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'You've got to be old to go there'

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'You've got to be old to go there': psychosocial barriers and facilitators to

social eating in older adults.

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Abstract

Background and Objectives: Social eating is associated with a range of physical and mental

health benefits for older adults. Previous research has identified some of the practical

barriers that may limit social eating, such as cost and access to public transport. However,

little is known about the psychosocial issues that can affect older adults' engagement with

social eating. This study examines psychosocial barriers and facilitators to attending

community-based social eating opportunities for older adults.

Design and Methods: Forty-two older people aged between 59-89 years living in

Manchester, UK, participated in semi-structured interviews or focus groups about their

experiences and perceptions of social eating opportunities. Interview transcripts were

analysed using an inductive thematic analyses. As there are known gender differences in

relation to attitudes and behaviours relating to food and social activities, a framework

analysis was applied to explore how these themes were differentially expressed by gender.

Results: Four themes were identified that related to the importance of: 1) offering more

than food; 2) participants' social identity; 3) taking the first step; and 4) embarrassment and

self-consciousness about physical health. Gender differences related to perceptions of the

relevance and attractiveness of social eating, and the role of social support.

Discussion and Implications: This study improves our understanding of older adults' social

eating experiences and highlights clear strategies by which social eating opportunities could

be made more attractive, accessible, and acceptable to older adults.

Keywords: Commensality, Gender differences, Wellbeing, Psychological issues

Introduction

Social eating, or commensality, is defined as eating or sharing meals with other people (Vesnaver et al., 2015). Commensality continues to be the subject of theoretical and empirical research across the globe, notably in the field of sociology (Vesnaver et al, 2015), and has been associated with a wide range of physical and mental health benefits (Vesnaver & Keller, 2011). These include improved nutritional status (Boyer et al, 2016; Hays and Roberts, 2006), strengthening of the quality and quantity of social bonds and networks (Herne, 2009; Giacoman, 2016), increased wellbeing (King et al., 2017; Milligan, et al., 2015), and reductions in loneliness (Skingley, 2013), stress (Wikby & Fagersklold, 2004) and depression (Tani et al., 2017). However, large numbers of older adults live alone due to, for example, changes in the availability of housing, widowhood and divorce, and the departure of adult children (Tomstad et al, 2012; Wandera et al, 2017). Combined with the fact that the practice of eating with families and friends has become less common (Yates & Warde, 2016), this has led to a global increase in the number of older adults eating alone (Korsgaard et al, 2018: Nakata & Kawai, 2017).

Gender differences in attitudes and practices surrounding food behaviours are one factor that may influence needs for, and engagement with, social eating opportunities. For instance, Hughes et al (2004) found that poor cooking skills and low motivation were higher among older men than women, and constituted key barriers to maintaining healthy eating habits. Such gender differences have likely arisen from historical differences in socialisation and gender roles, in which women were traditionally expected to tend to food-related tasks, such as cooking and shopping, whilst men remained unfamiliar with cooking (Newman and Brach, 2001). Studies looking at associations between eating alone, loneliness and mortality have also found increased risks in men than women (Tani et al., 2017; Tani et al., 2015;

Isherwood, King, & Luszcz, 2015), even after adjusting for covariates such as health status and instrumental daily activates (Tani et al., 2017). Compared with men, women more traditionally socialise around food and meals (Caraher, et al., 1999): a finding that is consistent with models describing the more general increased capacity of older women to have more intimate and supportive social contact, compared with men (Seale & Charteris-Black, 2008). They are also more likely to choose a healthier diet due to concerns about maintaining a good appearance (Hurd, 2000). However, non-cohabiting women have been shown to simplify their cooking and meals, which can increase their risk of malnutrition (Gustafsson & Sidenvall, 2002). These reductions in cooking behaviour with increased age may, at least in part, be due to women diverting their limited time and energy resources towards social activities and hobbies (Lane et al., 2014), again demonstrating the particular importance of social contact to older women.

One way to facilitate social eating among older people is through the provision of community-based social eating activities, such as luncheon clubs (Thomas & Emond, 2017), where groups of people can meet to eat a shared meal at an affordable price. This approach is consistent with theoretical perspectives recognising the contribution of social and community factors to an individuals' ability to age well (Canham et al., 2018). Indeed, community luncheon clubs have been shown to be effective at improving nutrition and wellbeing among older people. For instance, nutrient intake (iron, calcium, and folate) has been shown to be higher on the days older people attended luncheon clubs compared to other days of the week (Burke, et al., 2011). Generally, food tastes better, and people eat more, when with others: an effect known as social facilitation (Herman, 2015). Even in the absence of food choice, older people attending luncheon clubs consider them pleasurable experiences due to the social interactions with others (Thomas & Emond, 2017). However,

not all commensality experiences are positive, and can depend on the context and the people who are eating together (Giacoman, 2016).

Despite the potential benefits of community-based social eating opportunities, many older people are unable or unwilling to attend them. For instance, luncheon clubs in the UK have reported low attendance and membership (Brighton & Hove Food Partnership, 2015; Sheffield City Council, 2017), particularly amongst men, who make up just one third of attendees (Community Food & Health, 2011). Previous research exploring reasons for the lack of engagement with community luncheon clubs identified a number practical barriers to attendance, such as the cost of meals and difficulty finding information about luncheon clubs (Brighton & Hove Food Partnership, 2015); the locality and lack of access to transport (Boyer, Orpin & King, 2016: Green, Jones & Roberts, 2014); and the impacts of illness and disability (Goll, et al., 2015). However, to our knowledge, no study has directly focussed on the psychosocial issues that may affect peoples' willingness to attend, such as their perceptions, attitudes, and self-confidence.

