

Enhancing Senior Well-being through Meals on Wheels

Addressing Senior Loneliness, Malnutrition, and Leveraging the Meals on Wheels Model



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Introduction

Meals on Wheels understands senior health

- Meals on Wheels New Mexico (Formerly Meals on Wheels Albuquerque) started in 1972
- Although we serve anyone, of any age, for any reason, 80% of our clients are over the age of 65
- Face-to-face delivery in the Albuquerque Metro, overnight shipping statewide
- Delivered over 4.5 million meals since 1972
- Projected to deliver 200,000 meals to 2,000 clients in 2023

Senior health is an important issue to focus on

- NM Ranks 7th in the nation for overall food insecurity, and 2nd for senior food insecurity
- By 2030, NM is projected to have the 3rd highest senior population in the US (tied with Wyoming and Maine)
- Inadequate nutrition and limited social contact have negative health consequences for seniors



Source: Iowa Data Center's projections.html Meals on Wheels America, Sept. 2020. Available at www.mealsonwheelsamerica.org/facts



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Inadequate Nutrition and Limited Social Contact Have Negative Health Consequences for Seniors

Seniors experiencing falls with injury	13%
Hospital readmissions within 30 days	15%
Preventable hospitalizations	28 per 1000
Total medicare spending (billions)	\$3.13



Table Source: Meals on Wheels America, Sept. 2020. Available at www.mealsonwheelsamerica.org/facts.

Senior Loneliness

Definitions

- Social isolation (objective) v Loneliness (subjective)
- Social isolation is objectively having few social relationships, social roles, group memberships, and infrequent social interaction
- Loneliness is the distressing experience that results from perceived isolation or unmet need between an individual's preferred and actual experience



Our Epidemic of Loneliness and Isolation: The U.S. Surgeon General's Advisory on the Healing Effects of Social Connection and Community, https://www.hhs.gov/sites/default/files/surge@eneral-social-connectionadvisory.pdf



Senior Loneliness

Poor Outcomes are Well Documented

- Loneliness and social isolation increase the risk for premature death by 26% and 29% respectively
- Increases risk for anxiety, depression, and dementia, and susceptibility to viruses and respiratory illness
- In addition, poor or insufficient social connection is associated with increased risk of disease, including:
 - 29% increased risk of heart disease
 - 32% increased risk of stroke 0

"The mortality impact of being socially disconnected is similar to that caused by smoking up to 15 cigarettes a day."

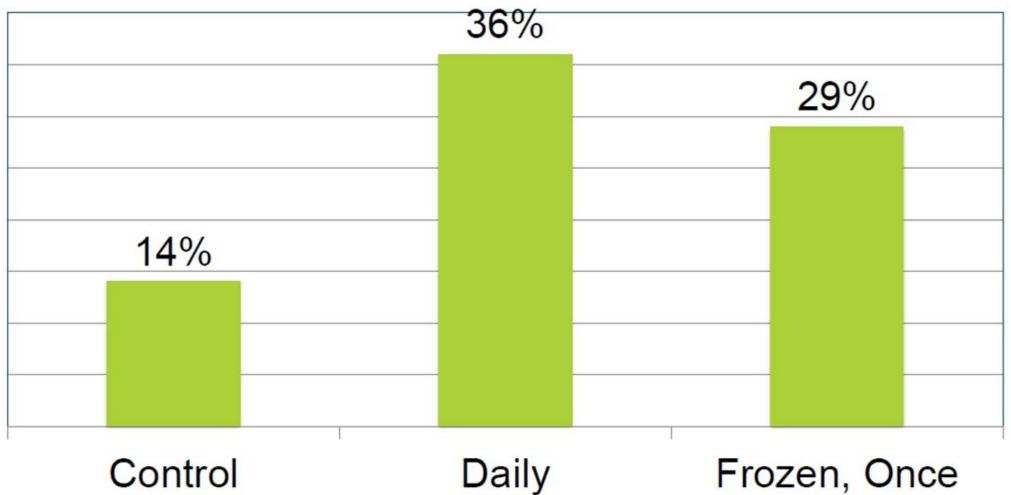
-Dr. Vivek H. Murthy 19th and 21st Surgeon General of the United States



https://www.hhs.gov/sites/default/files/surgeon-general-social-connection-advisory.pdf

Senior Loneliness

Among those who live alone, meals have a larger effect on improvement in isolation





Q: "How often do you feel isolated from others? Never, Rarely, Sometimes, Often?" These differences were statistically significant (χ^2 = 8.92, p=0.01).

