



Helping Older Adults Struggling Against Hunger Access Food in the Age of COVID-19

Introduction

As the COVID-19 pandemic continues to challenge the entire globe, millions of older American adults are struggling to put food on the table, let alone stockpile enough food to shelter in place. State and local agencies administering nutrition programs, nutrition program providers, emergency food networks, and food stores are scrambling to respond to the nationwide need brought on by COVID-19's dual threats to the economy and public health, including increased need for nutrition support and for social distancing.

Social distancing is key to limiting exposure to COVID-19, and is important for individuals of all ages. However, minimizing person-to-person contact is of paramount importance for adults [age 65 and older](#), [older adults of color](#), and older adults with [underlying medical conditions](#) who are vulnerable at disproportionate rates to contracting and experiencing severe illness from COVID-19. Unfortunately, life circumstances can make it more difficult for some older adults to socially distance themselves.

Practicing social distancing can be difficult for older adults who live in poverty, occupy crowded housing, take public transportation, or have jobs that require social contact. Likewise, shopping at grocery stores, eating meals with others at senior centers, or accessing emergency food at community sites can potentially expose older adults to COVID-19. Helping older adults minimize social contact in multiple realms will require a host of policies and measures that extend beyond the purview of this brief, which focuses on strategies in the nutrition realm.

This brief explores four available actions to minimize exposure to COVID-19 through person-to-person contact when it comes to older adults accessing food.

#1: Work with federal, state, and local partners to ramp up opportunities to grocery shop while minimizing person-to-person contact for older adult customers.

#2: Advocate for states to adopt Supplemental Nutrition Assistance Program (SNAP) policies that foster social distancing for older adults.

#3: Implement Older Americans Act nutrition programs that capitalize on models promoting social distancing.

#4: Work with emergency food providers administering federal food programs to implement models that support social distancing.

Underpinning all of these strategies is the need for additional investments that increase the food purchasing power of households with older adults. Older adult stakeholders have a vital role to play in advocating for additional resources — in the form of [additional SNAP benefits](#) and other income supports — that will help ease some of the struggles that low-income older adults face in affording food and other household necessities during this difficult time.

#1: Work with federal, state, and local partners to ramp up opportunities to grocery shop while minimizing person-to-person contact for older adult customers.

A wide range of stakeholders are implementing food shopping models that can help older adults, including those shopping with SNAP benefits, to minimize exposure to COVID-19.

SNAP online purchasing: Expanding online purchasing to SNAP customers is a critical opportunity to help more people shop from home, potentially decreasing their risk of being infected. Advocates have long worked to allow SNAP customers the option to shop online, just like any other customers, but expansion of the [SNAP Online Purchasing Pilot](#) has been slow until recently. Thanks to a flurry of April 2020 approvals by the U.S. Department of Agriculture's (USDA) Food and Nutrition Service (FNS), additional states now have the option to begin operating SNAP online purchasing. Once these newly approved online pilots are operational, more than 50 percent of all SNAP customers will live in states where online purchases will be possible in theory; however, there is still work to be done to support SNAP customer access to these online models.

While the 2014 Farm Bill gave USDA the authority to allow online SNAP pilots, such pilots were only rolled out recently given the initial complexities of ensuring the safe and secure processing of eligible food and grocery payments. Unlike a typical purchase with a credit card or a debit card, SNAP electronic benefit transfer (EBT) purchases require that the customer punch in their access code (PIN or personal identification number) at the point of sale. Online systems had to be developed to account for this need as well as ensure that SNAP benefits were not used for transportation costs or delivery fees.

[SNAP online purchasing](#) was first piloted in New York in April 2019 and, as of May 1, 2020, has been operational or approved in 16 other states. Check [FRAC's COVID-19 response page](#) for online purchasing updates.

These approvals are encouraging, but additional barriers remain. Only a limited number of food retailers are able to participate in online SNAP purchasing. With the increased demand for online purchasing as a result of COVID-19, it may be difficult for shoppers to find participating retailers with available online ordering slots. Furthermore, participants may face challenges with delivery fees (which cannot be paid for with SNAP benefits) or transportation to pick up online purchases.

