Humana Foundation

Senior Food Insecurity in Kentucky: A Growing Public Health Challenge

By: Heather Hyden and Danielle Neveles-McGrath

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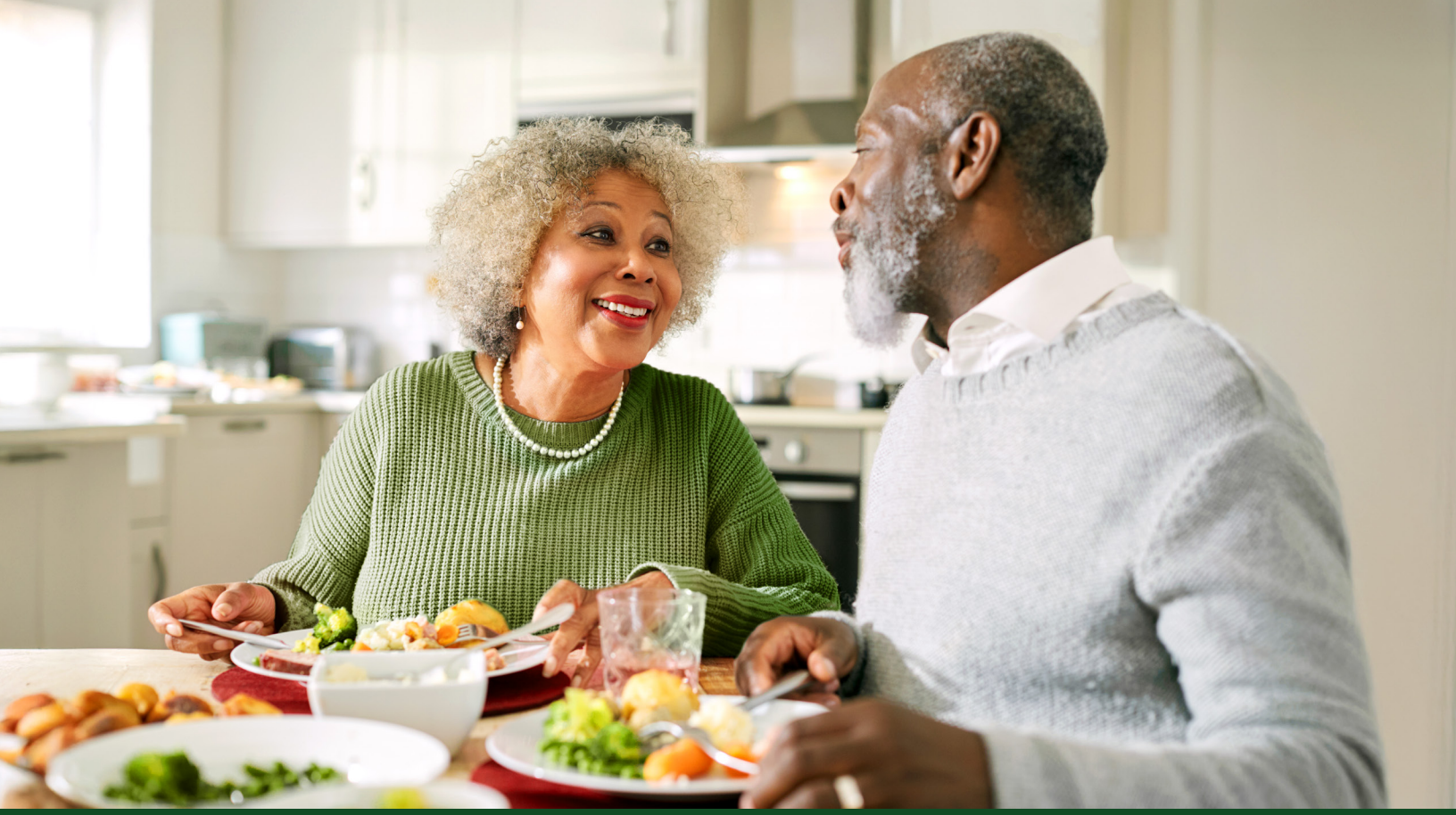

Introduction

One of the Humana Foundation's goals is to shape a healthier approach to nutrition for all seniors, with particular focus on underserved and diverse seniors. For this unique population, we are committed to addressing barriers to food access, preventing diet-related diseases, and promoting nutrition education by investing in community-driven, innovative, and scalable solutions. By 2040, adults aged 65 and older are projected to make up 22% of the U.S. population.[1] While many older adults are living longer and maintaining their independence, food insecurity among seniors is on the rise.[2] Studies show that food insecurity increases healthcare costs for seniors by 11%.[3] Social isolation, which is a closely linked issue, accounts for an estimated $6.7 billion in Medicare spending annually.[4] Tackling these challenges together can lead to significant savings for both individuals and the healthcare system, while helping older adults live healthier, longer lives. Now is a critical time to invest in programs that improve nutrition and food access for seniors, to not only prevent chronic disease and reduce medical costs, but to build a healthier, more equitable future for an aging America.

