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TRULOVE, JANET REGER. An Evaluation of Selected Components of the Mobile Meals Program in Greensboro, North Carolina. (1977) Directed by: Dr. Carol Fritz. Pp. 74

The purpose of this study was to construct a profile of the Mobile Meals recipients, to obtain an evaluation of the service and organization of Mobile Meals from the volunteers, to determine the general satisfaction and quality of service from recipients, and to evaluate the cycle menu.

Demographic data were collected from the Mobile Meals office, the Greensboro Planning and Community Development Department, the United States 1970 Census, and from observations made by the researcher.

Data were collected from volunteers and recipients using two instruments developed by the researcher. A questionnaire was mailed to a random sample of 250 volunteers. Personal interviews were conducted with a random sample of thirty-eight recipients. The Mobile Meals menu cycle was evaluated according to the criteria established by the Program Plan and by using basic principles of good nutrition.

Results indicated that 88 percent of the Mobile Meals recipients were sixty years of age or older, 68 percent were female and 32 percent were male. The Greensboro population was 54 percent female and 46 percent male. Of those recipients interviewed, 55 percent were white and 45 percent were black. Data on the Greensboro population indicated that 71 percent were white and 29 percent were black.

Forty-five percent of the recipients received special diets, primarily low sodium and diabetic, alone or in combination with other restrictions. Only two recipients who were interviewed were receiving mobile meals during a short term convalescent period.

Volunteers made few comments concerning the attitudes of the recipients toward the meal, the food service and the program. Those volunteers who did comment, indicated that recipients generally seemed satisfied. The greatest motivation for participating in the program appeared to be personal satisfaction from helping others.

Volunteers (92%) indicated that routes were consecutively arranged, but 96 percent reported that they took one hour or more to complete the route, possibly indicating that routes were too long to adequately preserve the temperature of the food.

Most recipients (92%) enjoyed the meal and ate all the food that was served. Sixty-three percent reported, however, that hot food was not always hot.

Recipients indicated that they followed a three meal a day eating pattern during the week, but were vague in describing what they are during the weekend. At least one recipient had difficulty understanding his special diet.

The noon meal and the bagged supper met the criteria established by the Program Plan of Mobile Meals and appeared to be adequate; however, the lack of serving sizes made a nutritional evaluation difficult.

AN EVALUATION OF SELECTED COMPONENTS OF THE MOBILE MEALS PROGRAM IN GREENSBORO, NORTH CAROLINA

by

Janet Reger Trulove

A Thesis Submitted to
the Faculty of the Graduate School at
The University of North Carolina at Greensboro
in Partial Fulfillment
of the Requirements for the Degree
Master of Science in Home Economics

Greensboro 1977

Approved by

Thesis Adviser

APPROVAL PAGE

This thesis has been approved by the following committee of the Faculty of the Graduate School at the University of North Carolina at Greensboro.

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CHAPTER I

INTRODUCTION

Mobile Meals, a program of Community Health Services, Inc. (CHS), a Greater Greensboro United Way agency, has been delivering a hot noon meal five days a week to the elderly and disabled since 1969. Recently a cold bagged supper has been included for those who wish it, provided that they are not on a special diet.

Mobile Meals serves the elderly and handicapped who are unable to prepare their own meals, and allows them to avoid or delay institutional care. The dietician at Starmount Villa Nursing Home supervises the preparation of the meals, including special diets. A Mobile Meals Coordinator supervises the delivery of the meals and the participation of volunteers.

Volunteers deliver the meals in teams of two; one person drives and one enters the homes. Problems of the recipients related to health, housing and family matters may be noted on the folder which is returned to the Mobile Meals Coordinator.

Funds for the operation of the program are provided by Title XX of the Social Security Act for qualified low income families and by private donations. Administrative services are provided by CHS.

Prior to this study, an evaluation never had been conducted to determine the effectiveness of the program. To obtain information to be used to support funding requests and to establish goals and directions for the future development of the program, CHS appointed a committee to conduct an evaluation. The committee established objectives (Appendix A) and assigned certain of them to this researcher.

The objectives of the study reported here were:

- 1. To construct a comparative profile of the Mobile Meals population and the population of Greensboro, utilizing files from the Mobile Meals office, the 1970 U.S. Census, and the Greensboro Planning and Community Development Department.
- 2. To obtain an evaluation of the service and organization of Mobile Meals from volunteers who participate in the program.
- 3. To determine general satisfaction with and acceptance of the meals and their service by the recipients.
- 4. To evaluate one cycle menu in current use according to the Program Plan of Mobile Meals, and to assess the nutritional adequacy using basic principles of good nutrition.

The remaining objectives were considered by the committee in order to complete the evaluation.

CHAPTER II

REVIEW OF LITERATURE

The first home delivered meals program began in England in 1905 with the delivery of a hot meal to "invalids" prepared in the "Invalid Kitchen of London." During World War II, the Women's Voluntary Service in England began sending hot meals to the homes of "invalids" who were unable to prepare their meals (1).

Home delivered meals programs have been organized by various communities throughout the United States since 1954. In 1962 there were only twenty-four nonprofit home-delivered meals programs, whereas in 1971, approximately 350 existed (1). The purpose of the Mobile Meals Program of Greensboro, North Carolina, is to deliver a hot, well-balanced, nutritious noon meal and a cold sandwich-salad-fruit supper to the elderly and disabled homebound in the community who are unable to prepare their own food (2).

Only one published program evaluation has been noted. It evaluated the attitudes of recipients of home delivered meals and findings indicated that most recipients were satisfied with the service. The study, however, revealed that there was a problem in keeping foods hot and that recipients needed more socialization (3).

Organization and Services of Mobile Meals Programs

The programs depend on volunteers to deliver the meals and are managed by a variety of different community organizations. The Minnesota Home Economics Association has organized a mobile meals program throughout the entire state that delivers between one and three hot meals a day to about 5000 recipients (4). The Baltimore program relies on city, county and state nutritionists to help plan and prepare food suitable to meet the needs of the elderly. It also provides recipients with food supplies for breakfasts, and for weekends and days when inclement weather may stop deliveries (5).

There are many variations among program services. The Nashville, Tennessee, Meals on Wheels operates six days a week and delivers two meals a day, one hot and one cold. A bag of fruit is delivered weekly, and special diets are available. To help insure error free delivery, meals are packed in color coded plastic containers (6).

Other programs provide food for the weekend. One such program in New Jersey not only serves meals five days a week, but also delivers a heavy soup on Fridays for recipients to eat during the weekend (6).

Although most food is delivered hot and ready to eat, in England prepackaged frozen meals are delivered to be cooked by the recipients (7).

Because some meals are prepared in hospitals, special diets can be provided. In Portsmouth, Ohio, the meals are prepared at the Scioto Memorial Hospital. The meals cover

a range of five diets: diabetic, regular, soft, bland, and salt free (8).

Funding for the programs varies. Most depend on contributions and support from local community organizations. Federal funds, such as Title XX of the Social Security Act, help pay for those who cannot afford to pay for their meals. Recipients become eligible for Title XX funds in proportion to their income level, and are certified by the Department of Social Services.

The mobile meals program in Albuquerque, New Mexico, allows recipients to pay for their meals with food stamps (9).

Needs of the Elderly

The elderly have needs other than that of home delivered meals. These include socialization, housing, transportation, and health care services (10). Title IV of the Older Americans Act was designed to improve the quality of service to the elderly and to help meet the need of trained personnel for programs for the aging. It provides funds for training programs for personnel, for research projects, and for establishing multidisciplinary centers of gerontology to meet these needs (11).

In Cincinnati, Ohio, the program is funded by Title IV.

In addition to delivering meals to the homebound elderly and handicapped, it also serves meals at three different sites throughout the city for those who are physically able to participate in congregate meals. This program allows recipients to go from one program to the other as their needs change (12).

