Listening Sessions

In preparation for the White House Conference on Hunger, Nutrition and Health

Summary and Recommendations from conversations with people with lived expertise and hunger advocates

Worcester, Massachusetts

July 2022
## Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facts Related to Food Security in Worcester and Massachusetts</td>
<td>3</td>
</tr>
<tr>
<td>Descriptions of the Listening Sessions</td>
<td>4</td>
</tr>
<tr>
<td>Listening Session Results for Pillar 1:</td>
<td>7</td>
</tr>
<tr>
<td>Improve food access and affordability</td>
<td></td>
</tr>
<tr>
<td>A. How has hunger or diet-related disease impacted you, your family, or</td>
<td>7</td>
</tr>
<tr>
<td>your community?</td>
<td></td>
</tr>
<tr>
<td>B. What specific actions should the U.S. Federal government, including</td>
<td>11</td>
</tr>
<tr>
<td>the Executive Branch and Congress, take?</td>
<td></td>
</tr>
<tr>
<td>C. What specific actions should local, state, territory and Tribal</td>
<td>21</td>
</tr>
<tr>
<td>governments; private companies; non-profit and community groups; and</td>
<td></td>
</tr>
<tr>
<td>others take?</td>
<td></td>
</tr>
<tr>
<td>D. What are innovative, successful activities already happening at the</td>
<td>25</td>
</tr>
<tr>
<td>local levels that could inform actions at the Federal level?</td>
<td></td>
</tr>
</tbody>
</table>
Facts Related to Food Security in Worcester and Massachusetts

Food insecurity in Worcester
Even before the COVID-19 pandemic, census tracts in Worcester, Massachusetts reported some of the highest rates of food insecurity in the state.1 The number of people experiencing food insecurity increased during the pandemic. According to the Massachusetts Department of Public Health’s COVID-19 Community Impact Survey (MDPH CCIS) (467 Worcester respondents) and UMass Chan Medical School/City of Worcester’s Greater Worcester COVID-19 Survey (2,156 Worcester respondents), 1 in 5 respondents reported being food insecure. Despite this need, approximately 50 percent of the people eligible for SNAP (Supplemental Nutrition Assistance Program) in Worcester County have yet to access these resources.2

Food insecurity in Massachusetts
The rate of food insecurity among Massachusetts resident doubled from a pre-pandemic rate of 8.2 percent to almost 20 percent in 2021.3 Although it has been falling since the peak in May 2020, the state average fluctuates as various pandemic-specific federal benefit programs end, and is now closer to 16.4 percent.4 The number of people utilizing food benefits, including signing up for SNAP, continues to rise.3

This overall statewide metric obscures the inequities between populations, particularly for Latinx, Black, and LGBTQ+ residents of Massachusetts. Up to 53 percent of Black individuals and 61 percent of Latinx individuals experienced food insecurity in 2021, which is over twice the rate of Asian and White individuals.5 These numbers represent an increase from 2019.

---

Descriptions of the Listening Sessions

The focus of this document is to amplify the voices of community members in Massachusetts with lived experience of food insecurity, who are often excluded from legislative processes that affect their daily lives. Recognizing that the limited number of sessions provided by the White House did not allow for equitable opportunities to provide feedback, the Worcester Food Security Task Force, in partnership with the Prevention Research Center of UMass Chan Medical School, conducted three listening sessions in preparation for the Conference on Hunger, Nutrition and Health scheduled for September, 2022. The food justice community of Worcester, MA held two Listening Sessions with 59 participants, and a state-wide coalition held an additional session with 97 participants. All sessions were held via Zoom. Each listening session was intended to capture the experiences and recommendations of people with lived experience with food insecurity, as well as agencies involved in responding to the crisis of food insecurity. Participants included adults, parents, grandparents, representatives of food banks and pantries, healthcare providers, legal advocates, hunger advocates, higher education employees, and nonprofit agencies.

Each session began with a welcome, an explanation of the purpose of the session and the format to be used, and an overview of data related to local food security and hunger. Details for the sessions are below:

**Listening Session #1: Members of the Worcester Together for Kids Coalition**

**Date and time:** Friday, June 24, 2022; 10:00 – 11:00 AM  
**Number of participants:** 40  

The Worcester Together for Kids Coalition is a group of parents, early care and education advocates, educators, health care professionals, and local government leaders who have met weekly. The vision of the Coalition is: If every family has...

- Access to jobs with a livable wage, enabling them to support a family  
- Access to safe, affordable homes, quality affordable food, effective transportation  
- Access to affordable, high-quality early education and care  
- Access to primary physical and mental health care, and parental support services

...then every family will be ready to provide the environment needed to raise healthy children with high standards of health and well-being.

**Website:** [https://togetherforkidscoalition.org/](https://togetherforkidscoalition.org/)

**Listening Session #2: Members of the Worcester Task Force on Food Security**

**Date and time:** Tuesday, June 28, 2022; 8:30 – 9:30 AM  
**Number of participants:** 19  

**Invitation to share experience and recommendations via a Google survey**
The Worcester Task Force on Food Security is a group of food hunger advocates, such as representatives from the Worcester County Food Bank, nonprofit agencies, food pantries, the Coalition for a Healthy Greater Worcester, UMass Memorial Health, the Prevention Research Center at UMass Chan Medical School, the Worcester Division of Public Health. Their vision is to create a food-secure community with vibrant and inclusive food cultures that reflect the diversity of our residents.

