



**Outside Witness Testimony of  
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**Submitted to the U.S. House of Representatives Committee on Appropriations  
Subcommittee on Labor, Health and Human Services, Education and Related Agencies**

**Regarding: U. S. Department of Health and Human Services, Administration for  
Community Living Fiscal Year 2024 Appropriations**

**March 23, 2023**

Dear Chair Aderholt, Ranking Member DeLauro, and Members of the Subcommittee:

Thank you for the opportunity to submit testimony concerning Fiscal Year 2024 (FY24) appropriations for the Older Americans Act (OAA) Nutrition Program, administered by the Department of Health and Human Services' (HHS) Administration for Community Living (ACL). To ensure the health and safety of older Americans and the sustainability of the nationwide network of community-based senior nutrition providers who serve them, **we are calling for a minimum of \$1,284,385,000 for the OAA Nutrition Program to be included in the final FY24 Labor, Health and Human Services, Education and Related Agencies (Labor-HHS-Ed) Appropriations bill.**

The OAA Nutrition Program consists of Congregate Nutrition Services (Title III C-1), Home-Delivered Nutrition Services (Title III C-2) and the Nutrition Services Incentives Program (NSIP, Title III). **Within the total funding requested, we urge the greatest proportion be allocated to Home-Delivered Nutrition Services.** While there is an important and steady return to congregate dining following the COVID-19 pandemic, shifting demographics and effective program innovations such as grab-and-go meals to meet the needs of older adults at greatest risk of hunger and isolation, have led to rapid and persistent demand for Home-Delivered Nutrition Services.

Overseen by ACL's Administration on Aging and implemented at the local level through thousands of community-based providers for over 50 years, the OAA Nutrition Program –

congregate and home-delivered meal services – is designed to reduce hunger, food insecurity and malnutrition, and promote socialization and the overall health and well-being of older adults. Local programs successfully achieve these goals through delivery of nutritious meals, social connection and safety checks to individuals 60 and older. The OAA Nutrition Program has a long history of bicameral, bipartisan support and is one of the best examples of a public-private partnership, leveraging multiple funding sources and volunteers to collectively deliver more than 247 million meals to 2.8 million seniors annually.<sup>1</sup> As our nation must address the healthcare and services needs for our aging population, **the significance and effectiveness of the OAA Nutrition Program as a solution cannot be overstated.** For example, we can serve a senior Meals on Wheels for an entire year for roughly the same cost as a day in the hospital or ten in a nursing home.<sup>2</sup>

Hunger among older adults is an urgent issue. In 2020, over 9 million (12%) older adults 60+ were threatened by hunger – nearly 5.2 million (7%) of whom experienced *low food security* or *very low food security*. Nationwide, that comes to one in eight older adults struggling with hunger – **and the fraction of seniors experiencing *very low food security* has increased almost 90% since 2001.**<sup>3</sup> It has also been estimated that almost half of all older adults may be at risk of becoming, or are already, malnourished.<sup>4</sup> Today, millions of older adults are forced to make difficult choices about the foods they eat due to financial strain and/or may forgo eating properly to be able to afford paying for other necessities, such as utilities, rent and/or medication.

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<sup>1</sup> Administration for Community Living (ACL), 2022, Older Americans Act Title III Programs: 2020 Program Results, report available at <https://acl.gov/news-and-events/announcements/acl-releases-older-americans-act-program-highlights>

<sup>2</sup> Meals on Wheels America, 2023, National Snapshot What We Deliver Fact Sheet, available at <https://www.mealsonwheelsamerica.org/learn-more/facts-resources>

<sup>3</sup> U.S. Census Bureau, 2020, *Current Population Survey (CPS) December Food Security Supplement*, dataset available at [https://www.census.gov/data/datasets/time-series/demo/cps/cps-supp\\_cps-repwgt/cps-food-security.html](https://www.census.gov/data/datasets/time-series/demo/cps/cps-supp_cps-repwgt/cps-food-security.html)

<sup>4</sup> Kaiser et al., 2010, “Frequency of malnutrition in older adults: a multinational perspective using the mini nutritional assessment”, *Journal of the American Geriatrics Society* 58(9):1734-8, abstract available at <https://pubmed.ncbi.nlm.nih.gov/20863332/>

Older adults who are food insecure and lack consistent access to nutritious meals experience worse health outcomes and are at increased risk for heart disease, depression, diabetes and declines in cognitive function and mobility compared to those who are food secure.<sup>5</sup> Most older Americans possess at least one factor that puts them at greater risk of food insecurity, malnutrition, social isolation and/or loneliness, which can have grave and costly health effects.

Further, older adults commonly experience a variety of life circumstances that put them at elevated risk for social isolation and loneliness, such as retirement from work, living alone, or losing a spouse or loved one. Nationally, 24% of older adults are socially isolated and 43% feel lonely. **Social isolation and loneliness also have serious health impacts, and are associated with higher risk for cardiovascular disease, diabetes, cognitive decline and premature death.**<sup>6</sup> For Meals on Wheels recipients, whom are more than twice as likely to live alone than other older adults, the visit from the volunteer or staff member delivering their meal may be the only person they see that day or even that week.

