

Addressing Hunger Among America's Elderly Population

Testimony before the Senate Select Committee on Aging

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Mr. Chairman, and members of the Committee, the Food Research and Action Center appreciates the opportunity to testify here this morning. We have been working for many years to improve public policy in order to eliminate hunger and reduce poverty in this country. Hunger in the elderly population continues to be a serious problem - - and an unnecessary and unacceptable problem. It is one this nation must address. We are pleased that this Special Committee is having this hearing.

Good nutrition – enough food, and health-sustaining food – is important to everyone in our society, but it is especially important when people are particularly vulnerable to disease, or when their life circumstances – such as limited mobility or limited resources or a limited ability to cook – make obtaining a healthy diet more difficult. For these reasons, many elderly persons are particularly at risk for the damage that can flow from inadequate nutrition.

For some elderly people – both in their own homes and in nursing homes and other congregate living facilities – disease or immobility or institutional shortcomings contribute to inadequate nutrition, regardless of the person's resources. But I want to focus today on the special problems caused by limited resources for those living at home.

Through Social Security and Supplemental Security Income, this country has made huge strides against elderly poverty over the last 35 years. But still, today, 9.4 percent of elderly persons (over age 65) live in poverty, according to Census Bureau data for 2006; and 2.5 percent – nearly a million seniors – live in very severe poverty (with incomes below 50 percent of the poverty line). Many economically vulnerable groups, such as women, Blacks, and Hispanics, have higher poverty rates among seniors.

There also are a lot of elderly people who have incomes just slightly above the poverty line. 15.6 percent (one in six) of elderly people had income below 125 percent of the poverty line in 2006, and 22.4 percent (one in five) had income below 150 percent of poverty. And the low-income population is not static, so poverty afflicts a much higher proportion of the senior population over time. Professor Mark Rank has estimated that roughly half of people will have incomes below 125 percent of the poverty line for at least one year between the ages of 60 and 90.

When people have inadequate incomes, very often they are “food insecure” as a result. Food insecurity is the U.S. Department of Agriculture phrase for households where there is serious hunger, or where resource constraints mean that people are skipping meals or

otherwise can't afford a basic, balanced healthy diet. Food insecurity harms health and well-being. Food insecure elderly persons have been found to be 2.33 times more likely to report fair or poor health status. And food insecurity among elders increases disability, decreases resistance to infection, and extends hospital stays. Moreover, many medications need to be taken with food to assure their effectiveness. Too many seniors have to skip meals in order to purchase medication, only to see that "Take with food" label on the prescription bottle because without food the drug will be less effective. Medically this is self-defeating. And from the patients' perspective it is a cruel "Catch-22."

USDA issues an analysis of food insecurity every year based on a survey by the Census Bureau. The most recent report showed that six percent of households with elderly members in them – 1.6 million households – were food insecure in 2006. And 1.8 percent of all households with elderly members experienced hunger outright. These are worse rates than in 2001. Other studies by think tanks and charities have found higher rates of food hardship among elderly Americans.

It is not acceptable that so many among our elderly population are struggling with hunger in this way. And these numbers may well get worse in the years ahead. The elderly population is going to grow both absolutely and as a share of the American population, and some of the more disadvantaged groups among the elderly population are going to grow the fastest. Moreover, the growth of the oldest part of the senior population will be the rapidest. These demographic changes likely will mean more poverty and food insecurity in the years ahead unless our society improves its supports for lower-income senior citizens.

For some low-income seniors, food security issues are complicated by the challenges of raising - - and feeding - - grandchildren. In a piece aimed at the 2.4 million grandparents now raising their grandchildren, MSNBC included access to food stamps among ten financial tips for them. A reader chimed in that tip number 11 is getting grandchildren free or reduced price school lunch and breakfast as well.
(<http://www.msnbc.msn.com/id/16876875/>)

Elderly people also will face in the years ahead rapidly rising out-of-pocket health care costs – over and above what Medicare pays – and also face growing energy costs and food costs. When people face this type of crunch – a "heat or eat" dilemma, or a "medicine-or-food" choice - - often good nutrition suffers. A household's rent or mortgage cost is fixed. The cost of health premiums is fixed. It is the energy, drug and food expenses that then get shaved back. That is one reason why low-income households, especially those consisting of elderly persons, have been shown to experience substantial seasonal worsening in the incidence of "very low food insecurity" (the most severe range of food insecurity) in geographic areas with high winter heating costs and high summer cooling costs. Of course, when elderly persons shortchange their nutritional needs, health care costs eventually rise.