Website: https://foodhelpworcester.org/about/who-we-are/

Listening Session #3: State-wide conversation with the Office of US Representative James McGovern, 2nd District of Massachusetts

Date and Time: Monday, June 27, 2022: 10:00 – 11:30 AM
Number of Participants: 97
Invitation to share experience and recommendations via a Google survey

A statewide Listening Session was held to allow people with lived expertise to share their experiences and recommendations as testimony to US Representative McGovern, of the 2nd District of Massachusetts. In order to reach as many participants as possible throughout the Commonwealth and in Representative McGovern's District, four entities joined forces to plan the session and disseminate the information broadly. The four organizing entities were:

* Massachusetts Law Reform Institute
  The Massachusetts Law Reform Institute mission is to provide statewide advocacy and leadership in advancing laws, policies, and practices that secure economic, racial, and social justice for low-income people and communities.
  Website: https://www.mlri.org/

* Equitable Spaces
  The mission of Equitable Spaces is to create opportunities for community members with lived and living experiences of poverty and related issues, those who have been historically excluded from policy decision-making processes, to incorporate their knowledge, perspectives, and expertise into the design of the policies and programs that directly impact their lives.
  Website: https://www.equitablespaces.org/about
The Coalition for a Healthy Greater Worcester
In conjunction with the Worcester Division of Public Health and the Central Massachusetts Regional Public Health Alliance, the Coalition for a Healthy Greater Worcester facilitates the Community Health Assessment and the Community Health Improvement Plan for the city of Worcester and contiguous towns of Paxton, West Boylston, Boylston, Shrewsbury, Leicester, Millbury, Auburn, Grafton, and Holden.
Website: https://www.healthygreaterworcester.org/ [Note: Need new link]

Prevention Research Center at UMass Chan Medical School
The Prevention Research Center is funded by the Centers for Disease Control and Prevention. Through academic-community partnerships, its mission is to: promote health and prevent disease and disability through: real-world community engaged research, evidence-based practice, and education.
Website: https://www.umassmed.edu/prc

People with lived expertise were invited to talk with a member of the coordinating group for help preparing their testimony. The groups used the definition provided by Equitable Spaces where lived expertise is defined as the experiences of individuals who know:

1. The realities of hunger, poverty, and other societal issues by living them daily
2. How those experiences impact health and wellness;
3. The challenges of navigating public benefits programs for support and services; and
4. That their perspectives uniquely qualify them as informed stakeholders who can help to shape more equitable policy.

The large group session prioritized inviting people with lived expertise to provide testimony. In addition, people with lived expertise and agency representatives were invited to share their experiences and recommendations via small breakout sessions, and written commentary on a Google survey form. These responses are listed below as “Google form response”.

Discussion Questions

The questions discussed during the Listening Sessions were based upon the guidance offered by the White House Conference on Hunger, Nutrition and Health: Toolkit for Partner-Led Convenings, May 2022. The facilitators asked the following questions:

- How have you, your family, or your community been impacted by not having enough food to eat?
- What policies, programs, and approaches to this work have been or would be helpful for you, your family, or your community?
- Which practices and norms have been harmful?

Recording and Analysis

The Listening Sessions were recorded on Zoom and transcribed by the online transcription service: [https://otter.ai/home](https://otter.ai/home). The Prevention Research Center led the process to analyze and summarize the results using rapid qualitative analysis. The methods were developed by Allison Hamilton PhD, MPH at the VA Center for the Study of Healthcare Innovation, Implementation & Policy ([https://www.hsr.d.research.va.gov/for_researchers/cyber_seminars/archives/video_archive.cfm?SessionID=3846](https://www.hsr.d.research.va.gov/for_researchers/cyber_seminars/archives/video_archive.cfm?SessionID=3846)).

Listening Session Results for Pillar 1: Improve food access and affordability

A. How has hunger or diet-related disease impacted you, your family, or your community?

Listening Session participants with lived expertise and advocates shared the various ways that they, their family or their community have been impacted by hunger, food insecurity or not having a stable access to food to eat for nourishment and health. Discussions prioritized hearing the testimony of people with lived expertise.

Through the analysis process, summary statements were made for thematic groupings of quotes. Each quote is identified by the name of the Listening Session group, and if the person was speaking as a person with lived expertise or representative of an agency. Although many participants fit both categories, the quote itself was used to make the determination.
1. The state of food insecurity can change rapidly, and only requires the convergence of a few unfortunate events. More people are closer to experiencing food insecurity than they may realize.

“When the pandemic started, my brother died of COVID...And then my family got COVID. And we were already in a position where we weren't amazing. We weren't set up with extra anything. And during that time [March 2020], I lost my benefits. I lost my job. I didn’t have EBT and I was quarantined for three weeks with two boys. And I was really scared. I didn’t have anything.” (State-wide meeting with Rep. McGovern 6/27/2022, personal testimony)

“The same year that my boss of 18 years retired, I also lost my husband. So, up until that point, I had a great job, was never food insecure, didn’t even really know what food insecurity was. Then for the very first time in my life, I was a single mom of three kids on unemployment...when you struggle like that you never forget.” (State-wide meeting with Rep. McGovern 6/27/2022, personal testimony)

2. Relying on a network of food pantries, benefit programs, and cheap restaurants often means eating unhealthy or expired food. People also reported stretches of time with no food at all.