The number of mobile meals programs has increased so rapidly that guidelines for organizing these programs are needed. The Pennsylvania Dietetic Association in Camp Hill has developed guidelines which cover both Meals on Wheels and congregate meals for the elderly (13).

The program in Salt Lake City, supported by a Title IV Demonstration Grant from the Administration on Aging, includes nutrition education, social and recreational activities. It provides for free health screening tests and for home visits by public health nurses (14).

Title VII of the Older Americans Act was designed to meet the nutritional and social needs of persons aged sixty or older. This program provides older Americans with low cost, nutritionally balanced meals served in strategically located centers such as schools, churches, community centers, senior citizen centers, and other public or private nonprofit institutions. Other social and rehabilitative services can be obtained at these locations as well. Title VII helps promote better health among older Americans and helps reduce isolation (11).

In New York, one of the first demonstration congregate feeding programs, funded by the Administration on Aging, provided one meal five days a week served in a community center. In addition, all recipients participated in a nutrition education program, were interviewed by case workers, and received physical examinations (15).

The elderly have a need for social interaction (16). Although recipients in a mobile meals program do have personal contact each day with the volunteers, the time spent together is very short. Contact with other people can be extended through congregate feeding programs for the elderly who are not homebound.

Congregate feeding programs help prevent the feeling of isolation that the elderly experience and may help to prevent poor nutrition. Many programs involve the participants in some type of nutrition education program. One program involves participants in trips to the market, group discussions, lectures, and individual counseling (10).

In Greensboro, North Carolina, a congregate feeding program called Fellowship Luncheon has been organized by CHS. Meals are served at six sites throughout the city to residents over sixty. Funds from Title VII of the Older Americans Act help support the Fellowship Luncheon. A range of services, including recreational and community awareness programs, and nutrition education have been developed for participants.

Home Health Care for the Ill and Handicapped

Homemaker-home health aides prepare meals, shop for food, and do other necessary household tasks for the ill or handicapped who find it hard to manage in their own homes (17). Mobile meals may be delivered to these homebound people. In

San Francisco, the homemaker-home health aide teaches principles of good nutrition in addition to performing other household tasks (18).

Under Medicare, the home health services do not include nutrition counseling as a supported service and the cost must be absorbed by the home health agency (19, 20). The American Dietetic Association supports legislation that would provide for this service by qualified personnel (21).

Home health services account for less than one percent of the Medicare dollar, therefore extending home health benefits to include nutrition would cost less than five million dollars. The American Dietetics Association maintains that if nutrition were included as a component in home health services the number of people needing medical care would be reduced (20).

Summary

The various mobile meals programs offer different services to the recipients. Hot meals may be provided five or six days a week. A cold supper and food for the weekend may or may not be provided. Special diets are available through some programs. Mobile meals programs are funded in various ways: by local organizations, through private contributions and with government funds.

Only one published program evaluation has been noted. There is a definite need for evaluating these programs.

CHAPTER III

METHOD

This evaluation of the Mobile Meals program included a recipient profile, an evaluation by the volunteers through the use of a questionnaire, an evaluation by the recipients through personal interviews, and an evaluation of the cycle menu.

Profile of Recipients

In order to meet funding agency requirements, demographic data on the recipients were collected from the Mobile Meals office records and included age, sex, and special diets. Although data on race, housing and income were considered important, these were not available. Data on the race of the sample interviewed, however, were collected by the researcher. The age, sex and race of the Greensboro population were obtained from the Greensboro Planning and Community Development Department and the United States 1970 Census.

Evaluation of the Mobile Meals Program by Volunteers

A sample of 250 volunteers, representing 27 percent of those in the Mobile Meals program, was chosen by applying a table of random numbers to volunteers in the total population. Questionnaires were used to collect data for two reasons.

Volunteers would be difficult to interview because they are not homebound and might be hard to locate. They would not have time for interviews during Mobile Meals delivery.

A questionnaire was developed to include the volunteers' evaluation of attitudes of recipients toward the food and its service, the temperature of the food as served, route information, the means of initial contact with Mobile Meals, length of time and frequency of participation, reasons for participation, and strengths and weaknesses of the total program (Appendix B).

The questionnaire was approved by the evaluation committee, and was then pretested with two volunteers not selected for the sample to assess the clarity and accuracy of the information collected. The questionnaire did not require any changes.

The director of CHS wrote a letter which was mailed with the questionnaire encouraging participation by volunteers (Appendix C). The addressing and tabulation of the questionnaires were handled by the researcher. The questionnaires were mailed to the sample with an addressed, stamped envelope for their convenience in returning the questionnaire.

One month later, follow up phone calls were made to the volunteer sample to remind them to return the questionnaires, if they had not already done so. Because the questionnaires were returned anonymously, the entire sample was contacted.

As a result of the phone calls, twenty-five additional questionnaires were received. A total of 136 questionnaires, representing 54 percent of the sample, were completed and returned.

Evaluation of the Mobile Meals Program by Recipients

A random sample of forty-five recipients, representing 25 percent of the total population, was chosen for personal interviews. An interview was used for several reasons: interviews would be appropriate for blind and illiterate recipients, and would provide an opportunity to establish rapport with the recipients and perhaps obtain more complete information.

The interview schedule was designed to determine satisfaction with the meals, food preferences, diet information, food habits, the method of entrance into the program, the length of time of program participation, strengths and weaknesses of the program, and knowledge of congregate feeding programs.

The interview schedule, which was reviewed and approved by the evaluation committee, was pretested with two recipients not in the sample. As a result of the pretest, changes were made in the wording of questions and additional questions were added (Appendix D). For both the pretest and the actual study, the researcher contacted the selected recipients at the time meals were delivered to them. An appointment was made for an interview at a later time.

It had originally been planned to have a neutral person accompany the researcher. In practice, however, a volunteer from Mobile Meals went along, selected from a list of the Volunteer Evaluation Committee members supplied by the Mobile Meals office.

The time needed to complete the interview varied with each recipient, ranging from fifteen minutes to one hour. A total of thirty-eight recipients were interviewed. The other seven in the sample were not interviewed because of poor health, withdrawal from the Mobile Meals program, refusal to be interviewed, and absence from home at the scheduled time.

Evaluation of the Cycle Menu

The current cycle menu for Mobile Meals (Appendix E) was evaluated according to the Program Plan of Mobile Meals, which stated that the hot meal shall consist of one meat or fish, two vegetables ("one starch and one non-starch"), a hot roll, dessert and milk and that the cold bagged supper shall consist of a meat or cheese sandwich, a salad, salad dressing, and fresh fruit or fruit drink (2).

Sources of vitamin A and vitamin C were also noted and a general nutritional evaluation was attempted. The menus, obtained from the dietician at Starmount Villa, however, did not indicate amounts that were served.

CHAPTER IV

RESULTS

The objectives of this study were to construct a comparative profile of the recipients and the population of Greensboro, to obtain an evaluation of the service and organization from volunteers, to determine general satisfaction of recipients, and to evaluate the cycle menu.

Profile of Recipients

To meet the first objective of this study, data on age, sex, race and special diets were collected.

Age

Information on the ages of the Mobile Meal's population and the Greensboro population is given in Table 1. Of the 179 Mobile Meals recipients, the ages of 145 were available. Of these, 88 percent (128) were sixty years of age or older (22), whereas 26 percent of the Greensboro population was over sixty (23).

Seventy-four percent of the Greensboro population was between thirty and fifty-nine, but only seventeen (12%) of the Mobile Meals recipients fell in this age range.

Sex

In the Mobile Meals population, 68 percent were female, and 32 percent were male (22). The Greensboro population was 54 percent female and 46 percent male (23).

TABLE 1

AGES OF MOBILE MEALS RECIPIENTS AND GREENSBORO POPULATION

Age		Population							
Age	Mobil N	e Meals %	Greens N	boro %					
30-39	1	1	19691	28					
40-49	5	3	17190	24					
50-59	11	8	15241	22					
60-69	38	26	10303	15					
70-79	45	31	5741	8					
80-89	39	27	2253	3					
90-99	6	4	•••						
Total	145	100	70419	100					

Race

Data on the racial balance of the Mobile Meals recipients were collected only on the sample who were interviewed. Of these, 55 percent were white and 45 percent were black. Data on the Greensboro population indicated that 71 percent were white and 29 percent were black (24).