Table Source: "More Than a Meal Medicare Claims Analyses," Brown School of Public Health & Gary and Mary West Foundation.

Weekly

Understanding Malnutrition in the elderly

- In patients over 65, malnutrition is cepresenting factor in upwards of 50% of hospital admissions
- Malnutrition can occur from many different factors

Physiologic	Pathologic	ic Sociologic		
Decreased taste	Dentition	Ability to shop for food	Depression	
Decreased smell	Dysphagia, swallowing problems	Ability to prepare food	Anxiety	
Dysregulation of satiation	Diseases (cancer, CHF, COPD, diabetes, ESRD, thyroid)			
Delayed gastric emptying	Medications (diuretic, antihypertensive, dopamine agonist, antidepressant, antibiotic, antihistamine)	Impaired activities of daily living skills	Emotionally stressful life events	
Decreased gastric acid	Alcoholism	Lack of interactions with others at mealtime	Grief	
Decreased lean body mass	Dementia		Dysphoria	

CHF = congestive heart failure; COPD = chronic obstructive pulmonary disease; ESRD = end-stage renal disease.



Source: "Nutrients, Malnutrition Increases Hospital Length of Stay and Mortality among Adult Inpatients with 19 ov Mar 2022 Table Source: "The Permanente Journal, Malnutrition in the Elderly: A Multifactorial Failure to Thrive" https://www.nclin.glow/pmc/articles/PMC3396084/.

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Areas that Meals on Wheels and Medically **Tailored meals** can help address.

Physiologic Pathologic		Sociologic	Psychologic	
Decreased taste	Dentition 🔇	Ability to shop for food 🧒	Depression 😥	
Decreased smell	Dysphagia, swallowing problems 🔕	Ability to prepare food 🕜	Anxiety 🕜	
Dysregulation of satiation	Diseases (cancer, CHF, COPD, diabetes, ESRD, thyroid)	Financial status low socioeconomic	Loneliness	
Delayed gastric emptying	Medications (diuretic, antihypertensive, dopamine agonist, antidepressant, antibiotic, antihistamine)	Impaired activities of daily living skills	Emotionally stressful life events	
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Older patients who transition from hospital to home are particularly at risk for decline in nutritional status

- For patients, malnutrition causes:
 - Slower wound healing 0
 - Increased risk of falls 0
 - Exacerbation of pre-existing medical conditions 0
 - 1.5x higher likelihood of dying while in the hospital 0
 - 5x higher risk of dying within 90 days 0
- For hospitals, malnutrition causes:
 - Health care costs that are 300% higher
 - 50% higher readmission rate
 - Increased length of stay of 4–6 days 0



Addressing Malnutrition in Older Adults During Care Transition, Meals on Wheels America, 2019; https://www.mealsonwheelsamerica.org/docs/default-source/research/nourishingtransitions/addressing-malnutrition-web-final.pdf?sfvrsn=f045ba3b 2 Morgensen KM, DiMaria-Ghalili RA. Malnutrition Vigilance During Care Transitions. Today's Geriatric Medicine. 2015;8(4):122



Sources:



Two separate measures showed decline in participants' nutritional risk, in a study with Meals on Wheels Central Texas and Meals on Wheels of San Antonio.



Participants at "high risk" nutrition status, Nutrition Screening Initiative (NSI) DETERMINE your Health **Checklist measure**

"Malnourished" participants, Mini Nutrition Assessment-Short Form (MNA-SF)

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Source: 2018 study by Ullevig and colleagues titled "Impact of Hondeivered Meals on Nutrition Status and Nutrient Intake among Older Adults in Central Texas." Published in The Journal of Nutrition, Health & Aging. Available at: https://doi.org/10.1007/s12603-018-1038-0

