



Freedom from Hunger: *An Achievable Goal for the United States of America*

Recommendations of the National Commission
on Hunger to Congress and the Secretary of the
Department of Agriculture

2015



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Executive Summary

To identify solutions to hunger, Congress created the bipartisan National Commission on Hunger “to provide policy recommendations to Congress and the USDA Secretary to more effectively use existing programs and funds of the Department of Agriculture to combat domestic hunger and food insecurity.”

This report is based on the commission members’ full agreement that hunger cannot be solved by food alone, nor by government efforts alone. The solutions to hunger require a stronger economy, robust community engagement, corporate partnerships, and greater personal responsibility, as well as strong government programs.

Our Process. The Commission held regular meetings; traveled to eight cities across America to hold public hearings and visit government, nonprofit, community, and faith-based programs working to alleviate hunger; and heard testimony from 80 invited experts from government, industry, universities, and nonprofits and from 102 members of the public.

What Is Hunger? We chose a precise and readily available measure of hunger called *very low food security*. For purposes of this report, hunger means the lack of access to food when families do not have enough money, causing them to cut the size, quality, or frequency of their meals throughout the year. We wish to be very clear that hunger in America is not the same as famine and the resulting malnutrition seen in developing countries.

Why Is Hunger Significant? In 2014, 5.6% of households in America experienced hunger in the past year, for an average of about 7 months.¹ The percent of households facing hunger rose from 4.1% in 2007 to 5.4% in 2010, and has remained around 5.6% since, even as the economic recovery enters its sixth year.

Root Causes. Many factors lead to hunger in America; focusing only on household income or the availability of government assistance misses major contributing factors such as low or underemployment, unstable families, insufficient education, exposure to violence, a history of racial or ethnic discrimination, personal choices, or a combination of these. These factors can play a large role in hunger and cannot be addressed solely through public nutrition assistance programs or charitable giving.

Populations of Specific Concern. We focused on seven groups that experience high rates of hunger: seniors, single parent families with young children, people with disabilities, veterans and active duty military, American Indians, people affected by high incarceration rates, and immigrants.

Addressing Hunger. The U.S. government, along with a host of nonprofit organizations, corporations, and individuals, works daily to reach millions of families, and they do so in comprehensive, effective, and creative ways. In 2014, the U.S. government spent an estimated \$103.6 billion on federal food and nutrition assistance programs.² Supplementing these are many community programs and private initiatives.

Recommendations. We offer 20 specific recommendations in six areas to reduce hunger:

- I. Improvements to the Supplemental Nutrition Assistance Program (SNAP) (10 recommendations)
- II. Improvements to child nutrition programs (4 recommendations)
- III. Improvements to nutrition assistance options for people who are disabled or medically at risk (2 recommendations)
- IV. Pilot programs to test the effectiveness of strategic interventions to reduce and eliminate hunger (1 recommendation)
- V. Incentives to expand roles for corporate, nonprofit, and public partnerships in addressing hunger in civil society (1 recommendation)
- VI. Creation of a White House Leadership Council to End Hunger (2 recommendations).





Table of **Contents**

Introduction	1
The Commission's Work	4
Who We Are	4
Our Process	6
What Is Hunger and Why Is It a Significant Problem?	10
Root Causes of Hunger	12
Labor Market Forces and Job Availability	13
Family Structure	14
Education	15
Exposure to Violence	15
Historical Context	16
Personal Responsibility	17
Populations of Specific Concern	19
Seniors	20
Single Parent Families with Young Children	21
Veterans and Active Duty Military	22
People with Disabilities	23
American Indians	23
Those Affected by High Incarceration Rates	24
Immigrants	24
Addressing Hunger in America	27
Federal Programs	28
WIC	29
SNAP	30
School Meals	32
Summer and Afterschool Food Programs	34
Community Programs	35
Public-Private Partnerships	36
Recommendations	39
Conclusion	65
References	66
Appendix A. Acknowledgments	77
Appendix B. U.S. Household Food Security Survey Module	84
Glossary	86





Introduction

[The] leading object [of our government] is... to lift artificial weights from all shoulders; to clear the paths of laudable pursuit for all; to afford all an unfettered start and a fair chance in the race of life.

—Abraham Lincoln, July 4, 1861

In America, we seek freedom and opportunity. But for almost 7 million households, the experience of hunger limits their freedom and reduces their chances of success. Thus, hunger in the United States can undermine our nation's full potential.

In spite of diverse viewpoints on the causes and consequences of hunger, we as a Commission are in agreement that hunger is an important problem and that we can do something about it.

Hunger in America is solvable. People in America are not hungry due to war or famine or drought. Our country—with all its strength, genius, creativity, and spirit of community—has the ability to be free from hunger. America has no shortage of food, and no shortage of food assistance programs. But those programs do not work as effectively, cooperatively, and efficiently as they should.

To identify solutions to hunger, Congress created the 10-member National Commission on Hunger. The Commission members, appointed by the House and Senate leadership, represent government, industry, academia, and nonprofit organizations.

We believe that the problem of hunger in America is fundamentally a problem of values—in a nation as rich as ours, no one should go hungry. Our members are in full agreement that the problem of hunger cannot be solved through government efforts alone. In addition to sound public policy, the solution to hunger in America requires an economy with broad opportunity for working age adults, robust community and corporate partnerships, personal responsibility to make good, positive choices for our families and communities, and our sincere commitment to helping others in ways that strengthen the fabric of our society.

There are many root causes of hunger, including labor market forces and job availability, family structure, education, exposure to violence, historical context, and personal responsibility. By focusing on the most vulnerable members of our society, such as seniors, single parent families with young children, people with disabilities, and our veterans, the United States can surely put an end to hunger.

In this report, we outline the pathway to achieve the goal of ending hunger in the United States through 20 recommendations to Congress, the U.S. Department of Agriculture (USDA), and other Executive Branch agencies that can be acted upon in the immediate future. What we outline here is achievable, practical, and forward thinking. These solutions depend on bipartisan actions in Congress, and commitment from the current and future President of the United States and the Executive Branch, and they depend on each of us to make the personal choice to get involved and act on our commitment to help nourish our families and communities. By doing so, we will “afford all an unfettered start and a fair chance.”



This is our charge:

To provide policy recommendations to Congress and the USDA Secretary to more effectively use existing programs and funds of the Department of Agriculture to combat domestic hunger and food insecurity; and to develop innovative recommendations to encourage public-private partnerships, faith-based sector engagement, and community initiatives to reduce the need for government nutrition assistance programs, while protecting the safety net for the most vulnerable members of society.



Defining Hunger: **Very Low Food Security**

“Hunger” is a complex concept to quantify. We wish to be very clear that the situation we call hunger in America is not the equivalent of famine and the resulting malnutrition seen in developing countries.

Food insecurity (see glossary) is measured by the U.S. Household Food Security Survey Module, which has been in widespread use for nearly 20 years. It asks questions about respondents’ reports of uncertain, insufficient, or inadequate food access, availability, and use because of limited financial resources, and about the compromised eating patterns and consumption that might result. The USDA uses the responses to classify households into four categories: high food security, marginal food security, low food security, and very low food security. Households with high or marginal food security are called **food secure**, and households with low or very low food security are called **food insecure**.

To define hunger for this report, we chose a precise and readily available measure called **very low food security**, which occurs when eating patterns are disrupted or food intake is reduced for at least one household member because the household lacked money and other resources for food. The use of this particular measure allowed us to focus on households where the problem is most severe.

Thus, when we use the word “hunger” we mean households experiencing *very low food security*. When statistics are not available for this measure, we may report values for the broader measure of *food insecurity*, which captures both low and very low food security.



Volunteers at the DC Community Kitchen

The Commission's Work

Who We Are

Congressional leaders from both parties appointed the Commission members: three each by the Speaker of the House and the Senate Majority Leader (John Boehner, R-Ohio, and Harry Reid, D-Nevada, respectively, at that time); and two each by the House and Senate Minority Leaders (Nancy Pelosi, D-California, and Mitch McConnell, R-Kentucky, respectively, at that time). We then selected two of our members as co-chairs to guide our work—Dr. Mariana Chilton and Mr. Robert Doar. Our goal was to develop recommendations to Congress and the USDA that had the unanimous, bipartisan support of all our members.



Mariana Chilton



Spencer Coates



Robert Doar



Jeremy Everett



Susan Finn



Deborah Frank



Cherie Jamason



Billy Shore



Russell Sykes

Note: Congressional leaders appointed ten people to the Commission, but one, Ricki Barlow (Reid appointee), later resigned for personal reasons and is not listed above.

Mariana Chilton, PhD, MPH, is an Associate Professor at Drexel University School of Public Health and Director of the Center for Hunger-Free Communities. She directs multiple research studies on the impact of public policy on food insecurity and health and wellbeing among families with young children. *(Reid appointee)*

Spencer Coates is President of Houchens Industries, Inc., and serves on its Board of Directors. He joined the Houchens family of companies in October 2003, after retiring from BKD, LLP, a national public accounting firm where he had spent 30 years serving in various capacities. *(McConnell appointee)*

Robert Doar is the Morgridge Fellow in Poverty Studies at the American Enterprise Institute, where he studies how improved federal policies and programs can reduce poverty and provide opportunities for vulnerable Americans. Previously, he served as Commissioner of the New York State Office of Temporary and Disability Assistance and Commissioner of the New York City Human Resources Administration. *(Boehner appointee)*

Jeremy Everett is the founding Director of the Texas Hunger Initiative (THI) at Baylor University, a capacity building project that develops and implements strategies to alleviate hunger through research, policy analysis, education, and community organizing. Prior to THI, Mr. Everett worked for international and community development organizations as a teacher, religious leader, community organizer, and farmer. *(Boehner appointee)*

Susan Finn, PhD, is the CEO of the global consultancy Finn/Parks & Associates and a recognized leader and respected communicator in the food, nutrition, and health arena. She is a leader in the Academy of Nutrition and Dietetics and is committed to advancing nutrition research and education. *(Boehner appointee)*

Deborah A. Frank, MD, is a child health researcher and the inaugural incumbent of a newly established Pediatric Professorship in Child Health and Well Being at Boston University School of Medicine. She began working at Boston City Hospital (now Boston Medical Center) in 1981. In 1984, she founded the Failure to Thrive Program, now called the Grow Clinic for Children, where she still practices. *(Pelosi appointee)*

Cherie Jamason is President and CEO of the Food Bank of Northern Nevada, a nationally recognized anti-hunger organization and recent Feeding America Food Bank of the Year. She established the Nevada Child Nutrition Initiative implementing summer food and afterschool meal programs for low income children throughout Nevada, and was instrumental in crafting Nevada's first State Food Security Plan and creating Bridges to a Thriving Nevada, which takes on poverty and financial instability. *(Reid appointee)*

Billy Shore is the founder and CEO of Share Our Strength, a national nonprofit dedicated to ending childhood hunger in America through its No Kid Hungry campaign. He is also the author of four books, including *The Cathedral Within*, and chair of Community Wealth Partners, which helps change agents solve social problems. *(Pelosi appointee)*

Russell Sykes is an independent consultant working on multiple federal and state projects focusing on job search in Temporary Assistance for Needy Families, Medicaid reform, Social Security Disability, and workforce engagement. He was the former Deputy Commissioner for New York State's Office of Temporary and Disability Assistance where he was responsible for the administration of SNAP, Temporary Assistance for Needy Families, welfare-to-work, and multiple other public benefit programs. *(McConnell appointee)*

Our Process

Since May 2014, we have met monthly in person or by phone to carry out our work. In addition, we have held regular meetings with representatives of the USDA.

We invited 83 experts from government, industry, universities, and non-profits to give us testimony, and received responses from 80 of them. In 2015, we traveled to eight cities across America to visit programs working to alleviate hunger, including government, nonprofit, community, and faith-based programs. We held public hearings in seven of those cities, where we heard from 102 members of the public. Altogether, we received testimony from 182 people, including experts, recipients of assistance, and members of the public.

Not surprisingly, we gained wisdom from people from all walks of life. We listened to corporate executives who have forged public-private partnerships to reduce dependence on government programs, physicians who have treated children lacking adequate nutrition, state officials tasked with implementing large federal assistance programs while also preventing fraud and abuse, and new Americans in search of a safer and better life for their children. In schools and community centers we witnessed breakfast-in-the-classroom programs, nutrition education and cooking classes, summer meals programs, and emergency food distribution.

Public testimony from Coach Larry Clark of LifeSkills for Youth, where they administer child nutrition programs in Little Rock.



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Sites visited by the Commission

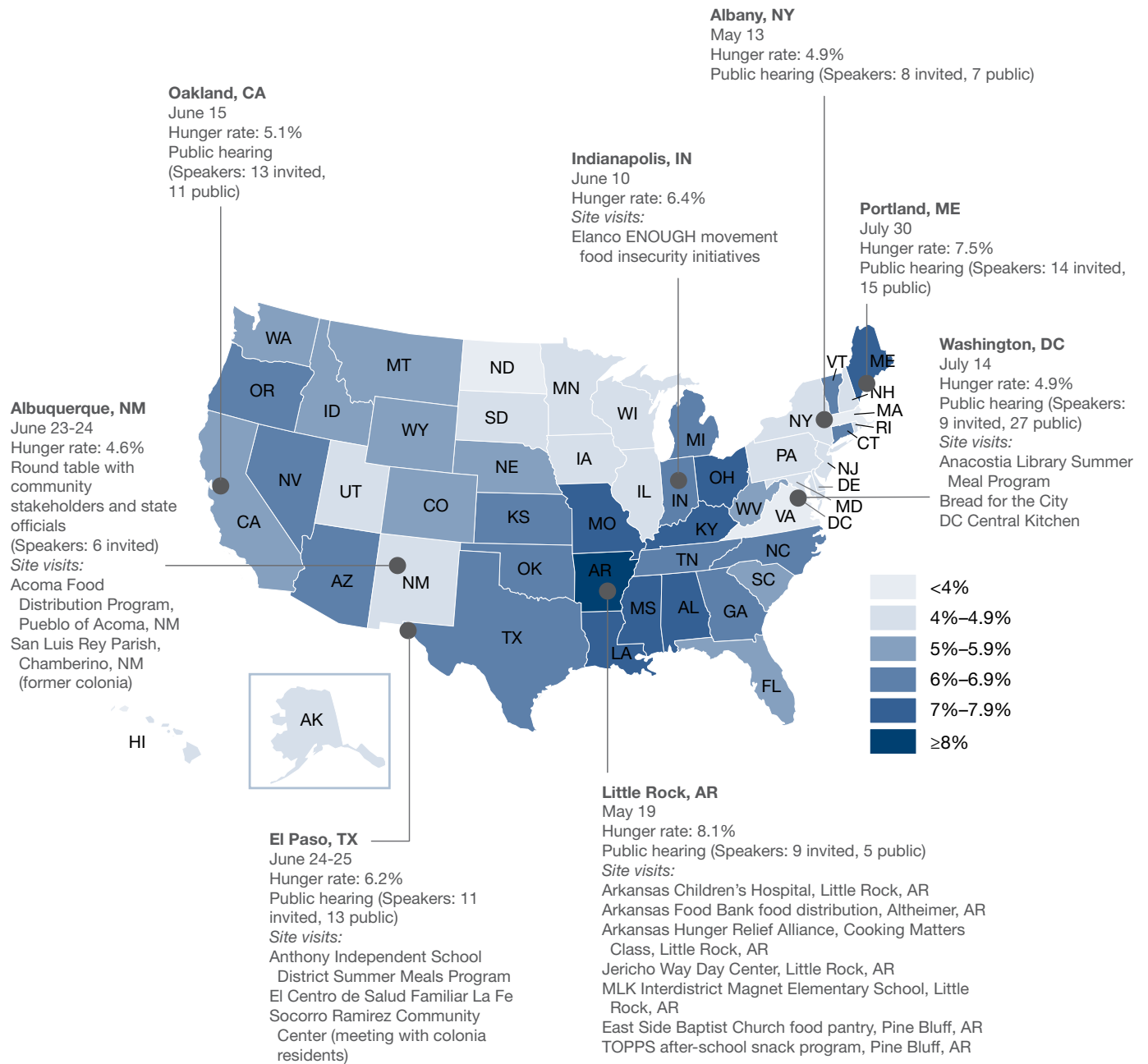


Figure note: All hunger rates are state rate of very low food security for 2012–2014, from USDA Economic Research Service data. State rates range from 2.9% (North Dakota) to 8.1% (Arkansas). U.S. average is 5.6%.



Community meeting at El Centro de Salud Familiar La Fe, El Paso.