For states that do not currently participate in the SNAP online pilot program, older adult and anti-hunger stakeholders can work to bring the program to their state by encouraging their state to apply and their SNAP-authorized retailers to offer the service. The responsibility for submitting an application lies with the

state SNAP agency, [their third-party processor](#), and any retailers who wish to participate.

Click and Collect: This “click and collect” model can help older adults who can drive or travel to participating grocery stores to shop in ways that minimize social contact. Through “click and collect,” SNAP customers can order groceries online or over the phone and then pay for their groceries with SNAP EBT cards at curbside pickup. Older adults can make use of the authorized representative provisions (see below) and have a trusted family member, friend, or neighbor use their SNAP card to shop for them using this model.

Wireless mobile point-of-sale devices are used for processing payments by swiping customers’ SNAP EBT cards at curbside pickup spots. For retailers that do not have mobile devices, retailers have the option to process manual vouchers curbside.

A [blog](#) from FMI—The Food Industry Association provides guidance to SNAP retailers on this grocery payment model.

Home Delivery: Another option that some retailers are using is delivering groceries to homebound older adults participating in SNAP. Store employees use wireless mobile point-of-sale devices to process SNAP benefits at point of delivery. Six-foot distancing protocols are adhered to in order to avoid close contact.

Funding for Grocery Delivery for SNAP Customers: Even in areas where older adults can access online SNAP or other home-delivery models that accept SNAP benefits, these options can be out of reach for older adults who do not have the resources to cover delivery fees or are unable to afford an order that meets the threshold to qualify for free delivery. SNAP cannot be used to cover delivery fees.

To accommodate more affordable food retailer deliveries to SNAP customers, Representative Jahana Hayes (CT-05) and Representative Joe Neguse (CO-02) introduced the Food Assistance for Kids and Families During COVID-19 Act. Senator Bob Casey Jr. (PA) introduced companion [legislation](#) in the Senate. Among other provisions, the Act would provide \$500 million in funding through state agencies to reimburse retailers for grocery delivery fees for SNAP participants.

Special Hours: In many communities, grocery retailers are advertising special hours that are only available to older shoppers, typically 60 years of age and older. With fewer shoppers in the store, these special hours can provide a safer shopping experience for older adults.

Allow Hot Foods Purchases: Under regular rules, SNAP benefits cannot be used to purchase hot prepared foods at authorized grocers; however, waivers are available for states to allow the purchase of hot foods at participating food

outlets. This provision can help older adults buy food that they do not have to cook and prepare at home, which can be particularly helpful to older adults who are unable to cook. And, by expanding the food options available at nearby grocers, can reduce the time and distance they need to travel and better promote social distancing.

SNAP Restaurant Meals Program: The Restaurant Meals Program (RMP) recognizes that purchasing and preparing food can be a challenge for some older adults. States have the option to operate a SNAP RMP for persons who are elderly, have a disability, or are experiencing homelessness. Under this program, states can authorize restaurants that offer a low-cost meal option to participate in the program. Currently, only a few states and counties use RMP.

The COVID-19 emergency makes this option even more timely as it expands the locations where older adults can pick up food and minimize travel and exposure risks.

A [letter](#) from FRAC, International Foodservice Distributors Association, National Council of Chain Restaurants, National Restaurant Association, and Western Center on Law & Poverty urges FNS to take seven specific administrative actions to add more restaurants as food access points for SNAP participants during COVID-19.

Also in response to COVID-19, Senator Chris Murphy (D-CT) and Representative Jimmy Panetta (D-CA) have [introduced legislation](#) to ease RMP expansion to more states and more restaurants during COVID-19 and future pandemics. Among other things, the bill would allow all SNAP participants during the pandemic to use their SNAP benefits to purchase meals from authorized restaurants.

#2: Advocate for states to adopt SNAP policies that foster social distancing for older adults.

SNAP allows individuals to buy food for in-home consumption. Under normal circumstances, SNAP involves some person-to-person interaction during the application and recertification process and when benefits are redeemed at participating food retailers, but there are key opportunities for older adults to minimize contact to protect their health.

