

The Meals on Wheels Association of America is the largest and oldest organization that provides meal services to the needy, particularly to the elderly, homebound, disabled, frail, or at risk (Meals on Wheels America [MOWA], 2020b). Understanding the need for Meals on Wheels programs first requires an examination of hunger among Americans, particularly senior citizens.

#### **HUNGER AMONG AMERICA'S SENIORS**

For seniors, many factors contribute to food insecurity, hunger, and nutritional deficiencies, including:

- Cost of food
- Expense for necessary medications
- Inability to locate, purchase, and cook food
- Reduced absorption of nutrients from food
- Less acute sense of taste and smell
- Loss of appetite
- Physical impairments
- Poor general and oral health
- Difficulty chewing and swallowing
- Social Isolation
- Depression

(National Institutes of Health [NIH], 2019)

As people age, food insecurity and hunger increase health risks. Research has demonstrated that seniors with low food security experienced more depression, lowered quality of life, and reduced physical performance. In fact, the higher the level of food insecurity, the more issues with pain, general health/functioning, and mental health.

In addition, seniors are more likely to have nutrient deficiencies and obesity. Some earlier studies on elderly nutrition (Sharpe, Huston, & Finke, 2003) support the recent research findings that seniors consume fewer than the recommended daily allowance for nutrients such as calcium and vitamin D (Health in Aging, 2020). When those seniors also had insufficient supplies of food, the nutrient deficiencies were even more pronounced. “[F]ood insecure seniors consumed less calories and lower quantities of all 10 key nutrients than their food secure counterparts...Notably, many of these nutrients, including iron and protein, are known to be particularly important to the health of the senior population” (Feeding America, 2014, p.6).

Adverse health effects are also associated with food insecurity among the senior population even when other factors such as age, ethnicity, and income are accounted for. Compared to their food secure counterparts, food insecure seniors are:

- 60% more likely to experience depression
- 53% more likely to have a heart attack
- 52% more likely to develop asthma
- 40% more likely to develop congestive heart failure
- 22% more likely to experience limitations in activities of daily life (eating, dressing, bathing, etc.)

(Feeding America, 2014)

**HUNGER IN TEXAS**

In 2018, 11.5% of all U.S. households experienced food insecurity:

- United States – 11.5%
- Texas - 15.0%

(Feeding America, 2020b)

The rate of food insecure households in the KCF counties of interest in 2018 was higher than the national rate but below the Texas rate for all but one County (respectively):

FOOD INSECURE POPULATION		
	Rate	Number
Bandera	15.6%	3,390
Bexar	14.1%	271,790
Comal	12.2%	16,480
Kendall	11.2%	4,720

(Feeding America, 2020a)

The Supplemental Nutrition Assistance Program (SNAP) provides eligible low-income individuals and families with benefits to help supplement their food budgets. Unfortunately, many of those in need of assistance do not meet the stringent eligibility requirements. One-third of people who are food insecure may not qualify for federal food assistance (Feeding America, 2020b). To qualify for SNAP assistance, a household’s income must be below 165% of the Federal Poverty Level, in Texas. The following table lists the percentage of those with food insecurity in the KCF counties of interest by reported income level in 2018:

FOOD INSECURE POPULATION			
SNAP ELIGIBILITY			
	Below 165% poverty	165%-185% poverty	Above 185% poverty
Bandera	52%	11%	37%
Bexar	71%	5%	24%
Comal	45%	7%	48%
Kendall	36%	8%	56%

(Feeding America, 2020a)

Even among those who are eligible for assistance, many do not know of, or apply for, the assistance available to them. “Only 48% of eligible seniors are enrolled and receiving SNAP benefits (formerly Food Stamps) — making assistance programs for SNAP enrollment that

much more important for seniors” (Feeding America, 2020c).

In 2020, Texas had one of the highest rates of food insecurity in the nation for adults aged 60 and over with a percentage of senior hunger at 18% (America’s Health Rankings, 2020). Texas ranked at number 49 of 50 states. All of the available statistical data and research findings emphasize the need for legislation and programs like Meals on Wheels to enhance the nutritional intake of senior citizens.