We visited Oakland, California, and Albany, New York, sizable cities located in two of the country's largest states, and Portland, Maine, in a northeastern state with high levels of hunger. We visited Little Rock, Pine Bluff, and Altheimer in Arkansas, because Arkansas has one of the highest rates of hunger in the country, and we wanted to observe what local authorities and organizations were doing to address it. We visited immigrant populations in El Paso, Texas, and American Indian (Pueblo) communities participating in a Food Distribution Program on Indian Reservations program near Albuquerque, New Mexico. In Indianapolis, Indiana, we visited a public-private partnership that works on multiple fronts to reduce hunger. In Washington DC, we observed an example of a successful summer feeding program and learned about nonprofit organizations offering job training and health services along with food assistance.

Although these visits offered only a snapshot of people's experiences, they provided insights into the available public and private assistance programs, and revealed the need for continued improvements on both fronts for programs to function more effectively. We also learned first-hand about the root causes and consequences of hunger. Many of the causes are associated with poverty and other economic and social factors, and poverty itself has multiple causes. Solutions to these larger issues are beyond the bounds of our mandate, but we encourage Congress and the President to make them a greater focus, as they lay the foundation for eliminating hunger across the nation.

To support us in our efforts, the Secretary of Agriculture selected, through a competitive bidding process, an independent, nonprofit research



Charlotte Douglas, State Representative, R-75th District, Arkansas, provided invited testimony in Little Rock.

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organization, RTI International, to conduct a current and prospective review of the literature on hunger, offer independent recommendations for reducing hunger, and provide us with ongoing research support and technical expertise. RTI prepared research-based “white papers” on questions posed by commissioners and potential solutions to hunger.³⁻¹⁵ RTI also created a Commission website, which houses our activities, minutes from our meetings, and written testimonies and transcriptions and recordings of the hearings. Commissioners also contributed relevant peer-reviewed papers and other primary sources, some of which were posted on our website.

Because our own backgrounds and disciplines are diverse, we often saw and learned the same things but reached different conclusions. We have sought to set those differences aside in favor of reporting on what we did agree upon, and we have synthesized it to present an overall picture of hunger in America today. At a time when our nation’s politics are so partisan and polarized, we hope the unanimity that we demonstrate in this report will give its conclusions and recommendations extra weight.

This report takes all of the information we collected through this process and synthesizes it to present our collective view of hunger in America today, and culminates in a set of recommendations to Congress, the USDA, and others committed to decreasing hunger in America. Eliminating hunger, as we define it, is possible, but doing so demands leadership and strategic vision. In light of that challenge, we crafted our recommendations to be targeted, meaningful, and realistic. We hope that Congress, the USDA, and the rest of the Executive Branch respond thoroughly, thoughtfully, and urgently.

What Is Hunger and Why Is It a Significant Problem?

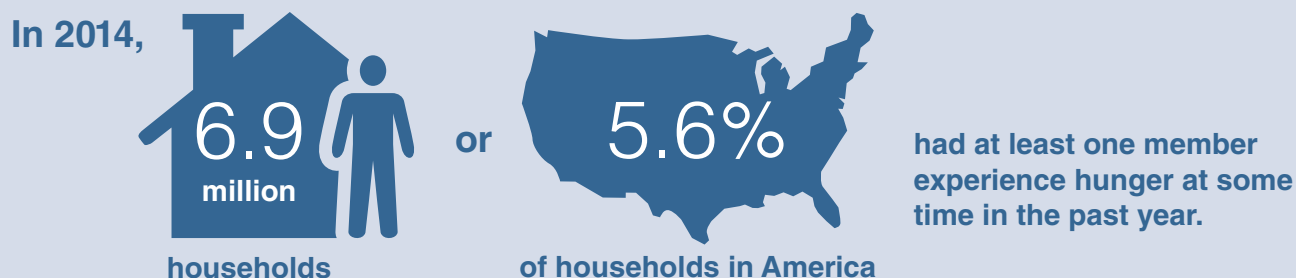
In 2014, 6.9 million households, or 5.6% of households in America, had at least one member experience hunger at some time in the past year.¹

Households reporting hunger (i.e., very low food security) in 2014 experienced it for an average of about seven months of the year.¹ During the Great Recession, the percent of households that experienced hunger increased from 4.1% in 2007 to 5.4% in 2010. The rate has remained at that level even as the economic recovery enters its sixth year. In addition, too many people who could work remain out of the labor market—labor force participation by working age adults has been declining since its peak in 2000.¹⁶

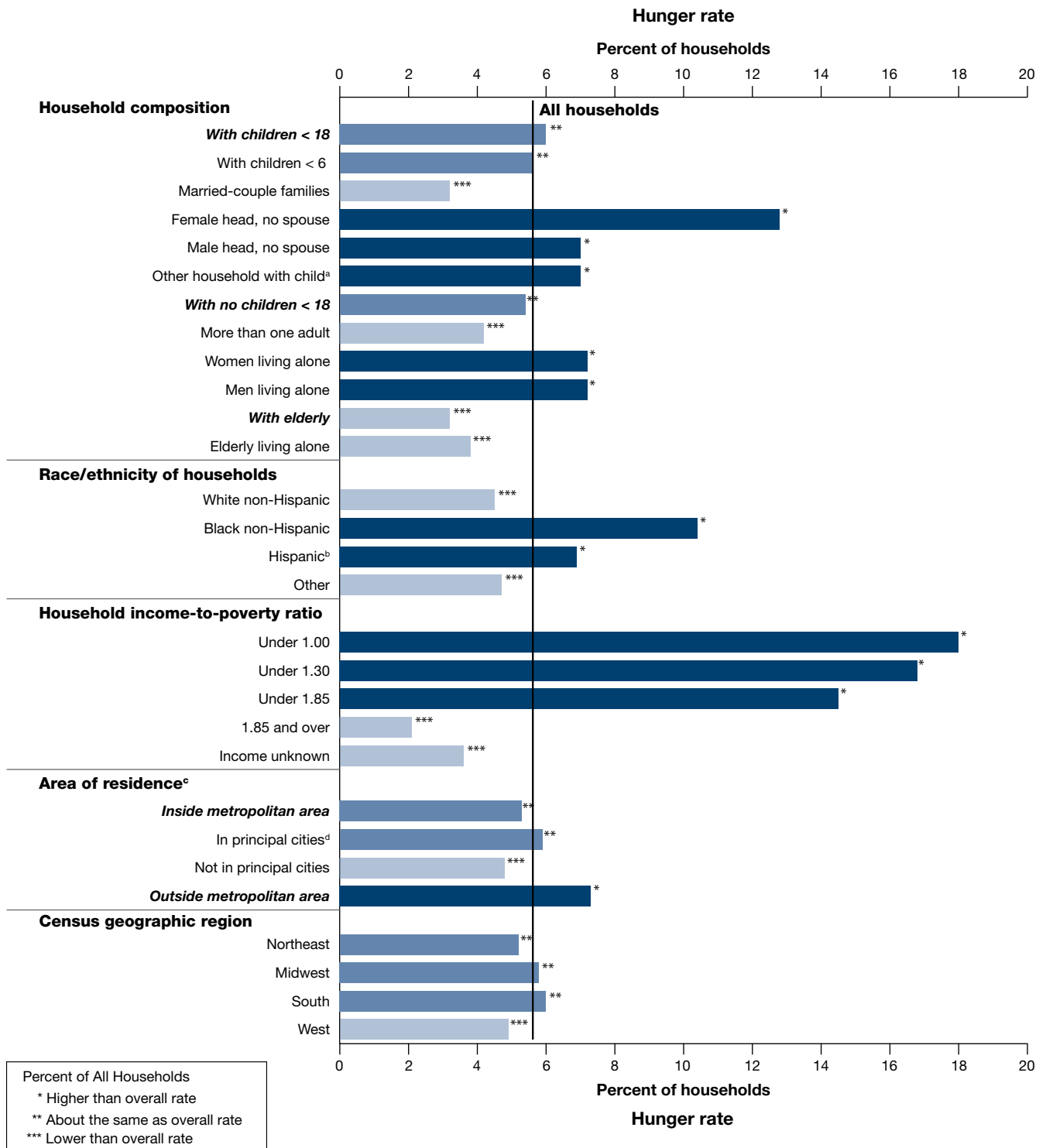
Hunger has far-reaching consequences, not just on individuals, but also on the U.S. health care system, our educational system, and the economy: hunger contributes to nutritional deficits that can undermine people's health, diminish human capital, and impede children's development.¹⁷⁻³⁴ These negative effects can translate into greater health care expenditures, reduced worker productivity, and greater rates of worker absenteeism.^{21,25}

Decades of medical, economic, social science, and educational research have shown that hunger affects people of all ages in the United States. Impairment of childhood health and development arising from hunger may result in poor health and poor academic achievement, generating potentially preventable costs for the health care and education systems.^{20,26,27} Adolescents in families reporting hunger experience more problems with mental health and thoughts of suicide.^{35,36} Adults that report hunger also report poorer physical and mental health and higher rates of being overweight or diabetic, and other related problems.^{17,24,29,30,34} Among seniors, hunger can lead to depression and reduced capacity to perform activities of daily living.³⁷⁻³⁹

Given these serious consequences for individuals and for the productivity and success of our country, it is urgent that we do everything in our power to reduce and ultimately eliminate hunger.



Hunger rates by household characteristics, 2014



^aHouseholds with children in complex living arrangements, e.g., children of other relatives or unrelated roommate or boarder.

^bHispanics may be of any race.

^cMetropolitan area residence is based on 2013 Office of Management and Budget delineation. Prevalence rates by area of residence are not precisely comparable with those of previous years.

^dHouseholds within incorporated areas of the largest cities in each metropolitan area. Residence inside or outside of principal cities is not identified for about 17 percent of households in metropolitan statistical areas.

Source: Calculated by ERS using data from the December 2014 Current Population Survey Food Security Supplement.

Root Causes of Hunger

Many factors lead to hunger in America. A simplistic explanation focused only on household income or the availability of federal nutrition programs misses major contributing factors.

For example, the Supplemental Nutrition Assistance Program (SNAP, formerly known as Food Stamps) has been shown to reduce hunger, but it does not succeed in eliminating it altogether for every participant.⁴⁰ Furthermore, hunger occurs in 25.5% of households with incomes below 130% of the poverty line that did apply for and receive SNAP benefits for 12 months, but occurs in only 10% of households at the same income level that did not receive SNAP benefits at all during that period.¹ Clearly, hunger has causes other than income alone, and therefore, food assistance alone will not eliminate hunger.

U.S. households experience hunger because of limited income due to a variety of factors, including low or underemployment, family instability, low educational attainment, exposure to violence, a history of racial or ethnic discrimination, personal choices, or a combination of these. These factors can play a large role in hunger and cannot be addressed solely through the public nutrition assistance programs or through charitable giving. Understanding the root causes of hunger is essential in order to eliminate hunger.



[People put] energy into collecting data and building infrastructure to distribute food boxes and run soup kitchens, creating ways to get kids to want to come eat some of the meals in the parks and close by—that's a lot of work. It's a lot of planning. It's a lot of organizing and it's great intelligence. Yet, doing so does not assist anyone out of poverty, and/or increase their accessibility to be part of mainstream community. It keeps us in line waiting for the box.

– Dee Clarke, Founder, Survivor Speak (Maine)



Labor Market Forces and Job Availability

The number of households experiencing hunger is sensitive to economic forces.

Globalization:
changes promoting the open flow of goods and services among countries.

Offshoring:
moving jobs from the United States to other countries where labor is cheaper.

The 2007–2009 economic downturn, the Great Recession, led to significant unemployment, which in turn led to an increase in hunger. The number of unemployed workers more than doubled, from 7.1 million in 2007 to 14.3 million in 2009.⁴¹ Hunger levels also jumped sharply during that period. Six years after the official end of the recession, hunger rates shamefully remain at historically high levels, with particularly high rates among single parent households with young children, households of persons with disabilities, and the households of racial and ethnic minorities.^{1,42,43}

Our nation's economy has struggled with significant structural shifts that have occurred over the last 60 years. Manufacturing jobs have declined, partly due to deindustrialization and automation, while the service sector is growing and producing more jobs. Globalization has contributed to more widespread offshoring and outsourcing, particularly of manufacturing jobs, but also of some types of service jobs, such as those in call centers. These trends have contributed to fewer well-paying job opportunities for those without a postsecondary education.^{44,45}

Workers with a high school education or below are more likely to hold jobs that pay low wages, and are part-time, unstable, or seasonal. Oftentimes these types of jobs offer few opportunities for career advancement, and may not offer important supports such as sick leave or family leave. Such jobs are also associated with major income instability or sharp income fluctuations. These are the kinds of conditions that can cause a household to experience hunger.⁴⁶



We hear every day loud and clear from all areas of the state that people can't support their families. They can't get food because they can't find decent jobs. The forest industry, the fishing industry, canning, textile, manufacturing are all in distress. Giant Mills: Empty. A major naval air station: Closed. Mill towns: have struggling economies. We hear about the problem of people living isolated from job centers in a state with virtually no public transportation, or the lack of affordable housing (if people do move to the few job centers).

– Donna Yellen, Chief Program Officer, Preble Street (Maine)



Family Structure

Marriage has a significant impact on whether or not a household will experience hunger:

Households with an unmarried head of household are more likely to face hunger than other households in America.

The hunger rate for households headed by a single mother (12.8%, or 1.3 million households) is four times the rate for households headed by a married couple (3.2%, or 804,000 households). For households headed by a single father, the rate (7.0%, or 228,000 households) is more than twice the rate of households headed by people who are married.¹

Today, 40% of children in the United States are born to unmarried parents.⁴⁷ These pregnancies are mostly unplanned: 69% of pregnancies among unmarried couples are unintended, compared to 35% of pregnancies among married couples.⁴⁸ Children growing up in single parent households are more likely to miss out on fundamental opportunities for their social and emotional development,⁴⁹ and are less likely than children in two parent families to do well in school or graduate high school.⁵⁰ Having children too early in life, struggling to create a safe and stable household environment, and having multiple children outside of marriage compounds this problem.⁵¹

Households with one wage-earner typically have lower incomes. In addition, women earned about 81% of the median earnings of their male counterparts in 2012.⁵² Women with children under 18 also earned less than both women and men without children and men with children.⁵³ Understanding that many factors affect the labor market and play a role in these data, these wage disparities compound the problem facing single-earner households, especially those headed by women. The poverty rate among children in households headed by a married couple is 6.2% (3.7 million households), compared to 15.7% of households headed by a single father (970,000 households), and 30.6% of households headed by single mother (4.8 million households).⁵⁴

**It is important to note here that children can be raised in single-parent households for reasons other than parents choosing not to marry, such as divorce or death of a parent.*



Basically, what it comes down to, being food insecure, you have to go through a lot of resources. It is really aggravating because basically I'm doing what I'm supposed to do as a parent, right? But when there's no husband or boyfriend or any other kind of support, everything falls on me.

– Denise Speed, Marbury Plaza Resident, Anacostia (Washington, DC)



Education

U.S. high school graduation rates have improved, with the national graduation rate exceeding 80% in 2012 for the first time in U.S. history; however, economic, racial, cultural, and ethnic differences remain.

The graduation rate for low-income students in 2014 was below 80% in 41 states.⁵⁵ Some of the most important predictors of high school graduation are reading level at third grade, family poverty, family structure, and concentrated poverty at the neighborhood level.