We believe learning drives progress. This state-level issue brief was developed to raise awareness of senior food insecurity as a public health issue, share learnings from partners, and inspire meaningful action. We must understand where we are to learn how to get to the world we all want to see, where seniors are well-fed, nourished, and thriving. We take a listening approach to our work; therefore, our research process included reviewing Kentucky's State Plan on Aging, interviewing three grant partners, four food security experts, and two seniors in Kentucky - directly impacted by food insecurity. We open with the stories of two food-insecure older women living in rural and urban areas of the state.

About the Authors

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Heather Hyden, MS in Community and Leadership Development, has over 15 years of community development and public health expertise. Her depth of knowledge spans grassroots organizational development, local government, academia, non-profit consulting and philanthropy. She has published across diverse platforms including magazines, peer-reviewed journals and institutional reports. Over her career, she has built new systems, policies and collective action for improved nutrition, maternal health, and story-based evaluation. She is currently leading the publication strategy for the Humana Foundation and continues to teach research methods and leadership fundamentals at the collegiate level.

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Danielle Neveles-McGrath, MBA, is the Chief Impact Officer for the Humana Foundation. In her role, she leads the Foundation's impact evaluation and learning for the Foundation's grant portfolio and publication strategy for advancing knowledge and insights from the Foundation's focus areas in mental health and nutrition. Danielle has more than a decade of healthcare experience and has worked across corporate communications, philanthropy, crisis management, international relations, employee engagement, and media relations in the healthcare and bio-pharmaceutical industries. Before joining the Humana Foundation, Danielle was the Vice President of Racial Equity Grantmaking for the Eli Lilly and Company Foundation, where she managed a $25 million grant portfolio and invested in community projects focused on education and economic development.

She is a board member of Ladies of Virtue, a Chicago-based mentoring, career and leadership development program for young women. Danielle holds a Master of Business Administration from the Kellogg School of Management at Northwestern University and a Bachelor of Arts degree in journalism from Indiana University-Purdue University Indianapolis. She is a poet and an author of a poetry collection.

Seniors' Call to Action

Miss Smith

Location: West Louisville, Kentucky

Health Challenges: Arthritis

Personal Challenges: Rising costs and other expenditures

Miss Smith is a senior who resides in the West Louisville Shively neighborhood in a small, income-based apartment. She enjoys reminiscing about her world travels. Even though she lives half a mile from the closest supermarket, her arthritis has significantly limited her mobility. She relies on paying a friend to take her shopping at the beginning of the month when they first get their Social Security and Supplemental Nutrition Assistance Program (SNAP) benefits. While she has support getting to the store, she rarely sees friends, and most of them are much older with their own health issues. She finds joy in eating fresh salads and has fond memories of family cookouts. But it's been a long time since she's been to a cookout after her parents passed away, and her siblings don't live nearby. **The joy of food has transformed into anxiety as rising food prices, limited SNAP benefits ($23 a month), and her health make it harder to keep healthy food on the table.**

"Sometimes, we don't have enough to make it through the month," she says. It has gotten harder and harder to buy other things she needs, like medicine and shoes.

While Miss Smith shared her challenges, she also offered solutions. First, she emphasized the **need for more food stamps and more fresh fruit and vegetable options**. She also used her nutrition knowledge to advocate for healthier options like leafy greens instead of potatoes and corn, which are heavy in starch. Next, she shared how her Medicaid case worker helped sign her up for SNAP, **highlighting how important having support in navigating benefit enrollment** is for seniors. Finally, she **recommended food delivery programs** to reach more homebound seniors with groceries or ready-made meals.

At the end of the interview, she paused for a long moment, then asked, "If prices keep getting higher, what can I really do? Do you know what I can do?"

It was more than a question. It was a plea. Her question reflects the deep uncertainty many seniors face as they try to navigate rising costs. It was clear that the daily effort to meet basic needs is taking a toll on her mental health.

Ms. Terri

Age: 70 years old

Location: Lives alone at home in rural Scottsville, Kentucky

Health Challenges: High blood pressure with required medications and nutrition needs

Personal Challenges: Inconsistent access to food

She is not alone. At 70 years old, Ms. Terri lives alone in the small, South-Central Kentucky town of Scottsville. Through the income-based United States Department of Agriculture (USDA) rural loan program, she owns her affordable home. She is a great-grandmother and lifelong crafter and enjoys spending time at the local senior center. Her favorite foods are fresh vegetables.