42% Before meals

After 3 months of meals 8%

Meals related to fewer falls among fallers

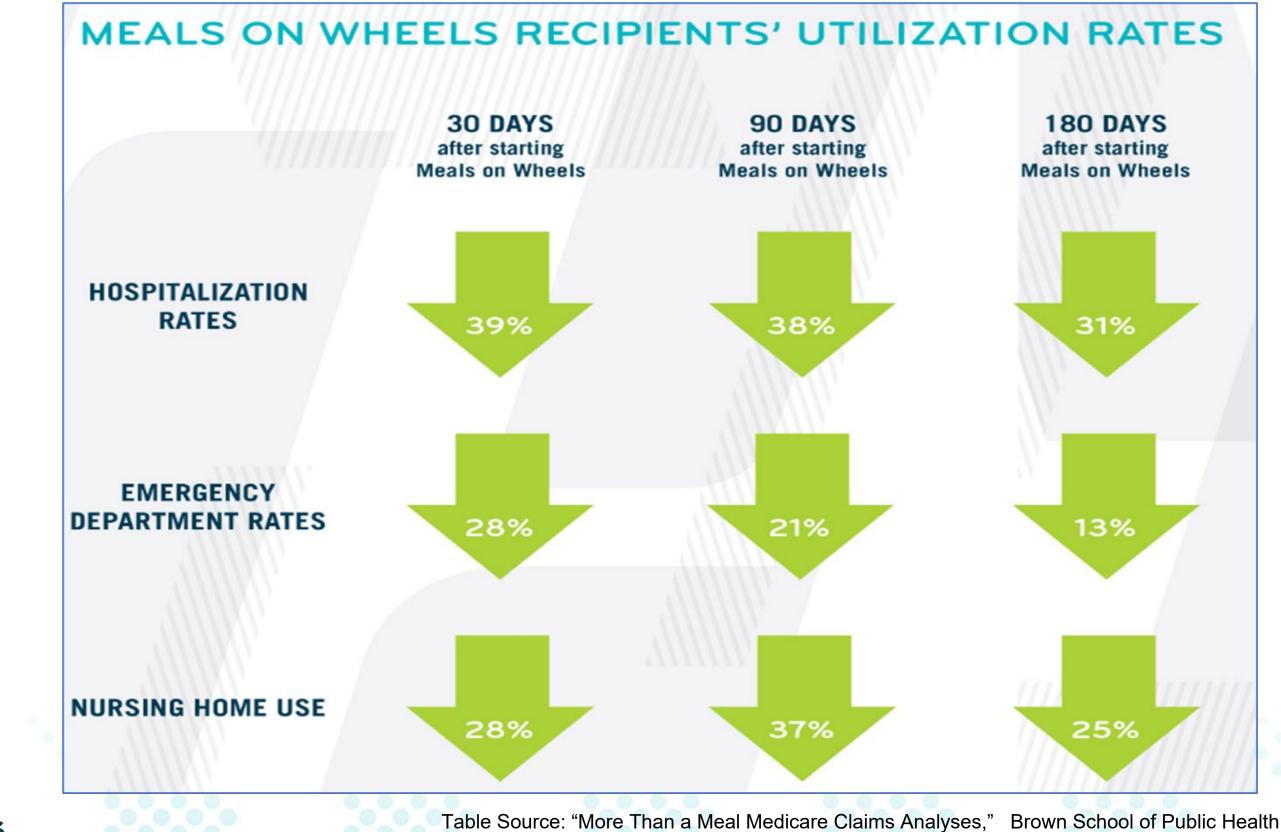
 Among participants who had fallen in the past three months at baseline (n=116)

		Control	Daily	Weekly, Frozen	Total
Fallen	n	19	10	14	43
	%	54%	21%	41%	
Did Not Fall	n	16	37	20	73
	%	46%	79%	59%	
Total		35	47	34	116

Differences between groups are statistically significant (χ^2 =9.718, *p*<0.01)

Table Source: "More Than a Meal Medicare Claims Analyses," Brown School of Public Health & Gary and Mary West Foundation







Brown School of Public Health & Gary and Mary West Foundation

Meals on Wheels Program We're more than just a meal

Nutrition related services:

- 8 different diets, including 3 specifically for medically tailored nutrition
- Weekend pantry bags
- Local harvest
- Dietician consultation

Connection related services:

- All meals delivered by a friendly volunteer
- Newspaper delivery
- Pet program
- Visual doorbells
- Address painting
- Additional program referrals when needed





Food is Medicine

Meals on Wheels addresses the spectrum from prevention to treatment through Medically Tailored Meals

What is Food is Medicine?

• Generally refers to prioritizing food and diet in an individual's health plan, with the goal of either preventing, reducing symptoms of, or reversing a disease state.