**BEGINNINGS OF SENIOR NUTRITION PROGRAMS**

***The Older Americans Act***

Some of the initial programs addressing the nutritional and social needs of senior citizens were created by the federal government in 1968. One decade later, Congress funded an elderly nutrition program under Title III of the Older Americans Act (OAA) (Colello, 2011).

In 2020, the final allocations for the Older Americans Act include \$485,279,923 in funding for congregate (group) meals, \$253,294,723 towards home-delivered meals, and \$117,815,343 for nutrition services incentive program (limited to food purchase). This money is given to state agencies, who then distribute the funds to area agencies, including Meals on Wheels. Texas’ share of the funds in 2020 include \$32,745,791 for congregate meals, \$17,103,511 for home-delivered meals, and \$9,107,303 for nutrition services incentive program (Administration for Community Living, 2020).

Typically, for every dollar of Title III money spent, another \$1.70 for congregate meals and \$3.35 for home-delivered meals must be raised from other state, local, private, and participant funding (Colello, 2011). “Meal on Wheels is now serving 21 million fewer meals than in 2005 because food, transportation and other costs have increased while funding remains stagnant...8 out of 10 low income, food insecure seniors are not receiving the home-delivered or congregate meals they likely need” (MOWA, 2019c).

Programs that receive money from the Older Americans Act, including Meals on Wheels, must abide by several requirements. The guidelines include:

- Offer services to people 60 years and older with the greatest social and economic need, specifically low income seniors and those who reside in rural areas
- Provide at least one meal a day, five or more days a week (exceptions allowed in rural areas)
- Meal must contribute to 1/3 of the daily dietary allowance
- Safe and sanitary food preparation conditions
- Initial nutritional screening of participants
- Promote intergenerational meal programs
- Offer congregate meals when possible at facilities like senior centers, community centers, schools, and adult day care centers
- Ask participants for voluntary monetary contribution toward the meal (not required if they lack the means)

(Colello, 2011)

**THE MEALS ON WHEELS PROGRAM**

The predecessor of Meals on Wheels occurred during World War II when meals were delivered to service members in England. The first Meals on Wheels program in its current form began in Philadelphia during 1954, where “Platter Angels” served hot, nutritious meals to senior shut-ins. Today, a hot lunch is delivered by volunteers at least 5 days a week to seniors either at their home or in a group setting (congregate) such as a senior center (Colello, 2011; Torrance Lomita Meals on Wheels, 2020).

The mission of Meals on Wheels America is to “empower local community programs to improve the health and quality of life of the seniors they serve so that no one is left hungry or isolated” with the vision of an “America in which all seniors live nourished lives with independence and dignity” (MOWA, 2020b). The Meals on Wheels Association of America can provide one year of meals to its participants for

the average cost of one day in a hospital or 10 days in a nursing home (MOWA, 2019b).

“Meals on Wheels operates in virtually every community in America through our network of more than 5,000 independently-run local programs” (MOWA, 2020a).

Meals on Wheels serves 220 million meals to over 2.4 million seniors each year:

Seniors Served	
Home-delivered meal recipients age 75+	79%
Women	69%
Live alone	59%
Live at poverty level	35%
Self-report fair or poor health	46%
Veterans	15%
Live in rural areas	25%
Belong to a racial/ethnic minority group	28%
Take 3+ medications	82%
(MOWA, 2019b)	

Of the more than 128,000 Texans receiving Meals on Wheels assistance:

- 45% live in poverty
- 53% belong to a minority group
- 34% live in a rural community
- 44% live alone
- 63% are women

(MOWA, 2019a)

**Extra Benefits of Meals on Wheels**

In addition to supplementing clients’ daily nutrition, Meals on Wheels services provide other direct and indirect benefits:

- *Reduces isolation and provides social interaction and support.* This occurs when the senior eats at group meal sites or through daily interaction with the Meals on Wheels volunteers. 52% of Meals on Wheels network members provide telephone reassurance and pet assistance while 31% also provide formal senior companion programs (MOWA , 2020c).
- *Supports seniors with disabilities.* An important study on health risks for seniors (Sharkey, 2002) suggested that difficulty in shopping for food and preparing meals were associated with increasing severity of

disability. Nearly half of local Meals on Wheels programs offer a variety of care coordination and transportation service (MOWA, 2020c).