Last year, Terri's health challenges escalated with high blood pressure that required seven medications. "All those medications made me feel lazy, like I couldn't move around as much. I knew I needed to make a big change," she said. That change came when she started attending cooking classes at her local Cooperative Extension office. From there, the SNAP Education Coordinator helped her sign up for a senior-focused Food as Medicine Box program with fresh fruits and vegetables. With better nutrition, Terri now takes only two medications. "**The fresh vegetables and vouchers help because pills were so expensive**," she explained.

Still, her access to food is inconsistent, especially for items low in sodium that she needs to maintain her health. Her location compounds these challenges. The nearest farmer's market is nearly seven miles away. Public transportation is nonexistent, and the stores she can afford are either 5 or 15 miles away. She often stretches meals to last the month or even goes without. "Yes, there are months I skip meals," she admitted. "It's depressing." She also shared the many roadblocks when trying to qualify for assistance, sometimes missing limits by just $25. This has led her to assume she doesn't qualify for those programs. After reflecting on how she sees these challenges affecting her friends and other senior center participants, she exclaimed, "We're suffering, and we shouldn't have to."

She emphasized the impact on her mental health and how seeking help is a challenge. "I got kids, but I don't want to ask them for help," she said. "They got families of their own. I just don't like to be a bother." The emotional weight of self-reliance is heavy. "It's like, I just want to sit and cry," she shared.

Terri's story reveals how **food insecurity is not just a physical issue but is also deeply tied to mental health, isolation, and dignity**. When it came to offering solutions for change, she had three recommendations:

1. **Continued and additional support for benefit connectors** who help seniors sign up for benefits like SNAP and/or other local programs.
2. **Support the growth of programs that deliver fresh fruits and vegetables to seniors**.
3. In rural areas, **add more fresh food access points** where produce vouchers can be redeemed.

Through these stories, we learn about the everyday hardships of older adults facing food insecurity, but we also hear a roadmap for change. With better support systems, more equitable food programs, and a commitment to listening to seniors like Miss Smith and Ms. Terri, we can ensure that aging in Kentucky doesn't mean aging into hunger.

Where does Kentucky Stand?

The senior population is rapidly increasing in Kentucky, with the 60+ population expected to rise by 12% between 2022 and 2030. The 75–84-year-old age group has the fastest growth rate at just over 39%.[5] This growth in older adults **could stretch state and local resources, making it critical to invest in preventative efforts now**.

	Florida	Texas	Kentucky	Louisiana	U.S.
Overall senior health ranking [6]	26	39	46	49	
% Senior population (60+) [7]	28.7%	19.2%	24.4%	23.8%	24.3%
Older adults below the poverty line [7]	11.5%	11.6%	13.0%	14.7%	11.3%
Seniors living alone [7]	22.5%	22.4%	27.6%	27.3%	24.5%
Senior Food Insecurity Rate [8]	10.7%	13.6%	12.0%	13.0%	9.2%
SNAP participation rate of eligible seniors [9]	37.8%	38.2%	18.5%	34.1%	29.8%

6. United Health Foundation. America's Health Rankings. 2024 Senior Report.
7. Meals on Wheels. By the Numbers: America's Aging Population Fact Sheet. April 2025
8. Hunger & Poverty in the United States | Map the Meal Gap
9. National Council on Aging. Benefits Participation Map.

Ranks 46th
in overall senior health perspective in the U.S.

18.5%
of eligible older adults

SNAP Rates
Kentucky has a substantially lower rate of SNAP participation compared to other states.

From an overall senior health perspective, **Kentucky ranks at the bottom compared to other states at 46th**. According to the table above, states in our focus geographies have significantly higher rates of senior food insecurity than the national average, except for Florida. All our focus states have higher SNAP participation rates than Kentucky, which has a substantially lower rate at just 18.5%. Kentucky's overall senior health ranking is lower than Texas (39th) and Florida (26th), but slightly ahead of Louisiana (49th). It has a relatively high proportion of seniors (24.4%) and a notable poverty rate among older adults (13%).

In a recent literature review, food-insecure seniors were more likely to be younger, less educated, Black or African American, female, current smokers, low-income, and self-report fair/poor health. The lit review also found that food insecurity is associated with medication non-adherence, poor mental health outcomes, and limitations in physical functioning.[10] Further research is needed to better understand how these factors intersect across diverse geographic scales, such as at the county level and across dimensions of difference, including race, ethnicity, gender, and sexual orientation.

