

## NUTRITION ASSISTANCE FOR OLDER AMERICANS

**Nutrition assistance programs play a vital role in promoting the well-being and independence of older Americans. This fact sheet highlights the various nutrition assistance programs available to older adults and the funding sources that support these programs.**

### Introduction

Older persons face special obstacles in maintaining an optimal diet. As individuals age, their caloric needs decline, but their need for nutrients does not. Therefore, older persons must consume foods that are nutrient-rich. Life changes such as loss of a spouse can reduce appetite, as can a diminished sense of taste or smell. Frailty can make it difficult to prepare meals, medical conditions can necessitate special dietary restrictions, and lack of income can compound all these problems by making nutritious foods hard to afford.

This fact sheet describes the federal programs that provide nutrition assistance to older Americans. Table 1 shows federal spending on nutrition programs that assisted older adults in 2007.

### Food Stamp Program

Food stamps, the primary form of federal food assistance for low-income Americans of all ages, provided monthly benefits to more than 26 million people living in more than 11 million households across the United States in 2006.<sup>1</sup> As a result of the reauthorization of the 2008 Farm Bill, the minimum monthly benefit, standard deduction, and asset limits for eligibility were raised and indexed for annual inflation. The reauthorization also changed

the name of the Food Stamp Program to the Supplemental Nutrition Assistance Program (SNAP).

In 2006, the average monthly benefit was \$74 for a single older person and \$91 per elderly household. The average monthly income, after deductions, of older households receiving food stamps was \$364.

Eighteen percent of all households receiving food stamps included at least one person over the age of 60. About 2 million older adults (80 percent of whom lived alone) received food stamps.

### Congregate/Home-Delivered Meals

The Older Americans Act (OAA) funds two nutrition programs designed to provide meals for older persons. Each meal must provide one-third of the daily recommended dietary allowances. There is no income restriction for recipients, but service providers must target meals to people most in need. Funding limitations restrict the number of persons who can receive meals.

The Congregate Meals Program was designed to combat both poor nutrition and social isolation among older persons. These meals are served in group settings such as senior centers or churches. Meals are often coordinated with other social

services such as transportation or health screenings. In 2006, 98 million meals were served to 1.7 million people. Congress appropriated \$411 million for this program in 2008.

The Home-Delivered Meals Program assists people who are homebound. Designed to help prevent unnecessary institutionalization, this program helps older adults maintain independence and avoid social isolation. In 2006, nearly 140 million meals were delivered to almost 1 million people. Congress appropriated \$188 million for this program in 2008.

**Table 1:** Federal Spending on Nutrition Programs that Assist Older Adults, 2007

Food Stamps	\$34 billion
OAA - Meal Programs	\$712 million
CSFP	\$107 million
CACFP	\$ 2 billion
TEFAP	\$190 million
SFMNP	\$15 million

**Source:** U.S. Department of Agriculture and OAA, 2007

**Commodity Supplemental Food Program (CSFP)**

The CSFP provides a monthly food package to low-income older adults, as well as certain pregnant women, infants, and young children. The food package is designed to be well-balanced and highly nutritious. Funding for the program is limited, and states must apply to participate. Participating states must decide which groups they will service. While originally the program was targeted to pregnant women and children, most states now use it to serve older persons.<sup>2</sup>

In 2007, the CSFP served 466,000 individuals each month, of whom 433,000 were elderly.

**Child and Adult Care Food Program (CACFP)**

The CACFP subsidizes the cost of meals served in qualified day care settings. The program was initially available only to child care centers, but in 1989 Congress made adult day care centers eligible to participate. Currently, about 3 percent of participants are seniors. The amount of reimbursement varies with the income level of the recipient and the types of meals served.

More than 3,400 adult day centers operate in the United States, caring for 150,000 older adults each day.<sup>3</sup> The CACFP can help subsidize adult day services and make them more affordable for consumers. In 2007, the CACFP provided meals to more than 86,000 individuals in adult day centers.

**Emergency Food Assistance Program (TEFAP)**

Originally designed as a temporary program to reduce surplus agricultural commodities, the TEFAP has been extended by Congress to help address the continuing need for food aid. Commodities are distributed to needy individuals, soup kitchens, and food banks. Approximately 360 million pounds of food (including bonus commodities) were purchased in 2006. The reauthorization of the 2008 Farm Bill increased the annual funding from \$140 million to \$250 million and indexed federal funding to annual inflation.

**Senior Farmers' Market Nutrition Program (SFMNP)**

The SFMNP awards grants to states to provide low-income older people (age 60 and older with household income at or

below 185 percent of the federal poverty level) with coupons that are exchangeable for eligible foods at farmers' markets, roadside stands, and community-supported agriculture programs. As of 2007, 46 states and federally recognized Indian tribal governments have been awarded grants to operate the SFMNP in their respective jurisdictions. In 2006, more than 825,691 people received SFMNP coupons to purchase fresh fruits, vegetables, and herbs.

## Conclusion

Despite the existence of these federal programs, the U.S. Department of Agriculture estimates that some 1.6 million households with elderly members experienced "food insecurity" in 2006.<sup>4</sup> These households have limited or uncertain access to safe, nutritionally adequate food. Food insecurity can lead to malnutrition or adverse health consequences.

Fact Sheet 19R, October 2008

Written by Jean Accius  
AARP Public Policy Institute  
601 E Street, NW, Washington, DC 20049  
[www.aarp.org/ppi](http://www.aarp.org/ppi)  
202-434-3892 [ppi@aarp.org](mailto:ppi@aarp.org)  
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<sup>1</sup> United States Department of Agriculture (USDA). "Characteristics of Food Stamp Households—FY 2006," September 2007.

<sup>2</sup> The Women, Infants, and Children program now provides targeted nutritional assistance to pregnant and nursing women, infants, and children, limiting access to the CSFP for this population.

<sup>3</sup> National Adult Day Services Association. Adult Day Services: The Facts. Available at <http://www.nadsa.org/adsfacts/default.asp>.

<sup>4</sup> Nord, M., Margaret Andrews, and Steven Carlson. "Household Food Security in the United States, 2006." Washington, DC: USDA, Economic Research Service, November 2007.