The relationship between hunger and high school graduation operates in both directions: graduation rates are lower among those experiencing hunger, and hunger, in turn, has been linked to special education and grade repetition, both important predictors of high school dropout rates.⁵⁶ Hunger is also related to lower educational attainment: in 46% of households with hunger among children, the adults did not have an education beyond high school.⁵⁷ Hunger among children is present in 2.9% of households in which the adults did not complete high school, 1.3% of those with adults having only a high school education or GED, and 0.4% of households having an adult with a college degree or more.⁵⁷

Exposure to Violence

Research over the last 10 years has found that victims of violence, neglect, or abuse as a child or violence as an adult, are more likely to report hunger.⁵⁸⁻⁶⁰

For example, hunger rates among women who, as children, experienced physical, emotional, or sexual abuse or household dysfunction (domestic violence, parent in jail) are 12 times as high as rates among women who did not.⁶⁰ Hunger is also more frequently reported by women who recently experienced domestic violence. In some studies, women who report experiencing post-traumatic stress disorder are more likely to report household food insecurity.⁶¹⁻⁶³

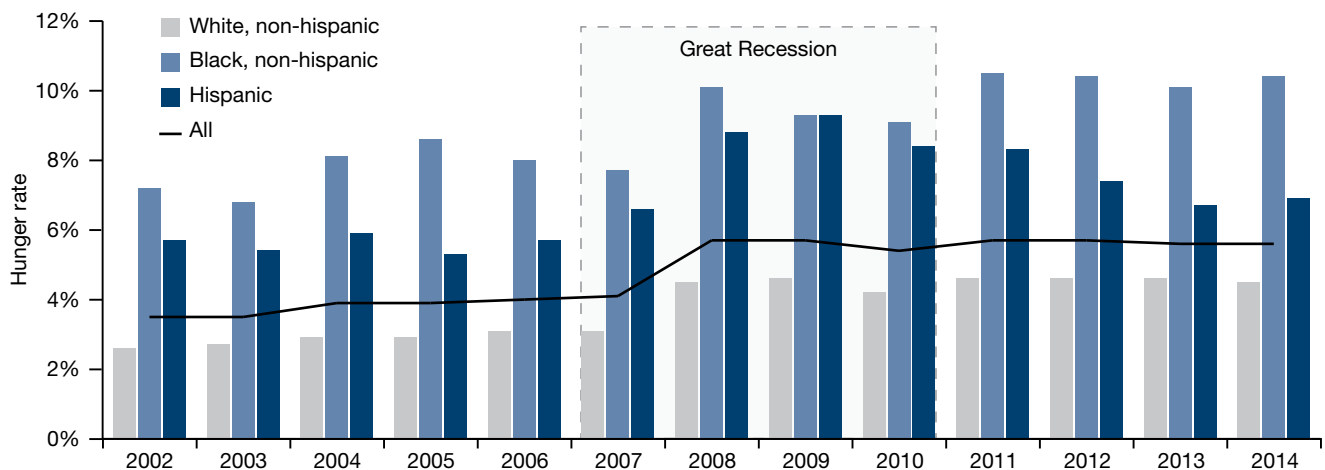
Historical Context

There are significant racial, ethnic, and gender disparities between households that report hunger and those that do not.

For example, the hunger rate among African American households is 10.4% (1.6 million households); for Hispanic households, it is 6.9% (1.1 million households); whereas for white households, that rate is 4.5% (3.8 million households).¹ Among American Indians, data are not available for hunger rates, but the broader food insecurity rate is nearly twice that of the general U.S. population.⁶⁴ These racial and ethnic disparities have been consistent since the USDA began measuring food insecurity in 1995. These disparities may be attributable to a persistent combination of political, social, and economic factors—including residual racial and ethnic discrimination—that affect access to jobs, opportunities for home ownership, high-quality education, and affordable healthy food.

We must acknowledge this historical context if we are to improve the nutrition, health, well-being, and security of all Americans, regardless of race or ethnicity.

Hunger rates over time by race and ethnicity





These disparities are wreaking havoc on our communities and our country and we need a sort of holistic response to the economic disparity and the food insecurity that you all are focusing on. Dr. King said in a letter from the Birmingham jail, “We’re caught in an inescapable network of mutuality tied in a single garment of destiny. Whatever affects one directly affects all indirectly.” This problem isn’t a problem for people of color. This is everybody’s problem.

– George Jones, CEO, Bread for the City (Washington, DC)



Personal Responsibility

Although we feel that our nation would make progress in reducing hunger if we made gains in each of the factors above, we also acknowledge one other key ingredient—the actions of individuals.

Personal agency, personal responsibility, and individuals making good choices play an important role in the extent to which Americans are hungry, and any discussion of how to reduce hunger that omits these factors is incomplete.

Individuals make many life choices that can affect financial circumstances and hunger: choices about staying in or dropping out of high school, choices about getting a job or not, and choices about having or delaying children.

While it is true that enhancing the health and cognitive and emotional wellbeing of Americans by reducing hunger would produce greater opportunities for individuals, we must always recognize the importance of individual decision-making. As Ron Haskins, Senior Fellow at the Brookings Institution, contends, “changes in personal behavior...would have an enormous impact on poverty and opportunity.”⁶⁵





Populations of Specific Concern

Taking into consideration the disparities in household characteristics between those who experience hunger and those who do not, we focused on seven specific groups that are especially vulnerable to hunger: seniors, single parent families with young children, veterans and active duty military, people with disabilities, American Indians, people affected by high incarceration rates, and immigrants.

Seniors

The number of older adults will increase over the next few decades, and if we do not change the way we assist seniors, the number of seniors who experience hunger will increase significantly.⁶⁶

Multigenerational:
a family headed by an adult householder aged 40 or older and with three generations (grandparent, parent, child) or grandparent and grandchild with no adult parent (so-called skipped generation).

In 2014, 3.2% of households with seniors aged 65 and older (1.1 million households) and 3.8% (480,000 households) of households with seniors living alone were hungry.¹ Many seniors who live alone depend on organizations such as Meals on Wheels.

Among adults aged 40 and older, those living in multigenerational households have higher rates of hunger (5.5%) than those who do not (3.1%).³⁸ Hunger rates among multigenerational households have also increased substantially over the past decade.

Compared to seniors who do not experience hunger, seniors experiencing hunger are three times as likely to suffer from depression, 50% more likely to have diabetes, and 60% more likely to have congestive heart failure or a heart attack.⁶⁷ In addition, 20% to 50% of patients admitted to the hospital are malnourished and thus compromised in their ability to fight illness and complications; these patients are predominately low-income/Medicaid patients 65 and older.⁶⁸ Readmissions among this group costs the health care system approximately \$25 billion annually, and 70% of this cost is for return trips that might not have been necessary if patients had received proper care, including proper nutrition.⁶⁹ Programs such as Meals on Wheels (both pre-admission and post-discharge), as well as greater attention to early nutrition assessment and intervention are critical to preventing complications and lowering costs.⁶⁸ These interventions in both health care settings and the community are not meeting growing need: in many communities, there is a waiting list for Meals on Wheels and similar programs.^{70,71}



**Gloria Gonzalez
and Father Villegas,
San Luis Rey Parish,
Chamberino, NM**

Single Parent Families with Young Children

Substantial research has found that a substantial percentage of young children in food insecure households experience negative social, emotional, and cognitive outcomes.^{28,31,72-75}

About 6% (4.4 million individuals) of individuals in households with children under age 6 are in households that report hunger; the rate is the same for households with children under 18 (9.5 million individuals). These rates are slightly higher than the percent of individuals in all households that report hunger (5.5%, 17.2 million individuals). But the problem is much worse in households with only one adult. Among married couple families with children, the rate of hunger among individuals is 3.5% (3.9 million individuals), whereas for households headed by a single mother, the rate is 13.2% (4.7 million individuals), and for households headed by a single father, the rate is 7.2% (0.8 million individuals).⁷⁶

Although adult caregivers (including grandparents) often try to mitigate the effects of hunger on their children by reducing their own food intake, such reductions affect the caregivers' health and capabilities, which in turn affects their ability to juggle parenting, work, and self-care. We heard this reflected in testimony from single parents during our field hearings.

Given the serious consequences of hunger for families with young children and children in the sensitive period of brain development, single parent families merit particular attention, care, and support to lay the foundation for optimal child development for school performance, good health, and participation in the workforce.

“ The cycle of hunger has never left my family. My siblings and I lived with my mom growing up, and we struggled with hunger. When she died, we went to live with my dad. And we struggled then. The stress of having no food affected him. He couldn't deal. He was so overwhelmed he started drinking instead of eating, and he sent us down South to our aunts, thinking we'd be better off. But we still were hungry there. And on top of that, we were missing our dad, and missing our mom. Hunger destroys people. It destroys families. ”

Tangela Fedrick, Witnesses to Hunger (Washington, DC)



Courtesy of Tangela Fedrick

Veterans and Active Duty Military

America's veterans and active duty military have provided and continue to provide our country with outstanding service to protect our freedom and security.

However, there is evidence that both groups have experiences with food insecurity and have inconsistent or inadequate access to nutrition assistance. In a 2012 study of veterans of the Iraq and Afghanistan wars, 12% reported hunger.⁸⁰ Approximately 1%–2% of active duty military members (more than 20,000) and 7% of veterans (1.6 million veterans) receive SNAP benefits.⁸¹ Hunger tends to occur among the lower enlisted ranks, especially those with multiple dependents.⁸¹

These issues are concerning, yet the Department of Defense, the Veterans Administration, and the USDA provide little data on the extent of hunger among active duty military and veterans.

“

I ask that you consider our veteran population in your work, and the only thing I have to say is that no veteran should go hungry after serving honorably on behalf of this country. No veteran should be left behind and that's what I ask of you is to make sure that the veteran population is included in this discussion about hunger in America. We're hungry, too.

– Carlos Rivera, Veteran, US Air Force, 1971 to 1975 (El Paso)



”

People with Disabilities

Disability has been identified as “one of the strongest known factors that affect a household’s food security.”⁷⁷

Thirty-eight percent of all households experiencing hunger include an adult with a disability.⁴² Families with children with disabilities are also at increased risk for hunger.⁷⁸

Low employment rates and high health care costs constrain the economic resources of people with disabilities, leading to higher rates of hunger. Despite special SNAP provisions regarding resource limits and medical deductions for adults with disabilities, one-third of chronically ill adults cannot afford both food and medicine.⁷⁹ In addition, their health may be more fragile than those who do not have disabilities, making them more vulnerable to the health consequences of hunger. In Washington, DC, we heard from Saleemah Akbar, a 57-year-old sufficiently disabled from arthritis and diabetes to receive Supplemental Security Income and SNAP. She relies on a manual wheelchair to go out, but she is too young to qualify for programs that deliver meals to seniors. She said her SNAP benefits are not sufficient to provide the high-protein diet recommended for her diabetes, and in the previous year, she lost more than 100 pounds from lack of sufficient protein.

American Indians

American Indians and Alaska Natives experience food insecurity at rates more than twice those of non-Hispanic Whites (23% vs. 11%).⁸²

The Navajo Nation has the highest reported rate of food insecurity of any subpopulation in the United States, with 76.6% of households on their reservation experiencing food insecurity.⁸³ This is more than three times the food insecurity rate of American Indians as a whole.⁸⁴

For many American Indians living in their traditional homelands or reservations, obtaining nutritious, affordable food can mean traveling more than 30 miles. In one study of Navajo members, 51% traveled off-reservation to get to a grocery store. Among this sample, the shortest distance traveled off-reservation was 155 miles round-trip.⁸³ Lack of access to healthy food is a daunting problem for American Indians, who are two to three times more likely than the general population to have diabetes, and are also more likely to be obese.^{85,86}

**Although figures for hunger specifically are not available, the figures for the broader category of food insecurity highlight the disparities in rates between American Indians and other populations.*

Those Affected by High Incarceration Rates

Incarceration affects not just those in prison, but also their families and communities.

For a family, one member's incarceration can mean loss of income and emotional support, disruption of family life, and social stigma. Especially for children, the result can be insufficient food and shelter, emotional trauma, difficulty in school, and increased stress.⁹³ Several studies have found significant correlations between parental incarceration and food insecurity.^{94,95}

About 650,000 people are released from prison each year; most are poor, unemployed, and homeless or living in marginal housing.⁹⁶ Returning to society after serving time, finding a job, getting housing, and reconnecting with family and community is often very difficult. Felons are ineligible to be a principal lease-holder for subsidized housing, and in most states, those convicted of a drug felony (but not other felonies, including violent ones) are prohibited from receiving SNAP. Currently, no nationally representative study assesses the hunger rate of people recently released from prison across the United States, but in a recent study, 90% of individuals released from prison reported household food insecurity, and 37% reported not eating for an entire day because they had no money.⁹⁷ All of these difficulties affect not just the released inmate, but also their families.

Meeting with commissioners in Washington DC, two women described their lives as “broken” after leaving prison, until they began job training at DC Central Kitchen. Monitoring hunger and providing assistance to people who have served their time and are re-entering society with a willingness to become productive and responsible members of society will not only help reduce hunger, but may also help to keep people from returning to prison and lessen the impact on their families.

Immigrants

Individuals and families immigrate to the United States for a variety of reasons: economic opportunity, reunification with family, or asylum from ethnic, religious, or political persecution.

Forty-one million immigrants—13.1% of our population—live in the United States. Of those 41 million, about 27% (11.3 million) do not have legal documentation.⁸⁷ Documented and undocumented immigrants represent a sizeable portion of our population, and their children account for a significant proportion of our future workforce. Therefore, understanding and monitoring hunger among immigrant families, including undocumented persons, is an important part of preventing long-term negative impacts.⁸⁷

Documented immigrants

are those who are in the United States legally.

Undocumented immigrants

are those who are here illegally. These may include asylum seekers (people who have entered illegally seeking refugee status, which if granted, would regularize their presence and make them legal) and those who entered the United States legally on a temporary visa that has since expired, rendering their presence here illegal.

Colonia:

an unincorporated settlement of immigrant families, the majority of whom are undocumented.

Assessing hunger in documented and undocumented immigrant populations is challenging for a variety of reasons. Immigrant households may include citizen children and non-citizen parents, who may or may not be documented. Extended family members—documented and undocumented—may also live in such households, either temporarily or permanently. In addition, immigrants who are seasonal workers move frequently. Undocumented persons may avoid participating in surveys and the Census out of fear of deportation or incarceration. Therefore, even though they are included in survey results, these factors make it difficult to compare hunger rates between documented and undocumented populations.⁸⁸

Given these complexities, studies among immigrants tend to be small, may include people of many different countries of origin, or be limited to particular geographies or professions, making it hard to compare hunger rates. We do know that children in immigrant households are disproportionately affected by hunger: children in households with immigrant mothers are three times as likely to be hungry as children in households with U.S.-born mothers⁸⁹ (documentation status not reported). Children in households headed by a recent immigrant are also more likely to be hungry than children in other households⁹⁰ (documentation status not reported). One small study compared documented and undocumented workers in Georgia and found that undocumented workers were about three times as likely to be food insecure as documented workers.⁹¹

On our trip to El Paso, we visited *colonias* in the Lower Rio Grande Valley. Women and lay community health workers from those communities told us that their communities lack basic infrastructure for safety and security. A survey of women in the *colonias* found that 78% of households did not have enough food, and 7% had no food at all. Approximately 18% had adults who were unemployed (documentation status not reported).⁹²



A home to a family of nine in Sparks, a *colonia* near El Paso, Texas.

Photo courtesy of Socorro Ramirez Community Center, El Paso, TX





Addressing Hunger in America

In our field visits, we observed many successful public and private food programs with track records of effectiveness and bipartisan support. These partnerships highlighted for us the synergy that can occur between government entities, nonprofits, industry, and individuals, not only producing a greater impact on hunger than any one of these sectors could alone, but also strengthening the bonds of communities across social classes and sectors. Through our review of the research, we learned of many effective programs as well as opportunities to enhance the work. The U.S. government, along with many nonprofit organizations, corporations, and individuals, works daily to reach millions of families, and they do so in comprehensive, effective, and creative ways.

Federal Programs

In 2014, the U.S. government spent an estimated \$103.6 billion on federal food and nutrition assistance programs,² with one in four people having participated in at least one of the government's 15 food assistance programs at some point during the year.⁹⁸ The five largest programs accounted for 97% of these expenditures. Together these programs form a nutritional safety net for millions of children and low-income adults, providing them the additional nutrition assistance they need to lead an active and healthy life. In his formal testimony to the Commission, Dr. Eldar Shafir, the William Stewart Tod Professor of Psychology and Public Affairs in the Woodrow Wilson School of Public and International Affairs at Princeton University, wrote, "The data suggest that government safety nets are not luxuries, but can be powerful tools to improve conditions precisely when things are difficult."⁹⁹

In her formal testimony to the Commission, Angela Rachidi, a research fellow in poverty studies at American Enterprise Institute, told commissioners, "Data suggest that our main food assistance programs are appropriately targeting those with very low food security."¹⁰⁰

The largest food assistance programs are discussed below.