Chronic Conditions

Taking a closer look at the correlation between poor health and food insecurity, research has shown an **association between cardiovascular disease and type 2 diabetes, with a higher prevalence of food insecurity**.[11]

Kentucky has the **13th highest mortality rate from type 2 diabetes in the U.S.**, and 22.7% of older adults 65+ have this chronic condition. It is most prevalent in Kentucky's African American communities, and their death rate from the disease is 1.5% higher than that among Whites.[12]

Obesity

Additionally, **the rate of obesity among Kentucky seniors is 33.7%** compared to 30.6% nationally.[6]

The **risk of death from obesity has risen by 180% over the last 20 years**, especially among Black adults and residents of Midwestern states and non-metropolitan areas.[13]

We also further explored the relationship between mental health and food insecurity among seniors. **Research and public discussions about senior food insecurity recognize that it's not just about access to nutritious food**. Mental health challenges and social isolation are also key issues. Notably, a recent review of research found that food insecurity and emotional health problems often go hand in hand. Struggling to get enough food can lead to emotional distress, and feeling emotionally unwell can make it harder to access food.[14] Higher food insecurity rates among older adults are also associated with increased depressive symptoms.[15] As of the most recent data, 19.3% of adults aged 65 and older in Kentucky reported being diagnosed with a depressive disorder by a health professional.[16] Loneliness and lack of social support are also significantly associated with higher odds of being food insecure.[17]

The information above tells a high-level story, but we wanted to hear directly from our partners and learn how Kentucky plans to support its aging population. In the following section, we provide insights from the 2025-2028 Kentucky State Plan on Aging, and we include three examples of how our grant partners across our geographic focus areas are working at the ground level to address senior food insecurity. We conclude with key takeaways and calls to action.

Key Insights from Kentucky's State Plan on Aging[5]

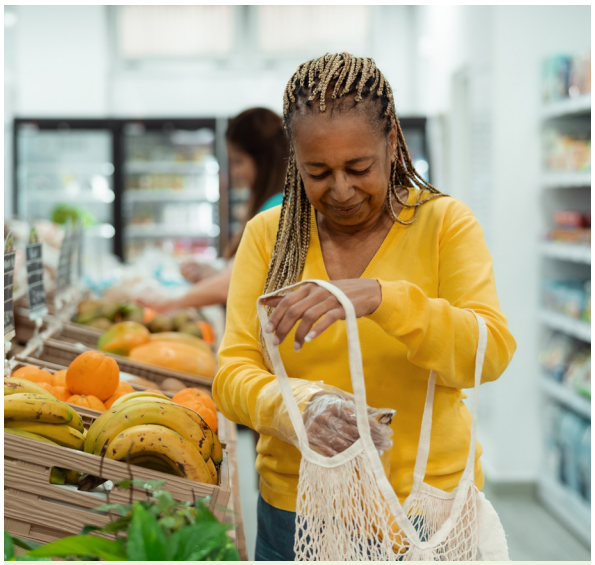
Kentucky's State Plan on Aging includes summaries of community needs assessment data and offers a look into recent progress and opportunities for change.

The community needs assessment in the State Plan revealed that **40% of seniors surveyed struggle with preparing meals**, a task made even more difficult for the **one in five seniors who also serve as caregivers**. This dual burden can easily lead to isolation and skipped meals.

1. The assessments also found that **access to nutritious, easily accessible meals has declined** due to increased demand following the COVID-19 pandemic, a shortage of staff available to deliver meals to seniors' homes, and limited transportation options that make it difficult for many to reach senior centers.

2. The plan highlights how the **lack of transportation options is an extreme barrier in rural areas**. Ms. Terri's story highlighted how long distances to the store can be a financial challenge in rural communities. Additionally, it reflects how living in a remote area can lead to increased social isolation. Kentucky's State Plan also identifies the lack of internet access in rural regions as a significant barrier because it prevents seniors from accessing virtual services. Online grocery ordering and delivery apps may be out of reach due to connectivity challenges.

3. The plan also focuses on progress made to address senior food insecurity rates. For example, over the last three years, the Kentucky legislature has approved an additional $35 million in support for senior meal planning. Additionally, collective action toward the issue has been galvanized through an annual Senior Hunger Summit. Also, the value of older adults to their local communities was emphasized throughout the report.



