



## Effective methods for engaging with YOPI (Young, Old, Pregnant, Immunocompromised) on food safety matters

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Young, older, pregnant, and immunocompromised (YOPI) people are most vulnerable to foodborne illnesses due to impaired or underdeveloped immune systems<sup>(1)</sup>. There is a lack of information regarding how YOPI groups access, receive or use information about food safety, what influences their food safety behaviour, and their preferences for receiving food safety advice. The objective of this research was to develop a better understanding of how YOPI consumers in New Zealand access and use food safety information, the types and sources of food safety information used, how information and advice are obtained, and how these influence their decision-making about food safety practices and related behaviours. Research questions were guided by a rapid review of literature. Twenty qualitative focus groups (comprising of either young, old, pregnant, or immunocompromised individuals) based in one of three locations in New Zealand were conducted. This was complemented with data from health care providers from relevant sectors (nutritionists, dietitians, aged care providers, cancer nurses, Well Child Tamariki Ora providers, and midwives). Recruitment included a focus on ethnic groups (Māori and Pasifika) to ensure diversity of experiences and perspectives were represented in the research and to reflect NZFS's interest in developing fit-for-purpose messages and resources for these YOPI populations. Thematic and segmentation analysis was conducted to understand current food safety behaviours and how to best communicate food safety matters. Typologies of participants were developed by grouping participants based on common features: attitudes, beliefs, and experiences. The research revealed most participants are comfortable with their food safety practices and reported habitual behaviours. Many YOPI did not perceive themselves to be at a greater risk of foodborne illness, particularly older people. A key finding was that access to information does not necessarily lead to behaviour change. Groups undergoing periods of change (immunocompromised, pregnant and young) were more likely to seek additional information. Families and health professionals are trusted sources of information, with all groups reporting some use of the internet as an information source. An individual's risk perception was the main motivating factor for obtaining and following advice. Habit, cost of food, and lack of information were key barriers to obtaining or acting on information, along with pregnant people reporting social pressures as a reason to not obtain or act on relevant advice. In general, there are three key types of food-safety messaging all groups would like to receive: situation-specific advice; information received alongside other key information (e.g., starting solids); and general information for the whole population. Gaining insights into YOPI preferences on food safety matters can aid the development of appropriate communication and engagement methods of the risks and impacts of food safety matters to vulnerable people.

**Keywords:** food safety, foodborne illness, Immunocompromised, old

### Ethics Declaration

Yes

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### Reference

1. Pattis I, Horn B, Cressey P *et al.* (2022, October) Annual report concerning foodborne diseases in New Zealand 2021. <https://www.mpi.govt.nz/dmsdocument/53872/direct>