The aim of this study was to identify psychosocial barriers and facilitators to attending social eating opportunities for older adults. In doing so, we aimed to contribute to an understanding of older adults' social eating experiences, and highlight clear strategies by which social eating opportunities could be made more attractive, accessible, and acceptable to older adults. Given the known gender differences in norms and attitudes and relating to food and social eating, gender-specific views on eating with others were also investigated. Interviews and focus groups were conducted with older adults who attended community luncheon groups and those who did not attend. The study of community based luncheon clubs allows for an understanding of how older adults can be supported to attend social

eating opportunities within the context of an ageing population, both in the UK and globally. This is important given the focus of national and international policies on reducing levels of social isolation and loneliness in the older population (Cattan et al., 2005).

Design and Methods

Participants

In order to be eligible to take part in the study, participants had to be an older adult (defined as around or over 60 years of age); living in the community or in sheltered housing in the North West of England; fluent in the English language; and with sufficient cognitive capacity to give informed consent and to participate in an interview. Taking into account that the study aimed to examine the experiences of older adults who ate together in the same place and those who didn't, purposeful sampling was used to ensure that the final sample was split over participants who did and did not regularly eat together, and that an ample number of both female and male participants.

Participants were recruited through a range of means. First, a number of older adults' community activities were identified following discussions with a key local authority employee. Some of the groups of older adults shared meals as part of their weekly gatherings and others did not eat together. Author Three contacted these groups and provided information about the study. Three focus groups were conducted; one group which met socially but did not eat together, one community lunch club and one group in a housing setting where residents and non-residents met to cook and eat together (Table 1). The focus groups were conducted in a community location, and food and refreshments were provided. An additional group of people recruited from a housing space with

communal dining facilities, who did not eat socially or attend regular social activities, and did not wish to participate in a focus group, were interviewed individually or in pairs.

To extend the number of participants, a private sector 'meals delivery service' provider then delivered leaflets to home dwellers who used the service. The leaflets provided information about the study and asked for people to contact the research team to participate in one-to-one interviews. One participant was recruited through this method. Finally, to further supplement the sample, author one contacted a number of community groups for older people, and invited members to take part in one-to-one interviews.

The final sample comprised 42 participants (18 males and 24 females; making up 42.9% and 57.1% of the sample, respectively). The participants ranged in age from 59 to 89 years, with a mean age of 73 years (four participants did not provide their age). Compared with the most recent (2017) estimates of the population of those aged over 60 (Office for National Statistics, 2018), our sample were slightly older than the average for the North West of England (which is approximately 72 years), and contained a slightly lower proportion of males (who are estimated to make up 46.5% of the over 60s in this region). The majority of participants described their ethnicity as White British (n=37); two as Greek Cypriot; one as Scottish, one as Black British, and one participant did not provide this information. A breakdown of the participants by setting and data collection method is provided in Table 1.

Insert Table 1 about here

Procedure

The research was approved by the Manchester Metropolitan University's Faculty Ethical Review panel and the University of Manchester's Proportionate University Research Ethics Committee prior to undertaking the fieldwork. All participants provided written informed consent before taking part, and those who took part received a £10 shopping voucher as reimbursement for time and travel expenses.

Data collection was done through a combination of focus groups (n=3) and semi-structured interviews (n=13). Focus groups were used with participants recruited from existing social groups, allowing shared experiences to be discussed from multiple perspectives. Individual interviews were used for participants recruited outside of existing groups, allowing more time to be devoted to the broader range of experiences gathered from individuals who were not socially connected with one another. The focus groups took place in community venues and the interviews in a combination of community venues and the homes of individuals. All data collection was undertaken by Authors One and Three.

The interviews and focus groups were conversational and followed the same three-part topic guide. First, participants were asked general questions about social eating opportunities. This included their initial reactions to the thought of eating with other people; their previous experiences of, and reasons for (or for not) eating with others; and their knowledge and views of social eating opportunities in their area. They were then given a short, fictional vignette describing an older man who lived alone and away from his family, who saw an advert for a weekly social eating group. Participants were asked to consider what factors may or may not encourage him to attend the social eating activity, and why. They were then asked to consider, in turn, how things might be different if the character

was: female; a wheelchair user; from a different cultural background. This vignette approach was used to provide a less personal way for participants to express views and opinions that did not require them to report their own experiences (Hughes, 1998). Finally, participants were presented with some posters advertising social eating activities, and asked to discuss what they liked and disliked about each, and why. Four of the posters were based on real adverts for UK-based social eating activities, but with information about key details (such as location) disguised or modified, and one was created by the research team. Detailed information about the content of each poster is provided in Appendix 1.

The focus groups and interviews were audio-recorded and transcribed verbatim, with all names and identifiable information removed or disguised to protect anonymity.