One section declared,

> "Despite challenges, seniors show remarkable resilience, ingenuity, and community spirit. They contribute significantly to the local economy through agriculture, volunteering, and small businesses, fostering solidarity and mutual support among community members."
>
> - *Kentucky Cabinet for Health and Family Services*

Key Insights from Partners on the Ground

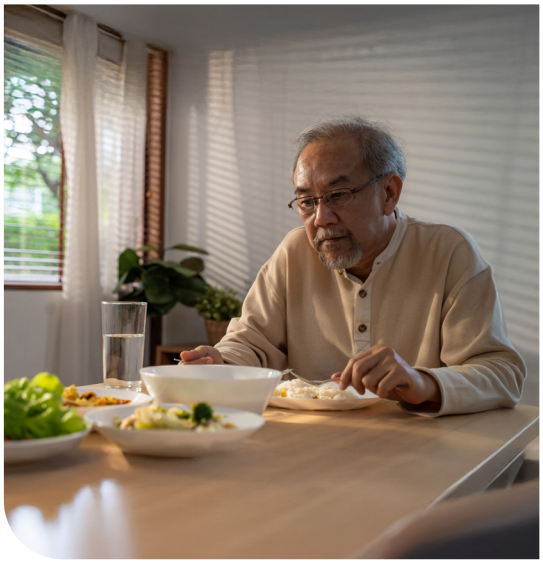
1 SNAP Program Enrollment

Only 18.5% of eligible seniors in Kentucky are enrolled in SNAP, with partners citing stigma and pride as barriers to participation in the federal assistance program.[9] Additionally, partners working to connect seniors to SNAP noted how **reluctance can be compounded by confusing eligibility rules, complex applications, and limited awareness of available programs**. Both Miss Smith's and Ms. Terri's stories highlight how important outreach is to get more older adults access to food assistance. However, since the passage of the 2025 reconciliation bill (One Big Beautiful Bill Act), the SNAP Education program through the Cooperative Extension system has been defunded, leaving a gap in SNAP outreach and nutrition education services that were critical to improving the health of Ms. Terri. This funding gap emphasizes the need for increased investments by funders to prevent diet-related disease among seniors.

2 Digital Tool Barriers

They also emphasized how digital tools, such as food delivery apps, offer promise but remain out of reach for many due to limited digital literacy. There have been recent calls for more research exploring the potential of digital platforms to facilitate food access for seniors.[18]

3 Social Isolation



Meanwhile, **social isolation leaves many without transportation or support to access food outlets**. Additionally, in rural areas, seniors often lose access to support from their children and/or grandchildren as they move away to bigger towns or cities. Organizations working to fill these gaps are stretched thin, facing staff shortages, burnout, and uncertain funding, especially after the expiration of COVID-era relief programs. Rising food costs have intensified demand. From February 2024 to February 2025, food costs increased by 2.6%.[19] However, partners also called attention to the bright spots. For example, older adult volunteers are the backbone of many food pantries. Their volunteer leadership helps feed their communities every day.

4 Healthy Food Incentives

Programs like the Senior Farmers Market Nutrition Voucher Program help seniors stretch their dollars to access the fresh fruits and vegetables Miss Smith loves at local farmers' markets. The vouchers have an exceptional redemption rate of 90% and seniors are the highest-demand customers of the state's Double Dollars program. In 2024, these programs combined contributed $490,000 to the local economy.

Partner Best Practices

1 Legal Aid Society Inc.

Legal Aid Society Inc. in Louisville works directly with seniors to help them make the most of available federal benefits. They provide direct legal representation to individuals when their benefits are threatened, partner with community organizations to expand program access, and provide case management support to help seniors enroll in and maximize their SNAP benefits. To address the stigma of seeking legal support and receiving food assistance, they work with over three dozen agencies to meet seniors where they are. Julia Leist, Director of Development and Communications at the Legal Aid Society for over 13 years, shared, "It's easy to reach seniors who are already connected, but homebound seniors are much harder to serve." To meet the needs of seniors who may be socially isolated or have limited mobility, they provide in-home support. Last year, they **helped individuals and families access over $2 million in SNAP benefits**, significantly increasing their purchasing power.

2 Dare to Care Food Bank

Another partner, **Dare to Care Food Bank** in Louisville, has transformed how they serve seniors through the charitable food system. They have been leading a food equity initiative centering the voices and experiences of their senior clients across Kentucky and Southern Indiana. Applying a big-picture approach, they provide capacity-building support to food pantry partners to offer delivery options, more choices in pantries, and partnerships with low-income housing communities to provide a mobile pantry option to address transportation barriers. The Chief Impact Officer, Dr. Ursula Mullins, shared, "There are residents who come together to influence what meals are offered to pantry clients", and emphasized, "We are trying to get as much information directly from the residents as possible." This community-led approach is a recognized best practice.[20] They also emphasized the importance of tailored outreach. "This is not a monolithic demographic. There are unique needs, for example, those who are more able-bodied and those with disabilities. It's not a one-size-fits-all, which is why we need everyone."