Medically Tailored Meals:

• Meals approved by a RDN that reflect appropriate dietary therapy based on evidence-based practice guidelines.



Medical News Today, Can Food Be Medicine: Prs and Cons, https://www.medicalnewstoday.com/articles/can-food-be-medicine-pros-and-cons Food is Medicine Coalition, https://www.fimcoalition.org

Table source: Food is medicine coalition, https://static1.squarespace.com/static/580a7cb9e3df2806e84bb687/t/5c8a5bbf6e9a7f0d61202be8/1552571328303/Picture1.png



FOOD IS MEDICINE

Medically-tailored meals for those with serious illness or disability who cannot shop or cook for themselves

Medically-tailored food for those with acute or chronic illness

Medically-tailored food for those at risk for acute or chronic illness

Healthy food for those who are malnourished or food insecure

Meet Carl





Program Evaluation and Impact

We provide measurable impact on falls, hospital admissions, loneliness and depression, and other health risk factors

Meals on Wheels clients reported:

- 81% of clients report a decrease in feelings of isolation
- 47% decrease in the number of times a respondent has fallen in their home
- 42% decrease in the number of respondents who reported battling depression
- 33% decrease in the number of times a respondent had to visit the doctor for something other than a routine appointment (emergencies)
- 12% decrease in the number of times a respondent had to choose between paying for food or paying for bills and/or medicine



Meals on Wheels New Mexico, Client Satisfaction Survey 2022

Future Initiatives and Expansion Million Meals Campaign



Our goal is to deliver one million meals over the next 5 years



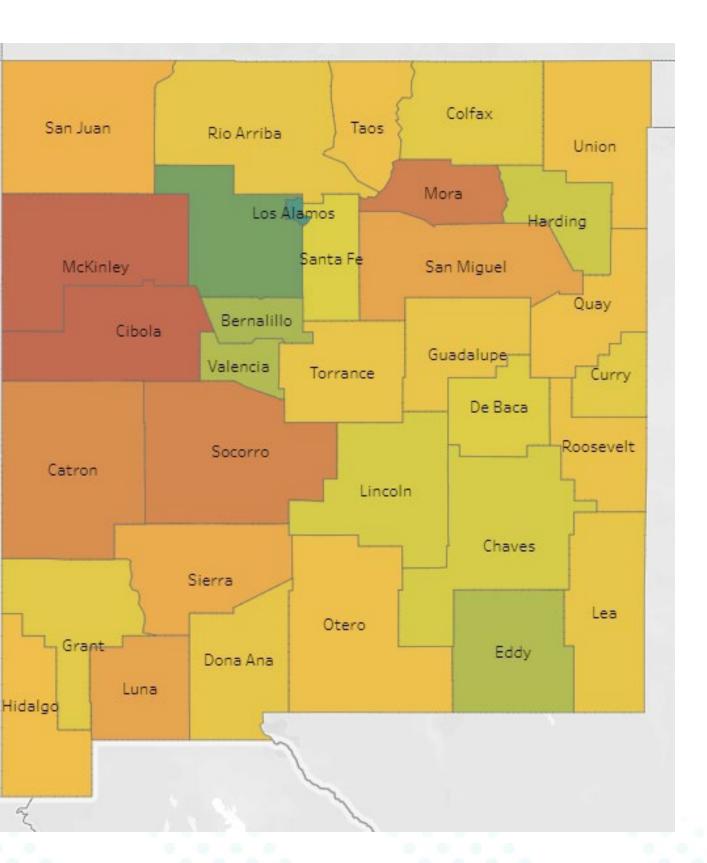
Future Initiatives and Expansion Million Meals Campaign