Special Diets

As seen in Table 2, eighty-three (45%) of the recipients received a special diet from Mobile Meals.

The largest group of special diets concerned sodium restriction, either alone or in combination with other restrictions. The combinations included low sodium and diabetic, and low sodium and low cholesterol diets. Diabetic diets, either alone or in combinations with low sodium and ulcer diets, were the second most prevalent diet. Other special diets included bland diets and low cholesterol diets.

Program by Volunteers

The second objective of this study was to obtain an evaluation of the service and organization of the Mobile Meals program from the volunteers participating in the program. A questionnaire was distributed to a random sample of 250 volunteers. Of these, 136 were completed and returned. The questionnaire was designed to determine observed attitudes of recipients toward the food and its service, the temperature

TABLE 2

CATEGORIES OF DIETS DELIVERED
TO MOBILE MEALS RECIPIENTS

Diets	Recip		
	N	%	
Regular diets	96	54	
Low sodium-2 grams	32	18	
Diabetic	27	16	
Low sodium-diabetic	12	7	
Low sodium-1 gram	4	2	
Bland	3	1	
Low cholesterol	3	1	
Low cholesterol-low sodium	1	0.5	
Diabetic-ulcer	1	0.5	
Total	179	100	

of the food as served, route information, characteristics of volunteers, and strengths and weaknesses of the program.

Observed Attitudes of Recipients

Volunteers were asked to indicate the attitudes of recipients toward the food, the food service and the program. Reasons for these assessments were requested, but few reasons were given. Many volunteers indicated the attitudes of recipients only with a check, and did not indicate why they thought the recipients felt that way.

Seventy-five volunteers indicated that they felt recipients were generally satisfied with the meal. Five volunteers reported that they felt recipients were partially satisfied; one volunteer indicated that one recipient was dissatisfied with the meal. Eleven volunteers reported that recipients were indifferent to the meal.

Seventy-six volunteers indicated that recipients generally were satisfied with the service of the food. One volunteer reported a partially satisfied recipient and another felt that one recipient generally was dissatisfied. Six volunteers felt that recipients were indifferent to the service of the food.

Seventy-nine volunteers indicated that the recipients they saw were favorable toward the Mobile Meals program itself. Two reported that recipients were unfavorable toward the program, and two volunteers reported indifference.

Reasons given for general satisfaction were that recipients appreciated the food and enjoyed the visits of the volunteers. Late delivery was the only reason given by three recipients for dissatisfaction.

Reported Temperature of Food

Eighty-four percent of the volunteers (114) made no comment concerning reports of recipients about food temperature. Of the twenty-two who did reply, fourteen (10%) indicated that they had heard no comments. Six volunteers (5%) stated that the hot foods were received cold by recipients, and two (1%) reported that the cold foods were received warm.

Route Information

Sixty-one percent of the volunteers had been assigned to only one route in the past year, however, 34 percent had been assigned from two to five route (Table 3). Seven volunteers (5%) made no response to the question.

Although 74 percent of the volunteers reported that they had the same partner each time, 26 percent indicated that their partners varied. Most of the volunteers (98%) were satisfied with their partners.

As seen in Table 4, 96 percent of the volunteers took one hour or more to complete the route. A few (3%) reported that less than one hour was needed to complete the route. Although 94 percent of the volunteers felt that the routes were consecutively arranged, 6 percent felt they were not.

TABLE 3

NUMBER OF ROUTES VOLUNTEERS WERE ASSIGNED
IN THE PAST YEAR

Routes	Volum	teers	
	N	%	
1	83	61	
2	22	16	
3	14	10	
4	6	5	
5	3	2	
Varies	1	1	
No comment	7	5	
Total	136	100	

TABLE 4

LENGTH OF TIME NEEDED TO COMPLETE ROUTE

Time	Volu	nteers	
	N	%	
30-45 minutes	4	3	
One hour	55	40	
Over one hour	76	56	
No response	1	1	
Total	136	100	

Eighty-five percent of the volunteers visited from eleven to twenty recipients; 15 percent delivered to under ten or over twenty recipients. Fifty-six percent of the volunteers visited from eleven to fifteen different households; 17 percent delivered to six to ten households (Table 5).

Seventy-nine volunteers reported making no multiple visits per stop, however, fifty-two volunteers did visit from one to four multiple units, such as apartment buildings and housing projects. Seven volunteers did not answer the question.

Characteristics of Volunteers

Seventy-four percent of the volunteers became involved with Mobile Meals through group organizations, such as churches or service clubs. Thirteen percent of the volunteers entered the program because of participating friends; 8 percent volunteered for unspecified reasons. Five percent made no response to the question.

As seen in Table 6, seventy-eight volunteers listed personal satisfaction in helping others as their reason for participating in the program. Fulfilling a community need was mentioned by thirty-seven volunteers as their major reason. Other volunteers stated church and religious involvement, and extra time.

Seventy-four percent of the Mobile Meals volunteers had participated in the program two years or more; 49 percent had served at least three or more years (Table 7).

TABLE 5

NUMBER OF RECIPIENTS AND HOUSEHOLDS
VISITED PER VOLUNTEER PER DAY

Recipients	Volun	teers	
	N	%	
6-10	6	4	
11-15	68	50	
16-20	47	35	
Over 20	7	5	
No response	8	6	
Total	136	100	
Households	Volun	teers	
	N	%	
1-5	8	6	
6-10	23	17	
11-15	76	56	
16-20	2	1	
Over 20	2	1	
No response	25	19	

TABLE 6
REASONS FOR VOLUNTEER PARTICIPATION

Number	Reason
78	Personal satisfaction in helping others
37	Fulfills a community need
8	Church and religious involvement
6	Extra time
5	Way to meet new people

TABLE 7

LENGTH OF TIME OF VOLUNTEER PARTICIPATION

Time	Volum	nteers	
	N	%	
Less than two months	5	4	
Two months to one year	31	22	
Two years	34	25	
Three to four years	32	24	
Over four years	34	25	
Total	136	100	

Seventy-seven percent of the volunteers reported participating once a month. Nineteen percent served occasionally; 3 percent participated twice a month; and 1 percent served once a week.

Ninety-four percent of the volunteers felt that their frequency of participation was satisfactory, however, 6 percent felt that they participated too infrequently.

Strengths and Weaknesses of the Mobile Meals Program
Comments received fell into two categories, those which
pertained to service to the recipients and those concerning
organization and management of the program. Some volunteers
contributed more than one comment; twenty-four failed to
list strengths and forty-seven did not list any weaknesses.

Table 8 contains a list of the reported strengths of the Mobile Meals program. Sixty-three volunteers felt that the major strength of the program was the hot, nourishing meal, whereas, forty-five reported personal contact. Other strengths mentioned were the availability of special diets, the bagged supper, home delivery, the dependable service, and the lack of income restrictions for recipients.

The thorough organization of the entire Mobile Meals program was listed by thirty-five volunteers as the major strength of the program. Other volunteers specifically stated the prompt service at the nursing home where meals are prepared and packed, organized routes and packaging of the food chests according to the route.

TABLE 8
STRENGTHS OF THE MOBILE MEALS PROGRAM
REPORTED BY VOLUNTEERS

	Service to the Recipients
Number	Comments
63	Nourishing meal
41	Personal contact for recipient
8	Home delivery
5	Reliable service
4	Recipient appreciation
4	Serving people of various life styles
2	Volunteers report other problems
2	Allows people to remain in their own homes
1	Bagged supper
1	Delivers, regardless of recipient's income
	Organization and Management of the Program
Number	Comments
18	Well organized
14	Well organized routes
5	Volunteer participation and dedication
3	Packaged into food chests according to delivery
1	Prompt service at the nursing home

Thirteen volunteers (Table 9) indicated that the major weakness of the program was the limited time available to spend with recipients. Other comments included no weekend delivery, cold, inadequate or unappealing food, and delivery to people who do not need the meals.