New federal COVID-19 relief legislation includes added [flexibility for SNAP management](#) that can help states more readily adopt [COVID-19 waivers](#) and models that promote social distancing. [SNAP Pandemic Planning Guidelines](#) is a resource from USDA that provides state agencies with guidance on updating their pandemic plans, including ways that “ensure the continuity of, and safe access to, SNAP during severe pandemic conditions or periods of social distancing.”

Key Opportunities to Highlight or Push

- **Apply for SNAP online:** Older adults who have internet access at home, such as through smart phones, can benefit by applying for SNAP online. In nearly all states and the District of Columbia, people can complete and submit an application for SNAP benefits using the State agency's SNAP online application system. This avoids the need to apply for SNAP in person at a state office, which is especially important as more and more offices close.

For applicants who do not have internet access or live in a state that does not have an online SNAP application, applicants can call the [State agency for assistance](#) or see if there are nonprofits (e.g., food banks, anti-hunger groups, or social service providers) that can provide SNAP application assistance over the phone. Applicants also have the option of mailing in applications (though this would require printing, picking up a hard copy of the application, or asking for the application to be mailed).

- **Ensure access to telephonic interview for initial applications and recertifications:** Arranging for telephone interviews means that an older adult does not have to visit a SNAP office for an interview. Instead, the interview takes place over the phone. Pursuant to the Families First Coronavirus Response Act, SNAP State agencies can adjust interview requirements as long as mandatory verifications are made, including the applicant's identity.
- **Implement voice/telephonic signatures:** States can implement processes to allow for acceptance of a telephonic signature (an individual's recorded verbal assent) in place of an ink or electronic signature. This can help older adults recertify or complete an application over the phone in lieu of having to go into a state or nonprofit's office to sign a SNAP-related form.

Additionally, this allows an older adult to receive application (or recertification) assistance not only from a State agency, but also from a community-based organization or other trusted contact over the phone, without requiring an additional and cumbersome step of procuring the ink signature from the older adult.

Of note, telephonic signatures can be particularly helpful to older adults who are visually impaired and those who do not have access to a computer or a reliable internet connection. Under this option, a third party, such as an older adult-serving social service agency, can complete an online application for a client over the phone, capture the client's telephonic signature, and then submit the application for the client through the use of an electronic signature. This removes the need to get the document to the client in person or by mail for inked signature and avoids additional delays

in getting the application processed. The state — not a third party — must still conduct the application interview with the client.

- **Promote the best use of authorized representative opportunities:** The authorized representative option can help older adults avoid going to the grocery store (as well as the SNAP office). Typically, SNAP requires that customers physically visit grocery stores or other food outlets that accept SNAP to purchase food items using their SNAP EBT card. This can already pose an issue for people who do not live near a grocery store or cannot readily shop for groceries because of a disability or health concerns.

All states allow for older adults (or any SNAP applicant) to designate a trusted friend, family member, neighbor, or other individual to help assist with applying for SNAP, submitting forms, and/or using the older adult's SNAP EBT card to buy food for the older adult. The older adult may have one authorized representative or separately authorized representatives for applying to receive SNAP benefits and making SNAP purchases.

- **Implement SNAP application assistance plans that include effective strategies to educate older adults about SNAP and its social distancing options:** States can engage in efforts to ensure SNAP education and application assistance efforts engage older adult-serving partners. Building SNAP partnerships with state units on aging, local Area Agencies on Aging, AARP chapters, Meals on Wheels providers, and community organizations that can help reach new older adults is one of the most effective ways for states to close the [older adult SNAP participation gap](#), reduce hunger, particularly among older adults, and lift up opportunities for older adults to access SNAP in ways that ensure social distancing protocols are followed.

For more on the importance of SNAP for older adults struggling with hunger and additional opportunities to help older adults access SNAP, refer to FRAC's [primer](#).

#3: Implement Older Americans Act nutrition programs that capitalize on models promoting social distancing.