“I could trace the trauma of hunger, through the scars on my body, I have had to get my gallbladder removed, because of so many years of like, inconsistent food, I have a scar on my face where I almost died from a tooth infection that didn’t get treated, but it was caused by me not having access.” (McGovern conversation, 6/27, personal testimony)

“I’ve been sick myself, I had a stroke and a half in the past two years. And I kind of attributed a lot of that to my diet. Like, I started eating a lot of crap...one of the things that we should really, really be concentrating on when we’re giving food to people is making sure that as good, fresh, healthy, root, vegetables. Whatever we can get, we [should] get it as low as possible. Prices that are astronomical right now.” (McGovern conversation, 6/27, personal testimony)

“The poor are not garbage disposals.” (Google form response, personal testimony)
“Food pantries are necessary but humiliating at times. I’m not knocking the food pantry, I'm very grateful for them, but we receive a lot of outdated food, sometimes 2 years outdated. Once, in our box, we were given apples donated by a woman who collected them on a walk that were picked off the ground. All diseased with deep black spots, bugs and bruises. They looked like crab apples. We have received opened and used peanut butter jar with crumbs in it. It is quite humiliating. People don’t ask for this situation. Its mortifying how little dignity is offered when you are in dire straits.” (Google form response, personal testimony)

3. Hunger, and the time it takes to obtain food when one can’t afford it, is deterring from educational and other advancement opportunities.

“It is so anguishing, so frustrating to hear that the students are trying to get a better education, because we talk about the number one way to get out of poverty is to get an education. If you’re dropping out of school, because you can't get food, which I have to tell you is what is actually happening. It is very, very frightening.” (State-wide meeting with Rep. McGovern 6/27/2022, higher education employee testimony)

“Even when I had some food stamps, I usually had to supplement them with the pantries and soup kitchens. All the time spent acquiring food was time that I could not devote to other activities and opportunities.” (Google form response, personal testimony)

“I have had to skip appointments, social events, medical care, and educational opportunities, and religious services because of the inconvenient timing of food dispensation. “ (Google form response, personal testimony)

4. Food insecurity and medical insecurity often coincide. People are going hungry to afford life-saving drugs, disability treatments, and medical debt payments.

“My lungs were devastated by COVID, and the medication prices to keep me alive are astronomical...I need to pay $528 a month, not including my high blood pressure and other medications. It's a necessity, not including my mortgage and other utilities. So our food budget basically, is what we have to give up, right, because that's the thing that and I'm sure I'm not the only one that this is happening to. There are a lot of other seniors, and we need to take this into account.” (McGovern conversation, 6/27, personal testimony)
“At the time I was food insecure. My income was relatively decent, but I was a single mom with high health care and housing costs. There was little leftover for food. I kept a running inventory of the food in our pantry in my head at all times. If there was an unexpected expense or a trip to the doctor, it was subtracted out of my food budget.” (McGovern conversation, 6/27, personal testimony)

“There a lot of people in the disability world who have issues with medical meals and it is very difficult to convince insurance companies that you need medical meals. Decisions if you can get medical meals are made by people who don’t understand the science between chronic/genetic health conditions.” (State-wide meeting with Rep. McGovern 6/27/2022, personal testimony)

“When the pandemic started, we began receiving free school meals. My daughter had a variety of food choices and kid friendly foods that I could not otherwise afford. I noticed that suddenly I had breathing room in my budget for things like clothing or medicines.” (State-wide meeting with Rep. McGovern 6/27/2022, personal testimony)

5. Experiencing food insecurity can be exhausting and stigmatizing. In addition to the stress of not having food, individuals feel a combination shame, guilt, and embarrassment, and can face discrimination.

“It’s embarrassing. It’s humiliating, you don’t want to tell people ‘Oh, I’m food insecure.’ So sometimes you have resources around you, but you’re embarrassed to show up at the food bank.” (State-wide meeting with Rep. McGovern 6/27/2022, personal testimony)

“I’m hearing people used to ordinarily go to the food pantries and get food, but now they’re asking them for social security numbers and they don’t have it... People got scared that they would be followed or apprehended, and they stopped going [to food pantries]...I don’t understand because these are places that before did not ask for those documents.” (Worcester Together meeting, 6/24/2022, food security advocate testimony)

“The individual and family embarrassment of needing to ask for help is something that people often forget... I’m going to swipe this very obvious bright blue card with my picture on it at the grocery store.” (Worcester Together meeting, 6/24/2022, food security advocate testimony)
“I was so traumatized, by the last experience I had applying for SNAP, that I had to weigh that and decide that it's not worth the months that it will take me to prove that I'm eligible, and literally the novel of documentation that I'll have to submit, in order to prove it.” (State-wide meeting with Rep. McGovern 6/27/2022, personal testimony)

“Waiting in line in the snow outside food pantries is humiliating.” (Google forms, personal testimony)

B. **What specific actions should the U.S. Federal government, including the Executive Branch and Congress, take?**

Participants had direct recommendations for actions the US Federal government to take to improve access to programs. These recommendations are supplemented with summary statements and direct quotes.

1. **Make COVID-era policies permanent.** Families and individuals identified the following policies enacting during the pandemic that facilitated their ability to eat healthy meals consistently. Food bank employees reported a documented decrease in demand when these benefits were available.

   "When the federal government was providing those additional resources, such as the monthly child tax credit payments, and the additional boost in SNAP benefits, we actually saw the number of people go into food pantries go down.” (State-wide meeting with Rep. McGovern 6/27/2022, personal testimony)

   a. **Universal school meals should be reinstated.** Children should be allowed to take meals home from school to eat during the weekend.