Twelve volunteers reported that routes were too long and unorganized; nine volunteers felt that Mobile Meals needed more volunteers and more publicity. Other weaknesses reported included poorly fitting lids for the styrofoam containers, lack of a more central location for meal pick up, errors in packaging, and waiting at the nursing home for food chests.

Twenty-three volunteers stated that there were no major weaknesses.

Evaluation of the Mobile Meals Program by Recipients

The third objective of this study was to determine general satisfaction with and acceptance of the meals and their service by the recipients. Personal interviews were conducted with a random sample of the Mobile Meals recipients. Although it was not scheduled in the method, a volunteer of the Mobile Meals accompanied the researcher on the interviews. It is impossible to determine the effect this may have had on responses of the recipients.

The interview schedule included items concerning satisfaction with the mobile meals, food habits and preferences, the method of entrance into the Mobile Meals program, length

TABLE 9
WEAKNESSES OF THE MOBILE MEALS PROGRAM
REPORTED BY VOLUNTEERS

Service to the Recipient	
Number	Comments
13	Need more time to visit with recipients
6	Delivers to people who don't need it
5	No weekend delivery
4	Food is unappealing, cold and inadequate
2	Recipients not at home at delivery time
2	No special diets for bagged suppers
1	Late delivery
1	Volunteers not reporting problems
Number	Comments
Number 9	Routes are too long
9	Routes are too long
9	Routes are too long Not widespread enough
9 8 6	Routes are too long Not widespread enough Need more volunteers
9 8 6 3	Routes are too long Not widespread enough Need more volunteers Need more publicity
9 8 6 3 2	Routes are too long Not widespread enough Need more volunteers Need more publicity Routes are not clear
9 8 6 3 2	Routes are too long Not widespread enough Need more volunteers Need more publicity Routes are not clear Styrofoam containers come open
9 8 6 3 2 1	Routes are too long Not widespread enough Need more volunteers Need more publicity Routes are not clear Styrofoam containers come open Need a more centrally located pick up station

of participation in the program, strengths and weaknesses of the program, and knowledge of congregate feeding programs for the elderly.

Satisfaction with Food Served

Most of the recipients (92%) enjoyed the food that was served; however, three recipients (8%) said they did not.

Eighty-seven percent reported that none of the foods served by Mobile Meals had given them indigestion. Thirteen percent indicated, however, that selected foods had given them indigestion at some time. These foods included chocolate pudding, hamburger, fish, and cabbage.

Thirty-six recipients (95%) stated that there was enough food in the mobile meal to satisfy them; thirty-five recipients (92%) reportedly ate all the food they were served.

Concerning the temperature of the food, twenty-four (63%) of the recipients felt that the hot foods were not hot when they received them. Although thirty-three recipients (87%) felt that the cold food was always cold, five recipients (13%) did not agree.

All recipients felt that Mobile Meals served a variety of foods. Eighty-nine percent indicated that none of the food items were served too often; however, ll percent felt that bologna, squash, tuna, and hamburger were served too frequently.

Thirty-six recipients (95%) stated that the aroma of the food was appealing. One recipient felt this was not always true and another recipient reported that he had no sense of smell.

Eight recipients (21%) who were interviewed reported receiving the bagged supper. Five indicated that they enjoyed it. Three stated that they were tired of sandwich meats, that the salad was too skimpy, and that the cheese was not good.

Most recipients reported that they did not share their mobile meals with anyone else. One recipient, however, stated that she shared leftovers with her daughter.

Food Preferences of Recipients

Recipients were asked to name their favorite part of the meal. Twenty-two recipients (57%) were unable to select a favorite part and reported that they enjoyed the entire meal. Other recipients stated specific parts of the meal that were their favorites. These included vegetables (15%), meats (7%), desserts (2%), and breads (2%). Seven recipients (17%) made no response to the question.

Vegetables

Fourteen recipients stated that all the vegetables served by Mobile Meals were favorites. Those vegetables listed specifically by recipients included green beans (6), mashed potatoes (6), turnip greens (5), salad (4), broccoli (3), asparagus (2), beets (2), cabbage (2), peas (2), carrots (1), and sweet potatoes (1).

Vegetables served by Mobile Meals that were reported by recipients as least favored included okra (5), cabbage (3), greens (3), salad (3), stewed corn (3), mashed potatoes (2), peas (2), asparagus (1), black eyed peas (1), broccoli (1), butter beans (1), green beans (1), and spinach (1). Seventeen recipients made no response to the question.

Meats

Twenty-two recipients reported enjoying all the meats or meat substitutes served by Mobile Meals. Specific favorites of the remaining recipients included chicken (6), meat loaf (3), spaghetti (3), roast beef (2), tuna (2), fish (1), corned beef (1), and beef stew (1).

Those foods reported by recipients as the least favored meat or meat substitute included fish (8), hamburger (5), meat loaf (5), chicken (3), macaroni (2), roast beef (1), corned beef (1), and ham (1). Seventeen recipients made no response to the question.

Desserts

Nineteen recipients stated that they enjoyed all the desserts served by Mobile Meals. Fourteen indicated that fruit was their favorite dessert. Specific fruits mentioned included pears (3), fruit cocktail (3), cherries (2), peaches (2), pineapple (1), and applesauce (1). Ten recipients reported pudding as their favorite mobile meals dessert; specific puddings mentioned were butterscotch (2), and lemon (1).

Twenty-eight recipients stated that there were no mobile meals desserts that they did not enjoy. Pudding was mentioned by five recipients as their least favorite mobile meals dessert; three indicated chocolate pudding. Two recipients reported that their least favorite mobile meals dessert was fruit.

New Foods Eaten

Sixty-eight percent of the recipients reported that they had not learned to eat any new foods through Mobile Meals;

32 percent stated that they had. These foods included salad, spinach, okra, candied yams, meat loaf, vanilla pudding, tuna, and an unknown green vegetable.

Special Diets

Fifty-five percent (2) of the recipients that were interview were not on a restricted diet. Eleven of the seventeen who were on special diets were restricted in sodium either alone or in combination with other dietary restrictions. Seven recipients were on diabetic or combination diabetic diets. Other diets mentioned included bland, low cholesterol, and 1000 calories (Table 10).

Fourteen recipients who were on restricted diets indicated that they had discussed the diet with a representative from Mobile Meals. Two had not and one recipient did not know. Two individuals stated that they had talked personally to the Coordinator of Mobile Meals concerning their diets.

TABLE 10

CATEGORIES OF DIETS RECEIVED BY RECIPIENTS WHO WERE INTERVIEWED

District	Recipients		
Diets	N	%	
Regular diets	21	55	
Low sodium	5	12	
Low sodium-diabetic	4	10	
Diabetic	2	5	
Low sodium-low cholesterol	1	3	
Low sodium-1000 calories	1	3	
Diabetic-1500 calories	1	3	
Low cholesterol	1	3	
1000 calories	1	3	
Bland	1	3	
Total	38	100	

Fourteen recipients indicated that their doctor had given a copy of their special diet to Mobile Meals, two did not know, and one stated that his doctor had not done so. Sixteen recipients indicated that they were receiving their restricted diet from Mobile Meals; one reported that he did not know.

Food Habits

Thirty-five recipients (92%) reported that they are in the morning. As seen in Table 11, foods they mentioned most often included eggs, cereal, toast and juice.

Eighty-nine percent of the recipients reported that they did not eat any food during the morning. Of the 11 percent who did, the foods they indicated included milk, ice cream and juice. One recipient, who indicated that he was diabetic, ate cake and cola.

Thirty-six recipients (95%) reported eating the mobile meal at noon time. Two recipients reported that they saved the meal to eat later, although one of them did eat milk and fruit at noon.