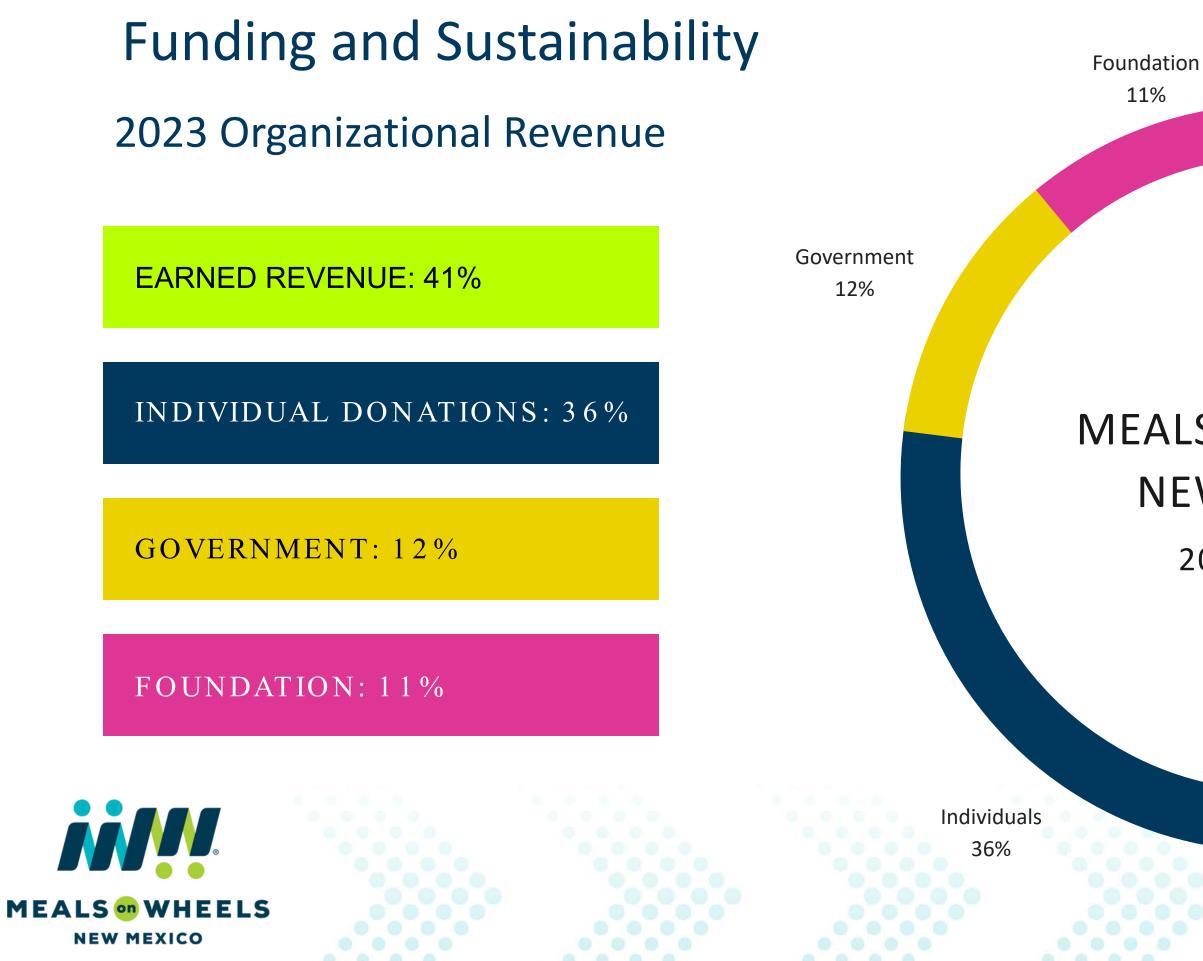
- UNM School of Public Administration, Dec 2022
- Weighted combination of more than 10 contributing factors to develop Medically Tailored Meals needs heat map
- 5 Counties of greatest need:
 - Cibola (76%)
 - McKinley (76%)
 - Mora (73%)
 - Socorro (72%)
 - Catron (71%)

% indicates corresponding need from the weighted ranking formula



UNM School of Public Administration, Meals on Wheels of Albuquerque Expansion Project, https://public.tableau.com/app/profile/kendra.brand7224/viz/FinalMap_16686524662000/Sheet1





MEALS ON WHEELS NEW MEXICO

2023 Budget

Earned Revenue 41%

Community Engagement and Awareness

Sharing our Impact

Awareness & Advocacy

- Million Meals Campaign
- #SaveLunch Campaign
- March for Meals Community Champions Week, March 2024

OpEds:

- Million Meals Campaign
- Surgeon General's warning on loneliness



Social Media

• Follow us on Facebook, Instagram, LinkedIn and YouTube



NEW MEXICO, Let's do lunch

Volunteer for Meals on Wheels

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Conclusion and Call to Action

Join us!

- Volunteer with MOWNM; take a tour
- Help us connect with other stakeholders
- Partner on policy
- Funding support





Thank you!



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