   "When the pandemic started, we began receiving free school meals. My daughter had a variety of food choices and kid friendly foods that I could not otherwise afford. I noticed that suddenly I had breathing room in my budget for things like clothing or medicines.” (State-wide meeting with Rep. McGovern 6/27/2022, personal testimony)
b. **Eliminate summer school meal USDA requirements requiring that each child be present in order to pick up summer meals.** This requirement puts an unreasonable burden on parents who work and whose children are at camp/out of the home.

> "If your kids are able to be in programs doesn’t make any sense to them, pull your children from a program or a camp, and then only to have them go with you to pick up the food to go home to safely store it. And then bring your children back to that program, which would likely be frowned upon for anyone who has a child in a program would be very difficult for that program to effectively help that child receive that experience for that education. And it’s not only a disruption for that group of people, but also for the family’s ability to work.” (State-wide meeting with Rep. McGovern 6/27/2022, personal testimony)

c. **Emergency SNAP (Supplemental Nutrition Assistance Program) allotments should be made permanent.** In March 2020 Congress authorized extra SNAP benefits ("Emergency Allotments") because they recognized the extreme financial need caused by COVID, the inadequacy of the regular SNAP benefit amount, and the increasing cost of food. The Trump Administration only allowed states to issue the extra SNAP to “top off” households getting less than the maximum monthly SNAP benefit for their household size. This meant the lowest income households got very little or nothing extra. About 40% of households – more than 200,000 families in Massachusetts – received no extra SNAP benefit. To address the inequities of the prior policy, beginning in April 2021 the Biden Administration expanded the extra SNAP benefits to provide a boost up of at least $95 to all SNAP households, including those who got no extra SNAP before. Unfortunately, these extra payments will only remain effective as long as there is both a state and federal public health emergency declaration.

d. **Child tax credit**

> "When the federal government was providing those additional resources, such as the monthly child tax credit payments, and the additional boost in SNAP benefits, we actually saw the number of people go into food pantries go down.” (Food Security Task Force meeting, 6/26/2022, food pantry representative testimony)
1. **Continue the SNAP program with improvements.** SNAP benefits are essential to helping people eat.

"SNAP and other programs have been essential to being able to stay afloat but never enough to cover more than half a month with careful shopping, budgeting and cooking at home. The constant stress caused by poverty is unrelenting." (Google form response, personal testimony)

**Recommendations to improve the program are:**

a. **Replacing the Thrifty Food Plan (TFP) with a more adequate food plan as basis for SNAP allotments.**

SNAP's most important weakness is that benefits are not adequate to get most families through the whole month or buy the foods needed for a quality diet. Benefits are inadequate, in part, because they are based on the U.S. Department of Agriculture's (USDA) impractical Thrifty Food Plan. The USDA's Low-Cost Food Plan – not the Thrifty Food Plan – is a much more appropriate basis for SNAP allotments. Such a change would improve the health and well-being of millions of low-income Americans.

Research published since the 2006 revision shows that the TFP is impractical and inadequate. SNAP recipients cannot afford the plan and an adequate diet with their allotment. This is true despite the fact that SNAP participants use a variety of savvy shopping practices to stretch their limited food dollars. The most substantial weaknesses of the TFP and its use in SNAP are:

- Includes impractical lists of foods,
- Lacks the variety called for in the Dietary Guidelines for Americans,
- Unrealistically assumes adequate facilities and time for food preparation,
- Unrealistically assumes food availability and affordability,
- Unrealistically assumes adequate, affordable transportation,
- Underestimates food waste,
- Is exacerbated in its inadequacy by SNAP benefit calculations,
- Costs more than the SNAP allotment in many parts of the country, and
- Ignores special dietary needs.
The amount of the federal government’s own Low-Cost Food Plan – the lowest of three government budgets for normal use – is approximately 30 percent higher than the TFP, depending on household composition. While the Low-Cost Food Plan shares several limitations of the TFP and cannot solve all of problems of the TFP, the Low-Cost Food Plan should be the basis for SNAP allotments for two key reasons: the plan is generally in line with what low- and moderate-income families report that they need to spend on food, and it allows for greater food variety and choices to support a healthful, palatable diet. USDA researchers in the early 1980s found that households spending at the Low-Cost Food Plan level had more nutritionally adequate diets than those households spending at the TFP level. This is consistent with a more recent study which found that increases in food spending positively impact the dietary quality of SNAP participants. Basing SNAP allotments on the Low-Cost Food Plan means participants will have more adequate benefits, less food insecurity, and healthier diets.

“And as a former EMT firefighter, who’s now disabled I see a lot of food inequity along the disabled and what the gentleman before me was referring to as food as medicine and the work that needs to be done with getting food to people like myself who have very low income. My EBT runs out. I’ve already gone through my EBT already and I still have to wait until the 15th of the month to get more food which is really really scary to me. And especially as a disabled woman.” (State-wide meeting with Rep. McGovern 6/27/2022, personal testimony)

“The National Low Income Housing Coalition has determined Massachusetts to once again, rank among the highest of most expensive states to live. We have to consider not just the housing market, the cost of utilities are extreme here, the cost of childcare, and then you know, we have 1000s of people who are eligible for SNAP like myself, that are not actually receiving those benefits for a variety of reasons.” (State-wide meeting with Rep. McGovern 6/27/2022, personal testimony)

“Food has gone up so much. It’s so expensive, that I almost feel like I’m rationing portions making them stretch.” (State-wide meeting with Rep. McGovern 6/27/2022, personal testimony)

“We have to do something about this uncontrollable price increases on gas and utilities. If we have mechanisms put in place to take a look at this, they’re not working, they’re totally out of whack. They they’re not functioning at all. These increases these things that are going on is under, it’s unconscious under, there’s no control. There’s no oversight, there’s no review.” (State-wide meeting with Rep. McGovern 6/27/2022, personal testimony)

b. **Raise the national SNAP income threshold**

If two parents are working a minimum wage ($15/hour) job, they will make a combined $4800/month, which is 250% of the federal poverty level.