Analysis

The data were initially analysed using thematic analysis (Braun and Clarke, 2006). For this, relevant extracts were identified and coded by the first and second authors using inductive, open semantic codes that summarised each extract in relation to the research question. Examples of some of these codes are provided in Table 2.

Insert Table 2 about here

Similar codes were then clustered together to form provisional themes (Table 2). These initial codes and themes were then reviewed and refined through discussion with all authors, until a consensus was achieved about the final structure.

After finalising the themes, a framework analysis (Ritche & Spencer, 1994) was applied to see whether and how each theme was differentially expressed and experienced by males and females. To achieve this, Author One charted the data by indexing each quote and code

according to the gender of the speaker or referent, and then interrogated the content of each theme for gender-based similarities and differences in its expression.

Results

The focus groups and interview undertaken with older adults highlighted a variety of experiences and views about community-based luncheon clubs and social eating opportunities. A number of practical issues that might affect luncheon club attendance emerged from the data. Specifically these illustrated limited accessibility to social eating opportunities due to: a lack of accessible transport; the high cost of meals; mobility and disability factors, including lack of disability accessible venues; variations in quality of food provided; and low awareness of locally available luncheon clubs. In addition, the following four themes relating to psychosocial barriers and facilitators were identified.

The need to offer more than food

Although many participants enjoyed eating with others, the meal itself was often not enough to motivate attendance at social eating opportunities. Participants mentioned needing something alongside the meals to encourage them to attend:

You need something else besides eating. You couldn't just go and eat, and then that's it. You couldn't do that - well old people couldn't do that. They could but they wouldn't. (P37: F: 82).

Many participants were attracted to the additional aspects and benefits that naturally came with the meal, such as giving them something to do, and the opportunity to socialise and meet new people:

Meeting new friends; especially at my age: you've had a good life, but you want to meet someone different now. (P39:M:83)

The role of advertising these additional factors to attract people's attention, and create more of an interest in attending, rather than just advertising food was commented on:

'Come meet new people, social evening and trips out'. You know all that kind of things. That's all right [referring to a poster that provided details of the time, place, menu, prices, and contact details for the luncheon club] but it's not got enough information on it. (P35:F:65)

It was evident that participants were more motivated to attend luncheon clubs if they were combined with an additional activity, such as a film, interest group, craft activities, computer lessons, or dancing. Often the opportunity to take part in activities was the main reason they participated in a social eating activity in the first place:

Well, like I said, I've been coming over here for four years now and I am mainly associated [...] - although I can't do anything physically - with the gardening section, and that's how it came about. (P38:M:69)

Both male and female participants felt that advertising sport-related activities was most likely to encourage males to attend:

They [men] would talk about sports. Sports brings a lot of men together. (P40:M:74)

Well we used to have a lovely evening on Friday night, a few of us playing cards in here all night and there was people playing pool and darts and all sorts. (P24:M:74)

Despite the appeal of activities, some felt that the meal was still critical in motivating attendance. For example, one woman felt that the film activity would not be as popular without a food offer:

I think if you only have the film, I don't think they'd come that much. I think the thought that they're having something to eat. (P2:F:71)

This suggests that it is the combination of social eating and other activity that is attractive to older adults.

The significance of social identity

Participants discussed their experiences of how they saw themselves, and how they were viewed by other people. The importance of participants' social identity was expressed in two sub-themes: being with my kind of people, and the use of group labels around age and loneliness.

Subtheme I: Being with my kind of people

Many participants reflected that they would prefer to eat socially with people who shared similar values or interests to them, or who represented positive social identities around active ageing.

The people I go out with have the same sort of mindset. We read the same stuff and listen to the same stuff. (P40:M:74).

Many participants were keen to position themselves as still youthful and being able to enjoy themselves rather than being old and isolated, and wanted to surround themselves with people who were like this. One woman noted that the luncheon club did not feel like a place just for older adults: 'It isn't like an elderly person's group though. You come here and you feel young'. (P13:F:75).

In most cases, participants thought the kind of people who attended luncheon clubs would not match their preferred social identities, and this discouraged them from attending. On being shown the sample posters, they laughed at a picture of an older woman and a group of white older adults sat around a table and said that they would definitely not attend a luncheon group with people like that.

Male participants also thought the kind of people attending luncheon clubs were more likely to be female, which they found off-putting. One man said, 'I don't want to be one man in a big group of women, no no.' (P30:M:64) and another from a different group noted the higher attendance of women:

First, there were gangs of us, but now hardly anyone is there. It is just these three old women. And I was the only man, and these three women were from another place, so I stopped going. (P42:M:79)

Subtheme II: The use of group labels

Alongside participants wanting reassurance that luncheon clubs would be attended by other people like them, references to older adults (elderly, senior or pensioner), or stereotypical conations associated with ageing, such as the word lonely, were perceived negatively by

participants. Referring to one of the posters, one participant said 'They shouldn't say 'old people' (P2:F:71)

Participants explained that labels such as lonely and old could discourage them from attending as they did not want to be associated with these social categories.

I mean, we had one for the, erm, coffee morning didn't we, and it showed you an old thing. I said nobody will come to that if they saw people like that. You think, yeh we can go to that one because it's lively, but if you put an old picture you'd think, 'I'm not going, there's too many old people there'. (P2:F:71)

Some participants also suggested that social eating opportunities should not be advertised as restricted to older adults:

Why does it have to be [a] senior luncheon club? Well, mind you, it is all for seniors.

