

126303  
~~30628~~

REPORT BY THE U.S.

# General Accounting Office

## Participants Are Satisfied With Mandatory Meal Programs In HUD Projects

The Department of Housing and Urban Development permits owners of section 202 housing projects for the elderly to adopt a mandatory meal policy that requires residents to purchase no more than one meal per day as a condition of occupancy. HUD intends this policy to benefit elderly residents by providing them with balanced meals and an increased opportunity to socialize with others.

GAO found that:

- about 11 percent of the projects that provided us with information have mandatory meal programs,
- most elderly participants like their mandatory meal programs, and
- most managers of projects with mandatory meal programs believe they could not operate a cost-effective meal program on a voluntary basis.

Given that the majority of participants are satisfied with their mandatory meal program and the problems that GAO did identify were predominantly issues of personal preference, GAO does not believe legislative or regulatory action is currently warranted.



GAO/RCED-85-67  
MARCH 5, 1985

031412  
~~03141~~

**Request for copies of GAO reports should be sent to:**

**U.S. General Accounting Office  
Document Handling and Information  
Services Facility  
P.O. Box 6015  
Gaithersburg, Md. 20877**

**Telephone (202) 275-6241**

**The first five copies of individual reports are free of charge. Additional copies of bound audit reports are \$3.25 each. Additional copies of unbound report (i.e., letter reports) and most other publications are \$1.00 each. There will be a 25% discount on all orders for 100 or more copies mailed to a single address. Sales orders must be prepaid on a cash, check, or money order basis. Check should be made out to the "Superintendent of Documents".**



UNITED STATES GENERAL ACCOUNTING OFFICE  
WASHINGTON, D.C. 20548

RESOURCES, COMMUNITY,  
AND ECONOMIC DEVELOPMENT  
DIVISION

B-217752

The Honorable Daniel Patrick Moynihan  
United States Senate

The Honorable Donald W. Riegle, Jr.  
United States Senate

This report responds to your joint letter of November 7, 1983, requesting that we examine mandatory meal programs in the Department of Housing and Urban Development's (HUD's) section 202 housing projects. These projects are financed by HUD, which is authorized by Section 202 of the Housing Act of 1959, as amended, to make direct, low-interest loans to private, non-profit sponsors of projects serving the elderly and handicapped. HUD gives section 202 project owners the discretion to adopt a mandatory meal program that requires project residents to purchase no more than one meal per day as a condition of occupancy. Projects adopting this program are expected to advise prospective tenants of this condition. HUD considers the one-meal-a-day limitation a compromise between (1) its recognition that mandatory meals will benefit most residents by providing balanced meals and an increased opportunity to socialize with other residents and (2) its desire that residents have as much independence as possible.

You asked that our review address (1) how many section 202 projects provide meal services, and how many require mandatory participation, (2) whether HUD's mandatory meal program has generally worked well, and whether complaints can best be resolved through legislation or regulation, and (3) whether section 202 projects could economically run a voluntary meal program, and if so, what the minimum size would be. You also asked that we determine how the cost of a mandatory meal compares with the cost of a meal that meets Department of Agriculture nutrition standards. We agreed not to address this issue because we found that the Department of Agriculture does not have cost data in a format that can be compared with the cost of the meals provided in section 202 projects.

In summary, we found that 512 of the 930 section 202 projects from which we obtained information have meal services; however, only 98 require resident participation as a condition of occupancy. Managers of projects that have mandatory meal programs believe that requiring participation ensures that their elderly residents receive nutritional benefits and have an

increased opportunity to socialize. They further believe that it is the only cost-effective way to operate a program that relies almost entirely on revenue from meal purchases. About 70 percent of mandatory meal program participants told us that they were satisfied with their program. However, some participants were dissatisfied with certain aspects, such as the cost or taste of the meals.

Given that most of the participants were satisfied with the program and the problems we identified were predominantly issues of residents' personal preferences, we do not believe legislative or regulatory action is currently warranted.

#### SCOPE AND METHODOLOGY

To answer your questions regarding the section 202 mandatory meal policy, we agreed to obtain data through three nationwide questionnaires. We sent one questionnaire to all managers of projects with mandatory meal programs, one to a random sample of elderly residents participating in mandatory meal programs, and one to a random sample of managers of projects without mandatory meal programs. Although section 202 housing serves the elderly and handicapped, we agreed with your offices to limit our review to projects with elderly residents.

To determine which projects had mandatory meal programs and which did not, we sent a mailgram questionnaire to the 1,114 section 202 projects identified by HUD records as having elderly residents, and we received 930 usable responses. After identifying projects with mandatory programs, we obtained lists of about 6,900 elderly residents participating in those programs, and sent questionnaires to a random sample of 888 of those residents.

We conducted our review from November 1983 through September 1984, and performed our work in accordance with generally accepted government auditing standards. A more detailed description of our objectives, scope, and methodology is contained in appendix V. Sampling errors for the questionnaire responses discussed in the letter portion of this report are contained in appendix VI.

#### RELATIVELY FEW PROJECTS HAVE MANDATORY MEAL PROGRAMS

As the following table illustrates, relatively few section 202 projects have mandatory meal programs. The table also shows the extent to which other types of meal services are available in the 930 projects that responded to our mailgram.

Meal Services Available  
in Section 202 Projects

<u>Type of meal service</u>	<u>Number of projects</u>
Mandatory meal program operated by project	98
<u>Estimated</u>	
Voluntary meal program operated by project	100
Voluntary meal program operated by public or private organization	<u>314</u>
<b>Total (projects with meals)</b>	<b>512</b>
No meal service available	<u>418</u>
<b>Total</b>	<b><u>930</u></b>

The 98 projects with mandatory meal programs have common characteristics as well as differences. Most serve meals in the project's central dining room and accommodate a range of special diets. However, these programs vary in the number of meals they require residents to purchase each month and the amount they charge for those meals. Programs also differ in whether or not they allow residents to be exempt from the program, offer meal subsidies to lower income residents, and accept food stamps as payment for meals. Appendix II contains additional information on the characteristics of mandatory meal programs.

Like mandatory meal programs, most of the 100 projects that operate their own voluntary programs serve meals in the project's central dining room. However, they do not require resident participation and the number of participants varies considerably from day to day.

The remaining 314 projects where meals are served do not operate their own programs. Instead, public or private organizations generally provide or arrange meal services, and residents often pay only a small portion of the costs. These programs vary widely, and in some projects, more than one program is available. Also, some programs limit participation to certain individuals. For example, home-delivered meals programs generally provide meals to only the elderly who, because of illness, are unable to prepare adequate meals for themselves. These programs are flexible regarding the length of time they will provide meals to a given individual. Appendix I contains

additional information on the variety of meal services available in section 202 housing.

VIEWS DIFFER ON THE SUCCESS OF AND  
NEED FOR MANDATORY MEAL PROGRAMS

We agreed to assess whether the mandatory meal policy has worked well by relying primarily on data obtained from those most affected--mandatory meal program participants--and measuring the policy's success by the extent of their satisfaction. To supplement this information, we also agreed to consider the views of managers of projects that have mandatory meal programs, as well as those without any meal services, regarding the impact that having or not having a meal program has on their elderly residents.

Most residents like mandatory meal programs

We found that most participants were satisfied with the mandatory meal program. Seventy percent liked having the mandatory meal program in their project, 17 percent disliked having the program, and 12 percent<sup>1</sup> expressed neither satisfaction nor dissatisfaction. Moreover, 80 percent of the residents would not want to withdraw from these programs if permitted to do so. Those who did have complaints, however, disliked the very things that others liked. For example:

--Eighty percent of the residents liked eating with other residents; however, 3 percent did not. Seventeen percent were indifferent about eating with others.

--Eighty-one percent of the residents were satisfied with the cost of the meals; however, 19 percent thought the meals were a poor value. (Residents pay an average of \$3.21 per meal.)

--Sixty percent of the residents were satisfied with the taste of the food; however, 20 percent were dissatisfied. The remaining 20 percent were neither satisfied nor dissatisfied.

Some residents' comments showed that they not only liked their mandatory meal program, but also recognized the importance of its nutritional and social benefits. For example, one resident said,

---

<sup>1</sup>Percentages do not total 100 because of rounding.

"Nutrition is a vital need in the aging process. Good meals in pleasant surroundings encourage socializing, make life much more comfortable and easier, and also play an important part in keeping people out of nursing homes for a much longer period."

Not all residents shared this point of view. As one tenant commented, "I feel that as long as I am able to prepare my own meals, that is what I should do. It helps to keep me busy and it is better than sitting around with nothing to do. . . ."

We looked at certain characteristics of meal programs and participants to determine if any of these characteristics were related to participant satisfaction. For example, we considered whether the amount residents were charged for mandatory meals had any relationship to whether they would want to withdraw from their program. We found no such relationship. Similarly, we found no relationship between residents' net incomes and their desire to withdraw from their meal program. We also considered whether certain characteristics of a project, such as its size, were related to residents' satisfaction. Again, we found no relationships.

However, we did find a relationship between residents' ages and their need for and satisfaction with the mandatory meal program. More than twice as many residents 80 years of age and older said that they had great difficulty preparing their own meals as did residents under 80 years of age. Also, of the residents 80 years old and older, 77 percent liked having a mandatory meal program in their project, as compared with 64 percent of the residents aged 62 to 79. Appendix III contains additional information on residents' opinions of their mandatory meal programs.

