
	Why do you grow food?	
Mobility – if homebound, for example	How has your challenges with mobility affected you in relation to food, meals and eating?	

### CLOSING SESSION WITH PARTICIPANT

- Thank the participant for their contribution to my research.
- Tell the participant what research activities I will be doing from now onwards – interviews with other participants, analysing the data, and writing up my thesis.
- Provide the participant with a small gift as a token of my appreciation.

## INDIVIDUAL GUIDE FOR SECOND INTERVIEW – *Sample from Mrs Andrews' interview*

### Finalise questionnaire

1. Date of birth?
2. Ethnic background or heritage?
3. How many years have you lived at this address, in this town, in rural Tasmania?
4. Are you a Health Care Card or pensioner?
5. Do you own your own home?

### Questions not asked in first interview

6. *How do you see your future years in relation to food, meals and eating? e.g. driving*
7. Life while married – where you and your husband farming? Were you working as a priest while bringing up children?
8. What did your husband like you to cook for him? Where did you sit to eat?
9. What does food mean to you?
10. Has dieting, medication, health concerns ever affected your eating?
11. Have you grown food in the past? When and why did that diminish for you?
12. How do you shop for food? How do you feel while doing it?

### Exploration of answers given in first interview

13. You said your mother cooked “plain well-cooked nicely prepared meals” P3. What would they look like? Can you describe them to

me? “good”; “solid”; “ordinary”; “everyday”; “reasonable simplicity”; “simple”; “wholesome”

14. Concrete details – how did your mother cook, what were the meals?
15. “It was never the highlight of my life that I could make scones”  
P9. You also said you were not brought up as model housekeeper by your mother. Perhaps carried that forward into your married life, too? Your community role. Busy on a farm as well?

### Place and walking questions

16. Are there features of this town that you especially like?
17. Is there anything you wish were different about this town or its surrounds?
18. What memories does this town or surrounds hold for you?
19. How do you feel about the people who live near you?
20. Do you feel connected to friends or family who live further away?
21. Does anything about living here affect the food and meals you cook or eat?
22. Can you tell me about what you enjoyed about bushwalking when you were younger?
23. How do you feel about walking now?

### Closing

24. Is there anything you would like to tell me about your food meals and eating that we have not talked about yet?

## PARTICIPANT QUESTIONNAIRE

### “Experiences of Food, Meals and Eating for Rural Older Adults”

**1. What is your name? *(Your name will not be recorded anywhere else.)***

FIRST NAME:

SURNAME:

**2. Are you male or female?**

MALE ☐

FEMALE ☐

**3. What are your contact details?**

HOME ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

**4. What is your date of birth?**

\_\_\_\_\_

**5. Were you born in Australia?**

YES/NO

If no, then state your country of birth and the year you arrived in Australia:

COUNTRY: \_\_\_\_\_

YEAR OF ARRIVAL: \_\_\_\_\_

**6. What is your ethnic background or heritage?**

---

**7. What are your living arrangements?**

I LIVE ALONE ☐

I LIVE WITH MY SPOUSE OR PARTNER ☐

I LIVE WITH ANOTHER FAMILY MEMBER ☐

I LIVE WITH SOMEONE ELSE (e.g. tenant, housemate) ☐

**8. What is your marital status?**

I AM MARRIED OR HAVE A PARTNER AND WE ARE LIVING TOGETHER ☐

I AM A WIDOW OR WIDOWER AND HAVE NOT REPARTNERED ☐

I HAVE NEVER MARRIED OR PARTNERED ☐

I AM DIVORCED OR SEPARATED AND HAVE NOT REPARTNERED ☐

OTHER e.g. I am married but I live alone as my spouse is in residential care ☐

Please describe: \_\_\_\_\_

**9. How many years have you lived...**

AT THIS ADDRESS? \_\_\_\_\_ [YEARS OR MONTHS]

IN THIS TOWN OR AREA? \_\_\_\_\_ [YEARS OR MONTHS]

IN RURAL TASMANIA? \_\_\_\_\_ [YEARS OR MONTHS]

**10. Do you hold a Health Care Card?**

YES ☐

NO ☐

**11. Do you own your home or are you renting your home?**

OWN HOME ☐

RENTING ☐

Thank you for completing this questionnaire. All the information that you provide will be kept in the strictest confidence.