But then again why does it have to be for seniors? Why can't everyone go?

(P36:F:71)

However, a few participants said that they liked the reference to older adults and this reassured them that they would be with older adults only.

Taking the first step

Many of the participants spoke about their hesitation to attend a social eating activity for the first time, raising concerns about feeling anxious and uncomfortable at the thought of meeting strangers and having to spend time participating in social eating. Participants further expressed reluctance to attend because they thought people would be cliquey and unfriendly, which would make it challenging for them to socialise.

When you go to places like that [luncheon clubs], you see they are all sort of stay in little groups aren't they? And, you know, it is whether you are going to fit into that group.(P36:F:71)

Men and women both perceived women to be more sociable than men, and felt that men would feel less motivated and comfortable about attending a social eating activity.

'It's just the way men are. They are just not as outgoing, I think, as ladies are.' (P35:F:65)

Two sub-themes were identified that reflected potential solutions to these challenges: going together, and having a personal connection.

Subtheme I: Going together

A number of participants, both male and female, said that if they were making their initial visit to a social eating opportunity, their anxiety would be alleviated by being accompanied by a friend or a family member. Having someone familiar there to welcome them and facilitate introductions to new people was also considered a facilitator to attending:

I would be happy if someone would introduce me [...] The first time you go to social eating is the worst time. It the time where you don't want to particularly introduce yourself. (P41:F:72)

Males were also considered less likely to seek support from friends to accompany them. A minority of the males contradicted the overall consensus about being hesitant to attend, and instead expressed they had no anxiety to attend at all:

I think they are not bothered: a man going by himself. They take it in their stride you know. You go in and if you don't like you can always go out again. Give it a try. (P39:M:83)

Despite feeling that females were generally more sociable and confident about attending luncheon clubs than men, female participants often still expressed feeling shy and hesitant about attending by themselves.

Subtheme II: A Personal Connection

Many participants agreed that having a personal connection to a luncheon club, such as hearing about it in person from someone they knew, would encourage attendance more than hearing about it through more general, impersonal means, such as a poster.

'Posters just don't seem to attract people. I think its word of mouth that do it more.'
(P37:F:82)

'I was going to say, somebody going and inviting them personally [would make someone more likely to attend]. (P1:F:85)

Personal invitations, and word of mouth, were considered engaging and encouraged people to believe that the luncheon clubs were relevant to them. Additionality, personal invitations made them feel more welcomed and motivated them to attend.

I think somebody knocking on my door and saying, 'come down on Thursday,' like she did [referring to group co-ordinator, laughing]. She said, 'are you coming down on Thursday?' So I did. (P26:M:70)

Embarrassment and self-consciousness about physical health

A number of participants spoke about age-related changes in physical health, such as decreased mobility and increased chronic conditions, as a result of ageing, and how they could discourage people from wanting to eat with others due to embarrassment and self-conscious about how their health conditions would affect their behaviour, and how others would perceive them. For example, some participants felt discouraged to attend because they could not eat large portion sizes, or at the scheduled meal times.

I have IBS so I have to feel comfortable with who I am eating with. 'Cause if I go out with the girls and, say I'm not eating, I might just have custard or something like that. So, I have to feel comfortable with whom I'm eating with. (P36:F:71)

Participants stated that they or other older adults felt self-conscious about being judged by their chronic health conditions interfering with normal eating habits:

You can feel a bit embarrassed, because I know someone with Parkinson's and there was literally peas flying all over the table. And I've got a blind cousin who can't see what he's eating so he is certainly very conscious. (P25:M:64)

Discussion and implications

The empirical study allowed us to identify important psychosocial barriers and facilitators to social eating among community living older adults, and consider how these might be differentially expressed according to gender. Consistent with previous literature, participants reported a range of practical issues such as the cost of meals, transport,

accessibility and knowledge of luncheon clubs (Boyer, Opin & King, 2016; Brighton & Hove Food Partnership, 2015; Green, Jones & Roberts, 2014). In addition, four themes relating to psychosocial issues were identified. These suggested that social eating opportunities needed to offer more than just food. Using labels or images that relate to undesirable or unrelatable social categories was shown to be off-putting. Participants also talked about the difficulties associated with making that first step into a group of strangers, and how this could be facilitated by attending with another person, and how having a personal connection or invitation made people more likely to feel welcome. Finally, participants spoke about how the embarrassment and self-consciousness associated with health problems could make it more difficult for them to attend.

Previous literature showed that, as people age, they experience a decline in their social network, and become at risk of feeling lonely and socially isolated (Forsey, 2018). This could explain why many participants felt they needed "more than the meal" to motivate attendance such as the opportunity to take part in activities and meet new people. Activities can also facilitate conversations and social interactions by giving people who have a shared interest in the activity something familiar to talk about, making them feel less self-conscious (Sanchiz, et al., 2016). Group activities involving structured discussions, health education, and physical activity have previously been shown to be effective at reducing loneliness amongst older people (Cattan et al., 2005). Research focussing on reducing loneliness and isolation in older men in the UK has also suggested that cultural, creative, and practical activities, such as music, reading, films, singing, and carpentry are attractive to many older men, and that older men also value group activities that allow them to make meaningful contributions to the lives of others (Willis et al., 2019). Activities such as these could therefore be a successful way of attracting lonelier and more isolated older people to social

eating events. Simple changes to advertisements to include more sociable terms, such as "come chat over a cup of tea and biscuits", and pictures of activities, could also help older people to see social eating opportunities as more than a meal.