Managers' opinions differ on residents' need for meal programs

Comments from managers of projects with mandatory meal programs indicated that they generally believe their programs ensure that (1) residents eat at least one balanced meal daily, (2) residents get out of their apartments and socialize with other residents regularly, and (3) management is alerted to possible problems if a resident is not present at mealtime. Typical of managers' comments was the following:

"We strongly feel that the [mandatory] meal ensures that each resident receives the majority of all daily nutritional needs which likely would not be received if they were on their own.

The mandatory noon meal also ensures all [residents] get up, [get] dressed, and go out of their apartment. It encourages socializing, and permits us to monitor the health and well being of the residents discretely."

Although virtually all of the managers of projects having mandatory meal programs believed their residents would be adversely affected if they had no meal program, the majority of managers without any meal program who commented on this issue did not agree. About three-fourths of their comments indicated that not having meals available at their project had little or no effect on their elderly residents primarily for two reasons. Some managers said that their residents were capable of preparing their own meals and, therefore, did not need a meal program. Others said that their residents were able to participate in a meal program at a nearby facility. The remaining one-fourth of the comments indicated that managers believed their residents were negatively affected by the absence of a meal program. Often these managers noted that their residents were being denied nutritional and social opportunities because they had no meal program.

MOST MANAGERS OF MANDATORY MEAL PROGRAMS BELIEVE THEY COULD NOT RUN AN ECONOMICAL VOLUNTARY PROGRAM

Ninety-two percent of the managers of projects with mandatory meal programs believe that they could not provide meals on a voluntary basis that would be similar to those they currently provide. According to most of these managers, if their program was voluntary, the number of meals purchased would vary too much from day to day for them to be able to operate a cost-effective meal program. In fact, 89 percent said that they could not tolerate more than a 10-percent reduction in the number of meals purchased before they would have to discontinue their program. We found that projects operating their own voluntary meal program generally experience more than a 10-percent variation in participation. In one of the more extreme cases, daily participation has varied from as few as 40 to as many as 120 residents.

Mandatory meal program managers generally believe that if they made participation voluntary, their budgets could not cover the loss that would result from inconsistent levels of participation. According to information obtained from these managers, 94 percent of their programs were operating either at a profit of less than 10 percent or at a loss.

Although voluntary meal programs experience profits and losses similar to those of mandatory programs, responses to our



questionnaires showed that they can better tolerate inconsistent levels of participation because their budgets are not as dependent on income from meal purchases. Ninety-six percent of the average mandatory meal program's revenue is supported by meal purchases, making these programs very dependent on consistent participation. On the other hand, only 71 percent of the average voluntary meal program's revenue is derived from meal payments. Other income sources, such as project sponsor funds, make up the remaining 29 percent.

In addition to the information we collected, HUD surveyed six voluntary meal programs in New England and found that all had some unique circumstance that enabled them to operate a voluntary program by cutting their costs, thereby reducing their dependency on income from meal purchases. For example, at one project, a retired school cook prepared meals without receiving compensation. At another project, a retired chef not only volunteered his cooking services, but managed the project's meal program at no charge. Appendix II contains additional information regarding meal programs' cost-effectiveness.

#### CONCLUSIONS

Relatively few section 202 projects for the elderly have mandatory meal programs, and most residents participating in these programs would not withdraw even if they could. Although some residents voiced complaints about their meal program, such as not liking the taste of the food served, the majority were satisfied with every aspect about which we inquired.

Most comments from managers of projects with mandatory meal programs indicated that they believe their meal programs provide important health and social services that their elderly residents might otherwise not receive. Moreover, they maintain that since their programs are almost entirely dependent on income from meal purchases, the only way they can ensure a consistent level of meal purchases, and thus operate a cost-effective program, is to require resident participation. Given the day-to-day variation in participation that occurs in voluntary programs, operating mandatory programs on a voluntary basis may not be a viable option.

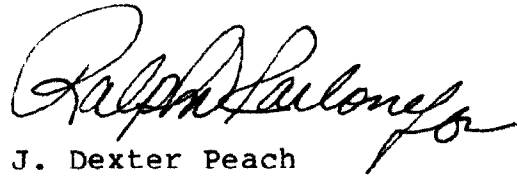
Because (1) the majority of residents are satisfied with mandatory meal programs, (2) the problems we identified in projects operating these programs are predominately issues of participants' personal preferences, such as dissatisfaction with the taste of the meals, (3) tenants are informed of these programs and their costs before signing a lease, and (4) reduced participation in mandatory meal programs could undermine the ability of those projects to provide meal services, we do not believe legislative or regulatory action is currently warranted, nor

would it be effective, in addressing the personal preference issues that residents raised.

- - - -

The appendixes in this report provide more detailed information on the matters you asked us to address. In addition, to illustrate the type of meals served in mandatory meal programs, we included examples of several menus. (See app. IV.)

As agreed with your offices, we are sending copies of this report to the appropriate House and Senate committees; the Secretary of Housing and Urban Development; the Director, Office of Management and Budget; and other interested parties. We are also sending copies to managers of projects with mandatory meal programs and will make copies available to others on request.



J. Dexter Peach  
Director

## C o n t e n t s

	<u>Page</u>
APPENDIX	
I MEAL PROGRAMS AVAILABLE IN SECTION 202 PROJECTS	1
Mandatory meal programs	3
Meal programs not requiring participation	3
II CHARACTERISTICS AND BENEFITS OF MANDATORY MEAL PROGRAMS	7
Managers differ on the need for mandatory meal programs	8
Mandatory meal program managers believe participation must be required to be cost-effective	12
Comparison of mandatory meal programs' practices and policies	14
III MOST ELDERLY PARTICIPANTS ARE SATISFIED WITH THE MANDATORY MEAL PROGRAM	18
Participants generally like mandatory meal programs	18
Oldest participants are most often satisfied with mandatory meal programs	22
Characteristics of mandatory meal program participants	23
IV OVERVIEW OF MANDATORY MEAL PROGRAM MENUS	25
V OBJECTIVES, SCOPE, AND METHODOLOGY	30
VI SAMPLING ERRORS FOR SELECTED QUESTIONNAIRE RESPONSES	35

### ILLUSTRATIONS

Meal programs available in section 202 projects	2
Perceptions of elderly residents' abilities to prepare their own meals	10
Mandatory meal programs' profit and loss margins	13
Sources of mandatory meal programs' operating budgets	14
Availability of special diets	15
Degree of participant satisfaction with certain program benefits	19

	<u>Page</u>
Participants' opinions of quantity of food served	20
Participants' opinions of amount charged for meals	20
Degree of participant satisfaction with meals' taste and variety	21
Participants' opinion of eating with other residents	22
Participants' opinion of taste of meals	22
Degree of participants' difficulty performing certain tasks	23
Participants' monthly incomes	24
Sampling and response rates for mailgram questionnaires sent to projects with elderly populations	32
Universe and response rates for questionnaires sent to managers of projects with mandatory meal programs	32
Sampling and response rates, on a project basis, for questionnaires sent to elderly residents participating in mandatory meal programs	32
Sampling and response rates for questionnaires sent to elderly residents participating in mandatory meal programs	33
Sampling and response rates for questionnaires sent to managers of projects without mandatory meal programs	33

#### ABBREVIATIONS

CHSP	Congregate Housing Services Program
GAO	General Accounting Office
HUD	Department of Housing and Urban Development