Thirty-one recipients (82%) reported that they had no food during the afternoon, however, seven recipients (18%) indicated that they did eat something. Two recipients ate their mobile meal then. Five other individuals mentioned cheese and crackers, fruit, milk, sandwiches, and cake and cola.

TABLE 11
FOODS EATEN BY RECIPIENTS IN THE MORNING

Number	Foods
21	Eggs
20	Cereal
16	Toast
16	Coffee
11	Juice
9	Fruit
9	Meat
9	Milk
3	Nothing
3	Cheese
2	Jelly
2	Fat Back
1	Vegetables
1	Hot Water

Thirty-six recipients (95%) indicated that they ate a meal in the evening. As seen in Table 12, some of the specific foods that were mentioned included cereal or bread, vegetables, meats, bagged suppers, fruit and milk.

Eighty-two percent of the recipients reported that they did not eat any food late in the evening, however, 18 percent indicated that they did. Two recipients reported eating fruit. Six other recipients ate diet cookies, milk, crackers, sandwiches, ice cream, and candy.

Twenty-two recipients (55%) indicated specific foods eaten during the weekend (Table 13). Sixteen (42%) stated that neighbors or relatives brought them meals during the weekend. Some of these foods included meats, vegetables, breads or cereal, milk, fruit, and T.V. dinners. Three recipients stated that they are nothing and two reported that they are out during the weekend.

Sixty-eight percent of the recipients reported that they had prepared their own meals before receiving mobile meals; 24 percent indicated no special preparation. Friends prepared meals for 5 percent and 3 percent of the recipients ate canned foods.

Participation in Program

Ten recipients stated that family and friends told them about Mobile Meals. Nine reported that either their doctor or nurse informed them, and six were referred by their social or case worker. Six recipients found out about Mobile Meals

TABLE 12
FOODS EATEN BY RECIPIENTS IN THE EVENING

Number	Foods
15	Cereals or breads
12	Vegetables
11	Meats
9	Bagged supper
7	Fruits
6	Milk
3	Leftover mobile meals
2	T.V. dinners
2	Eggs
2	Pudding or pies
2	Nothing

TABLE 13
FOODS EATEN BY RECIPIENTS DURING THE WEEKEND

Number	Foods
15	Meats
6	Vegetables
5	Breads or cereals
3	Milk
3	Nothing
2	Fruits
2	Eggs
2	T.V. dinners
2	Eat out
1	Cake
1	Pot pies
1	Canned foods

through the newspaper and television, and three through their church.

As seen in Table 14, thirteen recipients stated that family or friends arranged for them to receive the mobile meals; social or case workers arranged for seven recipients to enter the program. Other recipients commented that doctors, nurses or their church arranged for them to receive mobile meals.

Sixty-six percent of the recipients stated that no one from Mobile Meals visited them when they entered the program; 24 percent indicated that they had been visited by a Mobile Meals representative. Ten percent stated that they did not know if anyone had called.

Twenty recipients (53%) reported that they have been receiving mobile meals less than one year; eight recipients (21%) have been involved from one to two years. Ten (26%) have been receiving them two years or more, four of these for over four years.

Thirty-six recipients (95%) stated that they planned to receive mobile meals on a long term basis. Two recipients (5%) reported that they wanted to continue only a short time; reasons given included recuperating from a stroke and a broken arm. As soon as they were able to prepare their own meals, they planned to discontinue the service.

TABLE 14
ENTRANCE INTO THE MOBILE MEALS PROGRAM

Method of Entrance	Recipients		
	N	%	
Family and friends	13	34	
Social or case worker	7	18	
Nurses or doctors	4	11	
Self initiated	4	11	
Church	2	5	
Did not know	8	21	
Total	38	100	

Strengths and Weaknesses of the Mobile Meals Program

Eleven recipients (30%) stated that they most appreciated
the food delivered by Mobile Meals; ten others (26%) reported that they enjoyed most the visits of volunteers each
day. As seen in Table 15, other aspects that they liked
included the convenience of not having to cook, the variety
of food, and the availability of special diets.

Thirty-six recipients (95%) indicated that there was nothing wrong with the Mobile Meals program. Two recipients (5%) commented that meals were late, the beef was tough, chicken was incorrectly cooked, and they did not like milk.

The Fellowship Luncheon Program

Seventy-four percent of the recipients were not familiar with the congregate meals program for the elderly, the Fellowship Luncheon. Twenty-six percent had heard of it. In general, the recipients did not indicate an interest in congregate meals, perhaps due to a lack of familiarity with the program. Sixteen percent did report that they would be interested in participating occasionally. Of these, five recipients stated that they would like someone from the Fellowship Luncheon Program to visit them. These interested recipients indicated that they would need transportation to the luncheon site.

Evaluation of the Cycle Menu

The fourth objective was to evaluate one cycle menu, according to the Program Plan of Mobile Meals, and according to

TABLE 15
STRENGTHS OF THE MOBILE MEALS PROGRAM
REPORTED BY RECIPIENTS

Number	Reason
11	The food
10	Visits by volunteers
7	Convenience of not having to cook
2	Special diets
2	Dependable delivery
2	Variety of food
2	Food is appetizing
1	Food container separates the food

principles of good nutrition. The menu cycle for a three week period consisted of fifteen meals and five bagged suppers (Appendix E).

The mobile meals met the criteria established by the Program Plan, which stated that the meal shall consist of: one meat or fish, two vegetables, a hot roll, a dessert and milk. The five bagged suppers consisted of a meat or cheese sandwich, salad and a fresh fruit or fruit drink. The Program Plan included salad dressing with the bagged supper; however, the menu did not indicate whether salad dressing was served.

The cycle menu also was checked for sources of vitamin A and vitamin C. Foods containing vitamin A and vitamin C each were served nineteen times throughout the fifteen days in the three week cycle. No serving sizes were given so it was difficult to judge the nutritional adequacy of the menus with certainty. They appeared, however, to be nutritionally acceptable.

Summary

Eighty-eight percent of the Mobile Meals population were sixty years of age or older, 68 percent were female and 55 percent were white. Only two of the thirty-eight individuals interviewed had been referred to the program for a short term convalescent period.

Volunteers made few comments concerning the attitudes of the recipients toward the meal, the food service and the

program. Those volunteers who did comment, indicated that recipients generally seemed satisfied.

Seventy-eight volunteers indicated that they participated because they received personal satisfaction for it and thirty-seven indicated that they felt they were serving the community. Ninety-four percent of the volunteers felt that the routes were consecutively arranged; however, nine commented that routes were too long. Ninety-six percent of the volunteers reported that they took one hour or more to complete the route.

Most recipients reported that they enjoyed the food and felt that a variety of foods was served. Twenty-four recipients (63%), however, reported that hot foods were not always served hot.

Recipients reported following a three meal a day eating pattern during the week; however, they could not establish an eating pattern during the weekend.

Forty-five percent of the recipients interviewed were on special diets, primarily sodium restricted and diabetic diets. In at least one case a special diet had been misinterpreted. In general, the recipients had not heard about the Fellowship Luncheon, the congregate meals program in Guilford County.

The mobile meal and the bagged supper met the criteria established by the Program Plan. Serving sizes, however, were not indicated, preventing an accurate evaluation of the nutritional adequacy of the menus.

CHAPTER V

DISCUSSION

The objectives of this study were to construct a comparative profile of the recipients and the population of Greensboro, to obtain an evaluation of the service and organization of Mobile Meals from volunteers, to determine the general satisfaction of recipients with the meals and their service, and to evaluate the current cycle menu against the program's established criteria.