The second theme explored social identity, and showed that, whilst participants wanted to be around people who were similar to themselves, they were put off by many of the images and terms in the adverts that related to older people. This resonates with previous research showing that traditional social identities associated with older adults are often inconsistent with their sense of self (Nelson, 2005). Thus, advertisements that use language or images that reflect more negative identities, might lead many older people to avoid attending luncheon clubs because they find those negative social identities as threatening to their ego and self-esteem (Hogg & Abrahams, 1990). This may be particularly problematic for women, given the increased association between female identity, appearance and health and youthfulness in many societies (Hurd, 2000); therefore any references to older people may be particularly threatening to the female identity (Hurd, 2000; Halliwell, & Dittmar, 2003). Identifying luncheon clubs as a form of help seeking may also be particularly off-putting for males, due to the threat to their sense of masculinity and strength (Wang, et al., 2013).

In relation to this second theme, it is clear that a balance needs to be found between providing clarity about who the social eating activity is aimed at while ensuring that labels and images do not put people off attending. Thus, avoiding terms, such as old, elderly, lonely or senior and, instead, advertising pictures of a range of people standing up or engaging in actives, and targeting more positive stereotypes of older people (Carlson et al., 2019), could help to change the image of luncheon clubs. Even avoiding more old-fashioned terms such as "luncheon clubs", and replacing them with the terms such as "shared meal",

"eat with friends" or "come to play cards and have a meal" places the focus more on fun and youthful aspects that may also encourage men and women to attend. Luncheon clubs could also offer activities where males provide instrumental support to feel useful, which may prevent them feeling as though they are seeking support (Connell & Messerschmidt, 1995; Wang, et al., 2013).

The third theme related to the difficulties faced when joining a group of strangers for the first time, and how personal connections and social support would encourage people to attend. These findings are particularly important given that those in most need of luncheon clubs are often those who are more lonely and socially isolated, and lacking in social support (Forsey, 2018). Therefore, community organisations need to consider ways of providing social support and creating personal connections, such as offering meet and greet opportunities, or running sessions just for new people. Another way of establishing personal connections could be to have stalls in public places (for example, supermarkets, town centres, bus stops and doctor's surgeries) so that less socially-connected people get the opportunity to receive a personal invitation, and also to develop an initial connection with group members.

Finally, participants spoke about how embarrassment and self-consciousness related to age-associated health or dietary issues could be barriers to attending. To address this, organisers should be as flexible as possible about the timing of meals, and should aim to offer a range of portion sizes and meal options, so that individual needs can be catered for as standard. Luncheon clubs will also need to try and make adjustment to help people to maintain independent eating as this could help with improve self-esteem in eating in front of others (Eckel, Schreiber & Provident, 2012).

Strengths and limitations

There are a number of strengths of this study. First, we purposefully recruited participants to ensure that a range of social eating preferences and experiences were included, and that both male and female perspectives were considered. Second, our interview schedule included the use of vignettes and social eating advertisements that allowed us to elicit participants' views from a range of different perspectives. Third, we used both focus groups and one-to-one interviews when collecting data, allowing us to capture multiple views on shared experiences, whilst still capturing a diversity of views from participants who may feel less comfortable in a group setting. A key limitation is that the majority of the older people who participated in this study were of white British ethnicity. This is important given that there is considerable ethnic diversity in norms and practice relating to food and social activities (Devine, 2005).

Future directions

Future work should focus on exploring barriers and facilitators to social eating in people from a more diverse range of geographical, cultural and ethnic groups, as well as identifying other factors (such as socioeconomic status) that may add to, or interact with, the issues identified here. Studies that experimentally test the recommendations arising from this study in real-life settings, or that explore other strategies for encouraging social eating (such as providing financial incentives/subsidies for meals eaten with others), are also needed in order to strengthen the evidence-base in this area.

Conclusions and implications

This empirical study identified key elements relating to psychosocial facilitators and barriers that influence older people's engagement in social eating opportunities, and some gender differences in how these were expressed. This work clearly shows that focusing on practical issues alone will not be enough to enhance attendance at luncheon clubs, and provide evidence for developing and supporting age friendly societies that are accessible and inclusive to older adults. One of the major contributions of this work is the evidence on the barriers experienced by older adults in engaging with community-based social eating opportunities within the context of reducing loneliness and increasing wellbeing in an ageing population. The next steps are to implement some of the proposed changes in reallife settings, and evaluate the effectiveness of these changes in reducing barriers and increasing attendance. In current debates on loneliness, social isolation and the challenges of supporting older adults to age well at home, examining the psychosocial barriers to attending social eating activities in communities can aid an understanding of how the providers of community-luncheon clubs can increase attendance and our findings can be applied to other contexts and older adults across the globe.

Statement of ethical approval

The University of Manchester Proportionate University research ethics committee granted ethical approval for this study (Reference: 2018-3210-4818). The Manchester Metropolitan University Faculty of Health, Psychology and Social Care Research Ethics committee granted ethical approval for this study (Reference:1337).