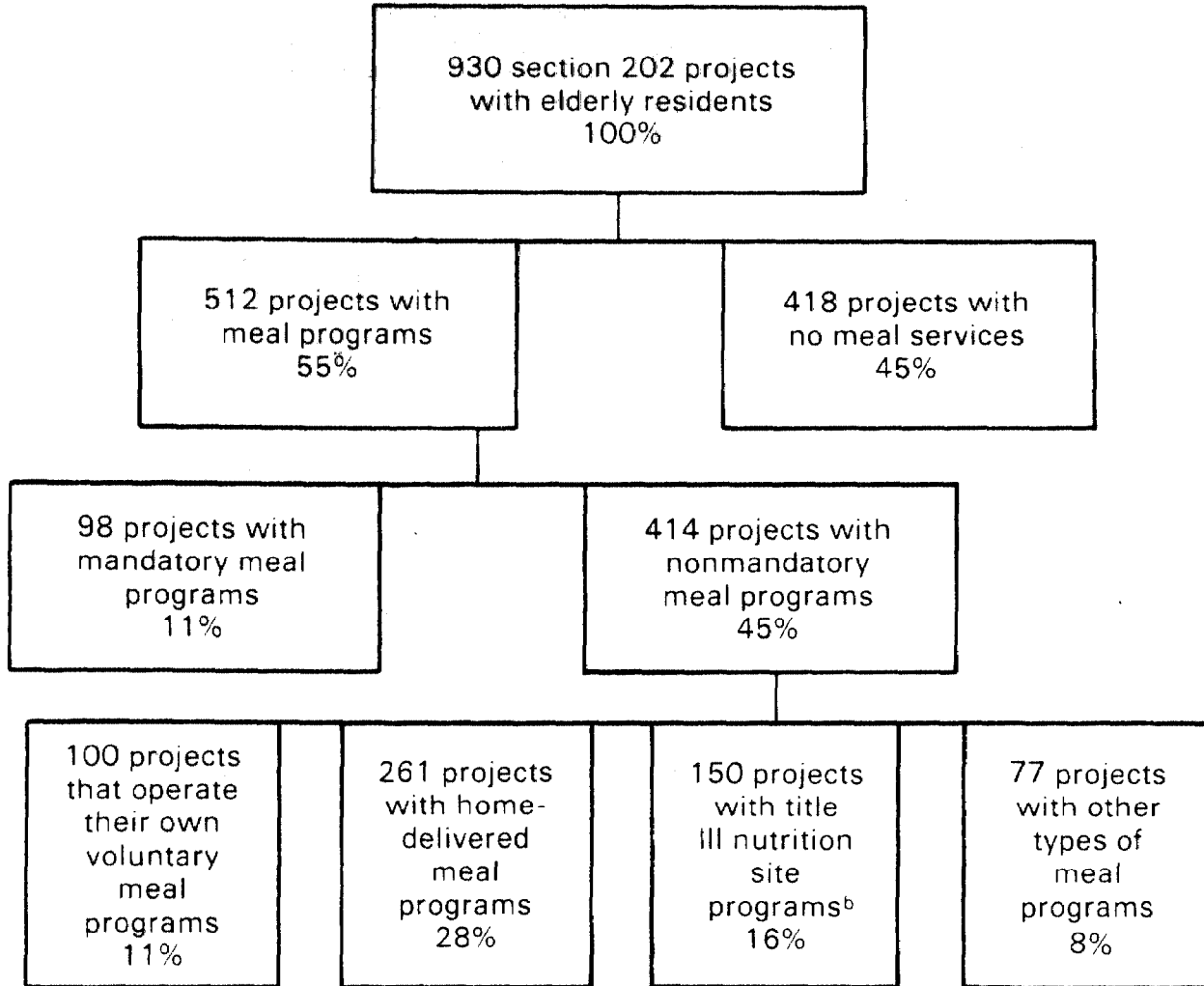
MEAL PROGRAMS AVAILABLE IN SECTION 202 PROJECTS

About half of the section 202 facilities for the elderly have meal programs although they vary considerably. About 11 percent have programs that require resident participation as a condition of occupancy. Most projects with meal programs, however, have no such requirement. In these projects, one of several public or private entities provide or arrange meals or else the project operates its own meal program with voluntary resident participation.

Section 202 projects that operate their own meal programs on a mandatory basis generally include most of their programs' costs in residents' meal payments. On the other hand, in projects where meal services are provided or arranged by a public or private entity, participants generally make only small contributions to the cost of the meals.

The range of meal services available in section 202 projects is summarized in the following chart.

**Meal Programs Available in  
Section 202 Projects<sup>a</sup>**



<sup>a</sup> We initially sent mailgram questionnaires to 1,114 projects identified by HUD as having elderly residents and received 930 usable responses. The percentage noted in each box represents each meal program's relationship to the 930 responding projects. From the mailgram responses, we identified 98 projects with mandatory meal programs. The number of projects in the remaining categories are statistically valid estimates based on responses to a subsequent questionnaire. The number of projects exceeds 930 because some projects have more than one meal program.

<sup>b</sup> Title III of the Older Americans Act of 1965, as amended, authorizes nutrition site programs which provide meals to elderly persons. (See p. 5 for additional information.)

### MANDATORY MEAL PROGRAMS

HUD allows managers of section 202 projects to operate mandatory meal programs. Specifically, HUD's section 202 handbook permits projects to charge residents for no more than one meal per day as a condition of occupancy, provided HUD determines that the charge is reasonable.

Only 98 projects nationwide, or about 11 percent of those that provided us with information, have chosen to operate their meal program on a mandatory basis. According to the project managers, most of their programs are operating at close to break-even with almost all of their operating budgets coming from meal purchases. The majority of these projects require that residents purchase one meal a day, 5 to 7 days a week. Sixty percent of the required meals are dinner, although about one-third are lunch. All but one project serve meals in a communal setting in the project's dining room. The average charge for a meal at these projects is \$3.21. (See app. II for additional details concerning mandatory meal programs.)

### MEAL PROGRAMS NOT REQUIRING PARTICIPATION

About 45 percent, or 414, of section 202 projects have some type of meal program that does not require resident participation. These programs fall into two general categories. The first includes programs where, like the mandatory meal program, the section 202 project manages and operates its own meal program. However, the key distinction between this type of program and a mandatory one is that resident participation is voluntary -- a resident need not participate in the meal program in order to live in the project.

The second category, involving the majority of these projects, includes meal programs that are arranged or provided by a public or private entity other than the section 202 project. For example, the meal program might be federally funded or it might be funded or arranged for by a state or local agency or a religious organization. Often, in these programs, residents purchasing meals pay only a small portion of the meal's cost.

### Voluntary meal programs

One hundred projects, or about 11 percent of the section 202 projects operate their own meal program on a voluntary basis. The key difference between these voluntary programs and mandatory programs is that there is no resident participation requirement. Also, about 96 percent of the average mandatory program budget, as opposed to about 71 percent of the average

voluntary program budget, is funded by meal payments. In addition to meal payments, funds to operate these programs come from project sponsors--generally religious organizations, fraternal orders, or senior citizen groups.

Projects operating their own voluntary meal programs have about the same number of residents as projects operating mandatory programs. However, the elderly residents living in projects where meal programs are voluntary are, on the average, younger than those living in projects with mandatory programs--74 versus 78 years old.

### Public and private meal programs

Brief descriptions follow of the principal public and private programs that provide meal services to residents in section 202 projects.

#### Home-delivered meals programs

Home-delivered meals programs, commonly referred to as "meals on wheels," encompass a wide variety of services that deliver meals to elderly persons who, through illness or isolation, are unable to prepare adequate meals for themselves. Generally, these programs are funded in one of two ways. Some are federally funded through Title III of the Older Americans Act of 1965, as amended, while the remainder are generally sponsored by private organizations such as churches or other civic groups.

At the time of our review, these programs were delivering meals to certain elderly residents at 261, or about 28 percent of section 202 projects. However, home-delivered meals programs are by no means restricted to section 202 facilities. In fact, tens of thousands of elderly persons nationwide receive meals through these programs.

These meal programs are flexible regarding the length of time they will provide meals to a given individual. Since most communities have more elderly homebound people that need delivered meals than the programs can serve, each program establishes its own guidelines for determining who can participate. State and area agencies establish participation criteria for the federally funded home-delivered meals programs; however participants must be at least 60 years old. Generally, no minimum fee is required in these programs, and participants may contribute if and what they wish. Each nonfederally funded meals on wheels programs develops its own criteria for participation.



Title III nutrition sites

About 16 percent, or 150, of section 202 projects are part of the nutrition site program, overseen by the Administration on Aging, Department of Health and Human Services. The program, which provides meals to elderly persons in congregate settings, is also authorized by Title III of the Older Americans Act of 1965, as amended. Funds under this program are awarded to state agencies on aging who then allocate funds to area agencies on aging based on economic need. The area agencies, in turn, plan and coordinate meal delivery, generally contracting with meal service providers. A variety of settings serve as nutrition sites, including churches, schools, and section 202 projects.

Residents of section 202 projects who wish to participate in their project's nutrition site program need only meet an age requirement--they must be at least 60 years old or have a spouse that age. Typically, these programs serve meals at lunchtime, 5 days a week. Paid and volunteer workers prepare, deliver, and serve the meals. Elderly participants are not required to pay for the meals but may voluntarily contribute what they wish. A 1983 study prepared for the Administration on Aging showed that the average cost per meal was \$4.09, with program participants contributing an average of \$.57 per meal.

Other meal services

A variety of other meal programs are available at 77, or about 8 percent of section 202 projects. Among these are HUD's Congregate Housing Services Program (CHSP); state-, county-, and city-sponsored programs; and a number of one-of-a-kind programs.

CHSP is a demonstration program authorized and funded under Title IV of the Housing and Community Development Amendments of 1978. The program provides funds for meals and optional support services, such as transportation and housekeeping, to section 202 projects and public housing authorities where elderly and handicapped persons reside. According to HUD, there are 63 such programs nationwide--31 of which are found in section 202 projects. Projects receiving CHSP funds must serve at least two onsite meals a day, 7 days a week. Participation in the program is generally limited to no more than 20 percent of a project's total resident population, with individual participants being selected based on their degree of frailty and need for program services. CHSP participants pay what they can afford for meals based on a sliding fee schedule. However, other residents not participating in the overall program may purchase meals at their full costs.

State-, county-, and city-sponsored programs provide a variety of meal services to residents in section 202 projects. For example, at one project, a county community action agency provides meals daily to about 60 residents out of a population of 105. The average cost for these meals is about \$3, with residents contributing about fifty cents, and the remainder being covered by a combination of federal and state funds and voluntary contributions. Another project receives federal and state subsidies and private donations to finance its twice-a-week meal program. About one-third of this project's 80 residents have chosen to participate in the meal program.

Similarly, a number of one-of-a-kind programs, sponsored by private and religious organizations, provide meals to section 202 residents. For example, at one project, a private vocational center provides meals to elderly residents for a small fee. At another project, an independent person charges \$3 per meal to prepare meals outside the facility and deliver them to any resident who orders them. In yet another project, a church group provides meals to several residents.

