

July 14, 2022

Will McIntee Office of Public Engagement The White House 1600 Pennsylvania Avenue, NW Washington, DC 20500

Dear Mr. McIntee.

Thank you for the opportunity to submit our comments for the upcoming White House Conference on Hunger, Nutrition, and Health.

Project Bread is a statewide anti-hunger organization committed to connecting people and communities in Massachusetts to reliable sources of food while advocating for policies that make food accessible—so that no one goes hungry. Project Bread believes racial justice, diversity, equity, and inclusion are all critical to our mission. Throughout the pandemic, we have highlighted the higher rates of food insecurity among Black, Latino, Asian, and multiracial households and continue to use a racial equity lens when proposing policy changes and implementing programs.

Project Bread, through our FoodSource Hotline, screens callers for Supplemental Nutrition Assistance Program (SNAP) eligibility and provides callers across Massachusetts with information and referrals to community food resources, such as pantries and summer meal sites. Additionally, Project Bread employs SNAP Enrollment Coordinators who work directly in community health centers to meet with families and individuals experiencing food insecurity and provide the information and assistance they need to enroll in SNAP. Most recently, Project Bread launched our Health Care Partnerships program in April 2020 with our state's Medicaid Office, MassHealth, as part of Medicaid's Flexible Services Program. Health Care Partnerships launched three months ahead of schedule in response to the COVID-19 pandemic. Our Nutrition Services Coordinators offer comprehensive case management to MassHealth patients who are food insecure and have a behavioral or physical health diagnosis. Beyond addressing the cost of food, barriers to access such as nutrition knowledge, cooking skills, kitchen resources, and transportation are provided. Additionally, MassHealth patients not currently receiving SNAP benefits are encouraged to apply and referred to the FoodSource Hotline.

Additionally, Project Bread has more than twenty-five years of experience working to boost participation, quality, and nutrition of school meals as a strategy to end childhood hunger. In partnership with the Massachusetts' Department of Elementary and Secondary Education (DESE), through the Child Nutrition Outreach Program (CNOP), we provide technical assistance to schools throughout the state to increase participation in both school and summer meals. In addition, we support schools with implementation of the Community Eligibility Provision (CEP).





For over a decade, our Chefs in Schools program, now called Community Nutrition Services, has worked with cafeteria staff to produce meals from scratch that meet high nutrition standards, maintain labor costs, and decrease plate waste. A key component of this program is to ensure that student feedback is included in recipe development and adoption, leading to the introduction of more culturally relevant menu options in many Massachusetts schools.

Project Bread also uses the collective experience of supporting federal nutrition programs and works alongside partners throughout the community to advocate for state and federal policy changes that expand access and improve the quality of the federal nutrition programs and address the root causes of food insecurity, such as poverty and the historic exploitation and marginalization of communities. For example, Project Bread leads the statewide Feed Kids Coalition, comprised of more than 100 diverse partners including health, education, business, social services, and faith-based organizations advocating for School Meals for All (also known as universal school meals) in Massachusetts.

Going Beyond the Federal Nutrition Programs to Improve Health Outcomes

As we will detail below, Project Bread firmly believes that the federal nutrition programs play a critical role in addressing food insecurity in the short and long term. They have a proven track record and can be made more effective by adopting the recommendations below. However, we know that families facing food insecurity are often facing other challenges with housing, transportation, childcare, and health care. The crisis of not having enough to eat compounds and is compounded by these other crises. With that in mind, Project Bread worked with the Massachusetts Executive Office of Health and Human Services and local affordable care organizations to create our Health Care Partnerships program in April of 2020 to provide nutrition support and address the individualized needs of patients who are food insecure while also having a physical or behavioral health diagnosis. For more information, please see our report, Food Security is Health Care: A Health Care Partnerships Impact Report. The report looks at this program from November 2020 to October 2021. Here are some highlights:

- Program participants that were not already receiving SNAP at the time of program enrollment were encouraged to apply. SNAP participation increased from 64% at the time of referral to 72% after six months. Unfortunately, while SNAP participation increased, patients still requested grocery store gift cards and referrals to other programs demonstrating that while SNAP is a critical resource, it has not been enough to eliminate food insecurity. In addition to grocery store gift cards, 82% of patients needed additional resources such as basic kitchen supplies. Forty patients were living without a refrigerator, making it impossible for them to store perishable goods like fruits and vegetables.
- The program also includes cooking classes from Project Bread's Chef Educators. At the time of referral, 38% of patients had little or no confidence in their knowledge of which





foods were healthy to eat. By six months, this has dropped to 12%, with the remaining 88% of patients being confident.

• This evaluation assessed nearly 500 clients between November 2020 and October 2021. Both food security and diet quality improved over six months of program participation, with 25% of patients reporting that they were no longer experiencing food insecurity and the average consumption of fruits and vegetables increasing by 3.5 servings per week.

As just one example, we want to share the story of Claudia, a 48-year-old resident of the Dorchester neighborhood of Boston.

Growing up in Boston, Claudia and her siblings always had enough to eat. Her parents, both Guatemala natives, worked to ensure cultural staples, like beans and tortillas with mixed vegetables, were plentiful. As an adult, the 48-year-old Dorchester resident, a single mother to three teenagers, found herself in need of assistance.

In 2019, she enrolled in the Supplemental Nutrition Assistance Program (SNAP), which immediately provided her funds to grocery shop where and when she wants to continue buying her Central American favorites. However, with the rising cost of groceries due to supply chain issues and inflation, sometimes even increased SNAP benefits during the pandemic aren't always enough. As a result, the family would cut back on buying expensive goods, like red meat and milk, and would often purchase cheaper less nutritious options.

Throughout their lives, Claudia and her children have been bullied for their curves. Insecurities coupled with fear during the pandemic and changing family dynamics fueled more unhealthy eating habits and ultimately depression and anxiety, at which point Claudia's physician referred her to the Flexible Services Program. Providing Claudia's family food security and the resources to change their diet is one way in which the family can take back control of their lives and improve their mental health.

Through the FSP, Project Bread provided comprehensive care to provide food security for Claudia's family, giving them the education and resources to empower healthy eating. She received new pots and pans, a toaster, knives and silverware, storage containers, cooking utensils, a cutting board and six-months-worth of gift cards to her local grocery store. In addition, she received access to recipes and cooking tips virtually through Project Bread's website and attended an online Cooking for Wellness class hosted by Project Bread's Chef Educators.

"This program has been incredible in teaching my kids that it's okay to ask for and accept help and that healthy eating is important," Claudia shared. "It pushes us out of our comfort zone and helps us be the best versions of ourselves."





Food Security is Health Care Policy Recommendations

We have long recognized the linkage between food insecurity and health outcomes, particularly the disproportionate impact that hunger has on the health of our communities of color. We have worked with community health centers for the past 15 years to support clinicians screening for food insecurity and providing patients onsite assistance connecting with federal nutrition programs. It is large scale solutions like the Flexible Services Program, which provides patients with access to healthy food resources and nutrition education, that are our greatest asset for efficiently addressing the scale of need statewide.

In addition to the potential impact of the Flexible Services Program statewide in Massachusetts, we believe that this program is scalable nationwide, and it is essential that we have this discussion on a national level. As the agenda for the White House Conference is set, we hope to see this prioritized and replicated, as Massachusetts has demonstrated strong early results. Based on our findings, we offer the following recommendations:

- The White House Conference on Hunger, Nutrition, and Health should highlight our Flexible Services Program as an innovative, scalable solution to systemically addressing food insecurity and its related health outcomes.
- The federal government should fund research to evaluate which types of interventions are best suited to improving health outcomes for the most costly and prevalent diseases, such as diabetes and heart disease, which disproportionately impact people of color. Research is needed to explore the variety of different nutrition support programs being offered throughout Massachusetts and to determine which combination of services has the greatest impact. We recommend that the Government Accountability Office (GAO) conduct a study to determine which programs offer the best outcomes. Through an analysis of health outcomes and a cost analysis, the GAO could provide the evidence needed for the Flexible Services Program to become a national model.
- The federal government should establish a common application between Medicaid and federal nutrition assistance programs. For our Flexible Services Program, 100% of patients are on Medicaid but only 64% were participating in SNAP at the beginning of the program. Rather than relying on Project Bread's outreach and case management, a more efficient and effective approach is to ensure that Medicaid patients are automatically enrolled in SNAP.
- The federal government should support a national pilot that addresses food insecurity for Medicaid and Medicare participants, using the Massachusetts Flexible Services Program as a model.





Importance of School Meals for All

In the following section we will offer recommendations on various nutrition programs, but we want to lift up one recommendation in particular. COVID-19 was a moment in time when all our eyes have been opened to the vast disparities faced by children when accessing the resources needed to be healthy and learn. While the road to equity is long and complex, there is a straightforward and significant step we can take to reduce childhood hunger and improve the health and educational performance of students. That step is making universal school meals permanent. We believe there is simply no path to ending childhood hunger that does not include universal school meals.

Before COVID-19, the Community Eligibility Provision (CEP) allowed many schools and districts to provide school meals free to all students. The benefits of serving meals to all students has been well documented to increase participation, improve academic outcomes^{1,2,3}, reduce stigma, and improve socioemotional learning. For schools, CEP has reduced administrative costs and allows for an economy of scale, freeing up time and funding. These additional funds can go toward staffing, equipment, and purchasing, resulting in stronger programs and better quality meals. The COVID-19 child nutrition waivers have allowed for a nationwide pilot of universal school meals. In Massachusetts alone, we found a 39.1% increase in school lunch participation between October 2019 and October 2021 in schools not previously serving universal meals. The White House, USDA, and Congress should continue expanding who is eligible for free meals and who is not with the ultimate goal of ensuring any child who wants or needs school breakfast or lunch is able to receive it without the barriers of cost or stigma.

Additional Recommendations on Improving the Federal Nutrition Programs

In addition, to our recommendations around support, replicating, and scaling our Health Care Partnerships model and making School Meals for All permanent, Project Bread recommends the following actions be taken by the federal government in response to food insecurity. By improving these programs, we can also improve nutrition security and the overall health of Americans. We understand that some of these recommendations will require action by Congress, but we urge the White House and federal agencies to pursue these recommendations as much as possible under current statute, while working with Congress to authorize greater program access and funding. For the purposes of these comments, we limited our recommendations to programs

³ Gordanier, J.; Ozturk, O.; Williams, B.; Zhan, C. Free lunch for all! the effect of the community eligibility provision on academic outcomes. Econ. Educ. Rev. 2020, 77, 101999.



¹ Kleinman, R.E.; Hall, S.; Green, H.; Korzec-Ramirez, D.; Patton, K.; Pagano, M.E.; Murphy, J.M. Diet, breakfast, and academic performance in children. Ann. Nutr. Metab. 2002, 46, 24–30.

² Wahlstrom, K.L.; Begalle, M.S. More than test scores: Results of the Universal School Breakfast Pilot in Minnesota. Top. Clin. Nutr. 1999, 15, 17–29.



that we have the deepest knowledge in: SNAP, the National School Lunch Program (NSLP), the School Breakfast Program (SBP), and the Summer Food Service Program (SFSP).

Supplemental Nutrition Assistance Program (SNAP)

As the most robust response to food insecurity, building upon the existing program will enable more households to participate and for existing SNAP clients to further achieve food and nutrition security. Many of these recommendations come from our own research, <u>Barriers to SNAP</u>, released last year and based on survey results of a diverse set of respondents as well as our own experiences through the FoodSource Hotline, Health Care Partnerships, and SNAP Outreach Program.