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Declaration of contribution of authors

All authors contributed to the development of the study. Authors Two and Four designed the original study and bid for the funding. Authors One and Three undertook the data collection and recruitment of participants. Author One led the data analysis, which was facilitated by Authors Two and Four. Authors One, Two and Four undertook the literature review and writing of the paper, and Author Three commented on a draft.

Statement of conflict of interest

The authors declare no conflict of interest

References

- Boyer, K., Orpin, P., & King, A.C. (2016). I come for the friendship why social eating matters.

 Australian Journal on Aging, 35(3), 29-31.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, *3*(2), 77-101.
- Brighton and Hove Food Partnership (2015) *Eating Together: Exploring the role of luncheon*clubs and shared meals in Brighton & Hove. Available online at

 https://bhfood.org.uk/wp-content/uploads/2017/09/Eating-Together-Report-FINAL
 1.pdf [Accessed 27 July 2018].
- Burke, D., Jennings, M., McClinchy, J., Masey, H., Westwood, D., & Dickinson, A. (2011).

 Community luncheoneon clubs benefit from the nutritional and social well-being of free-living older people. *Journal of Human Nutrition and Dietetics*, *24*(3), 278-278.
- Canham, S.L., Fang, M.L., Battersby, L., Woolrych, R., Sixsmith, J., Ren, T.H. & Sixsmith, A. (2018). Contextual factors for aging well: creating socially engaging spaces through the use of deliberative dialogues. *The Gerontologist*, *58*, 140-148.
- Caraher, M., Dixon, P., Lang, T., & Carr-Hill, R. (1999). The state of cooking in England: the relationship of cooking skills to food choice. *British Food Journal*, *101*(8), 590-609.
- Carlson, K.J., Black, D.R., Holley, L.M. & Coster, D.C. (2019). Stereotypes of older adults:

 development and evaluation of an updated stereotype content and strength survey. *The Gerontologist*. Advance access publication (avialble online May 29th, 2019).

 Doi:10.1093/geront/gnz061.

- Cattan, M., White, M., Bond, J. & Lermouth, A. (2008). Preventing social isolation and loneliness among older people: a systematic review of health promotion interventions. *Ageing & Society, 25,* 41-67.
- Community Food and Health (2011) A Bite and a Blether Case study from Scotland luncheon clubs. Available online at https://www.communityfoodandhealth.org.uk/wp-content/uploads/2011/06/luncheon-club-online-3662.pdf [Accessed 14 July 2018].
- Connell, R.W., & Messerschmidt, J. (1995). Hegemonic Masculinity Rethinking the Concept.

 Sage Journals, 19(6), 829-859.
- Devine, C.M. (2005). A life course perspective: Understanding food choice in time, social location and history. *Journal of Nutrition Education and behaviour*, *37*(3)121-128.
- Eckel, E., Schreiber, J., & Provident, I. (2012). Community dwelling elderly women and meal preparation. *Physical and Occupational Therapy in Geriatrics*, *30*(4), 344-360.
- Forsey, A (2018) Hidden Hunger and Malnutrition in the Elderly: All Party Parliament Group

 Hunger. Available online at

 http://www.frankfield.co.uk/upload/docs/Hidden%20hunger%20and%20Malnutritio

 n%20in%20the%20elderly.pdf [Accessed 30 May 2018].
- Giacoman, C. (2016). The dimensions and role of commensality: A theoretical model drawn from the significance of communcal eating among adults in Santiago, Chile. *Appetite*, 107: 460-470.
- Goll, J. C., Charlesworth, G., Scior, K., & Stott, J. (2015). Barriers to social participation among lonely older adults: the influence of social fears and identity. *PLOS One*, *10*(2), 1-17.

- Green, J., Jones, A. and Roberts, H. (2014). 'More than A to B: the role of free bus travel for the mobility and wellbeing of older citizens in London.' *Ageing and Society, 34,* 472-494.
- Gustafsson, K., & Sidenvall, B. (2002). Food-related health perceptions and food habits among older women. *Journal of Advanced Nursing*, *39*(2), 164-173.
- Halliwell, E., & Dittmar, H. (2003). A qualitative investigation of women's and men's body image concerns and their attitudes toward aging. *Sex Roles*, *49*(11-12), 675-684.
- Herne (2009) *Social eating programmes for older people*. University of Tasmania. Available online at http://www.utas.edu.au/__data/assets/pdf_file/0018/204219/Review-of-Models-for-Social-Eating.pdf [Accessed 30 July 2018].
- Hogg, M. A., & Abrams, D. (1990). *Social Identity Theory: Constructive and Critical Advances*.

 London: Harvester Wheatsheaf.
- Hughes, R. (1998). Considering the vignette technique and its application to a study of drug injecting and HIV risk and safer behaviour. *Sociology of Health & Illness*, 20(3), pp. 381-400.
- Hughes, G., Bennette, K.M., Heterington, M.M. (2004). Old and alone: barriers to healthy eating in older men living on their own. *Appetit*, *43*(3), 269-76.
- Hurd, L. C. (2000). Older women's body image and embodied experience: An exploration. *Journal of Women and Aging*, 12(3-4), 77-97.
- Isherwood, L.M., King, D.S. and Luszcz, M.A. (2015) Widowhood in the fourth age: support exchange, relationships and social participation. *Ageing & Society, 37,* 188-212.