CHARACTERISTICS AND BENEFITS OF  
MANDATORY MEAL PROGRAMS

This appendix, for the most part, summarizes mandatory meal program managers' responses to our questionnaire and contrasts their answers with certain information obtained from managers of projects without mandatory meal programs. We sent questionnaires to managers of the 98 section 202 projects we identified as having mandatory meal programs. Ninety managers completed the questionnaire, giving us a response rate of 92 percent. We also sent a different questionnaire to a randomly selected sample of 246 managers of the section 202 projects that either have some of their residents participating in one of the meal services described in appendix I or have no meal program at all. Of the 246 managers, 217 responded, yielding a response rate of 88 percent.

We found that most section 202 projects that operate mandatory meal programs do so out of concern for their elderly residents' needs, according to managers of projects that have these programs. Improved nutrition and a greater opportunity to socialize are among the benefits a mandatory meal program can provide. Some managers also explained that the elderly often lose their ability or inclination to cook as they grow older. They believe that if it were not for their project's mandatory meal program, some of their residents might have to move to a nursing home where meal services are available. On the other hand, the majority of managers of projects without a meal program say that the absence of such a program does not adversely affect their elderly residents, although their reasons differ. Some believe their residents do not need a meal program because most are capable of preparing their own meals. Others believe a meal program is beneficial, but their residents are able to participate in one at a nearby facility.

Most managers of projects with mandatory meal programs further believe that the only way to operate their meal programs cost effectively is to require resident participation, thereby ensuring a consistent level of meal purchases. Based on information from these managers, very few mandatory meal programs (1) are operating at a profit, (2) could tolerate a reduction in the number of meals purchased, or (3) could provide similar meals to residents on a voluntary basis.

Although similarities exist among mandatory meal programs, such as dining in congregate settings and preparing meals in-house, there are differences. For example, programs vary in the amount they charge for meals, whether they offer meal subsidies to residents in financial need, and whether they permit

residents to be exempt from the program under certain conditions.

MANAGERS DIFFER ON THE NEED  
FOR MANDATORY MEAL PROGRAMS

Comments from managers of projects with mandatory meal programs indicate that they generally believe their programs provide important social and health benefits to their elderly residents. Furthermore, virtually all of these managers believe their elderly residents would be unfavorably affected if there were no meal program available. On the other hand, the majority of managers of projects that have no meal program believe that the absence of such a program has little impact on their elderly residents. The two primary reasons they cited were their residents' ability to (1) prepare their own meals or (2) obtain their meals elsewhere.

Many managers of mandatory programs also believe that as residents grow older, mandatory meal programs become increasingly beneficial to their residents because, generally, their ability to prepare their own meals decreases. Moreover, these managers believe that even if residents maintain their ability to cook for themselves, they often lose their desire to do so. Consequently, these managers believe that for many elderly residents who are beginning to fail, the mandatory meal program may be a critical factor in maintaining some degree of independence and staying out of nursing homes.

Mandatory meal program managers  
cite health and social benefits

Virtually all (98 percent) of the managers of projects having mandatory meal programs believe their elderly residents would be adversely affected if their project had no meal program. Many managers provided comments emphasizing not only the nutrition-related advantages of the mandatory meal program, but the social benefits as well. Managers also pointed out that requiring participation gives management the opportunity to monitor residents' health--a skipped meal serves as a signal that a resident may need assistance. The following comments are just a few examples of managers' views on the importance of the mandatory meal program and the benefits it can provide.

From a project manager in Massachusetts:

"The mandatory meal program was initiated at this facility as a result of our experience in operating another elderly facility where no meal program was offered. Our observation was that a majority of the elderly would greatly benefit

from the social as well as nutritional benefits of such a program . . . The demonstrated benefits of the program both nutritionally and socially indicate that it should be continued . . . ."

From a manager in South Carolina:

"We strongly feel that the [mandatory] meal ensures that each resident receives the majority of all daily nutritional needs which likely would not be received if they were on their own. The mandatory noon meal also ensures all [residents] get up, [get] dressed, and go out of their apartment. It encourages socializing, and permits us to monitor the health and well being of the residents discretely."

From a manager in Pennsylvania:

"For some residents, the dinner hour is the only time they leave their apartments. This is an opportunity for them to socially interact with others as well as to eat at least one nutritionally balanced meal daily . . . ."

Managers with no meal program have different views on resident impact

We also asked managers of section 202 projects without meal programs to comment on the effect that the lack of a meal program has on their elderly residents. About three-quarters of the managers who commented said that having no meal program had little or no effect on their elderly residents. Some managers explained that there is little need for a meal program because many residents can cook for themselves. Typical of these comments was the following: "Most of the residents at this project are very capable of doing their own meal preparations, so it is not necessary for us to have a meal program at this time." On the other hand, other managers believed that their residents were not affected by the lack of a meal program in their project, not because they did not need meal services, but because they were able to participate in a meal program at a nearby facility. For example, residents of projects that do not have meal programs can sometimes participate in a neighborhood nutrition site program at a community facility close to their own project.

The remaining one-fourth of the comments indicated that managers believe the absence of a meal program in their project has a negative effect on some or all of their elderly residents, particularly regarding nutrition and socialization. As one manager from a project in Arkansas that has no meal program noted:

"The lack of a meal program contributes to numerous problems for the elderly residents . . .

(1) Health related: nutrition deficiencies, irregular and skipped meals, improper diet for prescription medication and medical condition, improperly prepared food, lack of food due to finances; (2) Social isolation: eating alone; (3) Fire Risk: unattended food cooking and incorrect operation of cooking appliances."

Managers believe program aids elderly who are unable or lack desire to cook

We asked managers of projects that operate mandatory meal programs, as well as those that operate their own voluntary meal programs, to offer opinions as to the percentage of their elderly residents who would have difficulty preparing their own meals because of health or physical problems. Managers of mandatory programs generally believed their residents would have more difficulty preparing meals than the managers of projects whose meal programs are voluntary. We also asked elderly residents who participate in mandatory meal programs to tell us how much difficulty they have in preparing their own meals. Their opinions, as well as the two groups of managers', are compared in the following table.

Perceptions of Elderly Residents' Abilities To Prepare Their Own Meals

Degree of residents' difficulties	Mandatory program managers' views	Voluntary program managers' views	Elderly residents' own views
	----- (percent) -----		
No difficulty	26	45	65
Some difficulty	37	23	23
Great difficulty	37	32	12

The above table shows that elderly participants in mandatory meal programs perceive themselves as being far more capable of preparing their own meals than their project managers believe them to be. This may be because managers are underestimating their elderly residents' capabilities or because the elderly are denying their own real limitations.

In addition to managers' general perceptions that their residents would have difficulty preparing meals, many managers expressed concerns that their residents may lack the desire or inclination to prepare nutritious meals. One manager related her project's experience with its recently established mandatory meal program. Since most of the residents lived in the project prior to its mandatory policy, only a small number of recent residents are required to participate, yet many others do so voluntarily. Her story, which follows, is similar to several others told to us.

"We have, from experience, become well aware that many of the residents, though financially and physically able, are not preparing nutritious meals for themselves. A case in brief: one of our residents was just admitted to a hospital, to the surprise of the family, due to a chronic case of malnutrition. When told the cause of her illness, she stated that she just could not bring herself to adequately cook just for herself. . . ."

Other managers of projects with mandatory meal programs also referred to their residents' lack of desire to cook nutritional meals. For example, a manager from Ohio made the following comment:

". . . Although some of our residents are capable of preparing their own meals they prefer not to be bothered with shopping, preparing the meal, eating alone, and cleaning up. It should also be noted that some residents may prepare meals that are not nutritionally balanced or snack rather than prepare a meal . . . ."

Some project managers view the mandatory meal program as an alternative to nursing home care. These managers believe that because of the deteriorating effect aging can have on one's ability or inclination to cook, some of their residents need to have a meal program in their project. If one were not available, these residents might have to move to a facility, such as a nursing home, where a meal service is provided. The following comment from a project manager in Pennsylvania illustrates this view.

"Many residents who would have a great deal of difficulty preparing their own dinners would not be able to remain in our building without this one supportive service . . . . Economically, it is less expensive to have a mandatory meal program than to financially support the cost of nursing care."

The belief that a meal program can make the difference in whether or not an elderly person requires nursing home care was expressed not only by managers of projects with mandatory meals, but also by some project managers having no meal program at all. For example, one of these managers commented:

"We have quite a few [residents] that need a well balanced nutritious meal desperately. Many are ending up in nursing homes just because of improper nutrition. If one projects into the future, Medicaid and Medicare can save a bundle if proper meals are given while they live independently."

MANDATORY MEAL PROGRAM MANAGERS  
BELIEVE PARTICIPATION MUST BE  
REQUIRED TO BE COST-EFFECTIVE

Operating a meal program on a mandatory basis ensures consistent and maximum participation which, in the opinion of managers who operate these programs, is the only way to run a cost-effective program. Managers indicate that the vast majority of mandatory meal programs (1) could not offer meals on a voluntary basis that would be similar to those they currently provide, (2) could tolerate little, if any, reduction in the number of meals they serve, and (3) are operating at close to break-even.

Ninety-two percent of the project managers with mandatory meal programs said that they could not provide similar meals on a voluntary basis primarily because the number of meals purchased would vary too much from day to day for the program to be cost-effective. Eighty-nine percent of the managers said that they could not tolerate a meal reduction over 10 percent, and 64 percent said that their program could not tolerate any reduction. Only 11 percent of the managers thought their programs could tolerate more than a 10-percent reduction in the number of meals purchased and still operate.