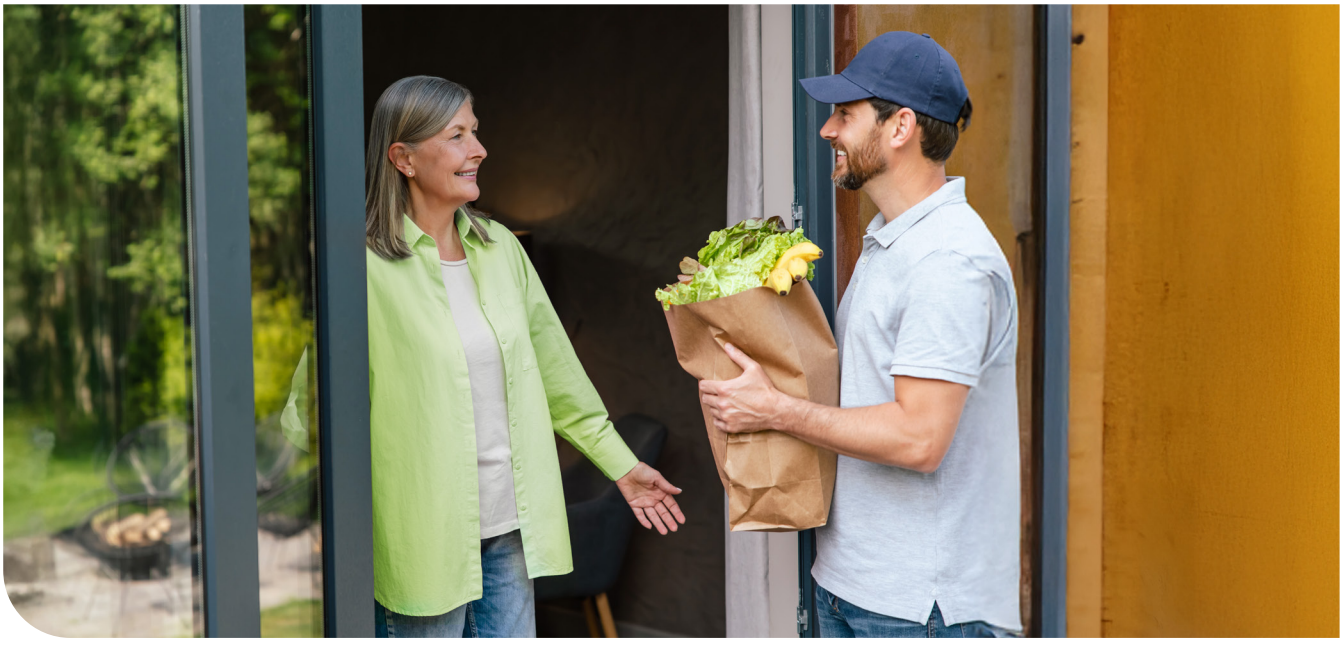
When asked what advice she has for other agencies and community-based organizations working on senior food security, Dr. Ursula Mullins recommends,

