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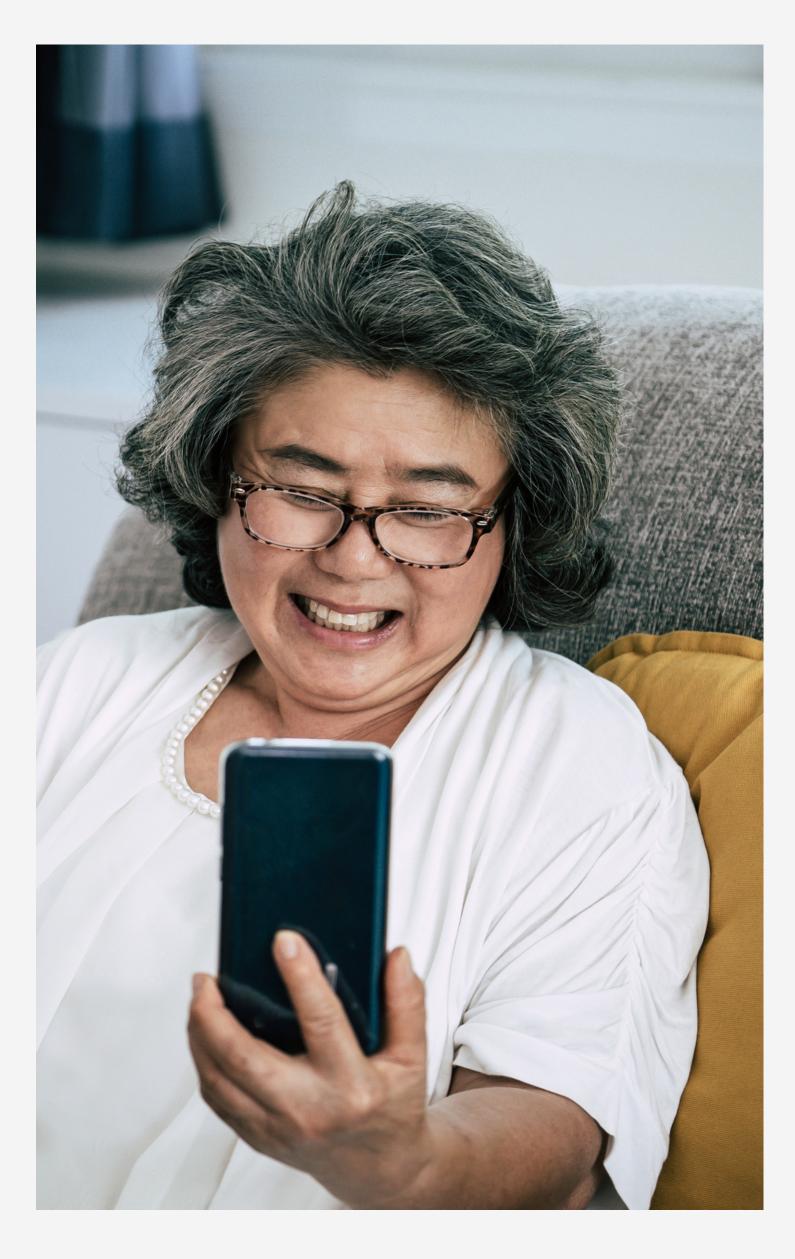
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# CALLS AND SOCIAL MEDIA USE ARE ASSOCIATED WITH CHANGE IN NUTRITION RISK DURING THE PANDEMIC FOR COMMUNITY-DWELLING OLDER CANADIANS.

### BACKGROUND

- Older Canadians commonly experience nutrition risk.
- Nutrition risk is associated with many adverse outcomes (e.g., death).
- Over time, pandemic-related changes in other lifestyle factors, such as social interactions, may impact nutrition risk.

# **OBJECTIVE**

To determine if change in nutrition risk is associated with poor or worsened/reduced mental health, loneliness, frequency of making or receiving calls, and frequency of social media use in community-dwelling older people from Hamilton, Ontario.

## METHODS

- 1. Phone- and online-administered survey data from a cohort of randomly recruited older adults (≥65 years of age) at baseline and nine-month follow-up were used.
- 2. Associations between change in standardized SCREEN-8 score (nutrition risk), covariates and hypothesized variables were analyzed with linear regression.

## CONCLUSIONS

- Over a nine-month period during the COVID-19 pandemic, low/reduced frequency of using social media was associated with improved standardized SCREEN-8 scores, while low/reduced frequency of making/receiving phone calls was associated with worsening standardized SCREEN-8 scores.
- Magnitude of change in nutrition risk status over time was modest.

# RESULTS

- 183 people, most women (median age 77, IQR 72-82).
- Median SCREEN-8 scores were 35 (IQR 30-40) at baseline, 36 (IQR 30-41) at nine-month follow-up.
   Higher scores indicate less nutrition risk. Scores were standardized by baseline score.
- Based on a nutrition risk cut-point of 38:
  - 11% improved their nutrition,
  - 10% had worsened nutrition,
  - 48% remained at high nutrition risk.
- 74% continued or started to make/receive daily calls or a few calls/week; only 45% used social media platforms daily/a few times a week or increased their use.
- Accounting for covariates, being male was associated with improved standardized SCREEN-8 scores ( $\beta$  6.16, 95% CI [0.06, 12.26]).
- Low/reduced frequency of making/receiving calls was associated with decline in standardized SCREEN-8 scores ( $\beta$  -6.47, [-12.54, -0.40]).
- Low/reduced frequency of social media use was associated with improved standardized SCREEN-8 scores ( $\beta$  6.60, [1.07, 12.14]).
- Low or worsened states of mental health and loneliness were not associated with change in standardized SCREEN-8 scores ( $\beta$  -6.33, [-15.15, 2.49] and  $\beta$  3.28, [-4.03, 10.59], respectively).