“The poverty threshold index effects are, it’s affecting a lot of us. I know there was an increase, but that is so, so, unrealistic. For people that work that are in the service industry, a lot of people comment that they’ve gotten a raise, they’ve gotten whatever, because of COVID it went up to automatically to $15. We have been fighting for years for $15 raises...but the costs of everything else has wiped that out, wipe that out clearly. This threshold is keeping people in poverty, keeping us struggling and fighting against each other.” (State-wide meeting with Rep. McGovern 6/27/2022, personal testimony)

c. **Streamline eligibility and residency rules across all 50 states**

When people move state to state, they should not be faced with the burden of reapplying.

“The requirement to live in a state for a certain period of time, stop benefits in home state, etc, puts a huge burden on families, especially those fleeing domestic violence. Moving state to state creates a huge gap in benefits.” (State-wide meeting with Rep. McGovern 6/27/2022, employee testimony)

d. **Do not count Social Security Income as SNAP eligible income**

This requirement has made this program inaccessible for people with disabilities.
“As a senior who became disabled at 62, I am on a fixed income and was getting only $15 a month SNAP. Now my disabled son lives with me and COVID SNAP benefits help, but I don’t know what we will do after. Even now I will go without to make sure he has enough to eat.” (Google Form feedback, personal testimony)

“[Medications cost] $528 a month not including my high blood pressure and other medications, I need to, there’s a necessity, not including my mortgage and other utilities. So our food budget basically, is that we have to give up, right, because that’s the thing that and I’m sure I’m not the only one that this is happening to a lot of other seniors, and we need to take this into account.” (State-wide meeting with Rep. McGovern 6/27/2022, agency)

e. Make SNAP available to people who are undocumented or who are recent immigrants

People who are undocumented and who are recent immigrants are paying sales and income taxes but are barred from accessing this program or do not apply out of fear of losing citizenship.

“I don’t use WIC, SNAP, or HIP because I just don’t feel comfortable submitting all my personal details...most parents share that concern with me.” (Together for Kids Coalition, 6/24/2022, personal testimony)


The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) established a five-year waiting period for legal permanent residents in accessing federal public benefits for which they would otherwise be eligible, including the Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), Medicaid, the Children’s Health Insurance Program (CHIP), and the Supplemental Security Income (SSI). The 1996 law to restrict access to these programs was fueled by racist anti-immigrant narratives such as “immigrants are coming here to get welfare” and “we shouldn’t spend U.S. citizen taxpayer dollars.” The reality is that most immigrants are taxpayers and contribute greatly to our economy, including supporting the very programs and benefits they are barred from using. It has been 25 years since the passage of PRWORA, and immigrants and their families are still harmed by this racist
Children with an immigrant parent are twice as likely to be uninsured than children who have citizen parents. Immigrant families are more likely to be food insecure, and more than 20 percent of immigrant families with low incomes reported issues paying for their rent or mortgage. The pandemic has only exacerbated these issues because immigrant families have been overrepresented as essential workers but left out of relief.

A quarter of all U.S. children have an immigrant parent—but even though the majority of those children are U.S. citizens, their parents are often reluctant to seek critical services on their behalf. In some cities in Massachusetts, philanthropy attempted to fill the gaps this harmful rule has created for immigrant families by giving away gift cards to immigrant families that were hardest hit by the pandemic.

“Even though they were eligible for safety-net benefits these immigrant families were terrified of utilizing any government benefits. There was a family that struggled with utility bills and the family economized by taking cold showers in the winter and only allowing warm water and heat for their children.” (Worcester Food Security Task Force, 6/26, employee testimony)

g. Ease the “benefit cliff” to allow people to move towards self-sufficiency by providing a 6 month to 1 year buffer after an income raise before losing SNAP benefits.

“Prevent the benefit cliff, people end up being worse off when start working, lose access to SNAP or child care.” (State-wide meeting with Rep. McGovern 6/27/2022, agency)

“We have to come up with some kind of policy that will support people for a longer amount of time, you know, maybe their benefits are gradually reduced, but they shouldn't have them one day, and then the next day they're gone. So I think that that whole idea of a cliff effect.” (State-wide meeting with Rep. McGovern 6/27/2022, agency)

---


h. SNAP should extend income exemption for students from age 17 to 22.

SNAP/Food Stamp law has long treated the earnings of children through age 17 as non-countable as long as the child is a) living at home and b) in school at least part time. This rule applies to children in elementary, middle, and secondary school. However, once the child turns age 18 – even though he or she may still be completing high school and attending at least part time – his or her earnings suddenly become countable, creating a “birthday cliff effect” that reduces SNAP benefits for the entire family. This reduction in SNAP benefits happens at an age when the young adult is likely consuming more calories than most other family members between work and school, and at an age when that young adult may be most vulnerable to dropping out of school or moving away without sufficient resources to live on his or her own.