This concern about variations in meal purchases seems justified based on responses from managers who operate their own meal program on a voluntary basis. Most indicated that participation varied by more than 10 percent in their voluntary meal programs. In one of the more extreme cases, daily participation varied from as few as 40 to as many as 120 residents.

Most managers of mandatory meal programs believe that if they allowed their residents to participate voluntarily, their budgets would not be able to absorb losses that would result from inconsistent levels of participation. Managers told us that 94 percent of their meal programs were operating either at



a loss or at a profit of less than 10 percent during their most recent annual accounting period. Similarly, 95 percent of projects running their own voluntary meal programs were operating at either a loss or at a profit of less than 10 percent. The following table provides a more detailed breakdown of the extent of profits and losses among mandatory meal programs.

Mandatory Meal Programs'  
Profit and Loss Margins

<u>Profit/loss margin</u>	<u>Programs</u> <u>(percent)</u>
10% loss or more	9
1% to 9% loss	24
0% (break-even)	31
1% to 9% profit	30
10% profit or more	<u>6</u>
Total	<u>100</u>

Although voluntary meal programs were tolerating inconsistent levels of participation with profits or losses similar to those of mandatory programs, they could do so because their budgets were generally not as dependent on income from meal purchases. Only 71 percent of the average voluntary meal program's revenue was derived from meal payments, with other income sources, such as project sponsor funds, comprising the remaining 29 percent. In addition to the information we collected, HUD surveyed six voluntary meal programs in New England and found that all had some unique circumstance that enabled them to cut costs and operate a voluntary program. For example, at one project, a retired school cook prepared meals without receiving compensation. At another project, a retired chef not only volunteered his cooking services, but managed the project's meal program at no charge.

On the other hand, 96 percent of the average mandatory meal program's revenue was supported by meal purchases, making their budgets more dependent on consistent participation. The following table provides the average breakdown, by funding source, of a mandatory meal program's operating budget.

Sources of Mandatory Meal Programs'  
Operating Budgets

<u>Budget sources</u>	<u>Percentage of operating budget</u>
Elderly residents who purchase mandatory meals with cash	90
Non-elderly residents who purchase mandatory meals	3
Elderly residents who purchase mandatory meals with food stamps	2
Non-residents (guests) who purchase meals	1
Project sponsor's funds	2
Other	<u>2</u>
Total	<u>100</u>

COMPARISON OF MANDATORY MEAL PROGRAMS' PRACTICES AND POLICIES

Project managers' responses to our questionnaire revealed both similarities and differences in mandatory meal program practices and policies. Most meals provided in projects requiring participation are prepared in a project's central kitchen, served in its central dining room, and can accommodate a variety of special diets. Programs vary, however, in the number of participants, the number of meals they require residents to purchase, and the amount they charge for those meals. In addition, programs differ in whether or not they (1) accept food stamps as payment for meals, (2) offer meal subsidies to residents in financial need, and (3) exempt any tenants from the meal program.

Most mandatory meals are prepared in-house and served in a congregate setting

Ninety-one percent of the meals served in mandatory meal programs are prepared in the projects' central kitchens. Only 9 percent hire a caterer or contractor who brings already prepared meals into the project. Virtually all (99 percent) of the projects have a central dining room and can therefore serve meals in a congregate, or group, setting. According to managers, only one project had a central kitchen, but no central dining room.

Mandatory meal programs can satisfy a variety of diets

Meals at most projects are prepared to accommodate a variety of dietary needs and almost all projects have nutritionist or dietitian services available for planning menus. The following table shows the percentage of mandatory meal programs that can accommodate various types of diets.

Availability of Special Diets

<u>Type of special diet</u>	<u>Mandatory meal programs accommodating diets (percent)</u>
Low sodium	97
Low sugar	89
Low cholesterol	71
Vegetarian	50
Kosher	20
Other <sup>a</sup>	21

<sup>a</sup>"Other" types of diets include soft or pureed food and bland food.

Number of elderly residents participating in these programs

The number of elderly residents participating in projects' mandatory meal programs ranges from 11 to 400, with 131 being the average. According to managers, on average, 91 percent of their elderly residents eat all or almost all of the meals for which they pay, 9 percent eat most of the meals, and less than 1 percent<sup>1</sup> eat few or none of the meals for which they pay. Similarly, according to the residents, only 2 percent eat none of the meals for which they pay.

Number of required meals and their costs

Projects differ in the number of meals they require residents to purchase, the types of meals they offer, and the amount they charge for these meals. Most (85 percent) of the projects with mandatory meal programs require their residents to purchase between 20 and 30 meals each month. Four percent require residents to purchase fewer than 20 meals monthly and 11 percent require that residents purchase either 60 or 90 meals each month.

<sup>1</sup>Percentages do not total 100 because of rounding.

Although HUD's current policy states that projects may charge residents for no more than one meal a day, HUD does permit some exceptions. We found that four projects require that their residents purchase two meals a day, and five require that residents purchase three meals a day. In seven of these nine projects, however, residents have no kitchens in their apartments and, therefore, HUD permits that additional meals be required. One of the nine projects has very few apartments with kitchens, and only the one remaining project has a kitchen in every apartment. Nevertheless, according to the manager of that particular project, the residents requested that the meal program provide more than one meal a day.

Projects having mandatory meal programs charge an average of \$3.21 for a main meal. Sixty percent of the time it is the dinner meal that is mandatory. According to project managers, the average charge for dinner is \$3.45; however, prices vary between projects, with most (92 percent) falling between \$2 and \$5. Thirty-six percent of the time lunch is required and the average price for this meal is \$2.87. Again, prices vary, with most (93 percent) of the projects charging between \$1.50 and \$4 per lunch. Only 4 percent of mandatory meals are breakfasts, and their prices range from \$1 to \$2.90, with \$1.80 being the average price. (See app. IV for several examples of projects' menus and meal costs.)

Some projects accept food stamps  
or offer subsidized meals

Forty percent of the mandatory meal programs have policies of accepting food stamps as payment for meals, but less than half of these projects had elderly residents who were using them at the time of our review. Furthermore, an average of only five residents at each of these projects were using food stamps. Sixty percent of the projects do not accept food stamps.

Twenty-nine percent of the mandatory meal programs have policies of subsidizing elderly residents' meals; however, only about two-thirds had residents who were receiving subsidized meals at the time of our review. An average of 19 residents at each of these projects were receiving this assistance. Seventy-one percent of the projects do not offer any meal subsidies.

Methods for determining which elderly residents receive subsidized meals vary, as do the sources of funds for the subsidies. However, most subsidies are reserved for residents in financial need. For example, some projects consider a resident's income after subtracting rent and the mandatory meal fee. If the remaining monthly income is below a certain level--e.g., \$120--then the resident is eligible for a meal subsidy. For the

most part, funds for meal subsidies come from the project sponsor or contributions from churches and other charitable organizations.

Some mandatory meal programs allow exceptions

Although less than half of the mandatory meal programs allow some elderly residents to be exempt from the program, most give rebates or credits for meals not eaten.

Specifically, 42 percent of the programs permit exemptions, with an average of about six elderly residents exempt in each project. Most frequently, these residents are permitted exemptions due to their special medical or dietary needs. However, some projects exempt residents because they (1) lived in the project prior to its adoption of a mandatory meal policy, (2) cannot afford to pay, or (3) have another commitment at meal time, such as an outside job.

Eighty-five percent of the mandatory meal programs give rebates or credits for meals not eaten. Eighty-one percent of the managers said that their programs give rebates for meals missed due to hospitalization; 71 percent give rebates for absences due to vacation; 47 percent give rebates for meals missed due to illness; and 17 percent give rebates for other reasons, such as extensive absenteeism, regardless of the reason. Interestingly, the smaller the project, the more likely it was to give rebates for meals missed due to hospitalization or vacation.

MOST ELDERLY PARTICIPANTS ARE SATISFIEDWITH THE MANDATORY MEAL PROGRAM

The majority of elderly residents participating in mandatory meal programs were satisfied with their meal program. Their satisfaction extended from the meal itself--taste, variety, quantity, and value--to other benefits the meal program can provide--eating with other residents, having someone else prepare their main meal, and generally improving their day-to-day lives. Furthermore, among older participants, even more were satisfied with many aspects of the meal program.

The information presented in this appendix was obtained from questionnaires sent to a stratified random sample of 888 elderly residents. We received 699 usable responses for a response rate of 79 percent. These responses are projectable to the universe of about 6,900 elderly residents of section 202 projects who participate in mandatory meal programs. The average participant was 78 years old, and over half had monthly net incomes of less than \$600. Also, most had participated in their project's mandatory meal program for between 2 and 5 years.

PARTICIPANTS GENERALLY LIKE  
MANDATORY MEAL PROGRAMS

Seventy percent of the elderly residents who live in a section 202 project and participate in its mandatory meal program liked having the program in their project. Twelve percent were indifferent about having the mandatory meal program, and the remaining 17 percent<sup>1</sup> disliked having the program. Moreover, 80 percent of the participants, if given the opportunity to withdraw from their mandatory meal program, said that they would not want to do so. Conversely, 20 percent said that they would withdraw if given the option.