Largest Federal Food Assistance Programs

- **SNAP:** Supplemental Nutrition Assistance Program
- **WIC:** Special Supplemental Nutrition Program for Women, Infants, and Children
- School Meals:
 - **National School Lunch Program**
 - **School Breakfast Program**
- Summer and Afterschool Programs
 - **Summer Food Service Program**
 - **Child and Adult Care Food Program**

WIC

The Special Supplemental Nutrition Program for Women, Infants, and Children



The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) provides federal grants to states for specific healthy foods, health care referrals, and nutrition education for low-income pregnant or postpartum women, and to infants and children under 5 who are at nutritional risk. In 2014, approximately 8.3 million women, infants, and children under 5 received help through the WIC program in an average month.¹⁰⁷ More than half of all newborn children in the United States participated in the WIC program. As of fiscal year 2013, 23% of WIC participants were infants, about 54% were children from 1–4 years old, and 24% were women.¹⁰⁷

WIC has been credited with a 68% reduction in hunger among families with young children.¹⁰⁸ Kate Breslin, President and CEO of the Schuyler Center for Analysis and Advocacy, explained in her testimony that WIC is associated with healthier births, more nutritious diets, improved cognitive development, and stronger connections to preventive health care, including an increased likelihood of children receiving immunizations.¹⁰⁹ Research supports Breslin's testimony: a longitudinal study of WIC participation examined the association between how long a household participated in WIC and food security status. Among pregnant women who reported hunger, receiving WIC in the first or second trimesters, as opposed to only the third trimester, reduced the odds of food insecurity. Additionally, among children living in food insecure households, children who were on WIC longer had lower odds of hunger at the final clinic visit.¹¹⁰

WIC, which involves participants in intensive nutrition education and encourages linkages to health care services, exerts a positive influence on health beyond reducing hunger. According to an analysis of data from the Early Childhood Longitudinal Study of 10,700 children born in 2001, WIC decreased the rate of low birth weight by at least 20%.¹¹¹ Low birth weight is associated with increased risk of impaired immune function, chronic disease, developmental delays, and high perinatal and lifelong health and educational costs. Another study of 26,950 WIC-eligible women and children from 2000 to 2010 found that receiving WIC diminished the effects of multiple stressors, including food insecurity and the depression often accompanying it.¹¹²

SNAP

The Supplemental Nutrition Assistance Program



The Supplemental Nutrition Assistance Program (SNAP, formerly known as Food Stamps) is the nation's largest program meant to address hunger by improving access to food for low-income individuals and households through additional income for groceries. According to program operations data from the USDA Food and Nutrition Service, SNAP provided assistance to 46.5 million people in an average month in fiscal year 2014, slightly fewer than the 47.6 million people served in an average month in fiscal year 2013. Thomas Ptacek, a military veteran who had experienced homelessness, spoke at the public hearing in Portland, Maine. He said, "It was not a quick and easy road back for me, and the SNAP program was a big part of my success in returning to a more fulfilling life. To me, the most beneficial aspect of the SNAP program is that it allows for choice in the purchase of food that can be prepared in the home...This extra piece, that I personally benefited from greatly, is the sense of normalcy and stability that comes from going to the grocery store and choosing your food."¹⁰¹

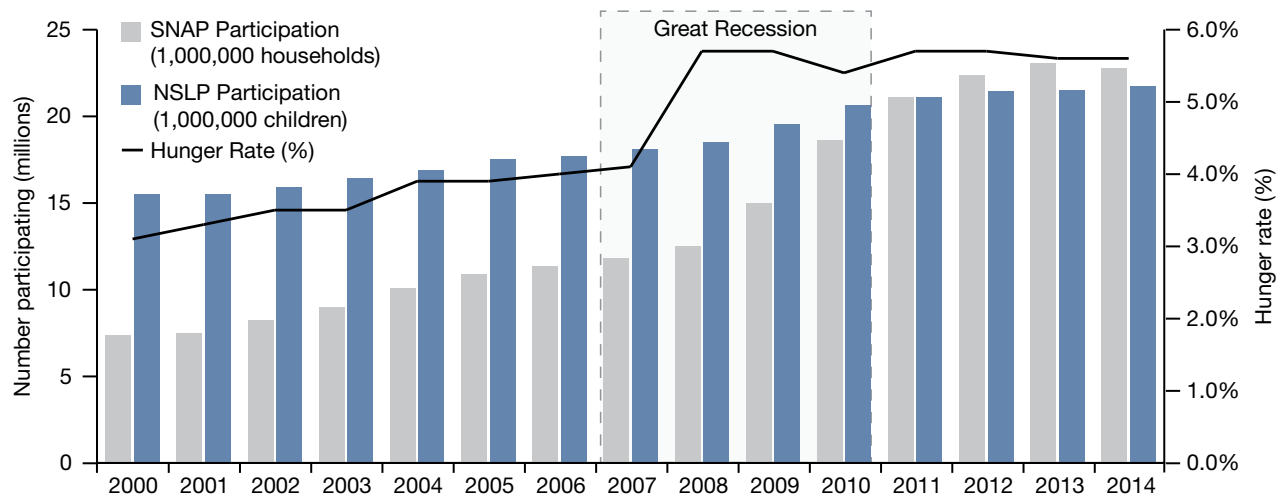
SNAP participation has decreased the percentage of households experiencing hunger by 12%–19%.¹⁰² In addition, people who participate in SNAP for 2 years are 20%–50% less likely to report hunger than those who leave the program before 2 years.¹⁰³

SNAP provides benefits that go beyond money for food. Compared to low-income, non-SNAP households, mothers receiving SNAP are less likely to experience maternal depression, although they are still more likely to experience maternal depression than mothers in food secure households.¹⁰⁴ In households participating in SNAP, children are 16% less likely to be at risk of developmental delays and have lower rates of failure to thrive and hospitalization compared to children in similar households not participating in SNAP.¹⁰⁴

The larger issues of economic growth, job creation, wages, and family choices are the underpinnings of addressing the root causes of hunger. SNAP is, by design, one of the most responsive programs to economic downturns, diminished labor force participation, and recession economies, doing exactly what it should do to mitigate hunger—eligibility for participation increasing when incomes are decreasing.

In spite of SNAP’s success, hunger remains a stubborn problem. SNAP administrative data show that from 2000 to 2014, the number of SNAP participants has increased 171%.^{105,106} However, hunger rates, relatively steady between 3% and 4% until 2007, also increased dramatically in 2008 (from 4.1% to 5.7%) and remained high in 2009 and 2010. But through 2014, both the increased participation levels and the increased hunger rates have yet to decline significantly, even 6 years into the recovery.

SNAP and National School Lunch Program (NSLP) participation compared to hunger rates over time



Our research has demonstrated the benefits of SNAP and WIC on the health and developmental academic well-being of children. We have come to think of these programs as prescriptions for healthier children. We need research on the adequacy of SNAP benefits in varying family contexts which relate to SNAP benefit levels.

– Patrick Casey, MD, Harvey and Bernice Jones Professor of Developmental Pediatrics, University of Arkansas for Medical Sciences (Little Rock)



School Meals

The National School Lunch Program and School Breakfast Program offered meals to more than 30 million students in fiscal year 2014. The programs operate in more than 100,000 public and nonprofit private schools and residential child care institutions. Because school nutrition programs have such bipartisan support, many communities have seen this as an excellent way to reduce hunger and improve the nutritional status of our children.

Researchers found that children from food insecure and marginally food secure households receive a larger proportion of their food and nutrient intakes from school meals than do children from food secure households. This difference is partially explained by the higher participation rates of the food insecure and marginally food secure in school meal programs.¹¹³ While some studies have examined the relationship between school meal programs and food security, they cannot assess what the food security status of school meals participants would have been in the absence of the program. However, national nutrition survey data suggest that school meals are an important source of healthy foods: all school lunch participants, especially low-income participants, generally consume more healthful food at lunch than non-participants.¹¹⁴

In similar fashion to SNAP and WIC, school nutrition programs have an impact that goes beyond decreasing household hunger. Some studies have examined the correlation between participation in the School Breakfast Program and academic performance. Low-income school breakfast participants are reported to have lower tardiness and absence rates and a larger increase in test scores than low-income children who did not participate.¹¹⁵ Similarly, studies have linked higher rates of school breakfast participation with improved grades in math.^{116,117}

Despite the value of school breakfast, there remains a wide gap between the number of children who receive school lunch and the number who receive breakfast. In 2014, nearly 22 million school children received a free or reduced price school lunch, but despite the same eligibility, only about half those children participated in school breakfast.¹¹⁸ Implementing “breakfast after the bell” strategies such as “breakfast in the classroom” or “grab-and-go” meals (instead of serving breakfast in the cafeteria) is a promising approach to improving child nutrition and academic achievement.

Under the National School Lunch and School Breakfast Programs, the Community Eligibility Provision allows schools and local educational agencies in communities with high poverty rates to provide breakfast and lunch to all students without certification requirements, thus decreasing the school’s administrative costs and reducing stress and stigma for parents who would normally have to apply on an individual basis. The Community Eligibility Provision eliminates the burden of collecting household applications to determine eligibility for school meals, relying



A school garden in Little Rock

instead on information from other means-tested programs such as SNAP and Temporary Assistance for Needy Families. Marian Wright Edelman, President of the Children’s Defense Fund, recommended in her testimony to the Commission that use of the Community Eligibility Provision be promoted, since it predominantly serves low-income children and increases access to the school meal program while reducing labor costs to schools.¹¹⁹

More than 14,000 high-poverty schools in 2,200 school districts participated under the Community Eligibility Provision¹²⁰ in the first year of nationwide availability, and more than 6 million children now attend schools participating in the program. In Illinois, Kentucky, and Michigan, schools implementing the Community Eligibility Provision in the 2011–2012 school year saw breakfast participation increase from 44% in October 2010 to 56% in October 2012. Lunch participation increased from 69% in October 2010 to 78% in October 2012.¹²¹ To our knowledge, no data are yet available linking the implementation of the Community Eligibility Provision to food security. Therefore, this is an important area for further research.

Other Federal Nutrition Assistance Programs

The federal government operates a number of other smaller programs targeted to specific populations to assist with reducing and preventing food insecurity:

- The **Food Distribution Program on Indian Reservations** provides USDA foods to low-income households, including the elderly, living on Indian reservations.¹²⁸ For those living far from food stores, the Food Distribution Program on Indian Reservations is seen as more accessible than SNAP, although traditional food offerings are limited and overall food choices are restricted. Those living near supermarkets tend to choose SNAP for a better variety of foods.
- **The Emergency Food Assistance Program** provides USDA foods to emergency food providers and food banks to supplement the diets of low-income Americans, including the elderly.¹²⁴
- The **Commodity Supplemental Food Program** provides seniors with a food package containing good sources of nutrients.
- The **Fresh Fruit and Vegetable Program** provides students with no-cost fresh fruits and vegetables in school.
- The **Special Milk Program** provides participants with no-cost milk through their school, childcare center, or camp.
- The **WIC Farmers’ Market Nutrition Program** and **Senior Farmers’ Market Nutrition Program** provide coupons participants can use at farmers’ markets for fruits, vegetables, honey, and fresh herbs.

To our knowledge no recent research examines the effects of these programs on hunger.

Summer and Afterschool Food Programs



A child receiving lunch in the summer at Acoma Pueblo Community Center in New Mexico

Millions of students participate in school lunch and breakfast programs, but during the summer, many children face a period without substantial healthy meals. In 2012, about 4% of households participating in the National School Lunch Program reported “sometimes or often not having enough to eat” from January to May, but this figure increased to over 5% in June and July.¹²²

In an effort to address this issue, the Summer Food Service Program enables low-income children to receive meals when school is not in session by going to a central location and eating in a supervised setting. The program is delivered through public-private partnerships with summer camps, summer school, parks and recreation programs, churches, and other community organizations. Unfortunately, and for a variety of reasons, participation is relatively low. In 2014, approximately 14% of eligible children received meals in the summer.¹²³ More than 2.6 million children participated at almost 45,200 sites in the summer of 2014.¹²⁴ While visiting Washington DC, we observed the operation of the Summer Food Service Program at Anacostia Public Library. Washington DC’s summer food programs have served over 1 million meals to children and youth in the District of Columbia in the past three summers, and serve approximately 60% of the DC children who are eligible.¹²⁵ On a field visit in Texas, the Anthony Independent School District reported that they increased summer meal participation by almost 60,000 meals. This program helps to employ over 70 high school students who get involved in distributing meals at the baseball and t-ball fields, with a welcoming community atmosphere.

The Child and Adult Care Food Program is another program that serves nutritious meals and snacks to eligible children and adults at participating child care centers, day care homes, and adult day care centers. The program also provides meals and snacks to children and youth participating in afterschool programs or living in emergency shelters. On an average day, 3.8 million children receive nutritious meals and snacks through the Child and Adult Care Food Program in an effort to reduce hunger.¹²⁶ The program also provides meals and snacks to 120,000 adults who receive care in nonresidential adult day care centers.^{126,127} However, more empirical research remains to be done to assess links between the Child and Adult Care Food Program and reductions in hunger.

Community Programs

Across our country, individuals, nonprofit organizations, faith-based organizations, and corporations are engaged in helping to alleviate hunger in their communities. In 2013, 62.6 million people in the United States contributed 7.7 billion volunteer hours, time estimated to be worth \$173 billion. Providing food to others was among the most frequently reported activities, with 24% of volunteers saying that they “collected, distributed, prepared, or served food” during the year.¹²⁹

We heard from many volunteers at our hearings, and they were very proud of their organizations’ accomplishments in providing food to low-income people. While almost all experts point out that volunteers alone cannot meet the overall needs of families, and that their efforts cannot replace the effectiveness of federal nutrition assistance programs, volunteers can play an important role in supplementing and leveraging those programs.

Through innovative school nutrition and summer feeding programming, job training efforts, social services provision, community gardening, farm-to-table programs, soup kitchens, food pantries, and advocacy efforts, volunteers significantly contribute to the work of hunger relief organizations across the country. We provide some examples below.

- In Maine, **Preble Street** involves 5,000 volunteers in serving 500,000 meals yearly across eight local soup kitchens.¹³⁰
- The **DC Central Kitchen** relies on 14,000 volunteers each year to help prepare meals, which are provided under government contracts to DC public schools that don’t have the equipment and staff to do their own healthy “scratch cooking,” and to 80 partner agencies, such as homeless shelters.
- **Feeding America**, the largest umbrella organization for food banks and food rescue organizations, has 200 members supporting 61,000 agencies that, as of 2010, distributed food to 37 million Americans, including 14 million children.¹³¹ Feeding America organizations benefit from 8 million hours of service per month from 2 million volunteers; more than half of these volunteers manage entire agencies without full-time staff.¹³²

Public-Private Partnerships

People and businesses in America are generous and motivated to help solve problems in their communities, and local organizations offer opportunities for cross-sector collaboration to maximize the effectiveness of publicly funded nutrition assistance programs. Public-private partnerships create valuable relationships that draw on the strengths of each organization to meet community needs.^{133,134} Partnerships between public and private entities have the potential to address hunger in ways that go beyond the limitations of government entities, by taking advantage of the ingenuity and creativity of private enterprise. For example, both the public and private sectors bring knowledge about food production and insights about pressing social issues.¹³³

Public-private partnerships use a variety of strategies to reduce hunger, and can be classified into five categories.^{135,136}

- **SNAP partnerships** offer outreach to increase SNAP participation and train volunteers to help individuals apply for SNAP and offer nutrition education. For example, the Arkansas Hunger Relief Alliance brings together 47 food banks and pantries and has increased access to SNAP applications throughout the state. SNAP partnerships also involve efforts to assist eligible participants in completing SNAP applications. Another example is Making Dinner a SNAP, a collaborative effort developed between the private nonprofit Ohio District 5 Area Agency on Aging Inc., five grocery stores, the Department of Job and Family Services in Richland County, and local nursing homes. The program aims to increase senior SNAP participation and teach seniors about cost-effective, nutritious recipes.
- **Child nutrition partnerships** focus on increasing school meal and summer meal participation and promoting farm-to-table initiatives. For example, ConAgra Foods has funded grants to Feeding America programs such as Kids Café, which provides free meals or snacks in afterschool settings, and Child Hunger Corps, which trains people in food banks nationwide to implement outside-of-school meal programs for children. Public-private partnerships also work together to implement child nutrition assistance initiatives. For example, the Academy of Nutrition and Dietetics and ConAgra work together to facilitate community education delivered by registered dietitian nutritionist educators. In addition, more than 80 private partners and state agencies recruit meal sites and facilitate the distribution of meals for summer breakfasts, lunches, and food backpacks on the weekends.
- **Food distribution partnerships** include food hubs that coordinate the sale and transport of produce from farm to local markets, stores, and emergency food providers. For example, in Indianapolis, we visited a partnership between Elanco (a division of Eli Lilly and Company), Kroger Country, Rose Acres Farms, and two Indiana food banks to make eggs more accessible to undernourished people of all ages.¹³⁷

The Indianapolis partnership also meets regularly to discuss and collaborate on research projects and a variety of other anti-hunger efforts.

