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### **Introduction**

Food insecurity among older adults, those age 60 and over, is a growing problem in Ohio and around the nation. In Ohio, more than one-in-six older adults (17.6 percent) face the threat of hunger.<sup>1</sup> Ohio is among the 10 worst states in the nation for food insecurity among older adults, with over 457,000 Ohioans over age 60 who are either “marginally food insecure” or “food insecure.”<sup>2</sup> Stories abound of older adults with fixed incomes who are forced to choose between food and medicine, homebound older adults who are unable to go grocery shopping to buy food for their household, and older people who can't prepare their own meals and don't have anyone to assist them. Further, research has shown that older adults who face the threat of hunger are significantly more likely than their food secure counterparts to have poor health outcomes, such as heart attacks and heart failure, asthma, chest pains, and limitations with activities of daily living, among other poor outcomes.<sup>3</sup> Additionally, older adults who are food insecure are 60 percent more likely than food secure seniors to experience depression.<sup>4</sup> And although adults who are age 40-59 are somewhat more likely to experience food insecurity (due in part to the fact that they are not yet eligible for benefits through Social Security or Medicare), older adults are more vulnerable to the negative impacts of food insecurity than younger adults.<sup>5</sup>

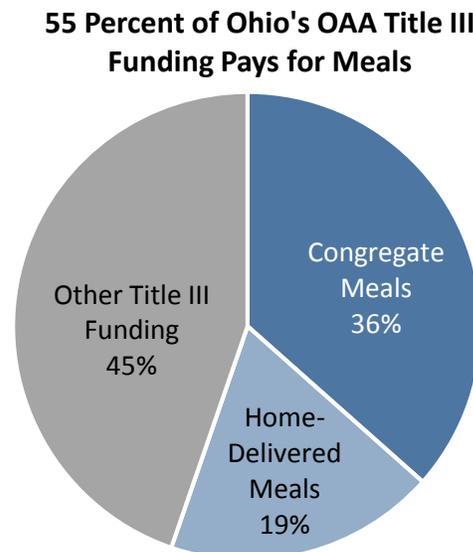
There are many resources that seek to address the issue of food insecurity among older adults, but the rising rate of food insecurity in Ohio suggests that these resources are insufficient to meet the need in communities. Although not specific to older adults, the Supplemental Nutrition Assistance Program (SNAP), also known as food stamps, is a vital program that provides assistance to many food insecure seniors. Community Solutions will explore the value of SNAP in reducing senior food insecurity in a report to be released in June, 2017. Food banks and pantries are also valuable resources that are available to all low-income Ohioans, but are increasingly being accessed by older adults. The Ohio Association of Foodbanks reports that the number of older adults visiting food pantries in Ohio has increased by 20 percent in the past four years, with a total of 449,115 people age 60 and over visiting food pantries in the first quarter of 2017.<sup>6</sup> Finally, prepared meals, provided in a congregate setting or through home-delivered meal programs, are essential to combatting senior food insecurity, and are the focus of this report.

### **Home-delivered Meals & Congregate Meals**

Home-delivered meals, often known as Meals on Wheels, and congregate meals are important and straightforward tools that can be used to combat food insecurity among older adults. Home-delivered meals are provided to homebound older adults. Home-delivered meal programs are administered

locally, so eligibility requirements may vary, but recipients are most often homebound due to a disability or illness, and very low-income. Likewise, congregate meals are prepared meals that are served in a group setting, such as a senior center, community center, church, or even a restaurant or cafe. Congregate meals are ideal for older adults who are still able to get out and about, and many congregate meal providers have vans that assist recipients with transportation to and from meals. In addition to receiving a regular hot meal, congregate meal recipients have the opportunity to socialize with others, reducing the risk of social isolation that often plagues older adults. Many home-delivered meal and congregate meal programs may ask for a suggested donation for the meal to offset the cost of providing the meal, however, payment is not required, as long as income limitations are met. Most congregate and home-delivered meal programs determine eligibility by administering a nutrition risk screening or assessment (required by Medicaid and Title III funded programs), and the meals may be accompanied by nutrition education and/or nutrition counseling.