Under the current structure of the Food Stamp/SNAP program, dependent children are doubly penalized as they enter adulthood. On the one hand, federal law requires them to be mandatory members of their parent’s household until age 22 if they live at home. And state law in Massachusetts and most states allow young adults to stay in K-12 grades until they reach age 22. Many young adults finishing high school or working towards their GED remain at home to save money and contribute towards their parents security, which means their income is deemed available to the household while they are in the midst of finishing their high school education. Further, if the 18 to 22-year old child attending high school and living at home fails or refuses to provide the SNAP state agency with wage stubs and/or permission to contact the employer to confirm income, the SNAP rules require states to deny SNAP benefits to the entire family for “failure to cooperate” with the financial eligibility rules. This scenario can create substantial tension in a household where a young adult is working hard to finish school as well as save for a car, go to college, or meet other personal needs.

Counting the income of young adult and high school students punishes both the student and his or her family. It fails to recognize the new reality that high school students will be older and may have a higher need to work due to educational setbacks and caregiver loss.

The pandemic caused many children to miss school due to lack of internet access or because they did not have the necessary support to master remote learning.¹¹ Pandemic-related learning loss means hundreds of thousands of school children will be required to repeat a grade as some estimates suggest many — if not most — are now a year or more behind in reading and math.¹² The fallout could last a generation causing bottlenecks in school systems, larger class sizes that could clog the nation’s education system for years to come, and increasing the amount of older students in the classroom.¹³

i. Decrease regulations around what individuals can purchase with SNAP

"The best programs have been those that reduce stigma and segregation and allow me the flexibility to choose where, when, and what I eat.” (Google form responses, personal testimony)

j. Allow SNAP to purchase hot meals in grocery stores and restaurants

This is crucial for disabled, elderly and unhoused individuals who cannot cook.

"And I think it’s particularly challenging for individuals with disabilities, who may not be able to cook a meal in the same way as someone who doesn’t have a disability, and we’re making the decision for people that Oh, no, no, you can’t buy that, even if that means that we’re putting a barrier to food up for somebody who really needs it.” (Worcester Food Security Task Force meeting, 6/26/2022, employee testimony)

¹³Id.
k. Make SNAP enrollment easier

“[People have] technological challenges with accessing government programs, so SNAP, you have to log online...all that stuff you have to do through the internet” (Together for Kids Coalition, 6/24, employee testimony)

l. Get rid of the Able-Bodied Without Dependents work/volunteer requirement. Individuals who are over age 18 and under 50 are limited to three months of SNAP benefits every three years unless they are working or in a work or training program 20 hours a week. Some individuals are exempt from this requirement, such as those who live with children in the household, those determined to be physically or mentally unfit for work, pregnant women, and others determined to be exempt from the three-month time limit.

When the three-month time limit is in effect, the law allows states to suspend it in areas with high and sustained unemployment. Prior to the pandemic, the time limit applied in at least a portion of the state in most states. This exemption should be made permanent as research suggests that taking SNAP away from people because they cannot find stable employment will not create more job opportunities or better equip workers to maintain work, while losing SNAP can result in significant hardship. Work requirements in other programs have generated little or no long-term increase in earnings and employment and have caused many households — often those with the greatest disadvantages — to lose assistance, leaving them in deep poverty, research shows.14

The time limit also disproportionately affects people of color. Nearly every study comparing the race and ethnicity of sanctioned and non-sanctioned recipients of Temporary Assistance for Needy Families who are subject to work requirements finds that Black people are significantly more likely to be sanctioned than their white counterparts, an outcome that likely occurs in the implementation of the SNAP time limit as well.15

Experiencing food insecurity, poor health, or housing instability can make it more difficult to find and sustain work. SNAP participation can improve some health outcomes, and tackle the long-term disparities that have existed in low-income communities.

---


2. Encourage national food as medicine initiatives.

“A lot of people in disability world who have issues with medical meals and it is very difficult to convince insurance companies that you need medical meals. Decisions if you can get medical meals are made by people who don't understand the science between chronic/genetic health conditions.” (State-wide meeting with Rep. McGovern 6/27/2022, personal testimony)

   a. Encourage all 50 states to incentivize fresh fruit and vegetable purchasing through programs that double SNAP dollars at qualifying vendors.

3. Facilitate screening for food security and referral to resources during healthcare provider visits

   a. Train physicians and nurses to screen for and recognize food insecurity and connect patients to necessary resources. This is especially important for health centers that serve low-income communities, such as federally qualified community health centers.

C. What specific actions should local, state, territory and Tribal governments; private companies; non-profit and community groups; and others take?

Through the analysis process, summary statements were made for thematic groupings of quotes. Each quote is identified by the name of the Listening Session group, and if the person was speaking as a person with lived expertise or representative of an agency.

   a. Recommendation for the State: Make the SNAP sign-up process more accessible with the Department of Transitional Assistance (DTA)

   i. Provide translation services in many languages. Currently, recipients receive information in English or Spanish. If they speak any other language they receive a two sided page called a Babel Notice. This notice states in multiple languages that if the person cannot read they should call the main assistance number.
This is problematic because 1) with so many languages written it is difficult to find the particular language needed, and 2) the number given is to the main assistance line which begins in English, and 3) the guidance on the paper does not explain to the reader what prompt they should press. This leaves recipients without the ability to understand the correspondence sent to them. This is problematic because if their benefits are being affected they will not know that they have legal recourse because they cannot understand what the letter states.