Most like benefits that  
accompany meal program

The aspects of the mandatory meal program that the greatest number of residents liked were not related to the food served, but rather to other benefits they derive. For example, the majority of participants liked eating with other residents and the fact that someone else was preparing their meals, as shown in the following table.

---

<sup>1</sup>Percentages in this appendix may not total 100 because of rounding.

Degree of Participant Satisfaction  
with Certain Program Benefits

In general, how much do you like or dislike. . .	Like	Neither like nor dislike	Dislike
	----- (percent) -----		
eating with other residents?	80	17	3
having someone else prepare your meals?	81	11	8

Furthermore, 75 percent of the participants said that the meal program improved their day-to-day lives, 8 percent said that it made life worse, and 16 percent said that it had no effect on their day-to-day lives. The following are a few examples of residents' comments reflecting how important these aspects of the program were to them.

From a resident in a Massachusetts project:

"Meal-time, to me, is a sociable occasion. I enjoy being with other residents--chatting, laughing, sharing. I feel that I am a part of a large, congenial family and feel enriched by it. Perhaps one could say it's good 'therapy', especially for those whose activities are limited. When I moved here, I really didn't want the meal program. Now, I am so glad we have it!"

From a resident in another Massachusetts project:

"Nutrition is a vital need in the aging process. Good meals in pleasant surroundings encourage socializing, make life much more comfortable and easier, and also play an important part in keeping people out of nursing homes for a much longer period."

From a resident in a Minnesota project:

"Living all alone in an apartment, I look forward to meeting with my friends and having our main meal together."

Although most participants indicated that they liked these aspects of the meal program, not all participants shared their

enthusiasm. In some cases the program aspects that some participants liked, such as not having to prepare their own meals, were the very things other participants disliked. For example, a resident from the same Minnesota project commented:

"I feel that as long as I am able to prepare my own meals, that is what I should do. It helps to keep me busy and it is better than sitting around with nothing to do. A person should be independent as long as possible."

And, from a resident in a New Jersey project:

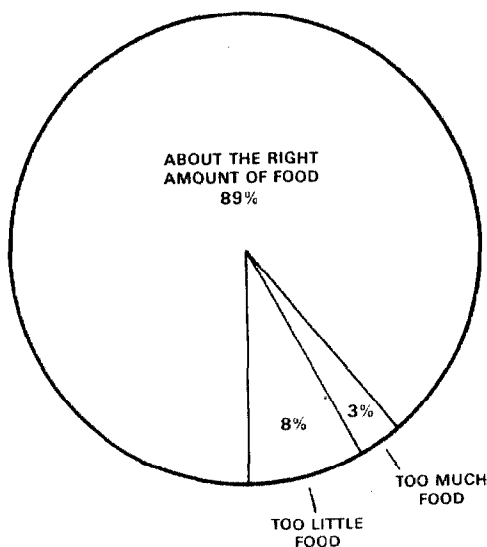
"Since I have a kitchen with all necessary conveniences, I would prefer to buy and cook my meals to my own satisfaction."

Of the 8 percent who said that the mandatory meal program made their day-to-day lives worse, one resident had this to say: "Management insists on our presence at the noon meal which totally destroys our days. We all have our own lives to live as we wish. We do not wish to be prisoners of a meal program."

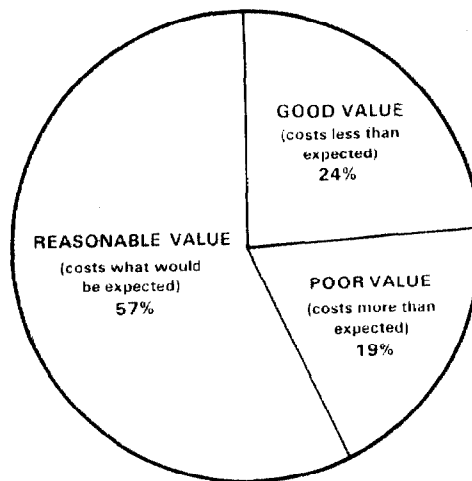
Most like the meals served

Most residents were also satisfied with the quantity, cost, taste, and variety of the meals served in the mandatory program. For example, as illustrated by the following charts, 92 percent of the residents said that they were served the right amount, if not too much food, and 81 percent thought that meal charges were good or reasonable.

**PARTICIPANTS' OPINIONS OF QUANTITY OF FOOD SERVED**



**PARTICIPANTS' OPINIONS OF AMOUNT CHARGED FOR MEALS**





The majority of participants also expressed satisfaction with the taste and variety of the meals, as summarized in the following table.

Degree of Participant Satisfaction  
with Meals' Taste and Variety

In general, how satisfied or dissatisfied are you with the . . .	Satisfied	Neither satisfied nor dissatisfied	Dissatisfied
	----- (percent) -----		
TASTE of the food?	60	20	20
VARIETY of the food?	59	21	21

One satisfied participant in Idaho told us, "It's wonderful having a balanced meal daily. It would cost a fortune to have the variety we receive if I were cooking my main meal daily." Another satisfied participant from Missouri acknowledged the dilemma of trying to please everyone in the project, saying:

"I am very much aware that satisfying the taste of 150 plus individuals is an almost impossible task. Food cannot be made highly seasoned in cooking, but seasoning is provided for those who wish to add it. Most foods are well prepared and served. Substitutes are provided for foods that individuals cannot eat."

Comments from participants who were dissatisfied with the taste and variety of the food served, however, were among the most vehement comments we received. Even so, 41 percent of those dissatisfied with the taste of the food served would not want to withdraw from the program. The following comment was made by a participant who actually liked having the mandatory meal program in her project, yet was very dissatisfied with the taste and variety of the food served: "The meals are prepared a day before and reheated and dried up so that the chicken is the size of a pigeon. No taste at all, no flavor of any kind---they are not prepared for our dietary needs . . . ."

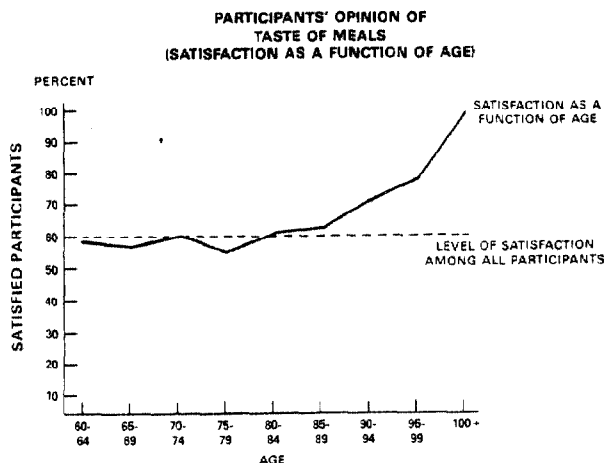
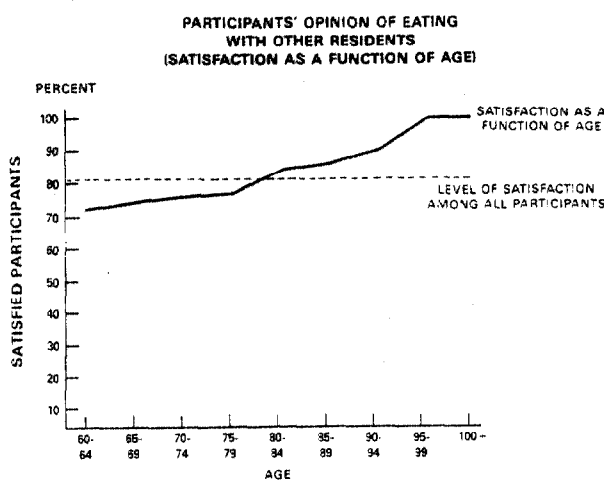
A resident from West Virginia who neither liked nor disliked having the mandatory meal program had this to say about the food:

"Generally, [the food is] too starchy. Very little or no flavor to meats, vegetables overcooked, too often jello served. I have called these meals 'Depression Meals'--soup, beans, bread stuffing with slivers of chicken or turkey, creamed chipped beef--but 'Where's the beef?'"

OLDEST PARTICIPANTS ARE MOST OFTEN SATISFIED WITH MANDATORY MEAL PROGRAMS

Although the majority of elderly participants expressed satisfaction with all the aspects of the mandatory meal program about which we inquired, even a greater number of participants who were 80 years old and older were satisfied. For example, more than twice as many residents 80 years of age and older said that they had great difficulty preparing their own meals than did residents under 80 years of age. Also, 77 percent of residents 80 years old and older, compared to 64 percent ages 62 to 79, liked having the mandatory meal program in their project. These responses suggest that as residents become older, their need for and appreciation of a meal program increases.

Furthermore, there were two factors--participants' opinions of eating with others and the food's taste--that revealed even more prominent relationships with participants' ages. In these cases, satisfaction was not only greater among participants who were 80 years old and older, but the percentage of satisfied participants actually increased with each age group we studied. These increases in satisfaction, corresponding with increases in participants' ages, are illustrated in the following graphs.



CHARACTERISTICS OF MANDATORY  
MEAL PROGRAM PARTICIPANTS

Questionnaire responses from elderly participants in mandatory meal programs revealed that their ages ranged from 62 to 101 years old, with 78 as their average age. The majority of these respondents completed our questionnaire on their own, and their relative age appears to have had no bearing on whether they received assistance in completing the questionnaire. Sixty-nine percent told us that they received no help, 26 percent said that they received help from a friend or relative, and the remaining 5 percent said that they received assistance in completing the questionnaire from either their project manager or other project staff.<sup>2</sup>

Most elderly participants perceived themselves as having no difficulty doing their own grocery shopping or preparing their own meals because of a health or physical problem. The following table contains the questions we asked the participants about these tasks, along with their responses.