Profile of Recipients

The age range of recipients of Mobile Meals was thirty to ninety-nine years of age, however, most of the recipients (88%) were sixty years of age or older. Since Mobile Meals is designed to serve the disabled and homebound, it is interesting to speculate whether groups other than the elderly who might be disabled or homebound, on a long or a short term basis also would benefit from the service. For example, a homemaker released from the hospital who needs assistance in preparing her meals during her convalescence, could find home delivered meals of value. Two individuals who were subjects in this study had such a problem. It appears that there probably is an under-utilization of the services for the non elderly. The high percentage of elderly in the program could be a reflection of their income status, since many elderly have low incomes and Title XX funds, which partially support the program, are specifically for low income

individuals. Title XX provides funds for the program, for meals, and for administrative salaries. This source of funding may have had an influence on the selection of recipients.

Home delivered meals for the homebound of more moderate income, could be beneficial to those who primarily have a physical limitation. Six volunteers commented on the questionnaire that they delivered to recipients who did not need the meals, implying that they were above the poverty level. This suggests that there is a need to emphasize the purposes of the program in the training of volunteers.

The Mobile Meals program serves a higher percentage of women than men. This could be due to longer life expectancy for women (25).

The racial balance of the sample interviewed was 55 percent white and 45 percent black, whereas, the Greensboro population was 71 percent white and 29 percent black. This higher percentage of black recipients might be a reflection of income status.

Evaluation of the Mobile Meals Program by Volunteers

Volunteers made few comments concerning attitudes of the recipients toward the food. This could be due to several reasons. The written questions might not have been structured so that volunteers fully understood them. Volunteers may never have heard any comments. They have limited time to

spend with recipients when delivering meals and some volunteers always drive and never see recipients. Because seventy-eight volunteers (57%) indicated that they participate in the program to receive personal satisfaction from helping others, they may be aware of only the positive aspects of the program. Recipients, also, might not comment because they are grateful for the service and might be fearful of its discontinuation if inappropriate comments were made.

Volunteers, however, did comment about the length of time needed to complete the routes. Ninety-six percent took one hour or more. Three percent indicated that they needed only thirty to forty-five minutes, probably because of multiple deliveries at certain stops. If routes were shortened, perhaps the food temperature could be better controlled.

Volunteer training programs may need to be re-evaluated. Several volunteers indicated that they thought mobile meals were intended only for low income recipients and, as noted below, volunteers could be contributing to the problem of temperature control by leaving food chests open. Perhaps follow-up training sessions for volunteers could be held.

Evaluation of the Mobile Meals Program by Recipients

In response to a general question, thirty-six recipients (95%) reported that there was nothing that dissatisfied them concerning the Mobile Meals program. Recipients were eager to report positive aspects of the program, which included appreciation of the food, daily visits by volunteers, the

convenience of not having to cook, and the availability of special diets. Recipients might have been more willing to report problems if a Mobile Meals volunteer had not been present during the interview. Recipients, generally, indicated that they were satisfied with the delivered meal and its service. They stated that the meal was appealing, satisfying and offered a variety of foods.

When asked specifically about the temperature of the food, sixty-three percent of the recipients reported that the hot food was not always hot. This could be due to the time needed to complete the route, inadequate packaging of the food, volunteers not closing the food containers after each delivery, or getting the meal out of the container before reaching the recipient's home. Both of the latter two aspects were noted by the researcher on several occasions. A study on packaging materials for home delivered meals concluded that styrofoam trays packed in polyurethane containers were the best of those tested to preserve food temperatures (26). These are the packaging materials used by Mobile Meals.

Most recipients indicated that they followed a three meal a day eating pattern. This corresponds to data obtained from the 1965 Household Food Consumption Survey on food patterns of the elderly (27). Eating between meals was reported by 11 percent of the Mobile Meals recipients, however, 40 percent of the elderly interviewed in the 1965 survey reported eating throughout the day. Although it appears that recipients did not eat throughout the day, this may not be

the case. Recipients may not be aware that they were eating or don't remember due to memory lapses.

Recipients were vague in describing what they ate during the weekend. Many could not establish an eating pattern, indicating that they did not plan for meals during the weekend or that they did not eat at all or did not remember eating.

Seventy-four percent of the recipients were not familiar with the Fellowship Luncheon program, which is a congregate feeding program in Greensboro that receives funds from Title VII of the Older Americans Act. The brief explanation they received from the researcher during the interview might not have been enough information for them to fully understand the benefits they could receive through participation, such as diet counseling, socialization, recreation and health care services.

Eighty-three (45%) of the recipients received a special diet from Mobile Meals. Of those recipients interviewed, 45 percent (17) were on special diets. It is interesting to note that recipients in the study sample received fewer special diets than did the total population of the Mobile Meals program. One recipient interviewed, who was a diabetic, reported that he snacked on cake and cola frequently. This indicates that he had little understanding of his dietary needs and restrictions.

Recipients, generally, did not make very many comments as to food likes and dislikes. They seemed to enjoy the

food served by Mobile Meals. Chicken was mentioned most often as the favorite meat, and the main dish listed as the least favorite was fish. Those vegetables listed by recipients most often as their favorites included green beans, mashed potatoes and turnip greens. Okra was mentioned by five recipients as their least favorite vegetable. It would be interesting to note how often these foods are served by Mobile Meals.

Recipients entered the program in various ways. Family and friends were mentioned by 34 percent and 18 percent had been referred by social workers. Only 11 percent of the recipients were referred to the program by doctors or nurses, indicating that convalescing individuals who might benefit from home delivered meals on either a long or short term basis may not be referred to the program.

The time needed for the interviews varied with each recipient, ranging from fifteen minutes to one hour. Many recipients were eager to talk, not only about the meals, but also about other topics. They also indicated that they would enjoy other visits. The Mobile Meals Volunteer Evaluation Committee is designed to visit recipients and to determine their satisfaction with the program. More frequent visits, on a regular basis, might be included in the responsibilities of the Volunteer Evaluation Committee.

Evaluation of the Cycle Menu

The noon meal and the bagged supper met the criteria established by the Program Plan of Mobile Meals. The meals were well balanced and provided sources of vitamin A and vitamin C. The menus, however, did not indicate the size of the servings, so it is difficult to fully assess their nutritional adequacy.

CHAPTER VI

SUMMARY AND CONCLUSIONS

The objectives of this study were to construct a comparative profile of the recipients and the population of Greensboro, to obtain an evaluation of the service and organization of the Mobile Meals program from volunteers, to determine general satisfaction of recipients of the program, and to evaluate one current cycle menu according to the criteria established by the program.

Demographic data on the recipients were collected from the Mobile Meals office records, which included age, sex and special diets. Data on the race of the sample interviewed was collected by the researcher. The ages, sex and race of the Greensboro population were obtained from the Greensboro Planning and Community Development Department and the United States 1970 Census.

An evaluation of the Mobile Meals program by volunteers was obtained through the use of a questionnaire. A sample of 250 volunteers was chosen by applying a table of random numbers to volunteers in the total population. The questionnaire was designed to determine observed attitudes of recipients toward the food and its service, the temperature of the food as served, route information, characteristics of volunteers, and strengths and weaknesses of the program.

The questionnaire was approved by the evaluation committee, pretested and mailed to the volunteer sample. A total of 136 questionnaires were completed and returned.

A sample of forty-five recipients was chosen for personal interviews. The interview schedule was approved by the evaluation committee and pretested. A total of thirty-eight recipients were interviewed.

The current cycle menu for Mobile Meals was evaluated according to the Program Plan of Mobile Meals. A general nutritional evaluation was attempted and sources of vitamin A and vitamin C were noted.

Eighty-eight percent of the Mobile Meals population were sixty years or older. In the Mobile Meals population, 68 percent were female and 32 percent were male; the Greensboro population consists of 54 percent female and 46 percent male. Of the Mobile Meals recipients who were interviewed, 55 percent were white and 45 percent were black. Data on the Greensboro population indicated that 71 percent were white and 29 percent were black. The two largest groups of special diets were low sodium and diabetic, either alone or in combination. Only two recipients who were interviewed were receiving mobile meals during a short term convalescent period.