- **Healthy food access partnerships** work to improve availability of healthy foods. For example, the Boston Bounty Bucks program promotes the purchase of fruits and vegetables. The program, begun in 2008 as a partnership between The Food Project nonprofit and the City of Boston, provides electronic benefit transfer terminals at farmers' markets so SNAP recipients can use benefits to buy produce. The program promotes purchase of healthful food by providing a dollar-for-dollar matching incentive for SNAP purchases up to \$10. By the 2013–2014 season, \$166,540 SNAP and Bounty Bucks dollars were spent through the program at 20 farmers' markets in the Boston area.¹³⁸ The New York City Health Department and Human Resources Administration works with Greenmarket Co. to distribute \$2 Health Buck coupons for every \$5 that electronic benefit transfer customers spend on fresh fruits and vegetables at the farmer's market. Fifty-one Greenmarkets distributed over \$260,000 in Health Bucks in 2013.¹³⁹ In addition, the Academy of Nutrition and Dietetics, using funding from Feeding America, General Mills, the ConAgra foundation, and the National Dairy Council, provides community training tools and educational grants for registered dietitian nutritionists to teach low-income people how to cook for their families. In another example, Share Our Strength's Cooking Matters Program works with local organizations to educate and empower low-income families to stretch their food budgets so their children get healthy meals at home. Cooking Matters, which leverages SNAP Nutrition Education funding in local markets, helps participants learn to shop strategically, use nutrition information to make healthy food choices, and cook affordable meals.
- **Research and education partnerships** create collaborations among government agencies, businesses, nonprofits, and community organizers to raise awareness and engage other stakeholders in their efforts. For example, the USDA Hunger-Free Communities Grants Awards program provided money to local governments and nonprofits to help assess and reduce hunger. In another example, Tyson Foods launched the KNOW Hunger Initiative with the Food Research and Action Center to assess people's views on hunger in the United States and raise awareness of hunger among stakeholders to encourage people to get involved in anti-hunger campaigns.^{140,141}

Public-private partnerships can help address hunger and many related issues (e.g., insufficient low-cost housing, lack of employment, inadequate child care opportunities) that contribute to food insecurity in communities where federal assistance programs cannot fulfill immediate needs. Open communication and clear guidelines may help to increase the effectiveness of partnerships.¹³³ Existing partnerships may serve as examples for future initiatives and can provide peer advice to other nonprofits, faith-based organizations, and corporations that wish to similarly commit resources and staff to such partnerships.





Recommendations

Defining Hunger: **Very Low Food Security**

As noted in the box in the Introduction, when we use the word “hunger” we mean households experiencing very low food security.

The latest USDA statistics, published in September 2015, show levels of hunger that are still elevated from the pre-recession period. This illustrates clearly that existing food assistance programs are not solving the problem—nor are they likely to do so without progress on the root causes of hunger. The Commission believes that we must continue to improve existing food assistance programs to alleviate hunger as effectively as possible, while also working to address the root causes. Accordingly, we offer the following recommendations for system changes, both statutory and administrative, across both the public and private arenas, to reduce hunger. However, we want to emphasize that although existing programs have not completely eliminated hunger, the research and information we reviewed and the testimony we heard support the conclusion that rates of hunger would be higher without them. Thus, they provide both opportunities for improvement and a strong foundation on which to build.

“¡Que Sabrosa Vida! (What a Delicious Life!)” by Mauricio Mora.

This painting hangs in the main lobby of El Centro de Salud Familiar (Family Health Center) La Fe’s Child and Adolescent Wellness Center in South El Paso. It is meant to capture the beauty of traditional and healthy Mexican-American foods.

Mindful of our charge to “*provide recommendations to more effectively use existing [USDA] programs and funds,*” our recommendations will not require significant new resources, but may lead to some future spending if further analysis or evaluations reveal opportunities for improvement.

We urge Congress to act on these recommendations as soon as possible, without waiting for bills (such as the Farm Bill) that are on a particular timeline. The child nutrition program improvements can be made through the upcoming Child Nutrition Act reauthorization process.

We make recommendations in six areas to comprise a total of 20 specific recommendations to Congress and the USDA.

- I. **Make improvements to SNAP** (10 recommendations in three categories: work, nutrition, and wellbeing)
- II. **Make improvements to child nutrition programs** (4 recommendations)
- III. **Improve nutrition assistance options for people who are disabled or medically at risk** (2 recommendations)
- IV. **Fund pilot programs to test the effectiveness of strategic interventions to reduce and eliminate hunger** (1 recommendation; 4 pilots)
- V. **Incentivize and expand corporate, nonprofit, and public partnerships to address hunger in civil society** (1 recommendation)
- VI. **Create a White House Leadership Council to End Hunger** that includes participation by a broad group of government and non-government stakeholders (2 recommendations).



With a little help, every nondisabled working-age adult has the capacity to pull themselves out of poverty and experience the life-changing, transcendent dignity that comes from gainful employment.

– Mary Mayhew, Commissioner, Maine Department of Health and Human Services (Portland)



Make Improvements to SNAP that Promote Work, Improve Nutrition, and Enhance Wellbeing

We identified 10 areas for improvement in SNAP, which we have placed in three categories: work, nutrition, and wellbeing.

Ensure That SNAP Promotes and Supports Work

While the primary goal of SNAP is to treat and prevent hunger, it can also serve as a way to help support families as they enter or re-enter the job market. The majority of people who receive SNAP benefits are not expected to work: they are the elderly, children, or people who are disabled. Another group of recipients includes adults who report earnings when they apply for assistance. In these cases, SNAP is acting to support work.

But a substantial number of working age, non-disabled adults who receive SNAP benefits report no earnings on their case budgets, and state SNAP administrators provide little help to these adult participants in their search for employment. This needs to change.

Encourage a greater focus on job placement, job training, and career development among SNAP recipients, and ensure necessary supports and infrastructure to facilitate finding work.

Rationale: *Having sufficient earnings is the best defense against hunger and reduces the need for nutrition assistance. If SNAP, as the number one nutrition assistance program, did more to help families move beyond the need for nutrition assistance, not only would it be an investment in improving the success, health, and productivity of low-income participants, but also, in the long run, it would reduce government spending.*

Action Items:

- a. **Congress and the USDA** should require states to provide more opportunities for adults participating in SNAP to attain the skills they need and find jobs with wages sufficient to enable them to leave SNAP. All non-working, non-public assistance (Temporary Assistance for Needy Families or state cash assistance programs), non-disabled, non-pregnant heads of households (with or without young children) applying for or participating in SNAP should be strongly encouraged and supported in their efforts to seek employment or participate in work-related activities realistically designed to lead to available employment. SNAP eligibility case workers should, at all stages of the program (initial application, during household participation, and recertification), assist all employable heads of household to secure employment by promoting the importance of earnings both socially and economically. For adult, non-senior recipients who are not reporting earnings, not disabled, and not on Temporary Assistance for Needy Families, states must provide more case management and employment services at initial application and recertification. Further, they should offer participants the ability to participate in existing SNAP employment and training programs or connect employable adults on SNAP to other existing job readiness, job development, and job placement providers in the community that offer case management, supervised job search, resume preparation, transportation assistance, soft skill training, and short-term career training related to available jobs in the local community. For households with children, families should be connected to subsidized, safe, accessible, and affordable child care. Such requirements on states to promote work and connect employable adults to appropriate services should be defined by USDA's Food and Nutrition Service in regulations and implemented by the states.
- b. **Congress** should ensure that the USDA collaborates with the Department of Labor, the Department of Health and Human Services, and other relevant agencies at the state and local level to facilitate the administration of programs that can support families applying for or participating in SNAP as they look for work and enter the workforce. Employers and community colleges should be integrally involved in designing career-directed training and skill development relevant to existing labor-market job opportunities. Specific services to ensure that families can find employment are outlined in (a) above.

- c. **Congress** should direct USDA to monitor and report annually, on a state-by-state basis, the share of working age, able-bodied adult SNAP recipients who do not report earnings and who are not receiving Temporary Assistance for Needy Families. This may include adding new tables to the “Characteristics of Supplemental Nutrition Assistance Program Households” report or beginning a standalone, annual report on the labor force participation and employment levels of SNAP recipients. In documenting these labor and SNAP participation dynamics, the USDA would provide reliable metrics to evaluate their performance in helping employable recipients successfully connect to the labor market.
- d. **The USDA** should allow states greater flexibility within their current SNAP Employment and Training funding to test innovative approaches that encourage work. Currently, the USDA has rigid and complex rules governing how SNAP Employment and Training funds can be utilized, which potentially stifle the creative and effective provision of employment services. For example, while other work support programs and SNAP Employment and Training can be integrated to leverage funds across programs, more should be done to help states to utilize Employment and Training funds for programs such as subsidized employment, substance abuse and mental health treatment, and legal aid services that help recent prisoners reenter the workforce. While 10 new SNAP Employment and Training pilots have been funded and will be evaluated for broader replication, awaiting their results should not be a reason to wait on efforts to improve the use of SNAP Employment and Training.

2

Ensure SNAP eligibility incentivizes work by improving responsiveness to earned-income fluctuations.

Rationale: SNAP has a logical phase-down of benefits as income increases. Still, there is evidence that when people abruptly lose all SNAP benefits at the top end of income eligibility, they may have less time to adapt to new income realities and may report that they experience hunger.^{46,142,143} Faced with this possibility, some SNAP recipients may not seek out work or seize an opportunity to increase their earnings.

Action Items:

- a. **Congress** should allow states to offer all households leaving SNAP for employment that pays sufficiently to end their program eligibility an appropriate extension of their SNAP benefits at the pre-existing level to help them navigate pay lags and adjust household food budgeting. The period of extended benefits shall be determined by states. In implementing these adaptations, states should measure their effectiveness through outcomes such as household reports of hunger, amount of administrative savings and cost of benefits, and amount of churn (reapplications for benefits within 3 months).
- b. **The USDA** should encourage states to improve their administration of SNAP by mandating a more streamlined and effective approach to re-certification for recipients who are working.

Ensure that SNAP Promotes Improved Nutrition

3

Encourage the use of financial incentives to SNAP recipients to facilitate the purchase of fruits, vegetables, high-quality proteins, whole grains, and other healthy foods.

***Rationale:** SNAP is not only an opportunity to help families meet the costs of providing food for themselves and their families, but can also play a crucial role in promoting healthy choices and good nutrition.*

Action Items:

- a. **Congress** should encourage the USDA to continue to develop mechanisms for incentivizing purchases of healthier foods and to promote cost-sharing opportunities with states, nonprofits, and municipal governments to incentivize purchases of healthy foods.
- b. **The USDA** should ensure mechanisms that provide broad, understandable, and culturally appropriate communication regarding these healthy incentives.

4

Exclude a carefully defined class of sugar-sweetened beverages from the list of allowable purchases with SNAP benefits.

***Rationale:** SNAP benefits should help families meet their nutritional needs, not contribute to negative health outcomes through poor nutrition choices. Recent scientific evidence suggests that the consumption of sugar-sweetened beverages, which are unhealthy, can have profound and serious negative effects on health, such as obesity and diabetes, especially among children.¹⁴⁴⁻¹⁴⁸ Reducing the consumption of sugar-sweetened beverages also follows the guidelines of leading health agencies such as the World Health Organization, the National Institutes of Health, the Centers for Disease Control and Prevention, the Institute of Medicine, and the Surgeon General of the United States. The technology to exclude certain items already exists at the participating retail store level. In light of the research and the recommendations of numerous health agencies, sugar-sweetened beverages should be added to the list of items excluded from the allowable purchase with SNAP.*

Action Items:

- a. **Congress** should enact legislation to restrict the purchase of a carefully defined list of sugar-sweetened beverages developed in consultation with major health and nutrition organizations (e.g., the organizations mentioned above), nutritionists, and scientific experts.
- b. **The USDA** should ensure mechanisms that provide broad, understandable, and culturally appropriate communication regarding this new restriction.

5

Use evidence-based product placement strategies that encourage purchase of healthy products with SNAP benefits, and tie it to SNAP eligibility for stores.

Rationale: *Participating SNAP retail stores receive significant revenue from SNAP and should therefore promote the purchase of healthy products. If the amount of shelf space allocated to healthy foods is increased, and shelf space for sugar-sweetened beverages and other unhealthy products is reduced, consumers are more likely to purchase healthier foods.*

Action Item:

The USDA should create new standards for SNAP vendor eligibility to ensure that participating stores, including not just grocery stores, but other outlets, comply with improved health and nutrition standards. For example, the USDA should require retail stores that currently accept SNAP or apply to become a participating retailer to provide enhanced and immediately visible shelf space for healthy foods and beverages.

6

Reform SNAP Nutrition Education (SNAP-Ed) to ensure that efforts are likely to lead to measurable improvements in the health of SNAP recipients.

Rationale: *While there are other nutrition education programs in the USDA system, SNAP Ed, which operates in all 50 states, is the most comprehensive. The USDA spent about \$400 million on SNAP-Ed in fiscal year 2014.¹⁴⁹ While there are many evaluations of individual SNAP-Ed programs that demonstrate their impact on nutrition, there is an opportunity to standardize the data collection and evaluation across programs to assess the effectiveness of SNAP-Ed on improving health and hunger outcomes.*

Action Item:

The USDA should continue to collaborate with the Centers for Disease Control and Prevention and the Department of Health and Human Services and other agencies and experts to ensure that funds designated for SNAP-Ed are supporting state-of-the-art nutrition education that is effective, relevant, and meaningful to SNAP participants. USDA can use multiple tools, such as the Academy of Nutrition and Dietetics Guide for Effective Nutrition Interventions and Education (GENIE), to define best practices within SNAP-Ed, develop or modify programs, and evaluate outcomes.¹⁵⁰ We note that, currently, SNAP-Ed outcomes data tend to focus on inclusion of fruits and vegetables in the diets of recipients. Future studies, however, should broaden that focus to include whole grains, low-fat dairy products, and high-quality proteins (including lean meat, fish, and eggs), in addition to fruits and vegetables.

Maximize SNAP's Ability to Promote Wellbeing

Overall, SNAP participation can improve health and wellbeing and help steer participants to make healthy choices. SNAP is often only one of the multiple services that a family or individual needs. For instance, given the evidence that food insecurity is related to increased risk of depression and poor mental health, or to unsafe housing conditions, or to employment barriers, SNAP application and administration provides an opportunity to assist families on a number of fronts. Building on this, the Commission recommends the following:

7

Continue to promote and facilitate greater coordination of means-tested programs across federal and state agencies and provide state incentives for establishing a “no wrong door” approach between SNAP and non-nutrition family support programs.

***Rationale:** Families that are eligible for SNAP are often eligible for other programs, such as Medicaid and housing assistance. Efforts are underway to find ways to serve families more holistically. However, these programs still have their own application mechanisms, facilities for application, and distinct funding streams at the federal level, which are attached to differing rules and regulations for eligibility and administration. This can create greater hardship for eligible families and increase the administrative burden and costs for states. In the case of Social Security/disability benefits, such rules and regulations can sometimes act at cross-purposes.*

Action Items:

- a. **Congress** should intensify existing efforts to encourage collaboration across agencies to facilitate the coordination of programs and to serve families more holistically in terms of SNAP, housing, medical care, education, child care, and job training supports. Additionally, states should be encouraged to use the option for enhanced federal systems match funding to coordinate Medicaid, SNAP, veteran's benefits, and Temporary Assistance for Needy Families more widely.
- b. **Congress** should increase their efforts to identify additional ways to link funding streams between different agencies to ensure greater collaboration between SNAP and other means-tested programs to ensure efficient and effective delivery of services, increased earnings, and reduced hunger.
- c. **The USDA** should find ways to ensure states are working to collaborate across agencies and should incentivize SNAP programming that collaborates with other state and federal agencies.

8

The USDA should use its current flexibility to the greatest extent possible to support state innovations that would help clients to become more food secure and more self-sufficient, and should approve or disapprove these requests within 90 days of submission.

Rationale: *States have long been a valuable arena for trying new ideas and evaluating them to see if they could work on the national scale. In addition, not all states have the same problems or conditions, labor markets, or caseload composition. Therefore, it is important for the USDA to be receptive to state innovation and experimentation, both by encouraging demonstration projects and by reviewing proposed projects in a timely manner. The USDA should create a process and offer staff support to encourage such innovation, and maximize the demonstration and waiver authority of the programs within its purview, while adhering to the SNAP goal of treating and preventing hunger, maintaining client protections, and keeping program integrity safeguards intact.*

Action Item:

Congress should require that the USDA allow greater flexibility for states to apply for SNAP waivers and demonstrations, and ensure that the USDA approves or disapproves such requests within 90 days of submission, including a thorough explanation of the final decision.