The home-delivered meals program and congregate nutrition program — which reached more than 870,000 and more than 1.52 million older adults, respectively, in 2018 (latest data available from the [AGID program data portal](#)) — are vital sources of meals for older adults in many communities around the country. COVID-19 has resulted in the heightened need for nutrition assistance from these programs and for these programs to innovate to match the new reality.

Home-delivered meals programs: In many ways, the home-delivered meals programs are uniquely designed to be able to respond to the distinct needs of older adults during the COVID-19 pandemic. Across the country, home-delivered meals providers have been adapting services to meet increased need, while simultaneously adjusting their operations to align with public health guidance and to respond to changes in capacity.

As this vital work progresses, the challenges faced are related to more than the unique circumstances of this pandemic. Even before COVID-19 struck, many home-delivered meals programs could not serve all the eligible older adults who likely needed meals due to funding not keeping pace with increasing demand for services. While supplemental funding and flexibilities provided through federal COVID-19 legislation has enabled some providers to expand their critical services, this program will need ongoing resources to be able to respond to the growing hunger among older adult households.

Congregate nutrition program: Congregate nutrition program sites have had to creatively change their approach or to temporarily shutter their programs as their model of bringing older adults together for meals does not support social distancing protocols. Community locations, like senior centers, where congregate meals are provided are closing to help stem the spread of COVID-19, and congregate providers have been pursuing temporary models to ensure congregate meal patrons still receive meals, such as transitioning to home delivery, or offering alternative methods, such as “grab and go” and drive-through models.

In order to address the new challenges of providing meals to older adults while adhering to social distancing, Congress provided emergency funding and program flexibilities for state and local stakeholders.

Additional funding: COVID-19 relief efforts at the federal level have included the supplemental investment of hundreds of millions of additional dollars to ramp up the ability of aging service providers to distribute home-delivered meals. The Families First and CARES acts included a combined \$750 million in additional funding for Older Americans Act nutrition programs. States also have been provided with additional flexibility in allowing funding previously allocated for congregate meals to be made available for home-delivered meals during the public health emergency.

Program flexibilities: State and local entities (State Units on Aging, Area Agencies on Aging, and local providers) that administer and implement Older Americans Act programs have discretion in program operations that can help in adapting to social distancing needs. This discretion is available via existing authority, as well as through new authority provided as part of federal COVID-19 response efforts.

As just three examples thereof, state and local entities have [existing flexibility](#) to

- set program guidelines that would allow additional older adults to be eligible for home-delivered meals;
- change state-established pre-participation assessment requirements for home-delivered meals; and
- determine the number of meals a participant receives during an interaction, the frequency with which meals are provided, and the method of meal delivery.

The U.S. Department of Health and Human Services' Administration for Community Living (ACL), which administers Older Americans Act programs, and older adult nutrition program stakeholders, including the [National Resource Center on Nutrition and Aging \(NRCNA\)](#), [Meals on Wheels America](#), [National Association of Nutrition and Aging Service Providers](#), [N4A](#), have provided resources to assist program providers. Key documents on nutrition programs at the time of publication of this piece include

- [COVID-19 Suggestions for Senior Nutrition Programs \(NRCNA\)](#);
- [COVID-19 Suggestions for Senior Nutrition Programs Offering Home Delivered Meals \(NRCNA\)](#);
- [Additional FAQ: OAA Nutrition Program Implementation During the COVID-19 Pandemic, issued April 17, 2020 \(ACL\)](#); and
- [Q&A from Meals on Wheels America Town Hall, posted March 31, 2020 \(ACL\)](#).

The federal government has granted [additional flexibilities](#) to assist state and local entities to adapt and expand service models to meet the unique challenges of serving older adults during the COVID-19 pandemic. The CARES Act provided several additional flexibilities, [which apply to funding provided](#) under the CARES and Families First acts and, in some select instances, standard Older Americans Act funding for as long as there is a public health emergency. [Two examples](#) are the allowance of 100 percent of funds to be transferred between congregate and home-delivered meal programs; and inclusion of people who are adhering to social distancing guidelines related to COVID-19 for those who are considered to be home-bound.