- Allocate additional funds to increase awareness. Our research found several myths deter potential SNAP participants from applying and receiving benefits including misinformation (46.4% of respondents), stigma (38.6%), and lack of awareness (36.6%). Project Bread's own SNAP awareness efforts have helped address these myths and encouraged additional households to apply for assistance.
- Support additional SNAP application assistance. Even in a state such as Massachusetts with a responsive state agency, the Department of Transitional Assistance, clients still report challenges with completing an application either through computer access (38.6%) or concern over the application being too difficult (36.6%). For example, 55.8% of Asian survey respondents indicated that the ability to apply in a language other than English affected their decision to apply for SNAP. Trusted community partners colocated with other services such as health care can provide additional support for clients including in their native language or from someone in their community.
- Support efforts to create common application portals among assistance programs. While Medicaid, SNAP, and other safety net programs are administered on the state level, the Departments of Agriculture and Health and Human Services should provide support and guidance to facilitate a common application experience to clients to prevent needing to submit similar data to multiple agencies and ensure households can maximize support during a time of need. While our Food Security is Health Care policy recommendations reference a common application between Medicaid and the federal nutrition assistance programs, we hope to see a long-term strategy toward a broad common application for all of the income-based federal assistance programs.
- Reduce burdensome requirements in applying, accessing, or renewing SNAP benefits, such as those waived during the COVID-19 pandemic such as:





- Extending certification periods.
- Reducing which households applying for or recertifying SNAP are subject to an interview.
- Allowing for a telephonic (verbal) signature on SNAP applications.
- Eliminate the five-year waiting period for immigrants otherwise eligible for SNAP.
- Increase income thresholds for SNAP eligibility. Federally, households must have a gross income of less than 130% of the federal poverty level to qualify. Due to flexibilities, many states have adopted a higher threshold of 185 or 200%. In Massachusetts, cost of living hovers closer to 375% of the federal poverty level⁴.
- Expand eligibility by eliminating the gross income test and remove the cap on shelter deductions and medical expenses. By eliminating the gross income test and allowing greater flexibility in assessing a household's true need, a household would simply need to show a net income below the poverty level to qualify for SNAP.
- Increase SNAP benefits to at least the level of the USDA Low-Cost Food Plan. Even with the recently updated Thrifty Food Plan, SNAP benefits are insufficient to cover household needs, particularly in high-cost communities⁵. Higher benefits would ensure that families can purchase enough food and be in a better position to consume healthier food.

School Meal Programs

The school meal programs, NSLP and SBP, provide important sources of food and nutrition for children and teens during the school day. Participation in NSLP and SBP has also been shown to reduce pressure on household finances, allowing for greater food security among non-participating family members⁶. Research has found, due to higher nutrition standards, that school meals are the healthiest source of food for all age groups and the introduction of healthier meal

⁵ Fol O, Waxman E, Gundersen C. Does SNAP Cover the Cost of a Meal in Your County? | Urban Institute. Published 2021. Accessed September 30, 2021. https://www.urban.org/does-snap-cover-cost-meal-your-county ⁶ Gross, S.M.; Kelley, T.L.; Augustyn, M.;Wilson, M.J.; Bassarab, K.; Palmer, A. Household Food Security Status of Families with Children Attending Schools that Participate in the Community Eligibility Provision (CEP) and Those with Children Attending Schools that are CEP-Eligible, but Not Participating. J. Hunger Environ. Nutr. 2019, 1–16.



⁴ MIT living wage calculator



options at school can support better food choices beyond the school day⁷. In other words, school meals provide fuel for students to learn and play and also establish a foundation for lifelong healthy habits.⁸ In order to expand on these benefits, we recommend the following:

- Require sufficient time to eat. The Centers for Disease Control and Prevention funded a report that recommends at least 20 minutes of seat time for lunch and at least 10 minutes of seat time for breakfast⁹. This would reduce waste and allow more time for students to try new foods.
- Increase meal reimbursements. Higher reimbursement rates would allow schools to invest in staff, equipment, and training, as well as source higher quality ingredients. According to USDA's 2019 School Nutrition and Meal Cost Study, the average cost of a school lunch is about \$3.81, approximately 21 cents more than the highest reimbursement rate, and the average cost for a school breakfast is about \$2.72, 46 cents more than the highest reimbursement rate. ¹⁰
- Improve nutrition standards. The Healthy, Hunger-Free Kids Act of 2010 vastly improved the quality of school meals, but school nutrition standards still fall short of Institute of Medicine recommendations and U.S. Dietary Guidelines. For example, the current standards do not include limits on added sugars. Project Bread stresses that such an improvement in nutrition standards must be accompanied by higher reimbursement rates.