"It's really hard when we don't have the ability for them to have access to language lines." (Worcester Food Security Task Force, 6/26/2022, employee testimony)

“The language barrier is our number one issue” (Worcester Food Security Task Force, 6/26, employee testimony)

ii. **Place DTA offices in locations that are easy to reach.** DTA serves one in eight residents of the Commonwealth with direct economic assistance (cash benefits), food assistance (SNAP benefits), and workforce training opportunities. To access these safety net services, DTA offices need to be in locations accessible to all residents.

iii. Those without transportation or technological access, our most vulnerable families – those with children, the elderly, the homeless, and the disabled, face many challenges. The technological divide is real. For many residents accessing assistance and support via phone or computer is a huge challenge if not an impossibility.

DTA has been closing and relocating offices throughout the state without asking for the input of the communities it serves. Some relocations are to areas that are impossible to access via public transportation. Even where public transportation is available, the relocation increases the commuting time for residents from 2 to 3 hours each way! This has widened the accessibility gap between those with access to a car and those without access.

DTA is required to provide meaningful access to its services. It cannot do this when its offices are isolated from a resident's reach. The commonwealth has current regulations that need to be enforced in order to ensure that safety net programs become and remain accessible to all individuals.
This is more important now when state agencies are pushing for more online services, leaving behind the most vulnerable.

"I'm talking about SNAP, like the snap office that moved. Chucky Cheese area or wherever it is, you know, sometimes you have to take three buses." (Together for Kids Coalition, 6/24/2022, employee testimony)

iv. Increase the hours availability of telephone lines and the number of people that answer at the Department. Due to the long wait times during business hours it is difficult for people to access benefits. In addition, many individuals have government phone which give limited minutes. There should be an exemption to 1-800 or state agency numbers.

“When they call the office...nobody gets back to these families. They have questions, they need to reapply, they got cut off for some reason, and they can't contact a person on the phone to fix the issue” (Together for Kids Coalition, 6/24/2022, employee testimony)

“If you're trying to call the DTA, they can't get a hold of them, or if they get a hold of somebody, they don't have someone who can translate for them. It's really becoming a big problem. And we're noticing one of the biggest things we're noticing, especially in our elder sites, where this is the same situation is, we don't have enough Worcester Housing Authority employees, you know, coordinators, eldercare service providers to help them get food that they need or fill out even applications, let alone get someone on the phone” (Worcester Food Security Task Force, 6/26/2022, employee testimony)

v. Improve the DTA website to make it easier to enroll in SNAP. The website should also be more mobile friendly as many low-income households utilize their smartphones as their main method of internet access.

“Before I could help people enroll online...It's been over two months that their webpage is not working properly.” (Together for Kids Coalition, 6/24/2022, employee testimony)
b. Recommendation for the state: Pass the Hunger Free Campus Initiative in Massachusetts. The Massachusetts Hunger Free Campus Initiative (S.2811 and H.4697) would provide colleges with funding and technical assistance to address food insecurity among students in institutions of higher learning.

“But it would provide funding for campuses to provide services for students and it would make SNAP enrollment a lot easier. It almost, I think it would actually be part of as you enroll in college, you know, you'd actually be able to enroll in the SNAP programs.” (State-wide meeting with Rep. McGovern 6/27/2022, agency)

“And if I can say the one thing that's preventing people from getting help is the shame. The stigma, the fear of reaching out to professor's the fear of reaching out to who can I tell what can I say, when people come to our office, we're connecting them to these resources. It is so anguishing so frustrating to hear that the students are trying to get a better education, we can talk about poverty, the number one way to get out of poverty is to get an education. If you're dropping out of school, because you can't get food, which I have to tell you is what is actually happening. It is very, very frightening.” (State-wide meeting with Rep. McGovern 6/27/2022, agency)

c. Recommendation for the State: Pivot Massachusetts Emergency Food Assistance Program funding from food pantries to direct cash programs. Food pantries were created as an emergency system to tackle the need of food in times of disasters. Unfortunately, it has become the go to response for law makers and philanthropy to tackle an issue that can be addressed with better policies. Since its inception in 1995, MEFAP's budget has increased dramatically to 30,000,000. While food pantries play a pivotal role in anti-hunger work, a significant portion of this budget goes towards administrative costs. The state should consider issuing cash programs to allow individuals the opportunity to purchase their meals they prefer and giving them back their dignity.

“We're really putting a burden on our patient when we're seeing, you can only buy this and not that and you can only do this and not that, you know, people should be in control of their own lives and their family's lives. And I think it's particularly challenging for individuals with disabilities, who may not be able to cook a meal in the same way as someone who doesn't have a disability, and we're making the decision for people that Oh, no, no, you can't buy that, even if that means that we're putting a barrier to food up for somebody who really needs it.” (Worcester Food Security Task Force meeting, 6/26/22, employee testimony)
d. **Recommendation for non-profit agencies:** Recognize transportation barriers in the population you serve, and collaborate to overcome them.

"Since the pandemic, it has sometimes been impossible to obtain the necessary ID and medical documents necessary to apply for affordable transportation. I spent two years only able to access food that I could reach on foot and carry home. In the summer, if I did not walk miles at dawn, before the temperatures reached up to 117 degrees, I had no access to many basic foods until the next day at dawn.” (Google form responses, personal testimony)

"We need transportation and like vans or, or whatever that looks like because it's hard to travel with kids, even on buses. And I mean, a cab, like they have to spend their earnings like on a cab. I work with seniors too, and I bring the food to the people because transportation lacks. So that's what I seen and what I experienced.” (Together for Kids Coalition, 6/24, employee testimony)

"Let’s not forget that elderly lot of them don’t have access to transportation to get out to get food from these food pantries.” (State-wide meeting with Rep. McGovern 6/27/2022, agency)

e. **Recommendation for non-profit and state collaboration:** SNAP ambassadors.