Just last week, a member of Congress from the Northeast talked to anti-hunger groups about his visits to hospitals in his district where he is being told that seniors are coming in who, because of the need to pay the cost of medications, aren't eating.

Attacking hunger among seniors requires a multi-faceted approach:

- We have to make sure that the nation defends and shores up the economic security of elderly persons. Social Security, SSI and other supports need to be protected and strengthened. And health coverage needs to be robust enough that seniors don't face impossible choices between food and medicine.
- We have to make sure that the federal nutrition programs are strong enough to supplement income supports and help eradicate hunger among elderly persons.

Food stamps are the most important program, by far, to achieve this second goal. But before addressing food stamps in more detail, I want to briefly mention some other important initiatives, and the need to strengthen them. They include the Senior Farmers Market Program, the Emergency Food Assistance Program, the Commodity Supplemental Food Program, and Meals on Wheels.

These programs have been weakened in recent years as their funding – typically part of the discretionary budget – has lost ground to inflation and population growth. For example, the Commodity Supplemental Food Program is an effective way to help low-income seniors obtain added commodity foods. The President's budget has proposed eliminating it for three years in a row. Thankfully, the Congress has continued to reject this proposal. But CSFP's funding has been eroded compared to inflation so that the program has 17 percent fewer slots funded than in 2003. Rather than reaching more people in more states, as it should, the program is losing ground.

Similarly, Meals on Wheels and the senior congregate feeding programs not only haven't kept up with a growing senior population, they have lost ground. The number of people helped by Title III-funded nutrition programs like Meals on Wheels and the congregate meals program has declined from 3.4 million in 1995 to 2.6 million in 2006.

Let me now turn to food stamps.

The Food Stamp Program is a very successful program – the nation's most important bulwark against hunger. The program is essential to the basic well-being of millions of Americans, including the nutrition and health of seniors, but needs to be strengthened further. While its support for seniors is invaluable, it is not as effective for elderly persons as it is for other groups. This is a problem that can be solved.

First, let me talk about how effective food stamps can be. In the 1980s then-Senator Robert Dole described the Food Stamp Program as the most important advance in America's social programs since the creation of Social Security. An initiative that began with bipartisan support in the 1960s and 1970s, with early champions like Senators

Robert Dole and George McGovern and then Representatives Bill Emerson and Mickey Leland has continued to receive an extraordinary level of support from members of both parties. There also is considerable state and local official support, again from officeholders in both parties. And polls show that Americans care deeply about eliminating hunger in this country, feel that not enough is being done in that regard, and want greater government efforts.

This feeling is only magnified by the replacement in recent years of food stamp coupons by electronic benefits cards and other initiatives which have reduced errors and fraud (more than 98 percent of benefits go to eligible households). These have made the use of program benefits at the checkout lane much less visible, thereby reducing the stigma of participation.

Perhaps the clearest recent summary of the success of food stamps and the results of the considerable strengthening of the program came in a January, 2007 issue of The National Journal devoted to “10 Successes [and] 10 Challenges” in American society – major issues in the public and private sectors. Alongside cleaner air, successful assimilation of immigrants, American entrepreneurship, and six other successes was food stamps, described as “A Government Reform That Worked.” The National Journal was particularly struck by the extremely low rates of program fraud, and the quick and effective response of the program on the Gulf Coast after Hurricanes Katrina, Rita and Wilma in 2005.

The Food Stamp Program has brought the nation a long way; but it must be strengthened so we can truly move towards eradicating hunger and food insecurity, in the midst of our great affluence. To realize the program’s potential, it is important to make benefit allotments more adequate; open eligibility to more needy people; and connect more eligible people with benefits. This is true for all age groups, but in some respects especially for seniors. According to the most recent USDA data (from 2005), only 65 percent of eligible people participated in the Food Stamp Program overall, but fewer than one third of eligible seniors participated in the program.