- King, A.C., Orpin, P., Woodroffe, J. and Boyer, K. (2017). Eating and ageing in rural Australia: applying temporal perspectives from phenomenology to uncover meanings in older adults' experiences. *Ageing & Society, 37*, 753-776.
- Korsgaard, D., Bjoner, T. and Christian, N. (2018). Where would you like to eat? A formative evaluation of mixed-reality solitary meals in virtual environments for older adults with mobility impairments who live alone. Food Research International, online first March 2018.
- Lane, K., Poland, F., Fleminf, S., Lambert, N., MacDonald, H., Potters, J. [...] & Hoopers, L. (2014). Older women's reduced contact with food in the Changes Around Food Experience (CAFE) study: choices, adaptations and dynamism. *Ageing & Society, 34*, 645-669.
- Milligan, C., Payne, S., Bingley, A., & Cockshott, Z. (2015). Place and wellbeing: shedding light on activity interventions for older men. *Ageing & Society*, *35*, 124-149.
- Nakata, R. and Kawai, N. (2018). The "social" facilitation of eating without the presence of others: Self-reflection on eating makes food taste better and people eat more.

 Physiology and Behaviour, 179, 1: 23-29.
- Nelson, T. D. (2005). Ageism: Prejudice against our feared future self. *Journal of Social Issues*, *61*(2), 207-221.
- Newman, A. B., & Brach, J. S. (2001). Gender gap in longevity and disability in older persons. *Epidemiologic Reviews*, *23*(2), 343-355.

- Office for National Statistics (2018). Census Output Area population estimates North West,

 England (Edition Mid-2017). Retrieved 7th June 2019 from

 www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populati

 onestimates/datasets/censusoutputareaestimatesinthenorthwestregionofengland
- Sanchiz, E., Ibarra, F., Nikitina, S., Báez, M., & Casati, F. (2016,). What makes people bond?:

 A study on social interactions and common life points on Facebook. *International Conference on Collaboration Technologies and Systems (CTS), 16*(9), 26-30.
- Seale, C. & Charteris-Black, J. (2008). The interaction of age and gender in illness narratives.

 *Ageing & Society, 28, 1025-45.
- Skingley, A. (2013). Older people, isolation and loneliness: implications for community nursing. *British Journal of Community Nursing*, *18*(2), 84-90.
- Tani, Y., Kondo, N., Noma, H., Miyaguni, Y., Saito, M., & Kondo, K. (2017). Eating Alone
 Yet Living with Others Is Associated with Mortality in Older Men: The JAGES Cohort
 Survey. Journals of Gerontology Series B: Psychological Sciences and Social Sciences,
 00(00)1-5.
- Tani, Y., Sasaki, Y., Haseda, M., Kondo, K., & Kondo, N. (2015). Eating alone and depression in older men and women by cohabitation status: the JAGES longitudinal survey. *Age and Ageing*, *44*(6), 1019-1026.
- Thomas, N., & Emond, R. (2017). Living alone but eating together: Exploring luncheon clubs as a dining out experience. *Appetite*, *119*(1), 34-40.
- Vesnaver, E., & Keller, H.H. (2011). Social Influences and Eating Behaviour in Later Life: A

- Review. Journal of Nutrition in Gerontology and Geriatrics, 30(11), 2-23.
- Wang, Y., Hunt, K., Nazareth, I., Freemeantle, N., & Petersen, I. (2013). Do men consult less than women? An analysis of routinely collected UK general practice data. *The British Medical Journal*, *3*(8)1-7.
- Wikby, K., & Fägerskiöld, A. (2004). The willingness to eat: an investigation of appetite among elderly people. *Scandinavian Journal of Caring Sciences*, *18*(2), 120-127.
- Willis, P., Vickery, A., Hammond, J. & Jessiman, T. (2019). *Older Men at the margins: guidance for practitioners and services.* Age UK. Available online at

 https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-andpublications/reports-and-briefings/older-men-at-the-margins/guidance-forpractitioners-and-services-providing-groups-for-older-men.pdf. [Accessed 26th June 2019].
- Yates, L. and Warde, A. (2016) Eating together and eating alone: meal arrangements in British households. *The British Journal of Sociology*, 68, 97-118.

Table 1: Participant details

Data collection method	Description of group/setting	n	Participant Numbers	Age range (years)	Gender	Ethnicity
Focus group*	Older adults who meet regularly in a community centre for social activities (e.g. exercise classes, film nights, and a history club) but not for meals.	8	1-8	69 – 85	Six females and two males	Seven White British, and one not recorded.
Focus group	Older adults who meet each week in a pub to eat together. The event is run by a local community group.	14	9 - 22	59 – 89	Nine female and five males	Twelve White British and two Greek Cypriot
Focus group	Older adults who meet weekly in a community room in a housing block to cook and eat together. This event is run by the local housing association and volunteers.	6	23 - 28	62 – 74	Three females and three males	All White British
Individual interviews (two participants interviewed as a pair).	Older adults living in a housing block with communal areas, including a kitchen. A volunteer cooks food for the residents each week, but the residents take their food back to their flats rather than eating together.	5	29-33	60 -80	Two females and three males	Four White British and one Black British
Individual interviews	Older adults recruited though Meal on Wheels services (n=1) and a local community group that provides a range of activities, including gardening and arts and crafts clubs, and a café group.	9	34-42	(65 -82)	Four females and five males	Eight White British and one White Scottish

^{*} No age information available for four participants in this group

Table 2: Examples of open codes assigned to relevant data extracts, and the provisional and final themes that each one contributed to.

