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Why is Food Insecurity High among U.S. Grandparents who are Caring for Grandchildren?

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KEY FINDINGS

- Grandparents caring for grandchildren face numerous challenges with food security.
- Having low income, poor transportation, limited access to healthy food, and poor health and mobility increase the risk of food insecurity for grandparents caring for grandchildren.
- Reinstating pandemic-era benefit expansions and easier enrollment policies in all food assistance programs, improving transportation, and increasing access to healthy food would help many grandparents feed themselves and their grandchildren nutritious meals.

A surprising number of grandparents who care for their grandchildren are food insecure. Food insecurity ranges from worrying about where the next meal will come from, to foregoing fresh produce because of insufficient income, to being hungry due to lack of food. Generally, the more care grandparents provide for their grandchildren, the more likely they are to be food insecure. One in four grandparent-headed families report food insecurity.^{1,4} The United States must develop better policies to assist food-insecure grandparents providing care for their grandchildren as they grapple with inadequate funds, burdensome food assistance programs, inadequate transportation, shortages of fresh foods, and poor health and mobility.

This brief draws on the research project, *Food Insecurity in Old Age*, by Colleen M. Heflin and Madonna Harrington Meyer and includes quotes drawn from Harrington Meyer's interviews conducted in 2021 with a non-random sample of 63 U.S. adults ages 60 and older who are below 130% of the federal poverty line.

Many U.S. Grandparents Caring for Grandchildren are Food Insecure

The risk of food insecurity increases with the amount of grandchild care grandparents provide. Grandparents often provide extensive grandchild care even when they are not the responsible caretaker, co-residing, or a legal guardian. Over 7% of grandparents provide more than 30 hours a week of extensive grandchild care even though they are not the primary caretakers, and only half of those grandparents live with their grandchildren.³ Extensive care is most likely to occur when grandparents live with their grandchildren in three-generation households that include adult children or skipped-generation households that exclude adult children.⁴ In 2020, 7 million grandparents lived with their grandchildren and 2.4 million of those grandparents were the responsible caretakers for their grandchildren.¹⁰

One in four grandparent-headed families report food insecurity, compared to one in seven among all families with children.² Among the 2.4 million grandparents who live with and are responsible for their grandchildren, 31% are unmarried, 44% are unemployed, 18% are below the poverty line, 25% have a disability, and 45% have been caring for a grandchild for five or more years, all factors that increase the risk of food insecurity.⁴ Grandparents who live with and are responsible for their grandchildren are also more likely to be food insecure if they are older, grandmother only, rural, or are Black, Latino, American Indian, or Alaska Natives.^{4,12}

Many Factors Contribute to Food Insecurity among Grandparents

Grandparents caring for grandchildren are at an increased risk of food insecurity if they have insufficient income, difficulties managing food assistance programs, unreliable or unaffordable transportation, limited availability of healthy foods, or poor health, mobility, and stamina.

Insufficient Income

Lacking money for food is the leading cause of food insecurity.¹¹ Lower income grandparents are more likely to live in multi-generation and skipped-generation families and it may be difficult to feed so many on a tight budget.^{6,8} Economic challenges tend to ripple through grandparent households, particularly if they decrease hours of paid work to care for grandchildren, struggle to obtain benefits from government assistance programs, or attend to grandchildren with special needs.^{5,8} Grandparents often face budget tradeoffs or shortfalls as they try to stretch limited income across food, housing, utilities, or medical expenses.^{5,6}

Ophelia, age 69, lives in a grandparent-headed household of four that includes her daughter, her pregnant granddaughter, and her grandson. She provides extensive care for her grandson. She explains that their household budget is tight and there is not much money left for food:

Because after I pay the rent, I only got a little bit left and out of that I got to pay the gas, electric bill, and my phone bill and, you know, utilities.

Theo, age 66, and his wife provide extensive care for their grandchildren at least five days a week. They often do not have enough money for food, so Theo scraps metal to supplement their income.

Makes me feel bad because we scrap – after the rent is paid, we's broke. Once I pay those bills and pay the rent and pay on my car, I don't have

nothing left. And I pick up junk every now and then...Well like just this morning I made \$10.40... I can get a carton of milk for him.

Difficulties Managing Food Assistance Programs

The Supplemental Nutrition Assistance Program (SNAP) is the main food assistance program in the U.S., though there are nearly a dozen other smaller programs that provide important food and nutrition. SNAP reduces food insecurity substantially, but it is not user-friendly for grandparents caring for grandchildren. Obtaining SNAP benefits requires proving that the household is poor enough to qualify.² Certification procedures were simplified in many states during the COVID-19 pandemic; still, grandparents may be unable to qualify if they are not legal guardians, do not cohabitate with their grandchildren, are unaware of eligibility, or lack expertise managing the required paperwork.⁴ Less than half of adults age 60 and older who are eligible for SNAP receive benefits and only 42% of skipped generation low-income households participated in SNAP.⁴

SNAP benefits increased in the wake of the pandemic. The current minimum monthly SNAP benefit for a single person household is \$23 per month, and the average SNAP benefit for all households is \$180 per person.¹¹ Benefits remain below what many families need to be food secure; 40% of households that receive SNAP continue to experience food insecurity.²

Ophelia receives \$234 a month in SNAP benefits. However, her benefits were disrupted when she missed her recertification because SNAP mailed the recertification paperwork to her old address. They did not replace the benefits lost during appeal. Ophelia often does not eat because the SNAP benefits have not yet arrived, the grandchildren need food, or she has run out of food.

Sometimes I just have enough food for maybe breakfast and dinner... I'm going to make sure the kids eat even if I don't.

Julie, age 62 and a custodial grandmother for her grandson, uses her SNAP benefits quickly and then relies on food pantry and congregate meals for supplements.