Home-delivered meals are distributed via many community-based programs around the state, and are funded through a variety of funding mechanisms. One substantial funding stream for home-delivered meals in Ohio is Title III of the Older Americans Act (OAA). Title III is dedicated to providing home and community-based long-term services for people age 60 and over. Title III funds are granted to the Ohio Department of Aging from the U.S. Department of Health and Human Services' Administration on Aging.



**Source: Administration for Community Living FY 2016 Allocations**

In Ohio, federal OAA funding is allocated to 12 Area Agencies on Aging (AAAs) around the state according to a formula, and the AAAs have some leeway in how they spend the dollars in their region. As a result of this system, the delivery of home-delivered meals and congregate meals can vary in different regions of the state. For instance, in some areas, the AAA may work with a limited number of providers in an effort to streamline meal delivery, while in other areas there are numerous providers who serve small areas, focusing on wrapping services around individuals who are particularly vulnerable. Additionally, federal Title III funding requires states to provide matching funds; for congregate and home-delivered meal programs, federal funds cannot be used to pay for more than 85 percent of the total cost of the programs. The AAAs are responsible for paying the match, which they can do with some combination of using local levy dollars, state funds from the Senior Community Services Block Grant, raising funds privately, or asking providers to contribute matching funds.

Home-delivered meals are also funded by Medicaid for eligible older adults who receive in-home services via a Medicaid waiver. This helps to reduce the overall spending on in-home services, because home-delivered meals are cheaper to provide than staff time required to do individual meal preparation in-home. Federal Community Services Block Grant (CSBG) funds can be used to help pay for home-delivered meals as a way to keep vulnerable individuals (such as low-income, disabled older adults) living independently at home. Federal Community Development Block Grant (CDBG) funds can also be used by communities to pay for home-delivered meals. Many counties and some municipalities also have senior services levies that help fund home-delivered meals. Ohio has many food banks and community-based nonprofits that provide congregate and home-delivered meals through some combination of funding from the above sources, often in addition to funding from their own private fundraising efforts and donations collected from meal recipients.

### *More Than a Meal*

Providers around the state emphasize that home-delivered meals are so much “more than a meal.” Meals must be given directly to recipients, not left on their doorstep or otherwise left without making contact with the recipient. In this way, home-delivered meals also act as a safety check to make sure recipients are up and about, and doing well. For many recipients, their delivery person might be the only person they interact with in the course of a day, and even the short human interaction can reduce a sense of social isolation that homebound older adults may experience. A national survey of Meals on Wheels recipients found that people who received daily-delivered meals (rather than a weekly distribution of frozen meals) attributed the meals to making them feel safer and less lonely overall.<sup>7</sup> Providers have, from time to time, found older adults who have fallen in their homes and have been able to get emergency assistance. Many providers also make sure that delivery drivers and staff who conduct assessments are informed about existing resources for older adults that have other challenges (financial, home maintenance, mental health, etc.) so that recipients can get referrals to other programs for which they may qualify. Similarly, congregate meals are often provided in conjunction with other programming at senior centers and community centers, offering opportunities for older adults to eat well, build community, reduce social isolation, and participate in engaging activities, all while being exposed to other resources and programs offered in their communities.

Approved meal providers must also meet dietary restrictions set by the U.S. Departments of Agriculture and Health and Human Services, meaning that the meal will contain at least one-third of the daily nutrition recommendations set by the Food and Nutrition Board of the National Academy of Science. This assures that, in addition to meeting their basic need of addressing hunger, meal recipients are eating nutritious food, at least once a day.

### *Cost-Effective Solution*

When compared with the long-term costs of addressing health concerns and other challenges associated with hunger, regularly providing prepared meals is a cost-effective solution to help curb senior food insecurity. Home-delivered meals are sometimes the primary resource that allows a homebound older adult to remain in his or her home, rather than living in a nursing home. By helping

older adults meet their nutritional needs, home-delivered meals create savings on future health care and nursing home care.