Degree of Participants' Difficulty  
Performing Certain Tasks

Because of a health or physical problem how much difficulty (if any) do you have . . .	No difficulty	Some difficulty	Great difficulty
	----- (percent) -----		
Grocery shopping?	59	24	17
Preparing your own meals?	65	23	12

Elderly participants' net incomes varied, with over half saying that their monthly income after taxes was under \$600, as shown in the following table.

<sup>2</sup>Responses from residents who received assistance from project personnel were not fundamentally different from those who received no help or received help from friends or relatives.

Participants' Monthly Incomes

<u>Monthly income after taxes</u>	<u>Participant responses</u> (percent)
Under \$300	7
\$300-\$399	16
\$400-\$499	22
\$500-\$599	16
\$600-\$699	9
\$700-\$999	14
Over \$1,000	9
Do not know	7
Total	<u>100</u>

HUD provides guidance to projects with mandatory meal programs on language to include in a lease that informs prospective tenants of the existence and cost of the meal program. Ninety-six percent of the residents who moved into projects with mandatory meal programs said that the project's management informed them of the meal program before they signed their lease. Only 4 percent said that either the building management did not inform them or they did not remember.

Over half (54 percent) of the participants have participated<sup>3</sup> in their project's mandatory meal program for a period of 2 to 5 years. About 21 percent have participated between 1 and 2 years and 18 percent have participated for less than 1 year. Eight percent have participated for more than 5 years.

In addition to collecting data on mandatory meal programs and their participants, we looked at certain characteristics of both in relation to participant satisfaction. For example, we considered whether the amount residents were charged for mandatory meals had any relationship to whether they would want to withdraw from the program. We found no such relationship. Similarly, we found no relationship between residents' net incomes and their satisfaction with their meal program. In addition, we found no relationship between the length of time residents had participated in their mandatory meal program and whether or not they liked having that program in their project. We also considered whether certain project characteristics, such as its size, were related to residents' satisfaction with the program. Again, we found no relationships.

---

<sup>3</sup>We defined "participating" as paying for meals.

OVERVIEW OF MANDATORY MEAL PROGRAM MENUS

Fifty-six of the managers of section 202 projects that have mandatory meal programs sent us menus from their meal programs. We reviewed these menus not to draw conclusions about their nutritional content nor to make statistical inferences about all meals served in mandatory meal programs, but merely to present an overview of the nature of the meals served. Although six projects provided us with breakfast menus, we concentrated on reviewing lunches and dinners, treating both simply as "meals."

We found that most (73 percent) of the meals described in the menus we reviewed offered hot entrees, 24 percent offered a combination of hot and cold entrees, and 3 percent offered cold entrees only. Half (50 percent) of the meals offered residents one entree per meal with no apparent choice; however, 44 percent did list a choice of two entrees. The remaining 6 percent offered residents a choice of three to five entrees at each meal. Twenty-three percent of the menus listed meal options to satisfy special diets, and another 7 percent indicated that substitute meals were available on request.<sup>1</sup>

All menus included at least one vegetable and, on average, each meal offered two vegetables. Thirty percent of the meals always included soup, and another 31 percent included soup some days. Forty-one percent of the meals always included salad, and another 34 percent sometimes did. Ninety-one percent of the meals always included dessert.

Several examples of menus from projects having mandatory meal programs are provided on the following pages, along with the amount the projects charge for these meals. These menus, in our judgment, are typical of the ones we received.

---

<sup>1</sup>Other projects may also accommodate residents with special diets, but we could not make this determination on the basis of the menus provided. Questionnaire responses from managers, however, indicated that the majority of projects accommodate low-sodium, low-cholesterol, and low-sugar diets.

---

**MENU #1**

---

**MONDAY**

Fruited Coleslaw  
Crispy Chicken  
Baked Potato  
Peas & Water Chestnuts  
Peach Crisp  
Dinner Roll & Butter

**TUESDAY**

Tossed Green Salad w/Dressing (Ranch Style)  
Swiss Steak  
Parsley Potato  
Sliced Carrots w/Parsley  
Gingerbread w/Whipped Topping  
Dinner Roll & Butter

**WEDNESDAY**

Chicken Noodle Soup  
Sweet & Sour Pork  
Steamed Rice  
Leaf Spinach w/Lemon  
Banana Cream Pudding w/Cookie  
Dinner Roll & Butter

**THURSDAY**

Green Salad w/Alfalfa Sprouts w/Italian Dressing  
Prime Rib Au Jus  
Oven Brown Potato  
Dilled Zucchini  
Fresh Fruit Compote  
Dinner Roll & Butter

**FRIDAY**

Cream of Celery Soup  
Breaded Cod w/Tartar Sauce  
Au gratin Potato  
Stewed Tomato  
Ice Cream  
French Bread & Butter

GAO note: Average price per meal--\$3.62

**MENU #2**

Each meal also has soup and salad bar and beverages (Orange juice, Cranberry juice, Coffee, Tea, Milk)

**MONDAY**

Pork Chops  
Turkey Tetrazzini

Diets: Pork Chops

Baked Potatoes  
Corn  
Peas and Carrots

Puddings (Butterscotch, Vanilla,  
Chocolate, Tapioca)

**TUESDAY**

Salisbury Steak  
Tuna Noodle Casserole

Diets: Baked Chicken  
Baked Fish

Mashed Potatoes  
Lima Beans  
Carrots

Pie (Egg Custard, Cherry)

**WEDNESDAY**

Cottage Ham  
Meat Loaf

Diets: Meat Loaf

Whole Round Potatoes  
Green Beans  
Beets

Fruit w/ Cookies

**THURSDAY**

Baked Chicken  
Chipped Beef on Toast or Biscuit

Diets: Salt Free Chicken

Mashed Potatoes  
Zucchini & Tomatoes  
Peas

Strawberry Shortcake

**FRIDAY**

Lambettes  
Baked Fish

Diets: Lambettes

Mashed Potatoes  
Squash  
Spinach

Assorted Cakes

**SATURDAY**

Liver & Onions  
Beans & Weiners

Diets: Liver  
Swedish Meat Balls

Mashed Potatoes  
Succotash  
Whole Carrots

Jello  
Brownies

**SUNDAY**

Roast Beef  
Creamed Chicken/ Biscuit

Diets: Roast Beef

Mashed Potatoes  
Broccoli  
Wax Beans

Apple Stroussel

GAO note: Average price per meal--\$3

---

**MENU #3**

---

**MONDAY**

Stew Meat  
Rice  
Red Beans  
Tossed Salad  
Vanilla Pudding  
Bread, Butter  
Coffee, Milk

**TUESDAY**

Baked Ham  
Baked Squash  
Mustard Greens  
Apple Salad  
Bread Pudding  
Bread, Butter  
Coffee, Milk

**WEDNESDAY**

Broiled Chicken  
Macaroni and Cheese  
Green Beans  
Combination Salad  
Cake  
Bread, Butter  
Coffee, Milk

**FRIDAY**

Broiled Fish  
Spanish Rice  
Broccoli  
Carrot Salad  
Baked Apples  
Bread, Butter  
Coffee, Milk

**THURSDAY**

Roast Beef  
Mashed Potatoes  
Peas & Carrots  
Beet Salad  
Fruit Cocktail  
Bread, Butter  
Coffee, Milk

GAO note: Average price per meal--\$2.50



---

**MENU #4**


---

**MONDAY**

<b>Mandatory Meal</b>	<b>Optional Meal</b>
Dinner:	Lunch:
Assorted Juices	Beef Noodle Soup
Baked Ham	Assorted Salads
Candied Sweet Potatoes	Open Face Roast Beef
Cardinal Green Beans	Sandwich w/Gravy
Cottage Cheese	Assorted Desserts
Tapioca Pudding	

**THURSDAY**

<b>Mandatory Meal</b>	<b>Optional Meal</b>
Dinner:	Lunch:
Tomato Juice	French Onion Soup
Roast Pork w/Gravy	Assorted Salads
Whipped Potatoes	BLT Sandwich
Glazed Carrots	Potato Chips
Pickled Beets	Assorted Desserts
Apple Cobbler	

**TUESDAY**

<b>Mandatory Meal</b>	<b>Optional Meal</b>
Dinner:	Lunch:
Apple Juice	Cr. of Chicken Soup
Italian Spaghetti w/ Meat Sauce	Assorted Salads
Toasted Fr. Bread	BBQ Beef on Bun
Bu. Mixed Vegetables	Assorted Desserts
Mixed Green Salad w/ 1000 Island Dressing	
Cherry Crisp	

**FRIDAY**

<b>Mandatory Meal</b>	<b>Optional Meal</b>
Dinner:	Lunch:
Grapefruit Juice	Barley Soup
Broiled Liver & Onions	Assorted Salads
Whipped Potatoes	Tuna Salad Sandwich
Corn O'Brien	Potato Chips
Lettuce Wedge	Assorted Desserts
Bread Pudding	