Extract	Descriptive Code	Provisional Theme	Final Theme
We come here for the computer lessons as well, and we stay and have something to eat while we are here. (P27:F:69)	Going in initially for the activity not the eating (fitting eating it into the activity).	More than the meal	The need to offer more than food.
[Discussing the posters] Why can't they put dominos? You know, cards or something else that they can be doing. Loads of men like playing dominos and cards. You know, at the end of the day, most just say lunch, don't they? (P36:F:71)	Advertising activities draws attention to the advert and attract men.	More than the meal	The need to offer more than food.
And I lie about my age, so you don't want to be associated. (P6:F:age unknown)	People do not want to be reminded of their age because they feel more youthful then they are.	Reference to older people (a barrier)	The significance of social identity: subtheme II: The use of group labels.
You see I know I am 71 but I don't want to be really told I am senior (P36: F:71)	Do not want to identify with senior – off-putting.	Reference to older people (a barrier)	The significance of social identity. Subtheme II: The use of group labels.
When I first went I was a little apprehensive but [name of another person] was going and she said, 'I'm always there on a Monday'. So I went first off. But after that it didn't bother me if she wasn't going because there was other people to talk to. (P4:F:69)	Feeling apprehensive to go independently but is more comfortable and confident attending with a friend	Social support from friends and family (a facilitator)	Taking the first step. Subtheme I: Going together.
My friend is in [name of region], but if he's here I'm more likely to go. (P26:M:70)	More willing to attend if a friend is going	Social support from friends and family (a facilitator)	Taking the first step. Subtheme I: Going together.

Appendix 1: Descriptions of the posters used in the focus groups and interviews.

Poster 1: This poster is comprised of black text printed over a backdrop illustration of a table, chairs and parasol on a sunny day. The top line of the poster poses the question: 'Lonely, feeling like you need to get out more..?' It then refers to a 'fun, friendly group for the over 70's' that happens on the last Tuesday of each month. Details of the location (a cafe) are provided, and a contact mobile telephone number and email address is given. Four bullet points are included which state that attendees could: 1) 'come and have a hot meal', and 2) 'meet new people', and that 3) vegans and vegetarians are catered for, and 4) the cost is £5. The words 'ALL ARE WELCOME' are also printed in coloured letters on the poster.

Poster 2: This poster has a white background, and depicts a cartoon illustration of a female chef holding a meal over the words 'Lisa's Kitchen'. Below this are the words 'Wednesday Lunch Club', along with the place (a Rugby club) and the time of the lunch club. Below this is a list of several meal options with prices, ranging from £1 for tea/coffee, through to £4 for a jacket potato with filling, and £7 for a roast dinner. Two desserts (apple crumble with cream or treacle sponge with custard) are listed as £2-3 each. A name and telephone number for bookings is provided at the bottom.

Poster 3: This poster is comprised of black and red text printed over a backdrop illustration of a sunshine, blue sky, and lawn with ants on it. The phrase 'Senior Lunch Club!!' is printed in large text at the top. Underneath this, readers are invited to join them for 'a chance to gather together with friends old, and new over a nice, warm meal.' Four bullet points then indicate the availability of 1) 'Tea/Coffee and Biscuits', 2) 'Dancing and Music', 3) 'Great Company', and 4) 'Games, Speaker, and much more'. Details of the location of the club (in a community centre) are provided, along with a telephone number and email address for further information.

Poster 4: This poster was created by the research team. It has a white background, and contains a photograph of groups of people sitting around tables. Most of the attendees have completely grey or white hair and look to be aged in their seventies or eighties. The tables are set with cups and cutlery, and the attendees are eating bowls of soup. Only one of the attendees is looking at the camera, with the rest seemingly looking at their food. The faces of only a few attendees can be seen clearly, but none of them are smiling or laughing. Underneath the photograph are the words 'Older People's Lunch Club'. This is described as 'A fun, friendly group for the over 50's'. Readers are invited to join them at a leisure centre every Friday at 12 for 'the chance to gather together with and meet new friends over a warm, delicious meal'. The address of the leisure centre is provided, along with a telephone number for further information. The poster also has three statements indicating that the group provides: 1) 'Lunch', 2) 'Great Company!', and 3) 'much, much more'.

Poster 5: This poster has a white background, and the name, logo, and strapline of a local church at the top. The words 'Lunch Club' are presented in large text, followed by details of the time that that the club is held on the first Tuesday of each month. Underneath this is a clip art image of a plate and cutlery. Below this are details that the lunch club is 'A chance to gather together over a meal and be with friends old and new'. The address of the church

is given, along with a note that the meals will not be charged for, but that donations would be welcomed. A website address, telephone number, and email address are presented at the bottom of the poster. Note that this poster was not used during the interviews with participants 34-42.