A common sense approach is needed [that would enable] states ... to ensure welfare benefits are being used appropriately. Being closer to recipients, state governments can more effectively determine which program changes best fit their populations. ...[S]tates have made significant strides in some areas to tackle fraud, waste and abuse in the system.

– Jason Turner, Executive Director, [State Human Services] Secretaries' Innovation Group (Maine)



Create mechanisms for improved training for front-line SNAP caseworkers to maintain a customer service perspective that facilitates best practices of case management.

Rationale: *Although accessibility to participation in SNAP has improved, the relationship between front-line caseworkers and applicants could be more positive and effective. Front-line caseworkers are often a client's first encounter with a system meant to help them; therefore, they have the best opportunity to provide effective and appropriate assistance.*

Action Item:

The USDA should require states to provide comprehensive training and modern infrastructure support for front-line caseworkers that ensures strong knowledge of SNAP eligibility; an emphasis on the importance of positive client service that explores potential other problems (such as violence exposure or homelessness) faced by the applicant; cultural competency; and the ability to thoughtfully convey the benefits of full-time work and related work supports. Periodic retraining is also recommended, as program rules change often. Accountability mechanisms to demonstrate high performance on client service and case management standards should be built into caseworker performance reviews. The USDA should also measure the performance of states relative to customer service, in addition to the current focus on error rates and timeliness. Unless such new measurements and expanded training are added, client service will likely not improve. In many places, office hours extending beyond 9–5 and offsite access points for working families are already available and should be encouraged.



I urge the Commission to focus on the horizontal integration of these important programs, and not only linking these resources, but [also] making the individual programs easy to navigate. Because it is a social safety net, not a ropes course.

– Sarah Palmer, Policy Associate, California Association of Food Banks; former CALFresh (SNAP) Recipient (Oakland)



Support the wellbeing of families that have members who serve or have served in the U.S. Military.

Rationale: *Families with an active duty service member should have as much support as possible to stay healthy, well-nourished, and financially stable while their family member serves to protect our country. Likewise, veterans who have served our country should not have to struggle to put food on the table for themselves and their families.*

There is a particular policy issue that restricts some SNAP-eligible active duty military families from qualifying for SNAP benefits. For families living off base or in privatized on-base housing, the Basic Allowance for Housing is counted as income in the determination of eligibility for SNAP and may prevent or reduce eligibility for SNAP. However, the Basic Allowance for Housing is currently excluded as income for calculating income taxes and eligibility for other government programs, including WIC. The Basic Allowance for Housing is also counted as income in determining eligibility for the Family Subsistence Supplemental Allowance, a program administered by the Department of Defense that operates somewhat in parallel to SNAP and was created to move military families off of SNAP.

Finally, data on food security and SNAP participation among members of the military on active duty, veterans, and their families are not readily available.

Action Items:

- a. **Congress** should enact legislation to exclude the Basic Allowance for Housing as income for the determination of SNAP eligibility and benefit levels for families who have an active duty service member.
- b. **Congress** should direct the Department of Defense to undertake a comprehensive review of the Family Subsistence Supplemental Allowance program and recommend reforms that are directed at improving food security in active duty military families.
- c. In keeping with our country's priority of national security, **the USDA** should work jointly with the **Department of Defense** and the **Department of Veterans Affairs** to help with collecting data on food security, its causes and consequences, and SNAP participation among active duty military and veterans, and make this data available to Congress, the President, and to the public at regularly specified intervals.

I**Make Targeted Improvements to Child Nutrition Programs**

Nutrition programs that are especially targeted to children provide much needed nutrition assistance in key periods of a child’s developmental growth, promoting their health and wellbeing and having an impact on their ability to learn, grow, and develop to their full potential. The WIC and school meal programs are widely available, show significant effectiveness, and should be sustained and enhanced. However, other programs, which seek to reach children outside of the normal school hours and academic schedule, can be improved. Below we make four specific recommendations.

11

Improve access to summer feeding programs and congregate meals by reconsidering requirements for rural areas.

Rationale: *Children living in rural areas may have limited access to summer nutrition programs due to remote living conditions and lack of transportation.*

Action Item:

Congress should change the congregate feeding requirements based on a community's stated need and local context to allow them to substitute or supplement with different, more accessible approaches. This includes areas of high need in rural areas where congregate feeding can be a barrier to feeding as many children as possible.

12

Change area eligibility for reimbursement of summer feeding from 50% of children eligible for free or reduced price school meals to 40% to help reach children in rural and suburban areas.

Rationale: *The summer feeding program uses an area eligibility test to determine whether to provide reimbursements for snacks and meals. This test defines a "low-income area" as one where more than 50% of children are eligible for free or reduced-price school meals. It is particularly hard for rural and suburban areas to meet this 50% requirement, because poverty is less concentrated in these areas. That keeps many communities with significant numbers of low-income children, but not a high enough concentration of poverty, from participating. In addition, the 50% test is inconsistent with federally funded summer programs, such as the 21st Century Community Learning Center programs and Title I Education funding, which require only 40% school meal participation.*

Action Item:

Congress should change the area eligibility criteria for participation in summer feeding programs from 50% to 40% of children participating in free or reduced priced school meals.

Make the summer electronic benefit transfer option available by creating a mechanism that allows communities to apply for it if they can clearly demonstrate a barrier to congregate feeding related to remoteness, climate, or safety.

Rationale: *Despite a high prevalence of children at risk for hunger in some communities, participation in summer feeding programs can be very low. This may indicate that the need is not as serious as thought in some areas, but in others, may reflect chronic underservice due to transportation barriers related to remote living conditions, severe weather patterns, or parental concerns regarding community violence. These barriers can occur in both rural and urban settings. USDA pilot studies have shown that participation in an electronic benefit transfer option can reduce hunger among families with children by more than 30%.¹⁵¹ This is significant evidence of a targeted child nutrition program improvement.*

Action Items:

- a. **Congress** should allow the USDA to offer summer electronic benefit transfer in communities that are especially at risk for hunger among children and where participation in summer feeding sites is restricted or minimized by remoteness, safety, or climate. The electronic benefit transfer option should be offered in areas (census tracts or school attendance zones) without the consistent presence of summer meals sites in an effort to minimize the duplicate use of summer electronic benefit transfer and congregate sites.
- b. **The USDA** should work with communities at risk to create an administrative mechanism through which funds can be provided directly to families with eligible at-risk children through an existing electronic benefit transfer mechanism.



At [our health center] we talk about **Nuestro Bienestar**, we talk about our total wellness. We talk about the categorical, dysfunctional system that we live in: where we talk about health and nothing else; where we talk about education and nothing else; where we talk about hunger and nothing else – as if each one were to lead a separate life. We know that all of them are intermingled. All of them are one.

– Salvador Balcorta, CEO, El Centro de Salud Familiar de La Fe (El Paso)



Streamline and simplify administrative processes among the child nutrition programs.

Rationale: *Currently, the various child nutrition programs have different application processes, even though the same organizations and sponsors frequently administer these programs. Having to complete separate applications and comply with differing or conflicting regulations places undue administrative burdens on the community-based programs that run these programs. Currently, community-based organizations operate the Child and Adult Care Food Program's At Risk Afterschool Meal Program and the Summer Food Service Program separately, even though they are serving the same children, often at the same sites, throughout the year. This approach not only burdens community organizations, but also incurs unnecessary USDA costs to review and respond to multiple applications from the same providers under complex regulations.*

Action Items:

- a. **Congress** should allow the USDA to streamline and consolidate the application processes, funding mechanisms, and regulations for the Summer Food Service Program and the Child and Adult Care Food Program's At Risk Afterschool Meal Program into one program for community-based sponsors.
- b. **Congress** should allow the USDA to permit school food authorities, with a single application, to provide and administer the School Breakfast Program, the National School Lunch Program, the Summer Food Service Program, and the Child and Adult Care Food Program's At Risk Afterschool Meal Program under National School Lunch Program regulations.



It's very difficult on the SNAP and Medicaid side to have the kind of effective streamlined eligibility access that leads to that integrative perspective that we want to see, because they are driven by different rules. That is something that is within the hands of national policy makers to change – it's a modernization. We know that if we can get services delivered faster in earlier ways to families, and we're not caught by the fact about whether someone qualifies for Medicaid or for SNAP or vice versa, we're serving families better and ultimately reducing tax-payer dollars because we're driving down the cost of health.

– Tracy Wareing Evans, Executive Director, American Public Human Services Association





Improve Nutrition Assistance Options for People Who Are Disabled or Medically at Risk

People with disabilities or multiple, debilitating health conditions are at increased risk for hunger and poor nutrition status. Additionally, homebound seniors and others with disabilities with limited ability in activities of daily living are also at nutritional risk. Such problems can exacerbate illnesses, decrease functioning, lower productivity, and increase health care costs. In our research, as well as in our field visits and hearings, we heard from agency administrators, people who are disabled and medically at risk, and physicians about ways to improve programming for medically vulnerable people. Below we make two recommendations that will improve conditions for people who are frail or disabled.

15

Expand Medicare managed care plans to include coverage for meal delivery for seniors with physician recommendation.

Rationale: Meals on Wheels programs meant to serve home-bound elderly people have been found to be highly effective in improving seniors' nutritional intake and reducing health care costs.¹⁵⁴ Access to this type of programming for underserved seniors would be important, especially as the baby-boomers are approaching their senior years, drastically increasing the numbers who will need assistance and who will be looking to be productive citizens in their own communities. This approach is appropriately the responsibility of the health care financing systems, because increased home-delivered meals could be an important cost-effective approach to reduce costly hospital admissions and readmissions. Currently, Medicare Advantage plans under Medicare Part C that cover home-delivered meals in certain circumstances are available in some areas. However, since these areas can be small, the reach of existing plans is difficult to determine.

Action Item:

Congress should work with the USDA and the Department of Health and Human Services to leverage existing efforts under Medicare Part C to create a national mechanism to provide home-delivered meals to seniors as a reimbursable cost through Medicare.

16

Expand Medicaid managed care plans to include coverage, with a physician recommendation, for meal delivery for individuals who are too young for Medicare, but who are at serious medical risk or have a disability.

Rationale: Home-delivered meals for medically at-risk patients can promote health and prevent readmission to the hospital; as noted earlier, 20% to 50% of patients admitted to the hospital are malnourished, and readmissions among this group cost the health care system approximately \$25 billion annually. Programs such as Meals on Wheels, as well as greater attention to early nutrition assessment and intervention, are critical to preventing complications and lowering costs. Additionally, some people who are too young to receive Medicare have multiple debilitating health problems that affect their functioning and activities of daily living. Such patients should be afforded the same assistance as people over 65. Currently, some states offer home-delivered meals via a Medicaid Section 1915(c) Home and Community Based Services waiver or a Section 1115 demonstration waiver. However, these waivers cover a broader range of services than home meal delivery, so reach is difficult to determine.

Action Item:

Congress should work with the USDA and the Department of Health and Human Services to leverage existing efforts under Medicaid waivers to create a national mechanism through which to provide home-delivered meals to people at risk and find a way for this to be a reimbursable cost through Medicaid.

IV

Fund Pilot Programs to Test the Effectiveness of Strategic Interventions to Reduce and Eliminate Hunger

As with any endeavor, research and development is required to consistently find ways to improve government programs and systematic efforts designed to reduce and eliminate hunger. There are many valid and empirically based ideas that suggest that USDA should make a strong commitment to testing particular interventions. We recommend funding the following demonstration projects. An evaluation component should be part of each pilot, based on multi-year, rigorous, random assignment protocols that include statistically valid sample sizes and a cost-benefit analysis that pays special attention to documenting potential savings in health and education spending. This list of projects is not meant to be exhaustive; many additional approaches are worthy of adequately funded research, but are beyond the time constraints of the Commission to elucidate fully.

Congress should allot funds to the USDA to implement, evaluate, and disseminate results of multiple pilot programs to assess their effectiveness on reducing hunger.

Pilot A: Investigate the effect on hunger of changing the SNAP benefit calculation from the Thrifty Food Plan to the Low Cost Food Plan.

***Rationale:** While families are meant to supplement their SNAP allotment with 30% of their own net income after deductions, the combination of the Thrifty Food Plan and additional family dollars may not be adequate to provide enough healthful nutrition for their families. Health and nutrition experts, including the Institute of Medicine, contend that the Low Cost Food Plan shows promise in reaching the appropriate nutrition levels for low-income families and individuals. Testing this theory will shed important new light on this issue.*

Pilot B: Test the effect on working families of three different increases to the earnings disregard compared to the current 20% (control).

***Rationale:** Providing a higher income disregard may reduce the danger of losing benefits before families are ready to transition to self-sufficiency. A higher income disregard may provide families time enough to stabilize their economic situations, and may also promote entry into the workforce and job retention by eliminating a potential disincentive to increase earnings or to engage in work.*

Pilot C: Test the impact on hunger of increasing the maximum excess shelter deduction/allowance in SNAP. Focus test demonstrations on the five markets with the highest housing costs.

***Rationale:** Research has linked the lack of affordable housing with hunger.^{152,153} If the shelter allowance was raised to more realistically account for the cost of housing, this change could reduce hunger.*

Pilot D: Further assess the effectiveness of public and private forms of nutrition education on purchasing habits, nutrient intake, health, and food insecurity, and conduct meta-analyses to better understand and build on collective evidence across these domains.

***Rationale:** Multiple federally funded studies have been conducted on the effectiveness of federal nutrition education programs at improving purchasing habits, health, and nutrient intake, but the evidence is mixed. Additionally, there is limited research on how both public and private nutrition education programs impact hunger. While there is a foundation of studies analyzing the scope of nutrition education programs, their barriers, and characteristics of successful programs with programmatic recommendations, the USDA should invest additional funds to test, rebuild, and re-analyze these programs using standard methodologies across a variety of domains and demographic sectors.*

V**Incentivize and Expand Corporate, Nonprofit, and Public Partnerships to Address Hunger in Civil Society**

Federal government programs are not and cannot be the only answer to hunger—civil society plays a vital role as well. Many stakeholders are already deeply involved in addressing the issues faced by households that report hunger. For instance, corporations, faith-based and community organizations, agriculture programs, and government entities at all levels (e.g., local health departments) have a role to play in providing fresh and nutritious foods for all people in the United States by, for example, keeping food costs low or providing strategic guidance and resources.

Community efforts should engage corporations in joint community impact efforts. Additionally, it has been a long-standing tradition in the United States for non-profits, institutions of higher education, and faith-based organizations to find creative and meaningful ways to help people rise out of poverty through outreach to potentially eligible households regarding existing public benefit programs and the strategic provision of food, resources, technical assistance, education and training, and behavioral health supports. Many times, government programs cannot reach all eligible people in need, and sometimes the added efforts of our community organizations, private philanthropy, and corporations can not only help reach the most vulnerable, but also provide strategic solutions to improve government programs. Therefore, we make the following recommendation.

Incentivize and expand civic engagement efforts on reducing and eliminating hunger.

Rationale: *Addressing hunger should not be the responsibility of individuals and government alone, but should be shared with multiple stakeholders and a large volunteer base of committed community leaders for widespread community impact. Much ingenuity arises out of such community-based or corporate-led efforts, and these efforts should be rewarded and encouraged, as the strong desire to help our neighbors and to empower others is part of our American values and social fabric.*

Action Items:

- a. **Congress** should designate existing funds to measures such as tax incentives, matching funding programs, and other similar measures that provide incentives to and catalyze the development of greater private efforts to address hunger and support existing partnerships with government.
- b. **The USDA** should provide incentives for creating and sustaining public-private partnerships (which should adhere to the same standards of non-discrimination that apply to fully public programs) while also placing greater emphasis on and providing funds for
 - i. Hunger-Free Communities collective impact efforts.
 - ii. Efforts that improve the quality of emergency food and reduce food waste by enabling grocers, restaurant owners, caterers and other food service providers, and food producers to donate extra food to emergency food providers and others who serve low-income communities (this requires improved Good Samaritan laws).
 - iii. Programs that provide incentives for farmers to contribute food to food banks and other food providers.
 - iv. Social enterprise that supports job training and education, and placement strategies for high-risk groups.