Costs of providing meals vary, depending on local food costs, transportation costs (rural areas often have much larger geographic areas to cover on delivery routes, increasing transportation costs), and how much providers are able to rely on volunteers for meal delivery, rather than paid staff. Data were collected from a number of AAAs around the state on meal costs for congregate and home-delivered meals, and meal costs varied widely from \$2 per meal to \$10 per meal, though most commonly, meals cost between \$6 and \$8. While some providers offer home-delivered meals seven days per week, most only provide meals five days per week. Assuming a typical home-delivered meal recipient gets 260 meals per year at an average of \$7 per meal, the cost to providing that person with meals is only \$1,820 annually. That means that the cost of providing home-delivered meals is only 2.4 percent of the average cost of nursing home care, and one year of home-delivered meals costs about \$800 less than one day in a hospital.<sup>8</sup>



This means we could provide older Ohioans with **1 month of daily delivered meals** for the same cost as **1 day in a nursing home**.



**1** year of Home-Delivered meals



\$1,820



**1** day in a hospital



\$2,608

### *Challenges in Provision of Home-delivered & Congregate Meals*

In talking with AAAs and meal providers around the state, the most pressing concern for the provision of home-delivered meals is funding. OAA funding through Title III has essentially remained flat over the past decade,<sup>9</sup> while inflation has taken place, costs of providing services have gone up, and the number of older adults needing services has increased. Sweeping federal cuts to other human services have created an environment in which many service providers are competing for limited private funds to keep fledgling programs alive.

Due to flat funding, increasing costs, and increasing need, many providers are making adjustments in order to cut costs. One common change is transitioning from daily-delivered hot meals to weekly or less frequent deliveries of frozen meals. While this solution can marginally cut costs, it eliminates the human touch of home-delivered meal programs. Without a daily delivery, there is no daily safety check, and no daily interaction, which can lead some older adults to feel less safe and more isolated.

Another challenge facing meal providers is staffing. Many home-delivered meal programs rely heavily on volunteers to prepare meals, drive delivery vans, and deliver meals to people's doors. Similarly, volunteers are essential to congregate meal programs. But volunteers aren't always reliable, and they can be hard to keep over sustained periods of time. For organizations that can afford to have paid staff prepare and deliver food, staff can be hard to hire and retain. Without the human resources needed to run these programs, they are not sustainable.

Many meal providers around the state are experiencing waiting lists. In some areas, providers have managed to keep waiting lists at bay, not because there hasn't been demand for services, but because their community has shown exceptional commitment (via private fundraising, volunteer recruitment, etc.) to providing meals for homebound seniors. But in many areas, waiting lists are common. Providers work to prioritize the neediest individuals, but in some cases, people may wait six months or longer to begin the service. It is difficult to estimate how many older Ohioans are currently waiting for meals, because there are no central waiting lists, and individuals may be on waiting lists for more than one provider. However, it is clear that in many areas of the state, the funding is not sufficient to meet the growing need for meals.

Another challenge is that in many cases, one meal per day is not enough to fully address food insecurity. Providers report that many clients still struggle to afford food to last the month. This is where food pantries and SNAP can play a part as valuable resources to wrap services around older adults who face hunger. One AAA employee shared that for many older adults in their area, it is as if the "recession never ended." Although they have been consistently serving older adults for decades, in recent years providers have seen an increase in clients who are in serious crisis situations, unable to afford basic needs like food, utilities, and housing. Many older adults have experienced foreclosures or need major home repairs or modifications that they can't afford. All of these financial challenges mean that older adults must make choices about how to spend their scarce resources, often sacrificing on basic needs.

Relatedly, many providers and AAAs talked about the challenge of serving older adults who are also grandparent caregivers. Around 100,000 grandparents are currently raising their grandchildren in Ohio,<sup>10</sup> and research shows that households with grandchildren are about three times more likely to be food insecure as those without grandchildren.<sup>11</sup> There are congregate meal programs for older adults, and there are summer and after-school meal programs for children, but it is often challenging or impossible for families to attend both programs.

### *Innovations in Provision of Home-delivered & Congregate Meals*

Ohio has seen many meal providers begin to innovate around the provision of meals as a way to reach more people and ensure the sustainability of their programs. One such innovation is the allowing of restaurants as congregate meal sites. For many older adults, there are barriers to getting to a senior center or congregate meal site. Some struggle with transportation, especially in more rural areas where attending a congregate meal may require a 45-minute or longer drive. Others don't like the environment of typical congregate meal settings, as they can feel institutional, or offer programming that does not appeal to them. Some areas have seen success in creating partnerships with local restaurants to allow older adults to use vouchers there to pay for meals, just as they would receive a congregate meal. Often, the restaurants are closer to home, more familiar, and less intimidating than some congregate meal sites, and these areas have seen great interest in the voucher programs. They also allow greater flexibility to older adults who may juggle child care, doctor's appointments, and other obligations that may not allow them to attend a congregate meal served at a specific time.