## APPENDIX 8: SAMPLES OF SERENDIPITOUS DATA

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## SAMPLES OF SERENDIPITOUS DATA

Below: Correspondence from Mrs Knight

To Alexandra,  
Thankyou so much  
for card. yes I'm still in la  
of living. Had 2 month check  
up with lung specialist last  
week & the node in neck  
hasn't altered. I haven't any  
pain or symptoms, only being  
tired & not very interested  
in food, but am eating all the  
right things. Best wishes. Enjoy

Lamb Jey.  
Pork chops.  
Lamb chops.  
rump steak  
good steak for. Cassarols.  
Sausages.  
Mince meat  
chicken smetseles,  
Cassaroles  
Pork Loh.  
chicken Breast  
drum Legs of chicken  
Lamb Shanks

Above: Mrs Parker's shopping list for the butcher

Below: Mrs Ingram's poem

STEAK OUT AT THE OK KITCHEN:

"STEAK OUT" I wrote myself a note  
You may be wond'ring why I wrote  
It. Then again, you might just be  
A freezer user just like me.

In that case you'll know why I had  
To make reminders..memory's bad..  
Upon a supermarket tag  
And put it safely in my bag.

But, lackaday, I lost the scrap  
Of paper: had to take the rap  
For serving up the "rare/rare" steaks.  
Ah well, my dears, then there's the breaks...

Mothers Day Dinner at Strath Lyn. 2pm to 4-30 pm.

There was plenty of good water !!!!

We were given a round dry bun thing, and typical useless thing they call a knife that would not cut the dry bun open, also a small dish of yellow liquid. The others broke bits off the dry bun in the fluid before eating.

Entrée:- Pork belly looked the best of a bad bunch. Well cooked pork cutlets has a good flavour, but what was served was soft and fatty and accompanied by several small mushrooms and some raw vegetable with an animal name Bruno Basil or some such, was drowned with sour bitter fluid. There were no salt or pepper shakers provided, but small dishes of pepper and coarse salt which had to be picked up with finger and thumb and scattered over the food. We used to use coarse salt years ago to make brine for preserving mutton birds.

For the main course I selected Venison. I had eaten Chevron years ago and it was O K. Venison is supposed to be similar. However 45 minutes later the weird concoction arrived. I was able to grind off a small portion with the provided blunt knife thing and although it was soft and wet with some obnoxious fluid, I was unable to reduce its size by chewing it, so swallowed it in a lump. My son in law was next to me and he had ordered cooked chicken so we swapped meats. There were no normal vegies like (potato, carrot, corn, parsnip, pumpkin, peas, beans or cabbage) The bulk of the rest was some small green half pea thing that was probably meant to go in pea soup.

My choice for the third course was apple crumble which I thought could not be mucked up, but I was wrong. It is normally made in a dish with stewed apple and the crumble on top and a serving put in a dessert plate with a jug of milk nearby to cool it down. Half an hour later it arrived. A bread & butter plate with a paper napkin and a thick walled cup! bowl affair with the crumble overflowing onto the napkin (no milk to cool it down or space to put the milk if there was any. I dug the spoon down one edge, dislodging more crumble and found hard pieces of very hot apple which could not be cut with a spoon. Beside the cup affair were two short handled ceramic spoon affairs, one of which contained cream, the other ice cream. I poked the ice cream down into the cup to try and cool the mixture which had apparently been micro wave heated. The raw hot chunks of apple eventually cooled down but crunchy to eat. Of course there was no teapot, milk jug or sugar bowl on the table, so one had to try & catch a waiters eye to order tea or coffee.

So! Two visits to Strath Lyn, the first and the last came to an end.  
A pity they didn't engage a good cook instead the modern chefs.

Above: Mr Edward's review of a "memorable" meal