VI

Create a White House Leadership Council to End Hunger that Includes Participation by a Broad Group of Government and Nongovernment Stakeholders

As stated above, the root causes of hunger are many and varied, and many of the consequences of hunger are far beyond the reach and effectiveness of nutrition assistance programs. For instance, employment trends and labor market dynamics, housing costs, disability, access to quality education, the rising prevalence of single parent families, behavior, income dynamics, and access to medical care all have an impact on hunger, but cannot be addressed effectively solely through nutrition assistance programs. Therefore, just as hunger cannot be solved by food alone, national efforts to alleviate hunger cannot be carried out by the USDA alone. To improve the overall health and wellbeing of people in the United States, the White House should mount a thoughtful, coordinated, and focused effort to address hunger and its root causes.

This strong commitment will demand

- A willingness to review all programs meant to assist low-income families for their effectiveness and to candidly discuss economic dislocation, discrimination, and the family structure and formation issues that contribute to hunger.
- Cross-agency collaboration among, at minimum, the following agencies: the Departments of Agriculture, Housing and Urban Development, Health and Human Services, Labor, Energy, Defense, Education, and Veterans Affairs; the National Institutes of Health; the Centers for Disease Control and Prevention; and the Center for Medicare and Medicaid Services.
- Strong representation, participation, and commitment from the corporate, non-profit, university, and faith-based sectors.
- More civic engagement in our communities, as well as meaningful initiative and involvement from those experiencing hunger.

Therefore, we make the following two recommendations.

Establish a mechanism for cross-agency collaboration to facilitate improved public assistance programming and evaluation through enhanced technology, data sharing, and coordinated funding streams that protect effective programs and encourage coordinated efforts to address larger issues of poverty.

***Rationale:** Currently, mechanisms for funding streams, eligibility and delivery systems, and accountability are separate, resulting in a variety of disparate and uncoordinated rules and regulations confusing to administrators and recipients alike. Additionally, there is no single agency that can improve hunger alone. A national, coordinated plan among multiple government and private sector partners to address hunger and its root causes should be developed. This plan must build upon and improve current public and private programs and have the mutual goals of improved outcomes and cost efficiency.*

Action Items:

- a. **The President** should establish a **White House Leadership Council to End Hunger** with representation from government, corporations, nonprofits, faith-based organizations, community leaders, program beneficiaries, private foundations, and other stakeholders to develop and implement a comprehensive plan to eliminate hunger, and should ensure that the Council has adequate resources and staff.
- b. **The President** should establish, convene, and lead the White House Leadership Council to End Hunger through the office of the Domestic Policy Council. The White House Leadership Council to End Hunger will be charged with developing a coordinated plan for ending hunger.

The White House Leadership Council to End Hunger and its members should monitor hunger at the federal and state level, with a specific emphasis on the following at-risk populations:

- (a) seniors,
- (b) single parent households with young children,
- (c) people with disabilities,
- (d) veterans and active duty military,
- (e) American Indians,
- (f) those reentering society from prison,
- (g) survivors of violence, abuse, and neglect, and
- (h) immigrants (including documented and undocumented, asylum seekers and refugees).

***Rationale:** The groups listed above are particularly vulnerable to hunger. Their individualized and unique issues are often misunderstood and too often go unaddressed.*

Action Item:

The **White House Leadership Council to End Hunger** should oversee progress within the involved government agencies and report annually to the Administration, Congress, and the public regarding the status of hunger nationwide among all families and individuals, as well as those particularly vulnerable populations outlined above. They should also report annually on the progress being made to eradicate hunger. Further, as part of their charter, they should regularly review program efficiency and effectiveness and recommend to the Administration and Congress any changes necessary to accomplish their goals.





Conclusion

In this report, we have described our process, what we learned, and what we think our nation should do to address hunger. We believe that our best chance for success is to make progress on the contributing factors and underlying root causes we have described. We also are confident that the implementation of our recommendations will lead to a significant reduction in hunger.

At various points in this report, we have said that personal choices and individual responsibility are factors associated with hunger in America. But there is another aspect of personal responsibility at work: personal responsibility extends to all. Everyone can take direct actions to reduce hunger. Each of us should extend compassion for and help to our neighbors and get involved in hunger relief efforts in our communities. We need more of that kind of personal responsibility, too. With it, we will end hunger in the United States.

High school students preparing food for a summer food program at Anthony Independent School District in El Paso, Texas.

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Appendix A. Acknowledgments

The Commission wishes to acknowledge all the organizations that hosted us on our visits, as well as the community members who took the time to talk to us in these informal settings. We found these site visits and conversations enormously helpful—thank you!

- Acoma Food Distribution Program, Pueblo of Acoma, NM
- Alameda County Board of Supervisors, Oakland, CA
- Anacostia Library Summer Meal Program, Washington, DC
- Anthony Independent School District Summer Meals Program, El Paso, TX
- Arkansas Children’s Hospital Medical Nutrition and Feeding Program, Little Rock, AR
- Arkansas Children’s Hospital WIC Clinic, Little Rock, AR
- Arkansas Food Bank food distribution and Mayor Zola Hudson, Altheimer, AR
- Arkansas Hunger Relief Alliance, Cooking Matters Class, Little Rock, AR
- Bread for the City, Washington, DC
- DC Central Kitchen, Washington, DC
- East Side Baptist Church food pantry, Pine Bluff, AR
- ELANCO HATCH program, Indianapolis, IN
- First United Methodist Church, Cooking Matters Class, Little Rock, AR
- Indian Pueblo Cultural Center, Albuquerque, NM
- Jericho Way Day Center, Little Rock, AR
- El Centro de Salud Familiar La Fe, El Paso, TX
- La Fe Culture and Technology Center, El Paso, TX
- Marbury Plaza, Washington, DC
- Merrill Community Center, Pine Bluff, AR
- MLK Interdistrict Magnet Elementary School, School Breakfast Program, Little Rock, AR
- Nelson A. Rockefeller Institute of Government, Albany, NY
- San Luis Rey Parish and Fr. Robert Villegas, C.S.C., Chamberino, NM
- Socorro Ramirez Community Center, El Paso, TX
- Statehouse Convention Center, Little Rock, AR
- TOPPS (Targeting Our People’s Priorities with Service) after-school snack program, Pine Bluff, AR
- University of Southern Maine, Lee Community Hall, Portland, ME

We are also grateful to all the people who testified at the public hearings or provided written testimony, both invited and public. We heard from a total of 182 people or organizations.

Summary of Testimony Received by Type and Category

Type	Nonprofit	Government	University/ Research	Industry	Unaffiliated	Total
Invited	53	11	12	4	-	80
Public	64	7	5	-	26	102
Total	117	18	17	4	26	182

Invited Testimonies

Justin Alford, Maine State Senator, Portland, ME

Salvador Balcorta, MSSW, Chief Executive Officer, El Centro De Salud Familiar La Fe, El Paso, TX

Jessica Bartholow, MPS, Legislative Advocate, Western Center on Law and Poverty, Oakland, CA

Joel Berg, Executive Director, New York City Coalition Against Hunger, Albany, NY

Laurie Biscoe, Deputy Director, Texas Workforce Commission, El Paso, TX

Janet Bono, Workforce Services Program Administrator, Workforce Solutions Borderplex, El Paso, TX

Linda Bopp, Executive Director, Hunger Solutions New York, Albany, NY

Lee Bowes, PhD, CEO, America Works, Albany, NY

Michael Brennan, Mayor, City of Portland, Portland, ME

Kate Breslin, MPH, MRP, President and CEO, Schuyler Center for Analysis and Advocacy, Albany, NY

Patrick Casey, MD, Harvey and Bernice Jones Professor of Developmental Pediatrics, University of Arkansas for Medical Sciences, Little Rock, AR

Dee Clarke, Founder, Survivor Speak, Portland, ME

Celia Cole, MA, CEO, Feeding Texas, El Paso, TX

Faye Conte, MS, Advocacy and Education Director, Hunger Free Vermont, Portland, ME

Christy Daggett, MPPM, Policy Analyst, Maine Center for Economic Policy, Portland, ME

Mitchell Davis, Director, Global Shared Value, ELANCO (written only)

Charlotte Douglas, Arkansas State House of Representatives, Little Rock, AR

Clarissa Doutherd, Executive Director, Parent Voices Oakland, Oakland, CA

Marian Wright Edelman, JD, President, Children's Defense Fund (written only)

Willy Elliot-McCrea, CEO, Second Harvest Food Bank Santa Cruz County, Oakland, CA

Thomas Farley, MD, CEO, Public Goods Project, Washington, DC

Linda Farr, RDN, LN, FAND, Speaker-Elect of the House of Delegates, Academy of Nutrition and Dietetics, El Paso, TX

Edward Frongillo, PhD, Professor and Chair, Department of Health Promotion, Education, and Behavior, University of South Carolina, Washington, DC

Veronica Garcia, EdD, Executive Director, New Mexico Voices for Children, Albuquerque, NM

Karen Gruneisen, Associate Director, Episcopal Community Services in San Francisco, Oakland, CA

Craig Gundersen, PhD, Endowed Professor, Department of Agricultural and Consumer Economics, University of Illinois (written only)

Sandra Hassink, MD, President, American Academy of Pediatrics (written only)

John Hennessy, Interim Canon Missioner for Communication and Advocacy, Episcopal Diocese of Maine, Portland, ME

Ellie Hollander, President and CEO, Meals on Wheels America, Washington, DC

Mia Hubbard, MA, Vice President of Programs, MAZON: A Jewish Response to Hunger, Oakland, CA

George Jones, CEO, Bread for the City, Washington, DC

Paula Jones, PhD, Senior Health Planner, Office of Equity and Quality Improvement, San Francisco Department of Public Health, Oakland, CA

Kathy Komoll, Executive Director, New Mexico Association of Food Banks, El Paso, TX

Kathy Krey, PhD, Director of Research, Texas Hunger Initiative at Baylor University, El Paso, TX

Jennifer Laurent, Executive Director, Randy Sams Outreach Shelter, Little Rock, AR

Rich Livingston, State President, AARP, Portland, ME

Mary Mayhew, Commissioner, Maine Department of Health and Human Services, Portland, ME

Kim McCoy Wade, JD, Consultant, Alliance to Transform CalFresh, Oakland, CA

Travis McKenzie, Executive Director, Grow the Future, Albuquerque, NM

Edmund McMahon, President, Empire Center for Public Policy, Albany, NY

Robyn Merrill, JD, MSW, Executive Director, Maine Equal Justice Partners, Portland, ME

Kristen Miale, MBA, President, Good Shepherd Food Bank, Portland, ME

Oscar Muñoz, Dir., Texas A&M Colonias Program, Center for Housing and Urban Development, El Paso, TX

Matt Newell-Ching, Public Affairs Director, Partners for a Hunger-Free Oregon, Oakland, CA

Ed Nicholson, Senior Director, Community Relations and Customer Service; Representative, Corporate Affairs, Tyson Foods, Inc., Little Rock, AR

Sarah Palmer, MA, Policy Associate, California Association of Food Banks, Oakland, CA

Kathleen Pickering, PhD, Professor of Anthropology, Colorado State University; Dr. Pickering was joined in her testimony by Benjamin McShane-Jewell, Community Garden Program Director, Community Crops; Michael Brydge, Co-owner, Sweet Grass Consulting; Marcella Gilbert, South Dakota State University Extension, Cheyenne River Tribal Office; and Linda Black Elk, Secondary Science Education Instructor, Ethnobotany, Sitting Bull College, Standing Rock Reservation (written only)

Louise Pocock, JD, Staff Attorney, New Mexico Center on Law and Poverty, Albuquerque, NM

Janet Poppendieck, PhD, Policy Director, New York City Food Policy Center at Hunter College and the CUNY School of Public Health, Albany, NY

Anne Quaintance, Chief Program & Government Affairs Officer, Meals on Wheels San Francisco, Oakland, CA

Mark Quandt, MSW, Executive Director, Regional Food Bank of Northeastern New York, Albany, NY

Angela Rachidi, PhD, Research Fellow in Poverty Studies, American Enterprise Institute for Public Policy Research, Albany, NY

Jennifer Ramo, Executive Director, New Mexico Appleseed, Albuquerque, NM

Robert Rector, MPS, Senior Research Fellow, The Heritage Foundation, Washington, DC

Kori Reed, Vice President, Cause and Foundation, ConAgra Foods, El Paso, TX

Heather Reynolds, President/CEO, Catholic Charities Fort Worth (written only)

Audrey Rowe, Administrator for the Food & Nutrition Service, U.S. Department of Agriculture, Washington, DC

Rhonda Sanders, MPH, CEO, Arkansas Foodbank, Little Rock, AR

Deborah Sanderson, Maine State Representative, Portland, ME

Eric Saunders, EdD, Assistant Commissioner for Fiscal and Administrative Services, Arkansas Department of Education, Little Rock, AR

John Selig, MPA, Director, Arkansas Department of Human Services, Little Rock, AR

Cathy Senderling-McDonald, MPPM, Deputy Director, County Welfare Directors Association of California, Oakland, CA

Eldar Shafir, PhD, Professor, Princeton University Woodrow Wilson School of Public and International Affairs (written only)

Joseph Sharkey, PhD, Professor, Texas A&M School of Public Health, El Paso, TX

Tia Shimada, MPH, Managing Nutrition Policy Advocate, Food Policy Advocates, Oakland, CA

Reagan Smetak, Bureau Chief, State of New Mexico Children, Youth & Families Department, Albuquerque, NM

Andrew Souza, President and CEO, Community Food Bank, Oakland, CA

Valerie Tarasuk, PhD, Professor, Department of Nutritional Sciences, University of Toronto (written only)

Charolette Tidwell, Director, Antioch Consolidated Association for Youth and Family, Little Rock, AR

Jason Turner, Executive Director, Secretaries' Innovation Group, Portland, ME

Kathy Underhill, Executive Director, Hunger Free Colorado, El Paso, TX

Emily Wang, MD, Assistant Professor, Yale School of Medicine (written only)

Tracy Wareing Evans, Executive Director, American Public Human Services Association, Washington, DC

Kathy Webb, Executive Director, Arkansas Hunger Relief Alliance, Little Rock, AR

Paul Winkeller, Independent Consultant (written)

Scott Winship, PhD, Walter B. Wriston Fellow, Manhattan Institute for Policy Research, Washington, DC

Ian Yaffe, Executive Director, Mano en Mano, Portland, ME

Donna Yellen, MSW, Chief Program Officer, Preble Street, Portland, ME

James Ziliak, PhD, Founding Director, Center for Poverty Research, University of Kentucky, Washington, DC

Kelly Zunie, Cabinet Secretary, Indian Affairs Department, Albuquerque, NM

Public Testimonies

Many of the people who provided public testimony did not provide a written copy, and we have only the sign-in sheet or audio transcripts to document who they were. We apologize to anyone whose name we have inadvertently misspelled as a result. We also had a few people present public testimony who did not identify themselves at all, so we are unable to thank them by name.

