

Meals and Wheels Threatened In The Bronx

by Linda Ostreicher

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If a group of old people got together on their own, advised by experts in gerontology, to come up with a way to keep seniors out of hospitals and nursing homes, the result could look a lot like Meals on Wheels. The current New York City program serves clients who are at high risk of having to leave their homes for institutions. Through face-to-face visits five times a week, it can call in extra care just when a client needs it most. It can ease depression with friendly human contact. And it can prevent one of the most common and deadly conditions underlying major illnesses among the elderly, malnutrition.

Unfortunately, the city's proposed experiment with the lives of Meals on Wheels clients in the Bronx does not appear to be based on recommendations from old people, gerontologists, or anyone familiar with the role of preventive health care. Instead, the local Department for the Aging has become mired in secrecy, rumors, Bronx politics, and financial problems facing nonprofit agencies. **Freezing Out Senior Centers**

In the fall of 2003, the Department for the Aging requested bids for a contract that would replace some of the hot lunches delivered by Meals on Wheels in the Bronx with frozen meals. Senior centers, which traditionally have cooked and delivered lunch to New York's elderly, bitterly opposed the pilot project. For months, they boycotted the contract and refused to bid on it. There have been no announcements from the Department for the Aging, but it is generally believed that multiple proposals were eventually submitted for the newly designed Bronx Meals-on-Wheels program, from both nonprofit and for-profit contractors.

The most controversial change would be reducing the number of deliveries to each client from five days a week to once or twice a week. It is not clear how this would meet the need, stated in the department's 2004-2005 annual plan, "to ensure greater access to appropriate food and nutrition services for older individuals." The change would reduce delivery costs, but also reduce the number of visits clients receive with their meals, and require them to be able to safely store and heat up frozen food.

Critics of the proposal point out the need for companionship and safety monitoring as well as food, that frozen meals place new burdens for meal preparation on clients already assessed as being unable to cook for themselves, and that fewer deliveries mean fewer reminders to eat. Many elderly people have shrinking appetites. The loss of as little as 10 pounds in six months can nearly double the chance of being institutionalized. Half of the people admitted to nursing homes are found to be experiencing malnutrition.

But many communities outside New York are substituting frozen for hot meals. They find that some seniors prefer the independence of being able to choose when to eat, and not having to wait hours every weekday for their lunch to be delivered. **What The Research Shows About Frozen Meals On Wheels**

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A major federally-funded study compared frozen meals to the traditional hot lunch and found no significant advantage to frozen meals in improving nutritional and function status of clients. ["Effects of two models of nutritional intervention on homebound older adults at nutritional risk," by Alison J. Kretser, Theresa Voss, Wendell W. Kerr, Claude Cavadini, Janet Friedmann, [Journal of the American Dietetic Association](#), March, 2003.

This is not a good sign. The frozen-meal model studied was much richer than that proposed by the Bloomberg administration. It cost more than twice as much, and provided 21 meals a week, plus 14 snacks.

By contrast, New York City's frozen-meal option would provide five to seven meals per week. There's a good chance that the city's less generous frozen-meal program will not be as good for seniors as the hot meals they are getting now. **How Will Clients Be Screened?**

The Department for the Aging made several changes to their proposal in response to the criticism by advocates for the elderly. Among them was a decrease in the minimum share of clients that must be shifted from hot meals to frozen ones, from 60 percent to 30 percent. It is not clear what will be done if 30 percent are not found to be eligible for frozen meals, or how screening for eligibility will be done.

To be in the Meals on Wheels program in the first place, applicants must be unable to prepare nutritious meals because they cannot shop, lack cooking equipment, or cannot do the tasks involved in cooking. They must also be without friends, relatives, or paid assistants who could help them to cook. In addition, they must suffer from dementia or be unable to leave their homes.

New York City is not Virginia, where the study about frozen foods took place. Much of our housing is older than its tenants, and furnished with cranky refrigerators whose freezers have been iced up for years. Con Edison's rates for electricity are among the highest in the nation; elderly customers can easily lose electricity if they forget to pay—or cannot pay--their bills.

Will aged clients be able to safely operate microwave ovens, if they have never used them before? Or will they nod and thank the social worker who suggests one, not having clearly heard what she said, or wanting to be polite about the offer? **Save Money?**

According to a report issued by the New York City's Comptroller's Office, the first year of a frozen-meals program could cost the city \$185,400 more than estimated by the Bloomberg Administration, for equipment and initial screening of clients. In subsequent years, it is likely to continue to cost more than the administration expects.