Summer Meals

For students who receive school meals, the summer may represent a challenge to accessing adequate nutrition. SFSP, the Seamless Summer Option (SSO) of NSLP, and Electronic Benefits Transfer (EBT) programs can help ensure that children and teens continue to have access to healthy meals during the summer. Unfortunately, summer meal sites under SFSP and SSO have

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⁷ 7. Lytle, L.A.; Seifert, S.; Greenstein, J.; McGovern, P. How do children's eating patterns and food choices change over time? Results from a cohort study. Am. J. Health Promot. 2000, 14, 222–228.

⁸ Altindag, D.T.; Baek, D.; Lee, H.; Merkle, J. Free lunch for all? The impact of universal school lunch on student misbehavior. Econ. Educ. Rev. 2020, 74, 101945.

⁹ Centers for Disease Control and Prevention. (2011). School Health Guidelines to Promote Healthy Eating and Physical Activity. U.S. Department of Health and Human Services.

¹⁰ U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, School Nutrition and Meal Cost Study, Final Report Volume 3: School Meal Costs and Revenues by Christopher Logan, Vinh Tran, Maria Boyle, Ayesha Enver, Matthew Zeidenberg, and Michele Mendelson. Project Officer: John Endahl. Alexandria, VA: April 2019.



historically served only a fraction of those served by school meals. To improve access and quality, we recommend the following:

- Allow non-congregate, multiple meal, and parent/caregiver pick-up permanently. The COVID-19 waivers have allowed families to pick up meals and eat at a location convenient to them and in many cases, pick up multiple meals at a time without the requirement of children being present. This allows busy families to make one stop rather than having to visit meal sites once or twice daily. The waivers also allowed for the home delivery of meals, which was significant in breaking down transportation barriers for families.
- Eliminate or greatly expand area eligibility to allow more sites to operate in mixed or middle-income areas. This would greatly expand access, reduce stigma around the program, and eliminate the significant administrative burden of establishing eligibility for program operators.
- Increase meal reimbursements. For many summer meal sponsors, the federal reimbursement for meals must cover the cost of purchasing meal components, producing meals, transporting meals, and supervising sites. Unlike school meals, these sponsors cannot sell a la carte items or find other revenue streams. Increasing reimbursement rates ensures that these meals are as healthy as possible and reach more children in need.
- Allow all sites to serve a third meal, including breakfast, lunch and supper.
- Establish a permanent Summer EBT program. While there are numerous benefits to traditional SFSP sites, they require children or teens to travel to a specific location at a specific time and eat the food available that day. Building upon earlier USDA pilots and Pandemic EBT, a permanent Summer EBT program would allow more families to afford groceries to offset the loss of school meals during the summer.

Envisioning A Massachusetts and United States Where Hunger is Permanently Solved

We are grateful to your leadership in elevating the concerns of your district to the White House ahead of this conference. We look forward to working with your office, the White House, and partners across government and throughout the Commonwealth to advance equity in healthy food access. While our comments focused on our own work and the opportunities around the federal nutrition programs mentioned, we believe that the lack of access to healthy food is caused by and in turn leads to a variety of other issues. We urge the White House to think about the challenges of Hunger, Nutrition, and Health holistically with the many other crises faced by low-income families who have been exploited and marginalized.





We stand available to provide any additional information or context to our comments. Thank you for the opportunity to share our vision for a world where hunger is permanently solved.

Sincerely,

Erin McAleer

President and CEO

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Project Bread