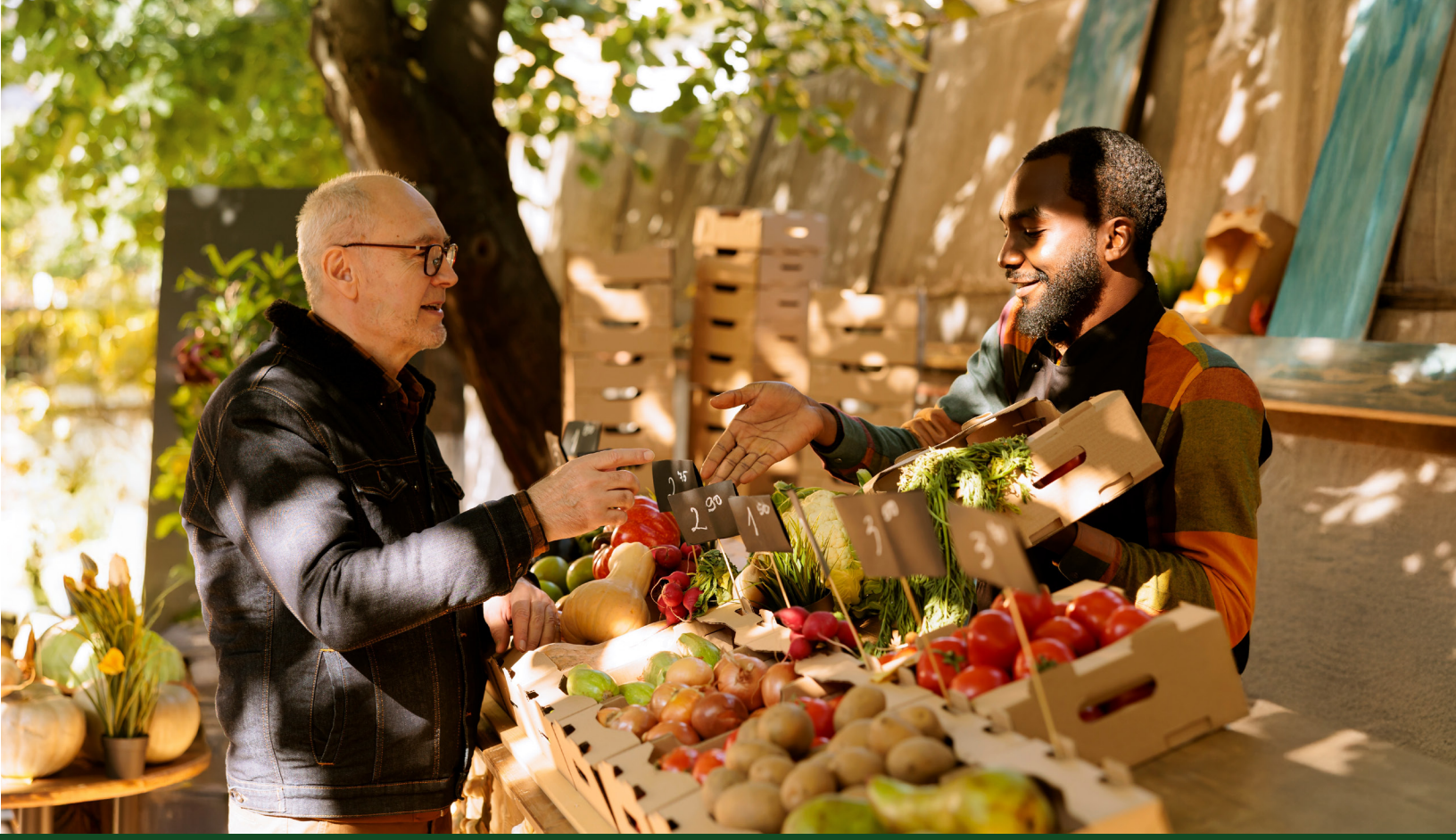
> "Staying the course. We need each and every partner to be part of the senior food ecosystem. Collaborating is huge."

3 University of North Carolina at Chapel Hill

To encourage innovation across the Southeast region, we interviewed a partner outside of Kentucky in North Carolina whose work demonstrates the best practice intervention tackling both food security and social isolation together. An academic partner, **Dr. Lindsey Haynes-Maslow at the University of North Carolina at Chapel Hill**, shares that, "Food is at the center of mental and physical health and is at the center of our society through our traditions, heritage, culture, and celebrations." Her research recognizes the critical role of food in our everyday lives. **She shared how cooking and sharing a meal can be a source of joy, and when older adults have feelings of loneliness or depression, they may lose the motivation to cook and feel disconnected from our society that is centered on food as a major cultural asset**. Her randomized control trial intervention aims to address food security through improved diet and social isolation jointly. The trial includes culturally tailored healthy home-delivered meals to seniors, while also randomizing half of the participants to receive weekly phone calls from a college student companion. The students conduct regular mental health wellness checks, and seniors share their wisdom and guidance with the students, fostering a valuable intergenerational social connection component. This intergenerational approach aims to increase social connection, reduce feelings of loneliness and depression, and improve diet quality. By emphasizing the impact of relationships in addressing food security, she also intends to break down barriers to access, such as stigma in relying on federal programs.

> "We can move past the stigma of having to rely on someone else. Any way you can provide food where it doesn't feel like a handout is critically important for older adults."
>
> - *Dr. Lindsay Haynes-Maslow*