Volunteers indicated that most recipients were satisfied with the meals, the food service and the Mobile Meals program. The greatest motivation for participating in the program appeared to be personal satisfaction from helping others.

Volunteers generally felt that the routes were consecutively arranged. Ninety-six percent reported that they took one hour or more to complete the route, possibly indicating that routes were too long to adequately preserve the temperature of the food.

Seventy-four percent of the volunteers became involved through group organizations and have participated two or more years. Seventy-seven percent of the volunteers reported participating once a month.

Most recipients (92%) enjoyed the meal and 95 percent indicated that there was enough food to satisfy them. Thirty-five recipients ate all the food. All the recipients felt that the food served by Mobile Meals represented a variety of foods. Sixty-three percent, however, reported that hot food was not always hot.

Thirty-five recipients (92%) reported that they ate additional food in the morning; 89 percent of the recipients indicate that they had no food during the morning. Ninety-five percent (36) ate the mobile meal at noon and also ate a meal in the evening. Thirty-one recipients reported that they had no food either during the afternoon or late evening. Recipients were vague in describing what they ate during the weekend. At least one recipient had difficulty understanding his special diet.

Recipients indicated several ways that they became involved in the program. These included family and friends, social workers, nurses or doctors, church, and self initiation. Ninety-five percent of the recipients stated that they planned to receive mobile meals on a long term basis.

The meals and the bagged supper met the criteria established by the Program Plan of Mobile Meals and appeared to be adequate; however, the lack of serving sizes made a nutritional evaluation difficult. Sources of vitamin A and vitamin C were included throughout the menu.

This study led to the conclusion that the Mobile Meals program provided a needed service to the Greensboro population. It supplied the elderly and homebound recipients with a hot noon meal and, if requested, a bagged supper. In addition, special diets were served when needed. Recipients of the program, generally, were satisfied with the food and services provided by the Mobile Meals program.

Results of the study suggested, however, that the Mobile Meals program should include more disabled or homebound individuals who are not elderly, regardless of the estimated length of their disability or their ability to pay.

Because sixty-three percent of the recipients indicated that the hot foods were not hot, the Mobile Meals program should try to preserve the temperature of the foods. The Mobile Meals training program should emphasize keeping the food chest closed between stops, and removing the meal from the chests only at the time the delivery is to be made.

Some recipients might benefit from inclusion in a congregate meals program and also from dietary counseling to help them establish a plan for their meals and to better understand their special diets. The Mobile Meals Program may wish to include food for the weekend in future plans.

More personal contact between the volunteers and recipients is recommended in order to fill a need for socialization and to provide information about problems that could be referred to other agencies.

CHAPTER VII

RECOMMENDATIONS

The Mobile Meals Program in Greensboro is well organized and appears to have satisfied its recipients. It offers a hot noon meal, a cold bagged supper and special diets.

As a result of this study several recommendations are made to assist the Mobile Meals Advisory Board in establishing goals, directions and procedures for the future development of the program.

- Encourage doctors and nurses to refer individuals to the program who could benefit either on a long or short term basis during a convalescence period.
- Serve more non elderly homebound and disabled recipients who need the service.
- 3. Include more moderate income recipients who can pay for their meals but are unable to prepare food for themselves.
- Include training review sessions for volunteers to emphasize procedures and policies.
- 5. Motivate volunteers to report any problems they might observe concerning housing, health and family situations.
- 6. Include more personal contact between the volunteers and recipients in order to fill a need for socialization and to provide information about problems

- that could be referred to other agencies. This might necessitate afternoon visits.
- Provide for more frequent visits by the Volunteer Evaluation Committee.
- 8. Instruct volunteers to keep the food chests closed between stops, and to remove meals from the food chests only at the time of delivery, to help preserve the temperature of the food.
- Provide some food for recipients to use during the weekends.
- 10. Educate eligible recipients about the congregate feeding programs and encourage participation where it would be of value to the recipient.
- Provide diet counseling to recipients by qualified personnel, so that recipients on special diets will better understand their needs.
- 12. Shorten routes in some cases to help preserve the temperature of the food.
- 13. Include serving sizes on the Mobile Meals menus so that nutritional adequacy can be evaluated.

It is hoped that these recommendations will assist the Mobile Meals Program in providing even better service to recipients.

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APPENDIX A

OBJECTIVES OF THE MOBILE MEALS EVALUATION COMMITTEE

OBJECTIVES OF MOBILE MEALS EVALUATION COMMITTEE (In the Form Received From the Committee)

1. Overview

- Get a copy of objectives, grant applications for a. three years (including budgets).
- b. What are we doing in terms of meals
 - 1. per day
 - 2. per week
 - 3. per month
 - 4. overall--6 months-one year
- c. Whom are we serving? (60 and over; shut-ins) What is our mixture?
- d. Where are our people?
 - 1. Map dispersion
 - 2. Routes covered in city
- 2. Impact Evaluation. Send out volunteers (students) to contact recipients on their evaluation of the program.
- 3. Financial (fiscal) Evaluation. Drop back 2 or 3 years to get a trend evaluation.
 - a. administration
 - b. program
 - c. food
- 4. How are we serving our people (efficiency)?
 - Someone from outside the program should do this. a.
 - Follow the program a week.
- Assessment Side (growth factor)
 - a. A projection of mobile meals future
- 6. Nutrition
 - a. Cycle of menus
 - Spot check to see that meals are according to b. approved plans
 - c. Are there variations? Why?

APPENDIX B

VOLUNTEER QUESTIONNAIRE



MOBILE MEALS OF GREENSBORO

A PROGRAM OF COMMUNITY HEALTH SERVICES, INC.

1301 North Elm Street MOBILE MEALS EVALUATION Greensboro, N. C. 27401 VOLUNTEER QUESTIONNAIRE Telephone 273-3691

DIRECTIONS: The following questionnaire is a part of the Mobile Meals Program Evaluation. It is designed to determine the strengths and weaknesses in the program toward the goal of better service to Mobile Meals recipients. All forms are anonymous; your name will not be involved in any way. Please fill out the questionnaire as honestly and thoroughly as possible and turn it in by June 2nd, 1976, in the enclosed, addressed, stamped envelope.

- 1. How long have you been delivering Mobile Meals? _less than two months _____ three to four years _____ over four years two years 2. How often do you participate? once a week twice a month occasionally 3. How do you feel about the frequency with which you participate? Is it: __about right too often too infrequent 4. a. How often do you have the same partner? ___always ____seldom ____sometimes b. Is this to your satisfaction? ____yes ____no ____sometimes 5. What reasons can you give for your participation in the Mobile Meals Program?
- 6. How did you begin working with the Mobile Meals Program?

7.	In the past year, to how many different routes have you been assigned?
In a	answering questions 8 to 11, please refer to your most ent route assignment.
8.	Is the route you follow arranged consecutively by location? usuallyseldomsometimes
9.	How long does it usually take to complete the route?
10.	How many recipients do you usually see each day? 1-56-10over 2011-15other (specify)
11.	a. How many households do you usually visit each day? 1-5 6-10 over 20 11-15
	b. Does your route include more than one household at any of the stops?
2.00	If yes, please indicate the number of stops with multi- ple householdsstions 12 through 20 concern the food, its service and the
	general attitude of the recipient.
12.	We would like to know any specific comments you may have received concerning the temperature of the food. Check any that apply and indicate the approximate number of comments you have received. hot foods received hot (number of comments)cold foods received cold (number of comments)cold foods received warm (number of comments)
	received no comments
13.	Do you feel that the food chest currently in use keeps the food at the correct temperature? sometimes
14.	Are the food chests easy to handle? yes no sometimes If yes, skip to question #16

15.	If the answer is "no" or "s reason that applies:too heavytoo lanother (please specify)	rgeunbalanced
16.	toward the <u>meals</u> , themselve meals with:	ng the attitude of recipients es. About how many regard the Reason, if known:
	General satisfaction	(number)
	Partial satisfaction	(number)
	General dissatisfaction	(number)
	Indifference	(number)
17.	Of the recipients that you service of the food with:	see, about how many regard the
	Attitudes.	Reason, if known:
	General satisfaction	(number)
	Partial satisfaction	(number)
	General dissatisfaction	(number)
	Indifference	(number)
18.	recipients that you see, a	: Unfavorable(number)
19.	What would you say are the	major strengths of the program?
20.	What would you say are the	major weaknesses of the program?
Sex:	Age:	
	female 16-25	26-3536-45
	male46-55	56-65over 65

APPENDIX C

COVER LETTER FOR QUESTIONNAIRE FOR VOLUNTEERS



Community Health Services, Inc.