127 State and Local Hunger Organizations (See complete list of organizations in Attachment 1; written only)

Saleemah Akbar, Washington, DC

Alexandra Ashbook, JD, LLM, Director, DC Hunger Solutions, Washington, DC

James Audiffred (written only)

Ali Avery, Portland, ME

Patricia Baker, Senior Policy Analyst, Massachusetts Law Reform Institute (MLRI), Portland, ME

Maria Elena Barrón, Partner, El Pasoans Fighting Hunger, El Paso, TX

Lionel Battle, Washington, DC

Rev. David Beckmann, President, Bread for the World, Washington, DC

Jill Borak, Policy Manager, Jewish Council for Public Affairs, Washington, DC

Rebecca Brislain, Florida Association of Foodbanks (written only)

Katharine Broton, PhD Candidate, University of Wisconsin (written only)

Elaine Bultena, Volunteer Coordinator, Food Ministry—First United Methodist Church, Little Rock, AR

Rhonda Chafin, Executive Director, Second Harvest Food Bank of Northern Tennessee (written only)

Leslie Clark, Veteran, St. Mary's Center, Oakland, CA

Bill Collins, Oakland, CA

Heather Cosson, MS, Dir. of Communications, National Foundation to End Senior Hunger, Washington, DC

Kay Cota (written only)
Evelyn County, Volunteer, Alameda County Community Food Bank, Oakland, CA
Joanna Cruz, Witnesses to Hunger, Washington, DC
Mike Curtin, DC Central Kitchen, Washington, DC
Diana Davis (written only)
Lisa Davis, JD, Senior Vice President of Government Relations, Feeding America, Washington, DC
David DeVaughn, MPA, Manager, Policy and Government Relations, City Harvest, Albany, NY
Allissa Eiser, RD, School Food Service Director, Public School System (written only)
Brooke Evans, Student and McNair Scholar, University of Wisconsin-Madison (written only)
Tangela Fedrick, Witnesses to Hunger, Washington, DC
Susan Forte, Exec. Director, House About It Community and Economic Development Agency, Little Rock, AR
Dana Frasz, Founder and Director, Food Shift, Oakland, CA
Abby Getman, The Food Bank of Western Massachusetts (written only)
Sara Goldrick-Rab, PhD Candidate, University of Wisconsin (written only)
Rev. Phillip Grigsby, Executive Director, Schenectady Inner City Ministry, Albany, NY
Sarah Grow, Director of Advocacy and Development, The Open Door, Portland, ME
Jonetta Hall, Oakland, CA
Scott Hamann, State Representative, Maine House of Representatives, Portland, ME
James Hanna, Executive Director, Cumberland County Food Security Council, Portland, ME
Helen Hanson, Portland, ME
Jim Hoffman, Friar, Franciscan Outreach Association (written only)
Ortencia Hopvi, Oakland, CA
Noel Hubler, Ray of Hope Food Pantry Inc., Little Rock, AR
Joan Ingram, SNAP-Ed Program Manager, University of New England, Portland, ME
Jennifer Johnson, President, George J Mitchell School PTO, Portland, ME
Andrea Jones, Oakland, CA
Rev. Kasey Jones, National Baptist Memorial Church, Washington, DC
Monica Kamen, Advocacy Coordinator, DC Fair Budget Coalition, Washington, DC
Erika Kelly, Meals on Wheels, Washington, DC
Courtney Kennedy, Nutrition Educator Manager, Good Shepherd Food Bank, Portland, ME
Jeff Kleen, Public Policy Advocate, Oregon Food Bank (written only)
Jeremiah Lowery, Research and Policy Coordinator, Restaurant Opportunity Center, Washington, DC
Cindy MacIntyre, Grace Episcopal Church Food Pantry, Washington, DC
Kate Maehr, MPPA, Executive Director, Greater Chicago Food Depository (written only)
Nahomi Martinez, El Paso, TX
Oscar Martinez, Coordinator, Social Justice Education Project, El Paso, TX
Janese Massey (written only)
Kirk Mayes, Chief Executive Officer, Forgotten Harvest (written only)
Shannon McCabe, Portland, ME
Bruce Meraviglia, Bread for the Cities, Washington, DC
Joycene Moore, Washington, DC
Artrese Morrison, Executive Vice President, Strategic Initiatives, Project Open Hand (written only)
Corina Marruto, El Paso, TX
National Association of Food Distribution Programs on Indian Reservations (written only)

Gina Núñez, PhD, Interim Director of Women's Studies, The University of Texas, El Paso, TX
Teri Olle, Director of Policy and Advocacy, San Francisco Marin Food Bank, Oakland, CA
Marisa Parisi, MS, Executive Director, Hunger Free Vermont, Portland, ME
Mary Penet, Director of Senior Feeding Programs, FeedMore, Washington, DC
Delene Perley, Food Pantry Coordinator, Project FEED, Portland, ME
Sr. Frances Mary Pierson, Dominican Sisters of MSJ (written only)
Shanti Prasad, Community Mobilization Coordinator, Alameda County Community Food Bank, Oakland CA
Carla Price (written only)
Thomas Ptacek, Portland, ME
Paula Reichel, DC Regional Director, Capital Area Food Bank, Washington, DC
Jeanne Reilly, Director of School Nutrition, Windham Raymond School Nutrition Program, Portland, ME
Colleen Rivecca, Advocacy Coordinator, St. Anthony Foundation, Oakland, CA
Carlos Rivera, President, Legacy of Valor, El Paso, TX
Wes Rivers, Policy Analyst, DC Fiscal Policy Institute, Washington, DC
Connie Rizoli, Director of Public Policy, Project Bread (written only)
Rosemary Rodibaugh, PhD, University of Arkansas Cooperative Extension, Little Rock, AR
Madonna Sactomah, Former Passamaquoddy Tribal Representative, Maine State Legislature, Portland, ME
David Sanchez, Regional Evaluator, Aliviane, Inc. and Prevention Resource Center 10, El Paso, TX
Ruben Sanchez, Regional Director, Texas Hunger Initiative, El Paso, TX
Anne Sheridan, MS, Director, Maryland Governor's Office for Children, Washington, DC
Janie Sinclair, Executive Director, El Pasoans Fighting Hunger Food Bank, El Paso, TX
Ana Solis, Open Arms Catholic Charismatic Community, El Paso, TX
Denise Speed, Washington, DC
Triada Stampas, MPA, Vice Pres. for Research and Public Affairs, Food Bank for New York City, Albany, NY
Kyle Stephan, Volunteer, Border Servant Corps–Kelly Memorial Food Pantry, El Paso, TX
Andrew Stettner, MPP, Chief Program Officer, Single Stop (written only)
Duke Storen, Sr. Director of Research, Advocacy, & National Partnerships, Share Our Strength, Washington, DC
Nermin Tadros, Board Member, New York City Coalition Against Hunger Food Action, Albany, NY
William Taft, Bread for the Cities, Washington, DC
Joel Thomas, Lead Culinary Educator, Martha's Table, Washington, DC
Daryl Twerdahl (written only)
Sr. Betsy Van Deusen, CSJ, Catholic Charities of the Diocese of Albany, Albany, NY
Gloria Williams, El Paso, TX
Michael Wilson, Director, Maryland Hunger Solutions, Washington, DC
Witnesses to Hunger, Washington, DC
Diane Woloshin, RD, MS, Director of Nutrition Services, Nutrition Services of Alameda County, Oakland, CA
Jessica Wynter Martin, Restaurant Opportunity Center, Washington, DC
Esther Zapata, El Paso, TX
Ginger Zielinskie, MBA, President, Benefits Data Trust, Washington, DC
Susan Zimet, Executive Director, Hunger Action Network of New York State, Albany, NY

Attachment 1. List of Signers of Letter from 127 Organizations

Note: This letter was provided to us by FRAC (Food Research Action Center). Some signers provided only an acronym. Where possible, we have identified those and spelled them out in parentheses following the acronym.

AHEPA [American Hellenic Educational Progressive Association]	Food Bank for New York City	Orange East Senior Center
Alabama Food Bank Association	Food Bank of Alaska	Oregon Food Bank
Arkansas Hunger Relief Alliance	Food Bank of Central New York	Oxnard-Pathway to Educated Nutrition, Inc.
Arrowhead Senior Center	Food Bank of Contra Costa & Solano	Partners for a Hunger-Free Oregon
Association of Arizona Food Banks	Food Bank of Delaware	Pennsylvania Council of Churches
B.J. Jordan Child Care Programs	Food Bank of the Golden Crescent	Point Roberts Food Bank
Baltimore Area Faces of Homelessness Speakers' Bureau	FRAC	Poor Peoples United Fund
Baltimore Outreach Services, Inc.	Franklin Grand Isle Community Action	Preble Street Maine Hunger Initiative
Bay Area Food Bank	GEDCO (Govans Ecumenical Development Corporation)	Project Bread
Bean's Café	Great Plains Food Bank	Public Policy Center of Mississippi
Blue Valley Community Action Partnership	Greater Philadelphia Coalition Against Hunger	Redwood Empire Food Bank
CAFB (Capital Area Food Bank)	Hardwick Area Food Pantry, Inc.	Regional Food Bank of Oklahoma
Cambridge Economic Opportunity Committee, Inc.	Harvest Regional Food Bank	Rhode Island Community Food Bank
Capital Area Food Bank of Austin	Hawaii Appleseed Center for Law & Economic Justice	Roxbury Food Shelf
CDA	Hunger Advocacy Network	South Carolina Appleseed Legal Justice Center
Center for Civil Justice	Hunger Free Colorado	Schenectady Inner City Ministry
CFPA (California Food Policy Advocates)	Hunger Free Vermont	Second Harvest Food Bank of Middle Tennessee
Champlain Islands Foodshelf	Hunger Solutions Minnesota	San Francisco–Marin Food Bank
Child and Family Policy Center	Hunger Solutions New York	Single Stop
Child Care Food Program Roundtable	Hunger Task Force	South Plains Food Bank
Children's Alliance	Idaho Hunger Relief Task Force	St. J Nutritional Center/Meals on Wheels
Citizens for Citizens, Inc.	Illinois Hunger Coalition	St. Mary's Food Bank Alliance
Committee on Temporary Shelter	Imperial Valley Food Bank	Survivors, Inc.
Community Action Committee of Lehigh Valley & Northeast Pennsylvania	Kenai Peninsula Food Bank	Tennessee Justice Center
Community Action Marin	Kentucky Equal Justice Center	The Food Depot
Community Servings	Kingdom Community Services	The Greater Boston Food Bank
DC Hunger Solutions	Loaves and Fishes Food Pantry	The Open Door
Day Care Connection	Long Island Care, Inc.	The Food Bank of Western Massachusetts
Duxbury Elf Food Shelf	Louisiana Food Bank Association	Three Square Food Bank
El Paso Human Services, Inc.	Maryland Hunger Solutions	Toledo Northwestern Ohio Food Bank, Inc.
Empire Justice Center	Mercy Medical Center–Mercy Supportive Housing Program	Treasure Coast Food Bank
End Hunger CT!	MLRI (Massachusetts Law Reform Institute)	Turning Point
Enosburg Food Shelf	Montana Food Security Council	Umbrella, Inc.
Facing Hunger Food Bank	North Carolina Association of Food Banks	United Ministries, Inc.
Fair Share	National Health Care for the Homeless Council	United Way of King County
Faith in Action Northern Communities Partnership	Nebraska Appleseed	Utahans against Hunger
Federation of Virginia Food Banks	New Hampshire Food Bank	Virginia Poverty Law Center
Feeding Indian's Hungry	New Jersey Anti-Hunger Coalition	Western Center on Law and Poverty
Feeding Missouri	New York City Coalition Against Hunger	Woodbury Calais Food Shelf
Feeding South Dakota	Northeast Kingdom Neighbors Helping Neighbors/RuralEdge	Woodstock Community Food Shelf
Feeding Texas	Northwest Harvest	Worcester Food & Active Living Policy Council
Florida Impact	Ohio Association of Foodbanks	Worcester State University
		Wu Yee Children's Services

Appendix B. U.S. Household Food Security Survey Model

In 2012, researchers at the USDA Economic Research Service compiled and made available a current version of the U.S. Household Food Security Survey Module to help other researchers achieve accuracy and standardization in application of the measures in empirical research. The U.S. Household Food Security Survey Module is available at the USDA Economic Research Service website, Food Security in the United States, (http://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us.aspx#.U8HyuLFv_Ok) along with very helpful guidance and recommendations for researchers' use of the module. In addition, Economic Research Service researchers have been an ongoing accessible and very helpful sources of advice, help, and guidance for public and private researchers who wish to use the food security measures in their own research. The support provided by the Economic Research Service has been a key factor in the large number of high-quality research studies that have been conducted on food security in the United States.

A household's raw score is the number of "affirmative" responses (e.g., "yes," "often," "sometimes," "almost every month," "some months but not every month") to the questions (listed below). The raw score is translated into one of four food security levels (high, marginal, low, very low) using ranges that depend on the subset of questions used.

How is food security measured?

(Scores are adult-only households on left; households with children on right)

		Raw scores	Examples of coping strategies	Examples of survey questions
Food Secure	High food security	0 0		
	Marginal food security	1 1		
		2 2		
Food Insecure	Low food security	3 3	Worry, stretch, juggle	"The food that we bought just didn't last, and we didn't have money to get more." Was that often, sometimes or never true for you in the last 12 months?
		4 4		
	Very low food security	5 7	Reduce quality and variety of diet	In the last 12 months, did you ever cut the size of your meals or skip meals because there wasn't enough money for food? In the last 12 months, did you ever not eat for a whole day because there wasn't enough money for food?
		6 8	Reduce food intake (adults)	
		7 9		
		8 -	Reduce food intake (of children)	
		9 -		
	10 18			

U.S. Household Food Security Survey Module Questions

1. “We worried whether our food would run out before we got money to buy more.” Was that often, sometimes, or never true for you in the last 12 months?
2. “The food that we bought just didn’t last and we didn’t have money to get more.” Was that often, sometimes, or never true for you in the last 12 months?
3. “We couldn’t afford to eat balanced meals.” Was that often, sometimes, or never true for you in the last 12 months?
4. In the last 12 months, did you or other adults in the household ever cut the size of your meals or skip meals because there wasn’t enough money for food? (Yes/No)
5. (If yes to question 4) How often did this happen—almost every month, some months but not every month, or in only 1 or 2 months?
6. In the last 12 months, did you ever eat less than you felt you should because there wasn’t enough money for food? (Yes/No)
7. In the last 12 months, were you ever hungry, but didn’t eat, because there wasn’t enough money for food? (Yes/No)
8. In the last 12 months, did you lose weight because there wasn’t enough money for food? (Yes/No)
9. In the last 12 months did you or other adults in your household ever not eat for a whole day because there wasn’t enough money for food? (Yes/No)
10. (If yes to question 9) How often did this happen—almost every month, some months but not every month, or in only 1 or 2 months?

(Questions 11-18 were asked only if the household included children age 0-17)

11. “We relied on only a few kinds of low-cost food to feed our children because we were running out of money to buy food.” Was that often, sometimes, or never true for you in the last 12 months?
12. “We couldn’t feed our children a balanced meal, because we couldn’t afford that.” Was that often, sometimes, or never true for you in the last 12 months?
13. “The children were not eating enough because we just couldn’t afford enough food.” Was that often, sometimes, or never true for you in the last 12 months?
14. In the last 12 months, did you ever cut the size of any of the children’s meals because there wasn’t enough money for food? (Yes/No)
15. In the last 12 months, were the children ever hungry but you just couldn’t afford more food? (Yes/ No)
16. In the last 12 months, did any of the children ever skip a meal because there wasn’t enough money for food? (Yes/No)
17. (If yes to question 16) How often did this happen—almost every month, some months but not every month, or in only 1 or 2 months?
18. In the last 12 months did any of the children ever not eat for a whole day because there wasn’t enough money for food? (Yes/No)

Glossary

Child and Adult Care Food Program: A federal nutrition assistance program that provides meals to children and adults in institutions and day care centers. Generally subject to the congregate feeding requirement.

Colonia: An unincorporated settlement of immigrant families, the majority of whom are undocumented.

Congregate Feeding Requirement: A requirement of the Summer Food Service Program and the Child and Adult Care Food Program to provide meals at a public site (e.g., school, senior center).

Documented immigrant: A citizen of another country who is in the United States legally.

Food insecure: A household with low or very low food security, as measured by the U.S. Household Food Security Survey Module.

Food insecurity: A household-level economic and social condition of limited or uncertain availability of nutritionally adequate and safe foods, or the limited or uncertain ability to acquire acceptable foods in socially acceptable ways without resorting to emergency food supplies, scavenging, stealing or other coping strategies.

Food secure: A household with high or marginal food security, as measured by the U.S. Household Food Security Survey Module.

Food security: Access by all people at all times to enough food for an active, healthy life.

Globalization: Changes promoting the open flow of goods and services among countries.

Hunger: Households experiencing very low food security.

Multigenerational household: A family headed by an adult householder aged 40 or older and with three generations (grandparent, parent, child) or grandparent and grandchild with no adult parent (so-called skipped generation).

National School Lunch Program: A federal nutrition assistance program that provides school children with free or reduced price lunch.

Offshoring: Moving jobs from the United States to other countries where labor is cheaper.

Public-private partnerships: Arrangements between public, private, and nonprofit organizations to provide public services.

School Breakfast Program: A federal nutrition assistance program that provides school children with free or reduced price breakfast.

SNAP: Supplemental Nutrition Assistance Program, the largest federal nutrition assistance program. Formerly called Food Stamps.

Summer Food Service Program: A federal nutrition assistance program that provides children with food during the summer when they are not in school. Generally subject to the congregate feeding requirement.

Undocumented immigrant: A citizen of another country who is in the United States illegally. These may include asylum seekers (people who have entered illegally seeking refugee status, which if granted, would regularize their presence and make them legal) and those who entered the U.S. legally on a temporary visa, such as a student or tourist visa, that has since expired, rendering their presence here illegal.

U.S. Household Food Security Survey Module: A survey used to classify households into four food security categories: high food security, marginal food security, low food security, and very low food security. See Appendix B.

Very low food security: The disruption of eating patterns and reduced food intake for at least one household member because the household lacked money and other resources for food.

WIC: Special Supplemental Nutrition Program for Women, Infants, and Children; a federal nutrition assistance program that provides assistance to pregnant and postpartum women, infants, and children under 5 to ensure they get adequate nutrition.

