# Issue At A Glance:

# Food Insecurity Among US Seniors

This brief examines the impact of food insecurity on the health of older adults and highlights the persistent barriers to effectively addressing this issue in the United States despite ongoing efforts.

# Introduction

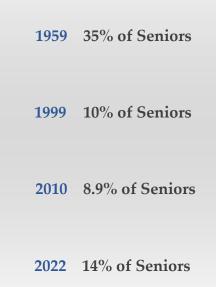
Food insecurity refers to the lack of access to consistent, nutritious meals due to either limited physical availability of food or economic barriers. Globally, approximately 50% of elderly individuals experience food insecurity.<sup>1</sup> According to the latest U.S. Department of Agriculture (USDA) data from 2022, 12.2% of U.S. households were food insecure, affecting about 38 million people. Among older adults (aged 60 and older), 8.0% experienced food insecurity, equating to 5.3 million individuals.<sup>2</sup>

Seniors experiencing food insecurity are at a higher risk of poorer health outcomes, including cognitive decline, depression, and delayed recovery from chronic conditions. Federal programs such as the Supplemental Nutrition Assistance Program (SNAP) aim to address this issue, yet many older adults still lack sufficient resources to maintain a healthy diet, resulting in impaired wound healing and progression of chronic diseases such as diabetes and hypertension.<sup>3</sup>

This brief examines the impact of food insecurity on the health of older adults and highlights the persistent barriers to effectively addressing this issue in the United States despite ongoing efforts.

Bringing wholeness to individuals and communities, the **Institute for Health Policy and Leadership** (IHPL) strives to integrate health policy research and education with leadership development. Our goal is to improve the health of our communities by building on our strong heritage of health promotion and disease prevention. To learn more, visit us at IHPL.llu.edu

#### Percent of US Seniors Living Below the Poverty Line <sup>4</sup>





# Health Effects of Food Insecurity

Food insecurity is linked to chronic diseases, poor diet quality, and age-related functional limitations. Seniors with limited access to nutritious food face a higher risk of falls and fractures due to insufficient protein and calcium intake, which can contribute to disability and even death.<sup>5</sup> Malnutrition also leads to more frequent hospital visits and complicates the management of chronic diseases.<sup>6</sup>

While food insecurity often results in undernutrition and micronutrient deficiencies, it can also lead to overnutrition and obesity.<sup>6</sup> Limited access to healthy food forces reliance on inexpensive, high-calorie options, contributing to poor nutrition. This, in turn, weakens immunity and increases susceptibility to infections and illnesses. Studies suggest that even marginal or mild food insecurity is associated with impaired cardiometabolic profiles. Poor nutrition, combined with the stress of food insecurity, raises the risk of cardiovascular conditions such as high cholesterol, hypertension, and inflammation.<sup>6</sup>

Research also shows that food insecurity affects nearly every aspect of health. It is associated with lower memory scores and accelerated memory decline.<sup>7</sup> Seniors facing food insecurity are less likely to engage in social activities, making them more prone to isolation and loneliness. Even older adults with marginal food insecurity have higher odds of experiencing anxiety and poor mental health. Additionally, a significant link has been observed between food insecurity and depression in middle-aged and older adults (aged 51 and older), although this association appears less pronounced in individuals over 70 years old.<sup>7</sup>

#### Meals on Wheels Program

This program is designed to prepare and deliver food for bedbound seniors, ensuring health and independence for those who cannot shop or prepare meals for themselves.<sup>8</sup> The eligibility for this program depends on age, health, bedbound status, nutritional needs, geographic location and income level.<sup>8</sup> Most programs do not have a strict income criterion but have a sliding scale fee. This program serves about 2.4 million seniors across the U.S. However, with the expectant rise of the senior population, the demand for this program is expected to highly increase.<sup>8</sup>



# Factors Involved in Senior Food Insecurity

Many factors contribute to food insecurity among seniors, and various federal, state and local programs exist to address this issue. For example, one special program that addresses the transportation limitation is the Meals on Wheels program. Other programs include Senior Farmers' Market Nutrition Program (SFMNP), Supplemental Nutrition Assistance Program (SNAP), The Emergency Food Assistance Program (TEFAP) and many more. Yet, with all these programs, many seniors still struggle with food insecurity. The following are factors contributing to continued struggle among seniors.<sup>9</sup>

