COMMITTEE ON HOUSING & NEIGHBORHOOD REVITALIZATION
DEPARTMENT OF AGING AND COMMUNITY LIVING
BUDGET OVERSIGHT HEARING
25 APRIL 2019
TESTIMONY OF MELISSA JENSEN
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Good afternoon. My name is Melissa Jensen and I am an Anti-Hunger Program Associate at D.C. Hunger Solutions, a local initiative of the Food Research & Action Center (FRAC). D.C. Hunger Solutions works to create a hunger-free community and improve the health, nutrition, well-being, and economic security of low-income residents of the nation's capital. My work focuses specifically on the Supplemental Nutrition Assistance Program (SNAP) and senior hunger in the District of Columbia. Thank you, Chairwoman Bonds and the committee for convening this hearing and for the opportunity to testify on the budget of the Department of Aging and Community Living.

As we testified in the Performance Oversight Hearing on February 14, 2019, food insecurity and malnutrition are growing problems in the District of Columbia. In 2016, the District had 113,644 residents age 60 or older. That same year, 10.4% of households with seniors in D.C. were food insecure.[1] At 17.79%, D.C. also has the ninth highest rate in the nation of marginal food insecurity in seniors, meaning that while they are not yet classified as food insecure, over 20,000 older adults are actively facing the threat of hunger.[2] More than 15,000 seniors, approximately 15% of the senior population in D.C., are living in poverty, and thousands more struggle to cover housing costs and medical care and still pay for food on a fixed income.[3]

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[1] FRAC. Rate of Food Insecurity Among Households With Seniors (Age 60+), by State, 2014-2016. http://www.frac.org/maps/seniors/tables/sr_food_insec_2014_2016.html.
[2] Feeding America. The State of Senior Hunger in America 2016. https://www.feedingamerica.org/sites/default/files/research/senior-hunger-research/state-of-senior-hunger-2016.pdf.
[3] Henry J. Kaiser Family Foundation. Issue Brief: How Many Seniors Live in Poverty? http://files.kff.org/attachment/Issue-Brief-How-Many-Seniors-Live-in-Poverty.

The U.S. Department of Agriculture (USDA) defines food insecurity as "access to enough food is limited by a lack of money and other resources."[4] This is different from hunger. Food insecurity is a "household-level economic and social condition of limited or uncertain access to adequate food", while hunger is an "individual-level physiological condition that may result from food insecurity", such as "discomfort, illness, weakness, or pain that goes beyond the usual uneasy sensation".[5] Both food insecurity and hunger have profound effects on one's quality of life. For seniors in particular, the lack of adequate food is associated with: poor dietary intake, poor/fair health status, diabetes, hypertension, anemia, functional limitations, depression, gum disease, and other poor health outcomes.[6] In addition, the economic restraints that come with food insecurity may cause older adults to skip meals, struggle to pay bills, or cut back on vital medications.[7]

16.3% of households with seniors (60+) in the District received SNAP benefits, formerly known as food stamps. This is the highest senior SNAP participation rate in the nation;[8] however, only about half of the seniors who are eligible for SNAP are participating.[9] Barriers that keep older Washingtonians from receiving SNAP benefits include: lack of knowledge that they may be eligible for SNAP, belief that receiving SNAP would make them ineligible for a food box or for Meals on Wheels, feelings of stigma or cultural norms against using government assistance, lack of transportation, and feelings of isolation, among others.[10]

This data does not include residents ages 50-59, a population that may also be at increased risk for food insecurity, especially as it faces high unemployment rates, declining ability to work, and increased

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[4] USDA. Household Food Security in the United States, 2005. https://www.ers.usda.gov/webdocs/publications/45655/29206_err29_002.pdf?v=41334.

[5] USDA. Definitions of Food Security. https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us/definitions-of-food-security.aspx.

[6] FRAC. Food insecurity is often invisible infographic. http://frac.org/wp-content/uploads/infographic-food-insecurity-often-invisible-health-care-providers-role.pdf.

[7] FRAC. Senior Hunger Facts Infographic. http://frac.org/research/resource-library/senior-hunger-facts-infographic.

[8] FRAC & AARP. Average Annual Percent of Households with Seniors Age 60+ that Participated in SNAP, by State, 2012-2016. http://www.frac.org/maps/snap-state-seniors/tables/tab-seniors-snap-state.html

[9] National Council on Aging. Senior SNAP Participation Visualization. https://www.ncoa.org/economic-security/benefits/visualizations/senior-snap-participation/.

[10] FRAC. Combating Food Insecurity: Tools for Helping Older Adults Access SNAP. http://frac.org/wp-content/uploads/senior_snap_toolkit_aarp_frac-1.pdf.

medical or nutritional needs. In addition, adults ages 50-59 generally do not qualify for benefits such as Social Security, Medicare, and Temporary Assistance for Needy Families.[11]

D.C. Hunger Solutions is active within the District of Columbia Senior Advisory Coalition (S.A.C.) and offers our support for the coalition's ask to add home delivered meals to the Elderly and Individuals with Physical Disabilities (EPD) Waiver. This is a budget-neutral proposal that will actually save the District money, because the vast majority of the fees to prepare and deliver meals will be covered by Medicaid. This is a simple change that can free budget money for other crucial programs.

One of these crucial programs is senior nutrition. D.C. Hunger Solutions also supports S.A.C.'s budget ask of $672,000 to increase nutritionist staffing across each ward of the District. Currently, each ward has only one nutritionist – regardless of the number of home delivered meals, community dining, or nutrition supplement clients they serve. Meanwhile, home delivered meals and community dining sites were two of the most utilized DCOA services in FY2018, with over 5,000 seniors attending a community meal site and nearly 3,400 seniors receiving a home delivered meal. We know that many older adults face increased health issues, and for many of them diet is crucial. Senior nutritionists allow them to address these dietary issues, helping them live longer and healthier lives. Increasing the number of nutritionists will especially help low-income seniors make the most of their limited budgets. We request that the Council allocates $620,000 for one additional licensed nutritionist in each Ward.

We are pleased to see that the Mayor's budget maintained or increased all senior nutrition funding. However, we are disappointed that funding for senior wellness centers was decreased by $399,000, while, per the Mayor's own budget, participation has risen since 2016. Senior wellness centers are vital for many seniors striving to maintain their health as they age; providing physical fitness and nutrition programs, the possibility to interact with a nutritionist, and socialization. They are also one of D.C. Hunger Solutions' main platforms for providing seniors with SNAP application assistance. Moreover,

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[11] AARP. SNAP Access Barriers Faced By Low Income 50-59 Year olds.
https://www.aarp.org/content/dam/aarp/aarp_foundation/2013-pdfs/SNAP_White_Paper_Mar_2013.pdf.

cutting money to senior wellness centers is hardly keeping with the Mayor's commitment to making D.C. an age-friendly city. We ask that the Council restore full funding for senior wellness centers.

Thank you again for the opportunity to offer testimony on the budget of the Department of Aging and Community Living. We look forward to working together to improve the health, nutrition, and wellbeing of older adults in the District of Columbia.

Respectfully Submitted,

Melissa Jensen
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