Despite this alarmingly low participation rate, it is still true that the program served – and was essential to the nutrition, health and well-being of – 2,229,000 people over age 60 in FY 2006. This was 8.7 percent of all recipients. And that number was nearly a third higher than the 1,687,000 recipients over age 60 in FY 2002.

So the program has a broad sweep, but needs to be much broader.

Why is the program serving fewer than one third of eligible seniors?

According to recent USDA focus groups, the difficulty associated with the application process and stigma surrounding public assistance were the most important factors in

seniors' decisions to avoid the program.* Paperwork requirements often were viewed as unnecessary and overwhelming, and food stamp workers sometimes seemed disrespectful.

For many elderly households, the costs of applying for food stamps seem to outweigh the benefits. According to a survey by the U.S. Government Accountability Office of state food stamp directors, 86 percent said that a major reason why seniors did not participate in the Food Stamp Program was that seniors felt the effort needed to apply outweighed the benefits. Part of the problem is the minimum benefit. According to a USDA report in 2002, elderly households eligible for only the minimum monthly benefit of \$10 participate at a rate of 23 percent. The \$10 minimum monthly benefit a food stamp household can receive has not changed since 1977. If it had been indexed for inflation in 1977, it would now be roughly \$35.

The majority of eligible households with elderly members, however, are eligible for more than the minimum benefit. In fact in FY 2006 the average monthly pro-rated benefit for a person over age 60 in the program was about \$70/month. One problem is that seniors often don't know that they likely will get more than the minimum, and aren't told that. There is some evidence to suggest that some elderly and disabled applicants receive less than the benefit for which they are eligible. Although households with elderly or disabled members can deduct out-of-pocket medical costs exceeding \$35 from their gross monthly incomes in order to determine benefit levels, many households did not take this deduction.

Seniors who are eligible non-participants in the Food Stamp Program also are less likely to be aware of their potential eligibility than the average eligible non-participant.

A number of studies have documented the fact that stigma plays a particularly important role in the participation decisions of elderly households. Specifically, seniors have cited worries about how they might be perceived by grocery store staff and other shoppers, and about the embarrassment they might feel if family and friends knew they received benefits: in a national survey of food stamp households, 76 percent of those with seniors reported feelings of stigma, as compared with 60 percent of households overall.

Households with elderly members are liable to be more sensitive to the numerous difficulties of the food stamp application process than other households. Seniors sometimes avoid the food stamp office because they are wary of poor customer service. According to an evaluation by USDA, seniors were particularly upset by personal interactions they had at food stamp offices, indicating that eligibility workers sometimes treated them without respect or dignity.

* This and other studies of participation barriers are reviewed and summarized in "Access and Access Barriers to Getting Food Stamps: A Review of the Literature," by the Food Research and Action Center (February 2008), available at www.frac.org/pdf/Access_Barriers_Food_Stamps_Lit_Review_Feb2008.pdf

A number of focus groups, outreach projects, and evaluations also have hinted at the potential deterrent effects of new technologies on seniors. An evaluation of USDA-funded outreach efforts found that prescreening was most effective among seniors when it involved paper-based forms (as opposed to computer-based ones), since seniors tended to distrust new technologies. The USDA outreach evaluation also found that seniors in New York feared the intrusiveness of that state's fingerimaging requirements, and that outreach from community organizations was important in building the trust necessary to motivate seniors to apply.

The physical length of the food stamp application and the tone it takes towards the applicant (i.e. if it takes a suspicious tone) also may have a deterrent effect on seniors. According to a number of focus groups, many of the questions on the applications seemed unnecessary or caused a feeling of guilt for seniors.

Finally, households with elderly or disabled members are traditionally assigned longer certification periods (the length of time between formal recertifications of eligibility) because it has been observed that their income and other household circumstances change very little over time. Despite a law that allows States to set recertification intervals at 24 months for households with elderly or disabled adults, a USDA survey showed that offices serving only 17 percent of the nation's caseload had taken advantage of this option.