Many communities across the country have successfully implemented a SNAP ambassador program, often as a collaboration between a local department of public health or city office and non-profit organizations. These individuals should be representatives from communities often excluded from receiving SNAP benefits, speak multiple languages and be well versed in the application process and connected to support lines.

"Don’t just give us a pack of booklets or pack of papers to read, it is not going to give us the right information that we need. Most people don’t have the patience to have the challenge. So like any small organization, immigrant small gathering, or, you know, that just translate into some of these things will make parents comfortable, making immigrants and undocumented immigrants comfortable for signing up for this resources now.” (Together for Kids Coalition meeting, 6/24/2022, personal testimony)

D. **What are innovative, successful activities already happening at the local level that could inform actions at the Federal level?**
1. A hot meals delivery program provides food from culturally diverse local restaurants to people who test COVID+. In Worcester, the Taskforce on Food Security reached out to various partners to create a program of referring people who are COVID+ and in need of food to restaurant meals prepared and delivered from local, culturally diverse restaurants. This program sustained not only these individuals and families who needed food, but also the local restaurants.

Building from the success of this program, the Taskforce on Food Security partnered with other advocates to push the Massachusetts Department of Transitional Assistance to launch the Restaurant Meals Program (RMP). This will allow SNAP recipients who are over 60, have a disability, or are homeless to purchase hot meals from participating restaurants. This is particularly important to the elderly, people with disabilities and people who are unhoused.

"And during that time, I lost my benefits. I lost my job. I didn’t have P-EBT and I was quarantined for three weeks with two boys. And I was really scared. And I didn’t have anything. But the community was able to show up through community programs, and provide me with things that I needed food supplies, specifically the hot meals delivery program. It was it was a lifesaver to my family. And I didn’t even know about the program, but someone in the community was saying, you know, hey, you know, we can get you free hot meals, you know, if you’re quarantined and COVID, and all these hot meals and supplies and groceries started showing up at my house. And it was like the first real sign of relief. But it was also really the first time I realized how food insecure that I was that without this service. And without my community showing up to help me, I wouldn’t have been able to feed my children.” (State-side meeting with Rep. McGovern 6/27/2022, personal testimony)

2. Community fridges provide food to anyone who needs it seven days a week, 24 hours a day. In Worcester, there are four community fridges located in areas of the city where many residents have high food needs. There are no intake forms or requirements to access the food, and local residents and agencies supply the food.

"[The fridges] have been a wonderful addition to the neighborhood...people walk to it morning noon and night, and on the weekends.” (Together for Kids Coalition/ 6/24/2022, organization employee)

3. Summer camps that serve meals are critical to children getting enough food to eat. These meals are provided by collaborating agencies.
“My daughter attended a rec department summer camp program where summer eats was heavily promoted. She asked me “Can we pick up food there?” I supplemented her P-EBT allowance with food retrieved from the summer eats site.” (State-wide meeting with Rep. McGovern 6/27/2022, personal testimony)

“When I’m trying to send my boys to programs, I’m evaluating, well, does this program provide food? Right? I’m sending them to a summer camp, is there going to be breakfast there, or lunch there? Because if not, I can’t afford to send them because I can’t afford camp.” (State-wide meeting with Rep. McGovern 6/27/2022, personal testimony)

4. Youth-serving agencies collaborate to provide food for families in need of food, such as the local public schools (Together for Kids Coalition, agency), Department of Youth Services, Neighborhood Youth Corps, the Worcester Community Action Council (State-wide meeting with Rep. McGovern 6/27/2022, agency testimony).

5. Transportation: multiple agencies transport food from food pantries to people in need of food. Transportation was highlighted as a critical barrier for accessing food from food pantries. In Worcester, several partnerships providing transportation for food from food pantries, included: National Alliance on Mental Health and Amazon (Together for Kids Coalition, 6/24/2022, agency). The Worcester Food Security TaskForce partnered with Amazon, the Family Resource Center and Catholic Charities to ensure that families had 1) food choice pantry items and 2) delivered food when transportation was an obstacle.

6. Centralized call line: In Worcester, the Family Resource Center’s centralized call line is essential for residents to the help they need, including for hot meals for people who are COVID+, baby formula and food pantries. (Together for Kids Coalition, 6/24/2022, agency)

7. A health care agency is located in a food pantry: In Framingham, a health care agency (Gratis Healthcare) providing free care is housed in a food pantry (Daniel’s Table) in Framingham, MA. (State-side meeting with Rep. McGovern 6/27/2022, agency)

“[food pantry] started asking the question, do you have access to healthcare? Then it became a very easy transition [between services].” (Worcester Food Security Task Force, 6/28/2022, agency)
8. A community freezer program is co-located in many community locations.

In Framingham, a community freezer program is located in health care clinics and community sites

“25 freezers that are strategically placed all over the city. Most of them are in schools, the YMCA, a couple of churches, all the community health centers.” (State-wide meeting with Rep. McGovern 6/27/2022, agency)

The recommendations are based on the findings of the conversations and not necessarily the point of view of the agencies coordinating the Listening Sessions.