- *Lowers the cost of health care.* Poor nutrition increases the risk of disease and therefore the cost of health care, particularly for seniors. “The elderly were the smallest population group, nearly 15 percent of the population, and accounted for approximately 34 percent of spending in 2014” (Centers for Medicare & Medicaid Services [CMS], 2020).

**Bexar and Surrounding Counties**

Exclusive Meals on Wheels programs exist in Bandera, Bexar, Comal, and Kendall counties. The scope of the program depends, in part, on the size of the county. The table at the end of this brief lists the most recent data available.

**GROWING CRISIS**

The number of seniors experiencing hunger continues to grow at an alarming rate. “The most recent report, released in 2020 using 2018 data, found that 5.3 million seniors, or 7.3% of the senior population, were food insecure in 2018...Households served by the Feeding America network that includes an adult of the age 50 or older are at an increased risk of having someone with a chronic health

condition, including diabetes (41%) and high blood pressure (70%) — conditions that can be mitigated by healthy food options” (Feeding America, 2020c). Surprisingly, the majority of seniors in this position are living with an income above the poverty line. The need for services such as Meals on Wheels can be expected to rise as the number of seniors increases with the aging of the Baby Boom generation.

**MEALS ON WHEELS SAN ANTONIO (MOWSA) COVID-19 RESPONSE**

The Coronavirus pandemic has caused MOWSA to make a number of changes to its usual operations including:

- No hot meals or fresh fruit delivered – meals delivered chilled and can be frozen up to 30 days
- Meal deliveries will be made twice a week to clients (versus the usual once-a-day)
- Staff will conduct a safety call to clients once a week
- In-home assessments have been suspended – new inquiries for service will be conducted over the phone
- Grace Place Alzheimer’s Activity Center is closed with projected opening date in early 2021

(MOWSA, 2020b)

SAN ANTONIO REGION MEALS ON WHEELS PROGRAM STATISTICS					
County	Meals on Wheels Provider	Year	Meals Delivered	Congregate Meals	Total
Bandera	Silver Sage Corral Senior Activity Center	2019	37,257	11,397	48,654
Bexar	Meals on Wheels San Antonio	2019	1,021,757	-	1,021,757
Comal	Comal County Senior Citizens Center	2018	47,341	20,749	60,090
Kendall	Kronkosky Place (Rainbow Senior Center)	2019	47,241	23,749	70,990

(Bandera County Committee on Aging, 2019; Comal County Senior Citizen’s Foundation, 2018; MOWSA, 2020a; Rainbow Senior Center, 2019)