If we want to attack these problems, the nation must start with better outreach and better state and local access policies. We applaud the Food and Nutrition Service's recent focus on media and other outreach to seniors. Many non-profit partners are using FNS' web-based screening tool or tools developed by AARP and the National Council on Aging to help get low-income senior citizens connected to the program. We need more such outreach from FNS, the states, local agencies, and private and non-profit partners, and we need more of it to be particularly sensitized to some of the special barriers seniors face.

We also need states and localities to use their options under federal law to lower barriers – fingerprinting is an archaic, cost-ineffective practice; certification periods should be longer; applications should ask only what is needed, and be framed in respectful tones; agencies should be careful to make sure applicants get all the benefits to which they are entitled; and other policies and practices need to be changed in order to increase benefits. We are encouraged that FNS has allowed some states to streamline the enrollment into the Food Stamp Program for low-income seniors who receive SSI. We encourage more widespread implementation of such SSI Combined Application Projects.

But Congress also must reform the program to make it more hospitable to seniors – by making benefits more adequate, removing unnecessary eligibility barriers, and easing access.

The recommendations below are aimed at achieving these three goals.

One essential priority must be making benefit allotments more adequate - - increasing the minimum benefit and other allotment levels and reversing the impact of long-term changes in the 1996 law that cut benefits. It is the norm rather than the exception for a food stamp recipient household's benefits to run out several days before the end of the month - - often in the third week of the month. The average benefit nationally of roughly \$1 per person per meal is not enough to purchase an adequate diet. The Thrifty Food Plan, which is the underlying rationale for the benefit amounts, does not represent what a household needs to purchase a minimally adequate diet, particularly for long-term consumption. This shortcoming was bad enough before, but it has been exacerbated by program changes in 1996 that cut benefits across the board and froze the standard deduction from income. The damage from those changes continues and grows.

Moreover, the \$10 minimum benefit - unchanged since 1977 - - the amount of benefits paid to the still-needy people who have higher incomes within the program's eligibility standards - - has been and is woefully inadequate. It provides barely one-third the purchasing power today that it did when it was set. Because of the interaction between Social Security and Supplemental Security Income cash levels and food stamp rules, the \$10 minimum applies most often to seniors and persons with disabilities. The amount helps too little and discourages very needy people from going through an often complicated application process (and maybe paying \$10 or \$20 to get to and from the food stamp office) to obtain such a small amount. A significant increase in the minimum benefit is long overdue. In a poll conducted in May 2007, 90 percent of voters surveyed supported increasing the minimum monthly food stamp benefit for seniors and the disabled from \$10 per month to \$30 per month.

As to eligibility, it is essential, and also long overdue, to revise resource rules so that families need not forfeit the last of their meager savings in order to participate. Current resource limits are terribly restrictive - - \$3,000 for households with an elderly or disabled member; \$2,000 for other households. The \$3,000 limit has not been adjusted for more than three decades. It is simply unreasonable to expect people who are 70 or 80 years old and have only \$4,000 or \$6,000 or \$8,000 assets left in the world as their last security blanket to decide whether to forego food stamps or spend down almost all of these scant assets.

Congress also needs to allocate more funding for food stamp enrollment operations, especially for outreach and education activities to boost access for seniors and others.

The Farm Bill that is pending right now in a House-Senate conference committee potentially makes some important first strides toward these goals. Both the House and the Senate bills raise the minimum benefit from \$10/month to \$16 and adjust it for inflation, helping about 780,000 people. The Senate bill raises the asset limit applicable to households with elderly or disabled members from \$3,000 to \$4,500 and indexes it for inflation. Both bills also exclude retirement accounts from the asset limit. Both bills improve benefits a little bit across-the-board, especially for smaller households (where most recipient seniors are), by improving the standard deduction. The Senate bill gives states a new option to simplify reporting for seniors and people with disabilities. And

both bills rename the program (in the Senate bill, it would be the “Food and Nutrition Program”), which would help with destigmatizing a program named after coupons that no longer exist.

These are good first steps. We need the Farm Bill to be finished and to include these provisions. But Congress needs to do more in these respects and others. The state and local administrators need to do more. So we are delighted to participate in this hearing that can move Congress and the nation down the right path. We believe that improving food stamps in the ways that we have suggested is one key cornerstone in the effort to end elderly hunger in this country.

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