Additional Considerations

Targeting: As older adults are being served by these important nutrition programs, it is critical to bear in mind who is served with the limited resources these programs have. While the home-delivered and congregate meals programs are not means-tested, the [Older Americans Act directs](#) that services be targeted to those with the greatest economic and social needs, “with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas.”

Volunteers: Older adult nutrition providers may encounter capacity challenges in scaling up service models or even in continuing current levels of service. Providers may have lost volunteers due to the need for volunteers to self-isolate, or may need to consider altering their involvement of volunteers, especially if their volunteer base is largely comprised of people who may be considered at high risk for COVID-19. For a list of volunteer-related resources, refer to NRCNA's [Volunteer Engagement and Recruitment Resources](#).

#4: Work with emergency food providers administering federal food programs to implement models that support social distancing.

Emergency food providers are innovating to help families in need access food in ways that minimize social contact for participating families and food provider staff and volunteers.

Food banks and emergency food providers are implementing [The Emergency Food Assistance Program \(TEFAP\) flexibilities to comply with social distancing guidelines](#) in light of COVID-19. Participating TEFAP agencies can implement models where staff or volunteers place TEFAP foods directly into a participant's car, deliver to a participant's home, or to a central location where foods are picked-up by participants. Some food banks and agencies are also allowing TEFAP applicants to apply over the phone and waiving signature requirements. Food banks that run TEFAP can request approval to operate a [Disaster Household Distribution \(DHD\) program](#) through their FNS regional office.

[TEFAP has been provided with an additional \\$850 million in the past COVID-19 stimulus bills](#), and participating food banks and pantries are scaling up food distribution in response to this unprecedented need fueled by COVID-19.

[Feeding America](#), the nation's largest network of food banks, has created a task force to provide support to food banks, including as food banks adjust food distribution models to adhere to distancing needs (e.g., through additional mobile pantries or by setting up appointments for food distribution).

The Commodity Supplemental Food Program (CSFP) distributes monthly food packages to enrolled adults who are low-income and 60 years of age and older. CSFP providers also can request approval to operated DHD; however, TEFAP is usually more recommended for use with DHD due to the higher quantity of TEFAP food available.

CSFP providers are responding to the need for social distancing among participants by adopting waivers and adapting distribution models.

- ***Adopting waivers:*** For example, some sites are not requiring the participant's signature on the application when applying for CSFP; are allowing staff to fill out the whole CSFP application; or are authorizing a proxy to come pick up their CSFP box without having an authorized representative form on file.
- ***Adapting distribution models:*** For example, some sites are instituting [drive-through service](#) to pick up CSFP commodities.

Conclusion

Social distancing is important for individuals of all ages but it is especially important for older adults who face particular risks from COVID-19. For some older adults, these challenges are exacerbated by existing obstacles that make it difficult to shop for or prepare food.

Singular to this pandemic is the need to shift from typical food distribution models that rely on congregate meals or distribution at community sites, such as schools, recreation centers, faith-based organizations, community centers, or food pantries, to models that foster social distancing. Additionally, older adults' ability to safely depend on social networks of family, friends, and neighbors may have changed during this time.

Because of the dedication and creativity of public and private entities focused on helping older adults access the nutrition they need to weather this pandemic, models are emerging that help older adults access food while minimizing the risks associated with social contact. Such ingenuity has helped older adults get the nutrition they need while abiding by social distancing protocols designed to protect their health.

The work to address older adult hunger, however, is not over. [Additional action](#) is needed to increase SNAP benefits so that older adults have additional purchasing power and to use some of the models detailed in this brief. Doing so, and continuing to respond creatively with nutrition programs, is vital to ensuring additional older adults will be able to access the food they need to protect their nutrition and health.

This brief was written by FRAC's Alexandra Ashbrook and Susan Beaudoin, with assistance from Lauren Badger and Ellen Vollinger. FRAC would like to thank Meals on Wheels America's Katie Jantzi, Uche Akobundu, and Katherine Nick and Feeding America's Jodi Romero and Hollie Baker-Lutz for their assistance in review of this document.

For more information on efforts and opportunities to ensure people have access to nutrition programs during the COVID-19 pandemic, visit [FRAC's COVID-19 Updates webpage](#).