## REFERENCES

- Administration for Community Living. (2020). *State allocation tables: Title III (2020)*. Retrieved from <https://www.acl.gov/about-acl/older-americans-act-oaa>
- America's Health Rankings. (2020). *Senior report: Texas summary 2020*. Retrieved from [https://www.americashealthrankings.org/explore/senior/measure/food\\_insecurity\\_sr/state/TX?edition-year=2020](https://www.americashealthrankings.org/explore/senior/measure/food_insecurity_sr/state/TX?edition-year=2020)
- Bandera County Committee on Aging. (2019). *Evaluation report for fiscal year 2019*. Available at the Kronkosky Charitable Foundation office.
- Centers for Medicare & Medicaid Services (CMS). (2020). *National health expenditure data fact sheet*. Retrieved from <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/NHE-Fact-Sheet.html>
- Colello, K. (2011). *Older Americans Act: Title III nutrition services program*. Retrieved from <http://nationalaglawcenter.org/wp-content/uploads/assets/crs/RS21202.pdf>
- Comal County Senior Citizen's Foundation. (2018). *Evaluation report for fiscal year ended 2018*. Available at the Kronkosky Charitable Foundation office.
- Feeding America. (2014). *Spotlight on senior health: Adverse health outcomes of food insecure older Americans*. Retrieved from <https://www.feedingamerica.org/sites/default/files/research/senior-hunger-research/or-spotlight-on-senior-health-executive-summary.pdf>
- Feeding America. (2015). *Baby boomers and beyond: Facing hunger after fifty*. Retrieved from <https://www.feedingamerica.org/sites/default/files/research/senior-hunger-research/baby-boomers-executive-summary.pdf>
- Feeding America. (2020a). *Food insecurity in Texas*. Retrieved <https://map.feedingamerica.org/county/2018/overall/texas>
- Feeding America. (2020b). *Map the Meal Gap 2020*. Retrieved from <https://www.feedingamerica.org/sites/default/files/2020-06/Map%20the%20Meal%20Gap%202020%20Combined%20Modules.pdf>
- Feeding America. (2020c). *Senior hunger poses unique challenges*. Retrieved from <https://www.feedingamerica.org/hunger-in-america/senior-hunger-facts>
- Health in Aging. (2020). *Nutrition: Unique to Older Adults*. Retrieved from <https://www.healthinaging.org/a-z-topic/nutrition/unique>
- Meals on Wheels America (MOWA). (2019a). *Delivering so much more than just a meal in Texas*. Retrieved from <https://www.mealsonwheelstexas.org/sites/mealsonwheelstexas.org/files/texas-mowa-fact-sheet-2018.pdf>
- Meals on Wheels America (MOWA). (2019b). *Delivering so much more than just a meal: United States 2019*. Retrieved from [https://www.mealsonwheelsamerica.org/docs/default-source/fact-sheets/2018/2018-national/what-we-deliver\\_2018-fact-sheets\\_forpublication.pdf?sfvrsn=1410bc3b\\_2](https://www.mealsonwheelsamerica.org/docs/default-source/fact-sheets/2018/2018-national/what-we-deliver_2018-fact-sheets_forpublication.pdf?sfvrsn=1410bc3b_2)
- Meals on Wheels America (MOWA). (2019c). *How meals on Wheels is funded*. Retrieved from [https://www.mealsonwheelsamerica.org/docs/default-source/fact-sheets/2019/2019-national/mowa2019factsheets\\_funding\\_final.pdf?sfvrsn=c52bb93b\\_2](https://www.mealsonwheelsamerica.org/docs/default-source/fact-sheets/2019/2019-national/mowa2019factsheets_funding_final.pdf?sfvrsn=c52bb93b_2)
- Meals on Wheels America (MOWA). (2020a). *Find a Meals on Wheels provider near you*. Retrieved from <https://www.mealsonwheelsamerica.org/find-meals>
- Meals on Wheels America (MOWA). (2020b). *Meals on Wheels America*. Retrieved from <https://www.mealsonwheelsamerica.org/learn-more/national>
- Meals on Wheels America (MOWA). (2020c). *More than a meal comprehensive network study*. Retrieved from <https://www.mealsonwheelsamerica.org/learn-more/research/more-than-a-meal/comprehensive-network-study>
- Meals on Wheels San Antonio (MOWSA). (2020b). *COVID-19 response*. Retrieved from <https://www.mowsatx.org/coronavirus>
- Meals on Wheels San Antonio (MOWSA). (2020a). *Annual Report 2019*. Retrieved from <https://www.mowsatx.org/annual-report-and-financials>
- National Institutes of Health (NIH), National Institute on Aging. (2019). *Overcoming roadblocks to healthy eating*. Retrieved from <https://www.nia.nih.gov/health/overcoming-roadblocks-healthy-eating>
- Rainbow Senior Center. (2019). *Evaluation report for fiscal year 2019*. Available at the Kronkosky Charitable Foundation office.
- Sharkey, J. R. (2002). The interrelationship of nutritional risk factors, indicators of nutritional risk, and severity of disability among home-delivered meal participants. *The Gerontologist*, 42(3), 373-380. Retrieved from <https://academic.oup.com/gerontologist/article/42/3/373/614468>
- Torrance Lomita Meals on Wheels. (2020). *History of Meals on Wheels*. Retrieved from <http://tlmow.org/history/>