**WEDNESDAY**

<b>Mandatory Meal</b>	<b>Optional Meal</b>
Dinner:	Lunch:
Grape Juice	Minestrone Soup
Chicken Fried Steak	Assorted Salads
Parsley Bu. Potatoes	Ham & Cheese w/Slice
Zucchini Parmesan	Tomatoes & Pickle
Fruited Jello Salad	Assorted Desserts
Cornbread	
Cake	

**SATURDAY**

<b>Mandatory Meal</b>	<b>Optional Meal</b>
Dinner:	None
Pineapple Juice	
Beef Mushroom Casserole	
Chopped Spinach	
Cottage Cheese	
Fruit Cup	

**SUNDAY**

<b>Mandatory Meal</b>	<b>Optional Meal</b>
Dinner:	None
Orange Juice	
Fried Chicken	
Rice Medley	
Peas	
Mixed Green Salad	
Asst. Dressing	
Hot Rolls	
Pumpkin Pie	

GAO note: Average price per mandatory meal -- \$3

OBJECTIVES, SCOPE, AND METHODOLOGY

In a November 7, 1983, letter, Senators Daniel Moynihan and Donald Riegle asked us to review HUD's current policy regarding the use of mandatory meals in section 202 housing for the elderly or handicapped. Specifically, they asked us to answer the following questions: (1) how many section 202 projects provide meal services, and how many require mandatory participation, (2) whether HUD's mandatory meal policy has generally worked well, and whether any problems can best be resolved through legislation or regulation, and (3) whether projects could economically run a voluntary meal program and if so, what the minimum size would be. They also asked us to determine how the cost of a mandatory meal compares with the cost of a meal meeting Department of Agriculture nutrition standards. After performing some initial work, we found that the Department of Agriculture's cost data were not in a format that could be compared with the cost of the meals that section 202 sponsors provide. Accordingly, the Senators' offices agreed that we not address this issue in our report.

As further agreed, our findings were based on the results of three nationwide questionnaires--one to all managers of section 202 projects with mandatory meal programs, one to a stratified random sample of elderly residents participating in about half of those mandatory meal programs; and one to a stratified random sample of managers of projects without mandatory meal programs. The results presented in this report represent responses weighted to reflect responses of the populations sampled. We stratified projects based on their size so that we could analyze managers' and participants' responses accordingly. Our analyses showed no differences on the basis of project size. For example, we found that for projects having mandatory meal programs, the project's size had no relationship to the amount it charged for meals or the number of residents who were satisfied with the meal program.

Before sending out the three questionnaires, we first sent a brief mailgram questionnaire to all 1,114 section 202 projects with a partial or wholly elderly population to determine (1) which projects had mandatory meal programs and which did not and (2) how many elderly residents lived in each project. We identified which projects had elderly residents, along with these projects' names and addresses, from HUD records. After identifying the projects having mandatory meal programs, we obtained lists from project managers of elderly residents participating in those programs. Although section 202 housing serves the elderly and handicapped, we agreed with the Senator's offices to limit our review to projects with elderly residents, and exclude those with entirely handicapped populations.

We relied on information obtained from the initial mailgram questionnaire to determine how many projects have mandatory meal programs. To ascertain how many have other types of meal services, and specifically what those services are, we relied on data obtained from the subsequent questionnaire sent to managers of projects without mandatory meal programs. From this information, we were able to summarize the variety and extent of meal services available in section 202 projects.

To assess how well the mandatory meal policy has worked and to determine what complaints have been voiced, we agreed to rely primarily on data obtained from those most affected--mandatory meal program participants--measuring the policy's success by the extent of the participants' satisfaction. To supplement this information, we further agreed to consider the views of managers of projects that have mandatory meal programs, as well as those without meal services, regarding the effect that having or not having a meal program has on their elderly residents.

We asked the participants a variety of questions regarding their level of satisfaction with their mandatory meal program. Our questions addressed subjects such as participants' opinions of the meals' taste and cost as well as their opinions of eating with other residents. We encouraged residents to provide us with additional comments, and we received both praises of and complaints about their programs. We asked the mandatory program managers questions about how and why they operate their programs. Instead of asking these managers whether their programs provide necessary benefits to their residents, and what these benefits might be, we encouraged them to provide comments about their programs. Managers' comments generally expressed what they viewed as the benefits their residents derive from the meal program.

Questionnaire responses of managers of projects with mandatory programs, coupled with questionnaire responses of managers of projects that operate their own voluntary programs, enabled us to assess mandatory programs' ability to operate a cost-effective voluntary program. We asked managers of both types of meal programs for data on their annual income, expenses, and revenue sources. We calculated the profit and loss margins for each specific program and compared them for mandatory and voluntary programs in general, also comparing their sources of revenue. In addition, we requested other information, such as (1) the average minimum and maximum number of participants in voluntary meal programs and (2) the amount of reduction in the number of meals purchased that mandatory program managers believe they could tolerate before they would have to discontinue their programs.

We did not attempt to verify any responses, except those which were unclear.

The following tables summarize universe, sample, and strata sizes for all three questionnaires. They also present response rates for each. Sampling errors for the questionnaire responses discussed in the letter portion of this report are contained in appendix VI.

Sampling and Response Rates  
for Mailgram Questionnaires  
Sent to Projects With Elderly  
Populations

Universe	Sample	Usable responses	Response rate (percent)
1,114	1,114	930	83

Universe and Response Rates for  
Questionnaires Sent to Managers  
of Projects with Mandatory Meal Programs

Universe	Sample	Usable responses	Response rate (percent)
98	98	90	92

Sampling and Response Rates, on a Project  
Basis, for Questionnaires Sent  
to Elderly Residents Participating in  
Mandatory Meal Programs

Strata (based on number of residents in project)	Universe	Sample	Usable responses	Response rate (percent)
1-99 residents	23	9	9	100
100-199 residents	58	31	30	97
200+ residents	<u>17</u>	<u>9</u>	<u>8</u>	<u>89</u>
Total projects	<u>98</u>	<u>49</u>	<u>47</u>	<u>96</u>

Sampling and Response Rates for  
Questionnaires Sent to Elderly Residents  
Participating in Mandatory Meal Programs

Strata (based on number of residents in project)	Universe	Sample	Usable responses	Response rate (percent)
1-99 residents	609	109	82	75
100-199 residents	4,106	527	437	83
200+ residents	<u>2,206</u>	<u>252</u>	<u>180</u>	71
Total residents	<u>6,921</u>	<u>888</u>	<u>699</u>	79

Sampling and Response Rates for  
Questionnaires Sent to Managers of  
Projects Without Mandatory Meal Programs

Strata (based on number of residents in project)	Universe	Sample	Usable responses	Response rate (percent)
1-49 residents	174	57	48	84
50-99 residents	298	100	88	88
100-199 residents	330	81	73	90
200+ residents	<u>30</u>	<u>8</u>	<u>8</u>	100
Total residents	<u>832</u>	<u>246</u>	<u>217</u>	88

We conducted our review from November 1983 through September 1984. We pretested our questionnaires at four projects in the Washington, D.C., metropolitan area, and at one project in Philadelphia, Pennsylvania. Generally, each pretest visit consisted of testing the managers' questionnaire with the project's manager, and the residents' questionnaire with three elderly meal program participants living in each project. Based on these pretests, we revised the questionnaires to assure maximum clarity.

We performed our work in accordance with generally accepted government auditing standards. We did not obtain agency comments on this report because it (1) focuses on section 202 project activities and not HUD activities and (2) does not contain any direct or indirect criticism of HUD. We did, however, discuss the report's contents with HUD officials and they assured us that our references to HUD and its mandatory meal policy were accurate.

SAMPLING ERRORS  
FOR SELECTED QUESTIONNAIRE RESPONSES

<u>Variable</u>	<u>Estimate</u> (percent)	<u>Sampling error</u> at the 95% <u>confidence level</u> (percent)
Residents who liked having the mandatory meal program in their project	70	5.3
Residents who neither liked nor disliked having the mandatory meal program in their project	12	2.6
Residents who disliked having the mandatory meal program in their project	17	3.0
Residents who would not want to withdraw from the mandatory meal program if they could	80	5.3
Residents who would want to withdraw from the mandatory meal program if they could	20	3.5
Residents who liked eating with others	80	5.2
Residents who neither liked nor disliked eating with others	17	2.7
Residents who disliked eating with others	3	1.3
Residents who thought mandatory meals were a good value	24	4.1
Residents who thought mandatory meals were a reasonable value	57	4.8
Residents who thought mandatory meals were a poor value	19	3.5
Residents who were satisfied with the taste of mandatory meals	60	5.7

## APPENDIX VI

## APPENDIX VI

<u>Variable</u>	<u>Estimate</u> (percent)	<u>Sampling error</u> at the 95% <u>confidence level</u> (percent)
Residents who were neither satisfied nor dissatisfied with the taste of mandatory meals	20	3.1
Residents who were dissatisfied with the taste of mandatory meals	20	3.4
Average voluntary meal program's revenue derived from meal payments	71	18.9
Average voluntary meal program's revenue derived from sources other than meal payments	29	18.9

(382336)





30628

**AN EQUAL OPPORTUNITY EMPLOYER**

UNITED STATES  
GENERAL ACCOUNTING OFFICE  
WASHINGTON, D.C. 20548

OFFICIAL BUSINESS  
PENALTY FOR PRIVATE USE \$300

**BULK RATE  
POSTAGE & FEES PAID  
GAO  
PERMIT No. G100**