We only get \$66 a month in food stamps... some months, you know, there's not enough for food.

Unreliable or Unaffordable Transportation

Obtaining food from grocery stores, food pantries, soup kitchens, or congregate meals nearly always requires transportation. Many grandparents live in areas where there is no public transportation, and even when public transportation is available, it often involves fares, changing buses, and carrying heavy groceries up the stairs. Many lower income grandparents own cars with limited utility because they require registration, inspection, repair, insurance, or gas. Transportation difficulties lead some grandparents to shop at nearby convenience stores or buy, consume, and serve less nutritious food.^{4,6}

Ophelia does not own a car and pays \$2.50 per ride on the public bus. Sometimes she cannot afford to take public transportation to the grocery store, the food pantry, or the congregate meal site.

I have to pay \$2.50 each way...Sometimes I would go to the market, and I just had enough money to call a cab which was the \$3...but there was a couple times I didn't even have money to get to the market.

Theo does not live near public transportation. When he walks to the bus stop, he gets short winded and feels the poor circulation in his legs. They would drive their car instead, but they are struggling to fund repairs. Sometimes they are unable to get food at the senior nutrition sites because they lack money for gas.

We got to go two lights, three lights, and the hill to get up before we can get to the [bus on] main highway... Right now, I got a taillight out. And then my heater... And they want to tell me \$500 to fix that.... because I just don't have it. I told my wife I said well, we just have to put on thick coats and some blankets.... We don't go at night. We go [to the food pantry] but...sometimes we don't have the gas.

Limited Availability of Healthy and Nutritious Food

Whether they are obtaining food from grocery stores, food pantries, soup kitchens, or congregate meal sites, many grandparents caring for grandchildren have difficulty obtaining nutritious fresh food. Sometimes the affordable fresh food at grocery stores or pantries is damaged or near expiration. Much of the food available through food assistance programs includes high fat, sodium, and sugar content. A lack of fresh, healthy food – and too much highly processed food – contribute to poor health for grandchildren and grandparents alike.^{4,6,7}

Ophelia tries to buy enough fruits and vegetables but often runs out of money for food, and the scarcity of produce affects how she feels physically.

I don't think I eat a lot of fruit and vegetables... I feel terrible.

Theo is only permitted to go to the food pantry once a month and sometimes the quality is low. He often skips meals so that his grandchildren can eat.

Canned goods... I've gotten meat there that won't be too good... Freezer burnt meat...If we don't have the egg or bread or something like that. I just don't eat anyway...Two or three times a month... I would do without it myself to give them some food.

Julie strives to provide enough fresh produce, milk, and meat for her growing grandson. Sometimes, Julie does not eat, so that there is enough healthy food for him.

I worry about some for feeding my grandson...I can't afford, you know, the fresh fruits and vegetables and stuff....milk and you know, like the meat...essential needs of a growing child...I may go without that and eat something else because I'm going to provide it for him.

Poor Health, Mobility, and Stamina

More than 80% of older Americans have at least one chronic health condition, and more than half have two or more.¹ Over 20% rate their health as fair or poor, and 20% have functional limitations, most often linked to mobility.¹ These limitations make it difficult to get to grocery stores, food pantries, soup kitchens, or congregate meals. Groceries are heavy and difficult to carry up the stairs. Additionally, those with mobility and stamina limitations may find it difficult to stand long enough to chop or stir. Difficulties preparing and cleaning up after meals may make relying on less nutritious packaged foods, such as frozen dinners, more attractive.

Ophelia's health is fair, and she has multiple chronic conditions that make walking and standing in line difficult. She is frustrated that she must travel far from her home to get

good quality food at a pantry. Ophelia augments her food supply by going to food give aways, which often requires walking and waiting in long lines.

I most likely would have to take a long walk to get there or use transportation... See because the area of the city I live in they don't give out much...Once a month in the summer I would go stand in a line that was giving out food.

Diane, age 65, has poor physical and mental health, which makes it difficult for her to obtain and prepare food to feed her grandchildren. She lives alone but provides extensive care for her granddaughter. She discontinued home delivered meals because the quality of the food was poor, she often has no transportation to the food pantry, and she does not feel alert enough to push a cart during poor weather. She lives in pain and contemplates suicide.

My capacity isn't that good ...My focus not really that good for me to be going. You know, you got to push a cart, you know, it be cold, it rains. It's different things or the weather is too hot, so when you get to a certain age you don't want to do a lot of things...I force myself to get up...Every time my legs is on fire... If had a choice I would take a pill and end it all...I don't have that choice.

Over time, the strains of caring for grandchildren with insufficient resources may diminish grandparents' physical and emotional wellbeing, which increases the likelihood of chronic illness, functional limitations, depression, and anxiety.^{4,7,9} When poor nutrition fuels poor health, it undermines many grandparents' greatest wish, which is to raise their grandchildren to adulthood. As Julie describes:

I really am concerned... about my health as I get older. I want to live long enough to finish raising my grandson.

Reinstating Pandemic-Era Benefit Expansions and User-Friendly Policies could Aid Grandparents Experiencing Food Insecurity

Moving forward, policy priorities should include:

- Increasing funding for SNAP and all other food assistance programs to expand the size and availability of benefits to pandemic-era levels.
- Simplifying application and recertification procedures while also providing grandparents more assistance in overcoming administrative barriers.
- Improving public transportation, particularly to high quality grocery stores and free and subsidized food sites.
- Expanding affordability and availability of healthy, fresh food and reducing reliance on highly processed food.

Data and Methods

This brief is based on Harrington Meyer's interviews conducted in 2021 with a non-random sample of 63 U.S. adults ages 60 and older who are below 130% of the federal poverty line. Interviews were conducted by phone, transcribed, and cleaned of all personal identifying information.

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