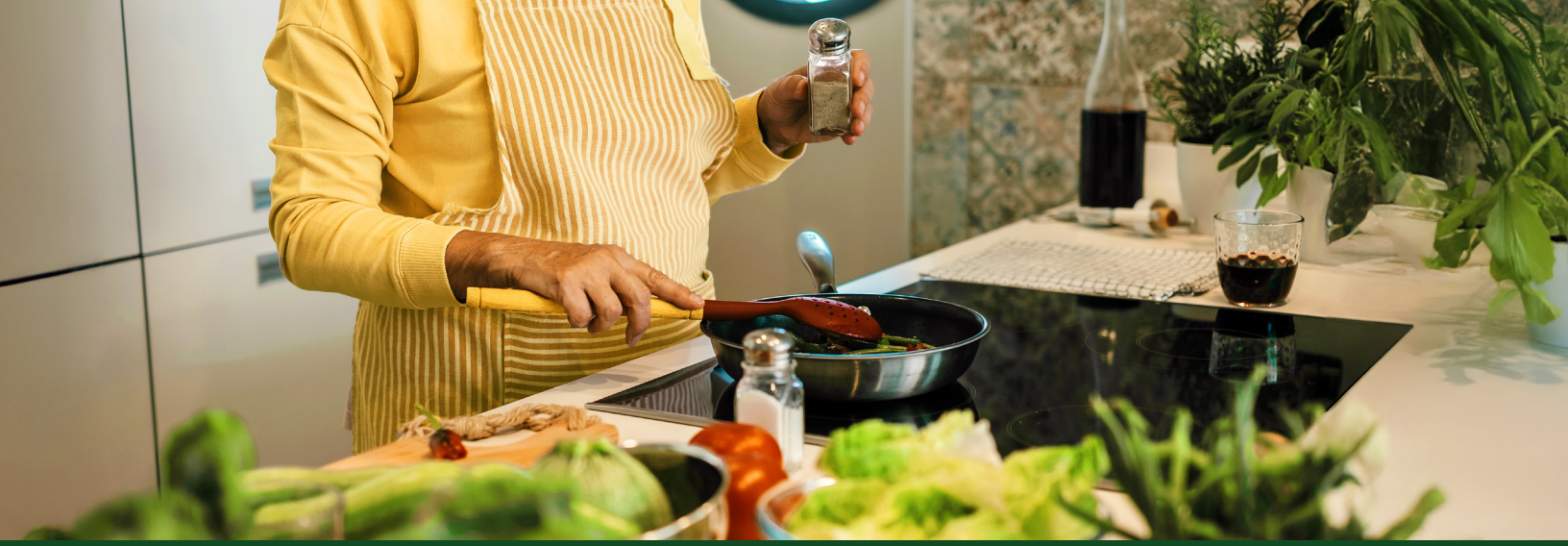


Conclusion

Kentucky's senior population is facing a **complex and deepening food insecurity crisis, shaped by intersecting challenges of poverty, chronic disease, social isolation, and underutilization of available support systems**. Kentucky's seniors come from all walks of life, including caregivers, people living in rural areas, older adults with disabilities, and individuals from diverse racial and ethnic backgrounds. Each group faces unique challenges when it comes to accessing healthy food.

This is a pivotal moment. The philanthropic sector will be needed more than ever. This brief lifts up the creative ways community organizations we partner with are stepping up to meet the moment. These are examples of **community-led initiatives aiming for long-lasting change**, not just for today's older adult generation, but for the many to come.

The brief also highlights **needed investments to improve senior food insecurity**. With the right investments and partnerships, Kentucky could lead the way in creating a future where every senior has reliable access to healthy food to improve health outcomes, reduce healthcare costs, increase dignity, and build stronger, more connected communities.



Calls to Action for the Funder Community

1

Invest in Community-Driven Solutions by funding and scaling programs that center seniors' voices and help preserve their dignity.

- Support models that address both nutrition and social connection.
- Support practical improvements that help older adults access nutritious foods by investing in healthy food markets, transportation options, and expanding broadband access.

2

Invest in Senior SNAP Outreach and Enrollment through community and healthcare organizations that help seniors navigate complex benefits systems, reduce stigma, and expand access to federal and local nutrition programs.

3

Foster Cross-Sector Collaboration

- Invest in and/or join coalitions across healthcare, aging services, agriculture, and philanthropy to create a coordinated "senior food ecosystem" that is resilient, equitable, and sustainable.

4

Support Research and Evaluation

- Fund future research to better identify the extent of senior food insecurity at the county level and address disparities across dimensions of difference.
- Invest and scale best practices such as programs focused on improving nutrition security, emotional well-being, and social connectedness.

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Humana Foundation

About Us

The Humana Foundation is dedicated to fostering health equity by dismantling social and structural barriers to health and healthcare through evidence-based interventions. Our mission is to support diverse communities, including seniors, veterans, and school-aged children, to live healthier, more connected lives. Our approach emphasizes creating emotional connections and promoting nutritional health as part of a holistic care strategy. By engaging directly with communities, we aim to improve health outcomes by listening to and learning from those on the ground.

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