In the Columbus area, one provider has had success with meal voucher programs geared toward certain immigrant communities. For example, a high population of Somali immigrants live in the area and have religious dietary restrictions that would not be met in a typical congregate setting, so the provider has partnered with Somali restaurants to provide meals that are Halal to eligible older adults.

Another innovation that has taken place around the state is the development of café-style congregate meal locations. In these cases, the meal is provided in a typical casual restaurant where anyone can dine, but eligible older adults receive their meal for free or a suggested donation. Some of these cafés operate as social enterprises, generating revenue from paying customers to help fund their congregate meal program. Half of the 12 AAAs around the state have approved these kinds of innovative voucher programs, which result in greater satisfaction among clients and reach more Ohioans with nutritious meals.<sup>12</sup>

### **Conclusion**

Home-delivered meals and congregate meals are a straightforward and vital tool that allow older adults to live independently and ensure that they have access to nutritious meals. As Ohio's older adult population continues to grow, the problem of food insecurity among older adults is one that communities will need to be ready to address. Home-delivered and congregate meals provide a cost-effective, common sense solution to this issue, which, if implemented in conjunction with other programs such as SNAP and food pantries, can help older adults to remain healthy and live independently.

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- <sup>2</sup> Community Solutions calculation using senior hunger rate from Ziliak, James P. & Gunderson, Graig. "The State of Senior Hunger in America 2014: An Annual Report." National Foundation to End Senior Hunger. June, 2016. <http://www.nfesh.org/wp-content/uploads/2016/05/State-of-Senior-Hunger-in-America-2014.pdf>; U.S. Census Bureau, 2015 American Community Survey 1-Year Estimates.
- <sup>3</sup> "Spotlight on Senior Health: Adverse Health Outcomes of Food Insecure Older Americans." Feeding America. <http://www.feedingamerica.org/hunger-in-america/our-research/senior-hunger-research/spotlight-on-senior-health.html>
- <sup>4</sup> Ibid.
- <sup>5</sup> Ibid.
- <sup>6</sup> "Losing Ground." Ohio Association of Foodbanks. March, 2017. [http://ohiofoodbanks.org/docs/publications/losing\\_ground\\_updated\\_march\\_2017.pdf](http://ohiofoodbanks.org/docs/publications/losing_ground_updated_march_2017.pdf)
- <sup>7</sup> Thomas, Kali S., et al.. "More Than a Meal: Pilot Research Study." March, 2015. <http://www.mealsonwheelsamerica.org/docs/default-source/News-Assets/mtam-full-report---march-2-2015.pdf>
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- <sup>9</sup> Campbell, Emily & Frech, Rose. "Investing in Older Adults: Demographic and Funding Trends in the Western Reserve Service Area." The Center for Community Solutions. June, 2016. [http://www.communitysolutions.com/assets/docs/Major\\_Reports/Older\\_Adults/investing%20in%20older%20adults%20final%20060616.pdf](http://www.communitysolutions.com/assets/docs/Major_Reports/Older_Adults/investing%20in%20older%20adults%20final%20060616.pdf)
- <sup>10</sup> "Kinship Care." Public Children Services Association of Ohio. Accessed May, 2017. <http://www.pcsao.org/programs/kinship>
- <sup>11</sup> "Spotlight on Senior Health: Adverse Health Outcomes of Food Insecure Older Americans." Feeding America. <http://www.feedingamerica.org/hunger-in-america/our-research/senior-hunger-research/spotlight-on-senior-health.html>
- <sup>12</sup> "Aging. It's Everybody's Business: Annual Report SFY 2016." Ohio Department of Aging. Accessed May, 2017. [http://aging.ohio.gov/resources/publications/SFY\\_2016\\_Annual\\_Report.pdf](http://aging.ohio.gov/resources/publications/SFY_2016_Annual_Report.pdf)



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