OAA services, including congregate and home-delivered meals, address the issues of senior hunger, isolation and malnutrition. Services are statutorily targeted toward seniors with the greatest social and economic need, including those who are low-income; are a racial or ethnic minority; live in a rural community; have limited English proficiency; and/or are at risk of institutional care. The impact these services have on seniors' lives is powerful, and older adults who receive them have better health as a result. Of home-delivered participants, **92 percent report the meals help them live independently and 77 percent say the meals help improve their health.** Most seniors receiving OAA nutrition services consistently report that participating

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<sup>5</sup> Ziliak and Gunderson, 2021, *The Health Consequences of Senior Hunger in the United States: Evidence from the 1999-2016 NHANES*, report prepared for Feeding America, available at [www.feedingamerica.org/research/senior-hunger-research/senior](http://www.feedingamerica.org/research/senior-hunger-research/senior)

<sup>6</sup> National Library of Medicine, 2020, *Social Isolation and Loneliness in Older Adults: Opportunities for the Health Care System*, <https://www.ncbi.nlm.nih.gov/books/NBK557972>

in the program helps them feel more secure; prevents repeated falls or lessens the fear of falling; and allows them to stay in their own home.<sup>7,8</sup> Further, meaningful social connection is an inherent component of the Meal on Wheels service model, addressing the negative impacts of social isolation and providing environmental safety checks and established approaches for addressing identified hazards, fall risks and home repair needs.

Senior nutrition programs help avoid preventable emergency room visits, hospital admissions and readmissions, extended stays in rehab and premature institutionalization – ultimately reducing overall healthcare costs. A rigorously designed study from 2015 found that older adults receiving home-delivered meals experienced statistically significant improvements in health compared to their counterparts who did not receive services. Between baseline and follow up, the group of older adults who received home-delivered meals and safety checks were more likely to have improved physical and mental health, including reduced feelings of anxiety and loneliness, and fewer hospital admissions and falls – a major contributor to preventable hospitalizations and healthcare spending among older adults.<sup>9</sup>

Congregate and home-delivered meal programs are highly trusted and sought out for the nutrition and social connections they offer. Despite the emergency resources from Congress and incredible efforts from the OAA network to quickly scale services in response to the COVID-19 pandemic, the rising need has not abated and challenges in addressing persistent demand remain. A survey of Meals on Wheels America membership last year found that 97% of programs report there are older individuals in their communities who need meals who they are not currently

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<sup>7</sup> Administration for Community Living (ACL), 2022, *National Survey of OAA Participants*, available on ACL’s AGID National OAA Participants Survey Frequency Tables, available at <https://agid.acl.gov/>

<sup>8</sup> Meals on Wheels America, 2015, *More Than a Meal Pilot Research Study*, report prepared by Thomas & Dosa, available at [www.mealsonwheelsamerica.org/learn-more/research/more-than-a-meal/pilot-research-study](http://www.mealsonwheelsamerica.org/learn-more/research/more-than-a-meal/pilot-research-study)

<sup>9</sup> Meals on Wheels America, 2015, *More Than a Meal Pilot Research Study*, report prepared by Thomas & Dosa, available at <https://www.mealsonwheelsamerica.org/learn-more/research/more-than-a-meal/pilot-research-study>

serving and about 63% of programs reported that the major limitation to serving meals to all the seniors in their community who needed them was funding to pay for the meals.<sup>1011</sup>

**Many programs are taking drastic steps to sustain their programs due to funding challenges, such as discontinuing or cutting back services.** Further, nearly all senior nutrition programs are facing at least one significant barrier to providing home-delivered meals to seniors in need, such as rising food costs, fluctuating gas prices, labor and volunteer shortages and continuing supply chain issues.<sup>12</sup>

We understand the difficult decisions you face with respect to annual appropriations bills and other budgetary challenges. However, funding for the OAA Nutrition Program must be protected and increased as the services provided can be the difference between life and death; we cannot go backwards. As the Subcommittee develops its FY24 Labor-HHS-Ed appropriations bill, you have a social and economic opportunity to invest in programs that support our nation's seniors and ultimately reduce healthcare spending. We urge you to include **\$1.284 billion for the OAA Nutrition Program**, so that local community-based senior nutrition programs can ensure the health, safety and social connectedness of older adults in your districts and across the country. Thank you for your leadership, past support and consideration this appropriations cycle. We look forward to working together to ensure that no older adult in America is left hungry and isolated.

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<sup>10</sup> Meals on Wheels America, 2021, *Comprehensive Network Survey* conducted by Trailblazer Research, available at <https://www.mealsonwheelsamerica.org/learn-more/research/member-perspectives-practices-survey>

<sup>11</sup> Meals on Wheels America, 2022, Fall 2022 Member *Pulse Survey*, available at [www.mealsonwheelsamerica.org/learn-more/research/covid-19-research-portfolio](http://www.mealsonwheelsamerica.org/learn-more/research/covid-19-research-portfolio)

<sup>12</sup> Meals on Wheels America, October 18 - November 7, 2022, *Fall Member Pulse Survey*, available at [www.mealsonwheelsamerica.org/learn-more/research/covid-19-research-portfolio](http://www.mealsonwheelsamerica.org/learn-more/research/covid-19-research-portfolio)