Home-delivered and congregate meal services are offered to eligible older adults living independently. It is postulated the intervention will lead to increased access to nutritious meals, which may improve food and nutrition security by improving dietary intake and decreasing malnourished status. This is expected to improve health-related quality of life and well-being (reduced frailty [muscle loss], reduced anemia, decreased depression symptoms), which may increase aging in place and reduce morbidity and mortality. It is postulated the intervention would also improve socialization. This is expected to decrease loneliness and, in turn, depression symptoms, which would increase aging in place and reduce morbidity and mortality.

Potential effect modifiers include population density, race or ethnicity, gender, or living alone status. Potential additional benefits are fewer cooking-related injuries and less need to travel to the grocery store. Potential harms were increased risk of foodborne illnesses and congregate meal services may increase risk of exposure to communicable diseases.