1301 N. ELM ST. GREENSBORO, N. C. 27401 PHONE 273-3691 HIGH POINT MEMORIAL HOSPITAL HIGH POINT, N. C. 27262 PHONE 882-2521

May 13, 1976

Marshall C. Abee Executive Director

Dear Mobile Meal Volunteer:

The Advisory Board for Mobile Meals is presently involved in an evaluation study of all aspects of this Community Health Services program. To make this study meaningful, you who know most about Mobile Meals are being asked to participate.

To assist us in this effort we have requested the Food and Nutrition Department of the University of North Carolina to take a major role in the evaluation of our Mobile Meals Program. This evaluation has been designed to provide information on the over-all effectiveness of the program as it is being conducted at the present time, as well as to identify strengths and weaknesses in the program toward the goal of better service to Mobile Meals recipients.

We are confident that you will want to work with us in this endeavor by completing the enclosed questionnaire and returning it to UNC-G in the envelope provided. You will not be identified with your comments, and Community Health Services will receive the summary report only.

Thank you in advance for assisting us with this important evaluation study.

Sincerely,

Marshall C. Abee
Executive Director

MCA/ms

Enclosure

Coordinated Planning to meet Community health problems

Supported year 'round by your annual contribution to your United Way



HICH POINT

APPENDIX D
RECIPIENT INTERVIEW SCHEDULE

RECIPIENT INTERVIEW SCHEDULE

1.	How did you find out about Mobile Meals?
2.	a. How did you go about getting Mobile Meals?
	<pre>b. Did anyone from Mobile Meals visit you when you first began? yes</pre>
3.	hear regaining Mobile Meals?
4.	Why did you want to receive them?
5.	How long do you wish to continue receiving Mobile Meals?short term (specify)
	long term
6.	Do you enjoy the meals?
7.	What part of the meal do you enjoy the most? meat or main dish vegetables desserts meat or main dish and beverage bread all parts
8.	Mobile Meals?
9.	by Mobile Meals?
10.	Mobile Meals?
11.	by Mobile Meals?
12.	Mobile Meals?
13.	What is your least favorite dessert among those served by Mobile Meals?

14.	Have any of the foods ever given you indigestion?yessometimes
	If yes or sometimes, what specific foods?
15.	Is there enough food to satisfy you?
	yessometimesno
16.	Do you eat most of the foods?alwayssometimes
17.	Have you learned to eat any new food through Mobile Meals? yes no If yes, what new foods have you learned to eat?
18.	Are the hot foods hot? sometimesno
19.	Are the cold foods cold?
	yessometimesno
20.	Are the foods varied enough for you?
	yessometimesno
21.	Are any of the food items served too often?
	yessometimes
	If yes or sometimes, what foods are served too often?
22.	
	yessometimes
23.	Are you on any kind of a diet?
	yesno
24.	If yes, what is the diet?
	Low sodium Low cholesterol Diabetics1800 calories 1000 calories
	Bland
	other (specify)
25.	a. Have you discussed your diet with anyone from Mobile Meals?
	yesdon't know
	no If yes, with whom?
	If yes, when?

-	yes no	don't know
1	Are you receiving a diet mealyes	from Mobile Meals?
	f yes, skip to question #28.	
1	oo you receive the bagged sup yes	per?
	If yes, are you satisfied wit	h it?
1	What other food do you eat on Meals? Probe: Diet history or 24-ho	
	a. What is the first thing y	ou usually eat each day
1	o. Do you eat anything throu	ghout the morning?
	. Do you usually eat someth	ing at mid-day?
	d. Do you generally eat anyt	hing in the afternoon?
,	e. Do you eat anything in th	e evening?
	f. What is the last thing yo	u usually eat at night?
,	What do you eat on the weeken	ds?
	What did you eat every day be Mobile Meals?	fore you began receiving
	Do you share your Mobile Meal yes no	with anyone?sometimes
	If yes or sometimes, with who	om?
	What part of the meal do you	share?

32.	Have you heard of the Fellowship Luncheon?
	If not familiar to recipients, explain briefly. The Fellowship Luncheon provides a nutritious noonday meal 5 days a week, Monday through Friday to residents of Greater Greensboro over 60. Meals are served each day at 6 different locations around Greensboro. It offers you a chance to socialize with others while enjoying your meal. Fellowship Luncheon provides a variety of community and personal awareness programs and recreational activities for each location. Each participant is given the opportunity to contribute that they can afford for the meals. Transportation is provided for those who need it. Fellowship Luncheon is a program of Community Health Services.
33.	Would you ever be interested in participating in it?yessometimesno
34.	a. Would you like someone from the Fellowship Luncheon to visit you?
	b. Would you need transportation to the Fellowship Luncheon site? no

35. What do you like best about Mobile Meals?

36. What do you like least about Mobile Meals?

APPENDIX E

MOBILE MEALS CYCLE MENU

MOBILE MEALS CYCLE MENU

Week One

Monday

Meat loaf with gravy Buttered noodles

*Fried okra

Roll

Milk

*++Royal Anne cherries

Tuesday

Roast pork, cornbread dressing

Black eyed peas

++Cole slaw

Roll

Milk

Applesauce

Wednesday Hamburger steak

Corn pudding

*++Turnip greens

Roll

Milk

Vanilla pudding

Thursday Fried Chicken

*++Buttered sweet potatoes

*French green beans

Roll

Milk

Pear halves

Friday

Corned beef brisket

++Steamed cabbage

*Buttered carrots

Cornbread

Milk

Creamed pudding

Week Two

Monday

Chuck wagon steak

++Whipped potatoes

*++Buttered green peas

Roll

Milk

Applesauce

*Vitamin A food source ++Vitamin C food source Tuesday Pot roast of beef Buttered rice

*++Buttered okra and tomatoes

Roll Milk

*Sliced peaches

Wednesday Baked ham, raisin sauce

*++Buttered mixed greens

Harvard beets

Roll Milk

++Pineapple chunks

Thursday Spaghetti, meat sauce

*++Buttered broccoli

Roll Milk

Fruit cocktail

Friday Broiled fish, tartar sauce

Oven browned potatoes

*++Turnip greens Cornbread

Milk

Lemon pudding

Week Three

Monday Sliced ham with pineapple

++Whipped potatoes *French green beans

Roll Milk

Butterscotch pudding

Tuesday Meat croquettes

++Diced potatoes

*++Turnip greens

Roll Milk

Pear halves

Wednesday Oven baked chicken

*++Candied sweet potatoes

*++Zucchini squash

Roll

Milk

Applesauce

*Vitamin A food source ++Vitamin C food source

Thursday Sauteed liver

Lyonnaise potatoes *++Chopped broccoli

Roll Milk

*Sliced peaches

Friday

Fried fish, tartar sauce French fried potatoes

*++Collard greens Corn pudding Milk Lemon pudding

Bagged Suppers

Monday Egg-tuna sandwich or

Ham slaad sandwich

Tossed salad Orange juice

Tuesday Bologna sandwich

Tossed salad Grapefruit juice

Wednesday Salami sandwich

Tossed salad Fresh fruit

Thursday Ham sandwich

Tossed salad Apple juice

Friday Pimento cheese sandwich or

American cheese sandwich or

Luncheon meat sandwich

Tossed salad Tomato juice

*Vitamin A food source ++Vitamin C food source