#### Lack of Awareness and Outreach

Not many people know about the programs assisting with food insecurity.<sup>10</sup> This is likely due to the lack of outreach efforts to spread the word on these resources. Programs may also lack the resources to properly reach eligible individuals. Alternatively, seniors might know about the programs but not know how to access them. <sup>10</sup> Complicated paper work is always a barrier to accessing any of the assistance programs, especially for seniors who might have trouble with vision, cognitive problems and low technological skills. <sup>10</sup>

Social workers play an important role in connecting individuals to the programs. <sup>10</sup> Often, they assess patients' need before discharge from the hospital and refer the eligible senior patients to meal assistance programs. Social workers help those who are referred by primary care, aging services or hospital discharge team. They also coordinate with families and caregivers to ensure these programs are set up. If the patient is not referred from any of the above, then their needs remain unmet.<sup>10</sup>

#### Gaps in Coverage due to Funding

Funding for most food assistance programs comes from a mix of government, individual donations and local resources. <sup>10</sup> Having governmental cuts in the past led to less meals being delivered. For example, the budget sequestration in 2013 led to a 5% reduction in federal funding for Meals on Wheels. These cuts made it harder for volunteers to face demands and lengthened the waiting list. <sup>10</sup> With the current climate of federal budget cuts, these crucial programs face challenges in obtaining adequate funding. Having stable funding facilitates long-term planning and helps food assistance programs navigate the high demands they face. <sup>10</sup>

#### **Geographic Limitation**

Different areas face different geographical challenges.<sup>10</sup> In rural areas, along with less robust local funding, programs are limited by fewer number of volunteers and longer distances to drive. Programs in urban areas may be more established but still face capacity issues. Some areas require coordination with healthcare providers or community-based services, resulting in further delay in providing necessary assistance.<sup>10</sup>

### Conclusion

Food insecurity impacts nearly 50% of the elderly population worldwide and 12% of seniors in the United States, with California experiencing some of the highest levels of food insecurity in the nation.<sup>1,2</sup> Seniors who lack access to adequate nutrition face heightened risks of depression, memory decline, and chronic health conditions. Programs like Meals on Wheels play a critical role in providing meals to homebound seniors who cannot prepare food for themselves.<sup>8,9</sup>

With federal funding for such programs being at risk for cuts, challenges persist in meeting the growing demand for these services.<sup>10</sup> To effectively address senior food insecurity, efforts must focus on expanding outreach, enhancing accessibility, and securing consistent funding at both state and federal levels. Bridging these gaps will ensure that all seniors in need can access the resources necessary for their health and well-being.



# Did you know?

Food Donation Improvement Act (FDIA) signed into law in 2023 extends the liability protections for food sold at reduced price (previously applied only to free food). This allows food to be sold at minimal costs to cover distribution and handling.<sup>11</sup>

#### References

- 1. The State of Food Security and Nutrition in the World 2023." *World Food Programme,* <u>www.wfp.org</u>.
- 2. "Household Food Security in the United States in 2022." United States Department of Agriculture (USDA), <u>www.ers.usda.gov</u>.
- 3. "Senior Hunger Facts." *Feeding America*, <u>www.feedingamerica.org</u>.
- 4. "Poverty Among the Population Aged 65 and Older." *Center on Poverty and Social Policy, Columbia University, www.povertycenter.columbia.edu*.
- 5. *National Council on Aging*. "The Impact of Food Insecurity on Older Adults." <u>www.ncoa.org</u>.
- 6. Precker, Michael. "Food Insecurity's Long-Term Health Consequences." *American Heart Association News*, 22 Sept. 2021, <u>www.heart.org</u>.
- 7. "Food Insecurity and Cognitive Decline in Older Adults." *Journal of Nutrition Reviews,* Oxford Academic, <u>www.academic.oup.com/nutritionreviews</u>.
- 8. "Meals on Wheels: A Case for Senior Hunger and Isolation." *Meals on Wheels America,* <u>www.mealsonwheelsamerica.org</u>.
- 9. Feeding America, <u>www.feedingamerica.org</u>.
- 10. "Food Assistance Programs." U.S. Department of Agriculture, https://www.nutrition.gov/topics/food-assistance-programs.
- "Food Donation Improvement Act Will Encourage Donations, Reduce Food Waste." NYC Food Policy, 2023, <u>www.nycfoodpolicy.org/food-donation-improvement-act-</u> 2023.



LOMA LINDA UNIVERSITY HEALTH

Institute for Health Policy and Leadership

11209 Anderson Street Loma Linda, CA 92354 Phone: 909-558-7022 Fax: 909-558-5638 IHPL.llu.edu

Special guest contributor: Marina AlNaser, MSIV at LLUSM

Questions? Please contact the Institute for Health Policy & Leadership (ihpl@llu.edu).