Increasing Food Security of Nevada’s Seniors

In Nevada, seniors are suffering from food insecurity due to a lack of appropriately focused SNAP outreach efforts and insufficient access to fresh, nutritious food. Only a portion of the adults over 60 years-old in Nevada who qualify for SNAP are currently enrolled in the program, and this has devastating consequences that impact seniors and our community as a whole.

Nationally, 4.8 million adults over the age of 60 rely on SNAP, and of older Nevadans, approximately 29.9% depend on the benefit and 13.6% are food insecure. Despite a significant number of elderly individuals requiring assistance in the form of supplemental benefits in order to eat nutritious meals, only 2 in 5 eligible seniors are enrolled in the program.

Research shows this vulnerable population is more apt to suffer from health conditions such as diabetes, depression, heart attacks, and high blood pressure when they do not have access to nutritious food, which contributes to increase societal cost and social burden. Ultimately, this results in a lower quality of life for the older adult and also increased tax-payer cost due to higher rates of health care costs related to ER visits, hospital admissions/readmissions, and outpatient services.

Efforts currently existing in Northern Nevada to combat food insecurity specifically for seniors are important and meaningful, but they are not fully addressing this concern. These programs and services include SNAP outreach at some locations within the community, often consisting of one time per week or less, and the distribution of food through the Senior Commodity Food Program (CSFP) one time per month. Additional services include food pantry and Mobile Harvest distributions; however, these programs are not senior specific and provide limited support.

SNAP outreach is a valuable service as it allows for those who may not have the resources, knowledge, or ability to seek out the program to enroll. Currently, limited SNAP outreach takes place at the Senior Center, however, those who do not have ability to attend these events are often left without easy access, which contributes to a large number of individuals not participating who qualify. The challenge of accessing services is apparent when it is considered 1/3 of seniors who are food insecure are also disabled and more likely to have debilitating and chronic health conditions. For this reason, it would be necessary to consider outreach efforts be increased wherein these individuals are most likely to receive services already. Many within this group of people are physically unable to go to welfare offices or attend community outreach services, which directly impacts their ability to access SNAP. Due to this, it is of utmost importance that outreach efforts be increased and focused as a means of having a bigger impact for those who need it the most.

In short, food insecurity is a problem for Nevada’s seniors and communities. Nearly 3 out of every 5 eligible seniors are not enrolled in SNAP, a program which decreases the societal and social costs associated with a lack of access to nutritious food. In order to more effectively provide services to adults in Nevada over the age of 60 who qualify for SNAP but are not enrolled, outreach efforts should take place in hospitals at bedside.

**Why Seniors?**

- 3 of every 5 eligible seniors are not enrolled in SNAP.
- 29.9% of Nevada’s seniors rely on SNAP to access nutritious food.
- 1/3 of food insecure seniors are disabled.
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A real story of a senior suffering food insecurity in Nevada...

In 2017, a hospital social worker completed an assessment with an elderly mother with a disabled adult son for needs of resources and referral. The social worker that completed the assessment learned the elderly mother is the primary care taker to her disabled son. Financially, they relied on Social Security Disability benefits as well as her Social Security each month given neither is able to work. Though this individual identified a lack of food as a problem for her and her son, she reported the reason she had not applied for SNAP was her inability to go within the community and spend multiple hours waiting in line to apply for it. In this instance and many others, SNAP outreach within the facility would have effectively allowed an eligible senior, and her disabled son, to access a service that is vital to their health and wellbeing.

Recommendation:
Administratively, it is suggested hospitals be mandated to enact policies and protocols to support SNAP screening, referral, and outreach in the inpatient setting within hospitals. This change in policy will increase access to services and improve food security for seniors within the Nevada community.

Justification:
Seniors are at increased risk of poverty, adversity, and food insecurity, which is explained by the fact they are more likely to be disabled and unable to access services and resources, even when such services already exist. SNAP is an invaluable program for Nevada’s seniors; however, their participation in the program is low in comparison to other high-risk groups.

For these reasons, it is imperative tailored efforts specifically for this vulnerable population are made in order to alleviate the burdens and difficulties that currently exist.

References:


