



## **National Commission on Hunger Public Hearing**

### **Invited Testimony**

June 15, 2015 ♦ 9:00 a.m. – 4:00 p.m.  
Alameda County Board of Supervisors  
1221 Oak Street, 5th Floor Board Chambers  
Oakland, CA 94612

### **TIA SHIMADA CALIFORNIA FOOD POLICY ADVOCATES**

Shimada: Good morning members of the Commission. My name is Tia Shimada. I'm here on behalf of California Food Policy Advocates. Thank you for the opportunity to speak with you today and for the important work that you're doing across the country. My colleagues and I truly appreciate your efforts to hear our perspectives and our recommendations to address hunger and food insecurity.

For over twenty years, California Food Policy Advocates has been dedicated to improving the health and wellbeing of low-income Californians by increasing access to nutritious, affordable food. Much of our work focuses on strengthening the federal nutrition programs. As they exist today, the programs offer essential resources to households that are struggling to meet their most basic needs. These resources, when they do reach low-income Californians, help to mitigate food insecurity and keep households from falling further into poverty.

That success offers promise for eliminating hunger and supporting long-term health, productivity, and wellbeing. That success also underlies the urgency in connecting all low-income children, adults, and seniors with the federal nutrition programs for which they are eligible. Given the collective expertise of the speakers scheduled for this hearing, it's a subset of the child nutrition programs that I will be testifying about today.

Three in five of California's public school students are eligible for free or reduced-price school meals. That means at least 3.4 million children in our state could benefit from the federal programs designed to help meet their nutritional needs in and outside of school time. But that's not happening. Millions of California's most vulnerable children are going without the healthy meals they need to learn, grow, and achieve at their fullest potential. In fact, more than 2 million of California's low-income households with children are unable to consistently afford enough food.



Participation gaps in the child nutrition programs have persisted for years across this state. That persistence has helped to keep food insecurity part of the unfair, unnecessary, and unacceptable reality for California kids. There are well-tested solutions to this problem. It's not so much a matter of what we should do to address food insecurity among children, but a matter of when we are willing to do so.

In order to connect children with all of the nutrition resources they need and deserve, we must effectively and efficiently identify children who are eligible for K-12 nutrition programs. Enrolling students in free school meal programs through direct certification using existing health and human services data is efficient for administrators and families. Direct certification enables low-income students to benefit from school meals without families or administrators being burdened by the completion, collection, and processing of school meal applications.

California has made a concerted effort to improve its direct certification processes. More work remains to be done. A recent report from USDA shows that California falls well below the federal performance standard for direct certification with CalFresh and CalWORKS (SNAP and TANF) data. We encourage USDA to uphold the performance standard and support states like California in meeting it, particularly through improved data matching systems. State and federal leaders should optimize existing technology and ensure that all eligible students are directly certified.

California's chronically low CalFresh participation rate means fewer of our kids are eligible for direct certification with CalFresh data, despite actually being in need. That makes direct certification through other data sources especially important for our state. In 2014, California was approved to participate in a demonstration project that will evaluate the use of Medi-Cal (Medicaid) data in directly certifying up to 225,000 low-income students. School districts participating in the demonstration project will use the much more comprehensive Medi-Cal data set to identify children who are eligible for free school meals but were not enrolled through CalFresh data. A federally authorized expansion of the very limited demonstration currently granted to California would enable definitively eligible students to be efficiently enrolled in school meal programs.

Beyond the challenges of enrolling eligible students in meal programs, California is challenged to serve those children who are deemed eligible and therefore are also at the greatest risk for food insecurity. With my remaining time, I would like to share a few details about two of the persistent nutrition gaps that affect millions of kids in our state.



Roughly 95% of California's low-income, public school students attend schools that technically offer the federal School Breakfast Program. But school breakfast only reaches 35% of students who are eligible for free or reduced-price meals. That means on an average school day in California, 2.2 million of our most vulnerable kids miss out on a free or low-cost breakfast that could reduce the strain on family food budgets. Pioneering school districts across the country have shown that when breakfast is integrated into the school day, rather than being served very early in the morning before kids are able to arrive on campus, the program works the way it's intended to work: hungry students get the food they need to function and focus. We urge Congress and USDA to hold states, schools, and themselves accountable for supporting and implementing after-the-bell breakfast models, which have been shown to most effectively reach students in need of school meals.

While the negative effects of food insecurity on children's physical and mental health and cognitive function may seem especially relevant to school meal programs, children need access to nutritious meals all year round for all the same reasons. When school is out for the summer, many low-income kids lose access to the affordable meals that are available during the academic year. More specifically, nearly 2 million low-income children in California who benefit from free or reduced-price school lunches are not served by any of the federal summer meal programs.

When and where the summer meal programs are able to reach kids, they provide a tremendous service. However, this approach on its own is unlikely to meet the nutritional needs of all eligible and food-insecure children. Providing a summertime monthly benefit to low-income households with children to purchase groceries via EBT is a well-tested, efficient method to ensure that children receive nutritious meals when school is not in session.

As of 2015, ten states and tribal organizations have implemented Summer EBT demonstration projects. Rigorous evaluation has found that Summer EBT reduces food insecurity among children and their families. We ask Congress to authorize a nationwide Summer EBT program as was recently proposed in the *Stop Child Summer Hunger Act* (H.R. 2715 / S. 1539) introduced by Representative Susan Davis (CA-53) and Senator Patty Murray (WA).

As Congress considers this action, we also ask that USDA expand existing Summer EBT projects to additional sites, including California. There is immense potential to reduce food insecurity among children by bringing Summer EBT to California our state. There are more children in California who are income-eligible for free or reduced-price school meals than in any other state.—and California's summer nutrition gap is the second largest in the nation.



As an advocate born and raised in California, I often worry whether decision makers will see the scale of food insecurity in our state as a foregone conclusion rather than an urgent call to action. But with technical efficiencies like direct certification, practical approaches like after-the-bell breakfast, and effective innovations like Summer EBT, it's clear that solutions can be brought to bear. We ask Congress and USDA to drive these efforts and we urge the Commission to prioritize these asks. Thank you for your time. I welcome any questions you may have and look forward to continued discussion of these critical issues.



**SARAH PALMER**  
**CALIFORNIA ASSOCIATION OF FOOD BANKS**

Palmer: Good morning, Commissioners, thank you for asking me here today to speak about my experience with food insecurity and provide policy recommendations, or at least a perspective to consider while you contemplate your task.

My name is Sarah Palmer. I am a former CalFresh Recipient. In addition to CalFresh, I received WIC and benefited from the Free and Reduced Lunch Program. I am here on behalf of over 4 million Californians helped by these programs, and millions more (most of them children of working people) who could be hungry less often if these programs were more accessible. And although I cannot speak for them, I can certainly share my story and tell you that I am not much different from anyone I've ever met who is participating in these programs.

I have been working since I was 13. My mother was a cook, and I worked with her in those kitchens: first as a dishwasher, a prep cook, a busser, and a server. In the summer I would clean cabins during the day and go straight to the restaurant at night. Hard work is not unfamiliar to me and as an adult I often had two jobs. I found myself at home in the food industry. I put myself through culinary school and went on to work in some of the best restaurants in the Bay Area. The hours are long, the work is hard, and the return for someone who didn't absolutely love it would be hard to reconcile.

While in a relationship, I got pregnant. Though unplanned, it was not unwelcomed. My boss was supportive and as a mother herself she warned me that the professional life of a chef does not bode well for motherhood, and she was right. I worked 10-14 hour days on my feet until I was eight months pregnant. My daughter was born in May of 2008. Her father had minimal involvement; shortly after her birth I realized I would be parenting alone, and although I established a child support case the payments were small and unreliable.

I knew that my situation was not sustainable and when my daughter was 4 months old I began taking online courses at a local community college while working  $\frac{3}{4}$  time. I was accepted at the University of California Davis, and graduated in 2012. I eventually received a graduate degree—all the while working when I was able—and trying to be the best parent I could be.

The WIC and CalFresh benefits that my daughter and I received were essential while I was in school. They kept us from going hungry during months when we didn't receive child support and sustained my confidence through my continued education so that I could provide a stable home for my daughter while working toward a life that would prove to be more sustainable. We received the maximum CalFresh benefit allowed for a family of two, and like many, there was nothing supplementary about it. All of my money went to my high



cost of rent and childcare, CalFresh (SNAP) was our primary source of food. With WIC and produce from Davis Korean Church's food pantry once a week we were able to eat for the month. However, as much as I tried to ration, I found myself foregoing fruits and vegetables toward the end of the month so that my daughter would have enough.

WIC, in California, has yet to implement Electronic Benefit Transfer (EBT) payments and so still delivers coupons. As a result, the program is difficult to use. A trip to the store often ended in frustration and sometimes tears after experiencing store clerks having to close down checkout lines in order to manage the perforated coupon transaction, referencing three-ringed binders, sending product back in exchange for the accepted type of brand product-line, all the while absorbing hurried shoppers' obvious irritation and judgment. Please do not get me wrong, the items I received while on WIC were a crucial part of our food supply, but the processes has to be improved and EBT payments should be implemented without delay. Modernization not only addresses issues of efficiency, but—if done well—can reduce unnecessary stress and stigma in an already stressful and vulnerable stage in a new mother's life.

The reports for CalFresh (SNAP) recertification require a lot of information and allow a short amount of time (about one week) to return according to the postmarked date, including proof of income, bank statements of the month (or months) in question, and proof of payment for any childcare expenses. I would have to go to a printing center, because I did not have a printer at home, to print out multiple bank statements. Proof of income required that I make photocopies of my pay stubs. Proof of identification required copies of my driver's license and both of our Social Security cards.

I had to ask the childcare center's administrative staff to print out a special receipt of payment. This often required me asking more than once and finally explaining to them that we were CalFresh recipients and that it was very time sensitive. This was humiliating, and I couldn't help but think that the entire staff looked differently at me—and maybe even my daughter—after I shared that information. Not long ago, I participated in a successful effort to change the law regarding childcare expense reporting here in California so it has improved, but there is more to do.

What I hope this testimony conveys is that it takes a lot of time to be poor. From the CalFresh application, to the recertifications, and the additional requirements, getting and maintaining CalFresh is difficult and time consuming. Imagine doing your taxes six times a year instead of just once. It is stressful and while trying to make it through the day-to-day challenges that poverty presented I found myself only able to do what was right in front of me, and that was overwhelming.

Please continue to look towards modernized operations and newly available technology, but remember, we need to be thoughtful about how these new technologies are used and



how we can use them to expand access to people more difficult to serve, with the goal of setting excellent nationwide standards that easily translate to state and county systems. This is especially important when considering our exceedingly vulnerable refugee, migrant and homeless populations. I can't imagine how much **more** difficult this process would have been had I not had a physical address, if I spoke English as a second language, if I lived in a rural community, or if I was a person of color and experienced institutional racism. I cannot imagine. It makes little sense that intentional programmatic barriers designed to make programs harder to navigate, are upheld. This puts unnecessary stress on poor families, causes further inefficiencies in administrative processes and wastes resources.

Low-income individuals that need help shouldn't have to hope to know about the safety net programs they are eligible for; we should help them. I feel that it is my duty to urge the Commission to focus on the horizontal integration of these important programs, and not only linking these resources but making the individual programs easy to navigate because it is a social safety net, not a ropes course.

Lastly, I am tired of the demonization of low-income people coming from people with little first-hand knowledge of what it is like to be on hard times. We need to look at the conditions that are creating so many food-insecure people. These are symptoms of a greater problem in the United States. What if we made childcare more affordable, work schedules more flexible and living wages more attainable? Please realize, while contemplating prescriptive solutions that many low-income people are managing work, school, our homes, and our child's wellbeing successfully in spite of the many barriers that lay in our path. I urge us all to think about equitable solutions and policies that will lead low-income people and their families to **real** economic sustainability.



**CLARISSA DOUTHERD  
PARENT VOICES OAKLAND**

Doutherd: Good morning, my name is Clarissa Doutherd, I'm currently working as Executive Director for Parent Voices Oakland, an organization that advocates for affordable, accessible, quality childcare for low-income families. It is such an honor to be here providing testimony today, and I want to thank the Commission for the opportunity, as well as my colleague and friend Sarah Palmer.

Growing up in the 80s, I watched my mother really struggle. We were often homeless. With no money for child care, and with no one to watch my baby sister, my brother and I, she couldn't keep the few jobs she was able to land. We cycled on and off AFDC for years. My mother received food stamps, and at that time the process was that you got a voucher in the mail, you went to a food stamp redemption center and cashed your food stamps to receive booklets of different colored coupons that you could use to buy food. The centers were filthy, with extremely long lines. It was a day-long process.

The food stamps didn't come close to feeding us, and when my mom got low we'd start making rounds at food pantries, and the bakery thrift stores which sold aging baked goods like Wonder Bread and Twinkies.

I had a deep sense of shame, waiting in those lines, going to food closets, and being stared at each time we were in a grocery store check-out. I remember people staring as my mother pulled out books of food stamps. I swore that when I was old enough to take care of myself, I would never experience the humiliation of poverty, and the sense of hopelessness that I knew as a child.

From age 15 on I worked two, sometimes three jobs. As much love, respect and admiration I had for my mother, I wanted to create a different life for myself....I held on to the belief that if I was responsible, and worked really hard there was no way I would experience the crippling poverty of my youth. And while that was true much of the time, I learned that this reductionist way of thinking simply wasn't reality. In 2006, I was 25 with a full time job as a bookkeeping and accounting consultant for small businesses in San Francisco. I had my own apartment in the City, and was making a good living. When I became pregnant with my son Xavier that year, I tripled my work load and diligently saved every penny that I could in preparation for the huge life change. I moved out of my apartment, and rented a small room to save even more money. I worked literally until the day I went into labor. And then life happened.

After Xavier was born my housing situation fell through, taking a good chunk of my savings with it, and of course, everything cost much more than I'd anticipated. Without any family or friends who could help, we were homeless. The last of my money went to diapers, baby





supplies, and gas to get back and forth from appointments. I was nursing Xavier, but had to carefully ration all of my food. I was scared, hungry, and lonely every day. I had no idea that I qualified for food stamps or WIC. I didn't know where to go to apply for them, I was just in a sleep-deprived panicked daze.

Things went on this way until Xavier was 4 months old. I began looking for a job and talked to a family childcare provider in my neighborhood who explained how to apply for TANF, CalFresh, and WIC until I got a job. She literally saved our lives. Getting CalFresh and WIC was a tremendous help. I had to supplement breast feeding Xavier with formula, and he was allergic to most brands. I couldn't afford the formula he was able to digest without support, but I could purchase it with the WIC voucher. This meant I had money for a babysitter and to buy gas when I needed to go on job interviews. It meant that I didn't have to choose between a healthy meal for myself and diapers.

It was a rough year, at first I worked part time with no sick leave or paid time off, so keeping appointments to recertify or turn in paperwork across town was extremely stressful because it meant we couldn't make rent. Xavier has asthma, which was severe in his infancy, so any time off had to be saved in case my baby had a medical emergency.

Eventually, I was able to advance at my job and be promoted to full-time employment, when Xavier was about a 1 year old. I finally made enough money to get off all public assistance, except my child care subsidy. It was the hardest, scariest, most stressful year of my life. I began to understand my mother, and some of what she went through.

Having a new baby should not mean that parents fall through the cracks. Our situation could have been so much worse. I was fortunate to find informal support through an experienced family childcare provider who had been through the same situation when her children were little. There were many points of intervention where systems and services could have worked to support my family and ensure we could stabilize more quickly than we had. Meeting families where they are at—child care centers, the maternity ward, home visiting programs, and churches to provide critical information and assistance with accessing programs.

Despite my early experiences, I still went hungry as a first-time mom from a lack of knowledge. Many parents are overwhelmed and simply do not know where to begin. Also, if I had known to ask for information on a home visiting program, as an at-risk mother without stable housing, this could have been another place of intervention. My son and I were in crisis for months, and the emotional impact this had on my baby was significant.

My recommendation for the Commission is to (1) continue listening to the stories and experiences of those impacted by poverty to understand where policy makers can fill in the gaps. There are critical moments where we can maximize our engagement with families



and provide helpful information and resources. Families are the experts. They can provide great information on when these moments are, what information and resources are most helpful, and how to best deliver these. (2) Investment. Having multiple supports working together meant I was able to stabilize completely in two years. Much of the federal and state funding for many of these supports have been cut. Families deserve an opportunity to lift themselves out of poverty with dignity, and we know that providing a strong safety net decreases the type of systemic, deep, generational poverty my family experienced.

Thank you so much for the opportunity to tell my story today.



**JESSICA BARTHOLOW**  
**WESTERN CENTER ON LAW AND POVERTY**

Bartholow: Good morning commissioners. I'm honored to speak to you today concerning hunger, as an expert, both because I have worked for nearly two decades in the antihunger community and because I have experienced hunger first hand as a child and young adult.

I grew up here in Northern California, where my family has lived for generations. My parents [were] both raised in working class homes, had their own working class status and middle class aspirations undermined by my father's untreated mental health disorder. He suffered from posttraumatic stress disorder, which he was diagnosed with prior to his honorable discharge from the Army. He served as an operating engineer in Vietnam, clearing landing zones. Upon discharge he was not given a follow-up appointment or even instructions for how to taper down the lithium that they had prescribed him while in Vietnam. My father self-medicated with alcohol and, for most of my childhood, he was suicidal and at times homicidal, and could rarely hold down a job for more than a year. My home was not a safe place and hunger was not the only trauma that we experienced. We moved frequently and so rarely built up a support network. To get by, my mother borrowed money that she could never pay back and when I was 13, she left her job as a bookkeeper to work from home ironing shirts for piecemeal wages and, as a family, we sold junk at the flea market on the weekends.

During the hardest years, we relied on the USDA commodity food program run by the Salvation Army in our small rural town. But it was run by volunteers and so the hours weren't dependable and the food, though sometimes the only food we had at the end of the month, was never enough to offer a balanced meal.

My family didn't know about the school meal program and so, until I was 15, we didn't participate. While school cafeteria food was (and still is) the bane of many jokes, I remember coveting the meals the other children would eat. Then one day, I was sent to the principal for arguing with a teacher who had insisted that I purchase a \$10 workbook for my French class. The vice-principal asked why I wasn't on the free meal program. To this day, I'll never forget the mix of relief and affliction when I learned about the program. That wasn't the first time I was sent to the principal's office, but it was the last—it was also the first year I got straight A's, a GPA that helped me earn a Cal-Grant, Pell Grant and a Federal Supplementary Educational Opportunity Grant and full ride to Mills College which included a meal plan. It was with this education that I earned the skills to help my dad apply for veteran's benefits, so he could get the mental health and financial support that eventually ended homeless for my family.

The angst I still have remembering all the hungry days I spent not knowing that there had been a lunch with my name has driven a great deal of my professional work, which includes



building a statewide network of outreach workers based at food banks, call centers, Catholic charities and other community-based organizations to let people know about federal food assistance they are eligible to receive and assist them in applying for it.

I believe that one of the most important accomplishments that this Commission can have is to lift up the problem of hunger and the stories of Americans who have been hungry, not just in the distant past as I have, but who are experiencing it today. I know that you, Commissioner Chilton, know the power of this goal achieved through your work with the National Witnesses to Hunger, not just to inspire, but to instruct policy change that is meaningful and lasting. I am grateful that today's agenda will achieve that goal and am thankful to you both for making sure it did.

As I enumerate my policy recommendations below, I need to say that they have been formulated with the belief that the goal of the Commission, to reduce the experience of low-food-security, is a bar set to low. Too low for America and the freedoms my father fought for. Instead, I posit that we should seek to eradicate, not just chronic hunger, but hunger. To do this, leaders must take immediate actions in response to America's stagnant poverty and dangerously high levels of inequality, restore confidence in our country's ability to protect our most vulnerable citizens, and make prosperity an achievable goal for all Americans. We recommend doing this by:

1. Making employment a real option for every low-income American and protect families who can't work.

Most poor families with working-aged adults are working families. Still, over 2.5 million Americans are among the long-term unemployed. The Humphrey-Hawkins Full Employment and Training Act will put Americans back to work rebuilding our nation's crumbling infrastructure and support worker retraining for a 21<sup>st</sup> century economy. Passage of this legislation, coupled with a doubled-down investment in work opportunity through youth jobs programs and subsidized jobs for low-income families who rely on the Temporary Assistance for Needy Families (TANF) Program, will make self-reliant employment an option [for] most working-aged Americans. And when unemployment is not available, long-term unemployment insurance should [be] and a safety net that keeps children safe from the significant and long-lasting harm of deep poverty must be.

2. Increasing and indexing the minimum wage so that an honest day's work can bring an honest day's pay.

With a proliferation of low-wage work, over 25% of jobs in the nation pay less than the federal poverty line for a family of four. Here in California, 64% of low-income people live in a working family. Increasing the minimum wage achieves the twin goals of maintaining a wage floor to keep workers out of poverty, and stimulating the consumer spending necessary for economic recovery and future growth. In a study conducted by the Chicago Federal

Reserve Bank, a one dollar increase in the minimum wage for a worker resulted in \$2,800 in new consumer spending by his or her household over the following year. America should seek to restore the full purchasing power of the minimum wage, which would be \$21.72 an hour if it had kept pace with worker productivity, to guarantee each worker a decent standard of living, reduce the reliance of government safety-net programs, and infuse our economy with more confident consumers. The Original Living Wage Act of 2015 would require workers to be paid a minimum wage that would allow a full-time worker to earn wages that are higher than the federal poverty threshold for a four-person household.

3. Establishing the right of all workers to have paid sick days and dependable schedules.

In addition to raising wages, low-income workers need workplace protections, like paid sick days and schedule fairness, to prevent poverty. Though paid sick time is considered by most Americans to be “a basic worker’s right,” more than 40% of people in the private sector workforce, including 81% of low-wage workers, don’t receive a single paid sick day. For low-income, working families this is especially critical, since a few days’ lost pay makes the struggle to secure basic needs, like food, that much harder. Even worse, nearly 25% of workers polled said that they’ve lost a job or were told they’d lose a job for taking time off due to illness. Congress should pass the federal Healthy Families Act allowing most workers to earn up to seven paid sick days annually. Additionally, federal law makers should support the Schedules That Work Act that establishes protections for workers who are undermined by no voluntary part-time employment and unpredictable schedules which negatively impacts women and Black and Latino workers most.

4. Supporting Paid Family Leave so that workers can care for or ill family members without losing their job.

Only 11% of workers in the U.S. have access to paid family leave through their employers. A recent study found that women who take paid leave are 39% less likely to receive public assistance and 40% less likely to receive food stamps in the year following a child’s birth. Congress should enact the Family and Medical Insurance Leave Act to secure up to 12 weeks of paid leave each year to qualifying workers for the birth or adoption of a new child, the serious illness of an immediate family member.

5. Making safe, affordable child care an option for every working parent and their children.

According to Child Care Aware, the average cost of enrolling an infant in a full-time day care center ranges from \$5,496 in Mississippi to \$16,459 annually per child depending on the state, yet the National Women’s Law Center (NWLC) says that only one in six children who qualify for federal childcare assistance currently receive it. Research shows that low-income mothers who receive childcare subsidies are more likely to be employed, work more hours, and work standard schedules compared to mothers without subsidies. This means fewer families with children will need to rely on federal food assistance to feed their families or be forced to go without food because their paycheck doesn’t last the month. Congress should restore full funding [of] the Childcare and Development Block Grant (CCDBC), permanently end the national sequester of Head Start funds and authorize significant new funds with the



passage of the Strong Start for America's Children Act to ensure early-learning settings they need and deserve, and parents are able to work and ensure that as we build out the workforce of child care workers, that we commit to ensuring that they are paid well enough that they, themselves, are not poor and vulnerable to chronic hunger.

6. Securing safe, affordable housing an option for all Americans.

Too many Americans are homeless and most pay more than 30% of their incomes in housing. In the wake of the mortgage crisis, rental housing availability dropped to an all-time low. Federal Community Development Block Grant funding cuts in the 2012 budget and Housing and Urban Development funding sequestration has magnified the impact of the rental housing shortage. Meanwhile, according to the Center on Budget and Policy Priorities, more than half of federal spending on housing supports went to families with incomes above \$100,000 in 2011. By redirecting housing investments to housing supports for low-income Americans, ending sequester and restoring the roughly 70,000 vouchers lost during sequestration and implementing a National renter's tax credit, housing instability could be sharply reduced, family resources for food & health freed up, and the quality of life for all Americans improved.

7. Preventing long-lasting harm of children and adults living in poverty by strengthening SNAP.

There is no goal more American than ending hunger and no program better at achieving that goal than the Supplemental Nutrition Assistance Program. In a poll commissioned by Tyson Foods and the Food Research and Action Center, 80% of respondents said they "strongly agree" with the statement that no one should go hungry in America. Still, more than 16 million children live with the possibility of hunger each day. Hunger has a tremendous impact on young children's health, future potential, and cognitive, social and emotional development. Americans shouldn't have to rely on food stamps to prevent hunger, but when they do, the benefit should suffice. However, according to a report released by the National Institute of Medicine, the current SNAP benefit levels are set too low to ensure adequate access to healthy food. To reduce the likelihood that Americans will suffer from hunger and prevent the long-lasting consequences of childhood malnutrition, Congress should set SNAP benefits using the Department of Agriculture's Low-Cost Food Plan and restore eligibility to immigrants cut by The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA).

I would like to close on a personal note, as I began. To make sure that the benefits we have allocated already through these programs are utilized, we need to fund outreach in all of our nutrition programs and allow alternative delivery strategies where traditional methods aren't working (like expanding Summer Lunch EBT projects), so that kids can eat the meal that has their name on it rather than go hungry. And, though these would be small investments, it would be meaningful to me if we were to pass legislation to improve SNAP access to Veteran Families and Military families—because if we can't prevent hunger among



those families who have already given so much to our country, then I'm not sure what America really stands for.

By pursuing these priorities with urgency and to commit to follow them with more robust reforms to reduce poverty, inequality and human suffering including, but not limited to, fully implementing the Affordable Care Act, creating a path to citizenship for immigrants, reforming prison sentencing, fully funding veteran health, home care and employment re-training programs, restoring of the promise of quality public education and strengthening the rights of workers to organize and collectively bargain for fair wages and safe working conditions. These policy next steps should be identified by people who are [experiencing], or who have experienced the indignity of hunger and poverty. They should be policy goals that, taken together, will not only significantly reduce the experience of hunger, but also elevate the dignity of all Americans and secure the possibility of economic prosperity for low-income and middle-class Americans.

I thank you for your time and for your generosity of collegiality to both of you Commissioners and appreciate the ongoing dialogue that we'll have with the Commission as you develop your recommendations. I have prepared my testimony in writing with the citations for additional information.

**Commissioner: Thank you very much.**

**Commissioner: Thank you, Jessica.**

Bartholow: Thank you.

**Commissioner: Any questions?**

**Commissioner: I'm really interested in your thinking on workforce development and jobs for those who are unemployed and your thoughts on more effective deployment of the programs of which there are probably 40 employment and training programs with more rules and regulations than one can possibly imagine, and whether you have any thoughts about how with the SNAP employment and training, at least, but if there were a way across the board to improve those, what your suggestions might be, what your thoughts are.**

Bartholow: Thank you for that question. As you know, the Congress recently passed the WIOA Act and they switched from WIA to WIOA, which adds the *Opportunity* into the act, the Workforce Investment and Opportunity Act. This act requires SNAP and SNAP ENT to be part of the state plan submitted for WIOA and in fact it requires states to pull together a dialogue to seam these programs that right now operate in vacuums, sometimes serving the same people but sometimes creating walls between really great programs and those



people who could benefit the most from them. I've had the honor of being able to attend three WIOA planning meetings here in California. Our Director, Director Lightbourne of our Department of Social Services, is part of those conversations and I, I believe that our Governor is planning to continue to have SNAP ENT in that, in that planning. It's an option for them to, for states to opt out. So I would encourage, you know, diligence from the nation, the national level to, you know, pursue states' participation in those WIOA planning. I think that that will help as, as what I see, I see a growing conversation. I was recently in a conversation with our Department of Social Services, our WIOA State Director, and our community colleges, and we were talking about how to, how to integrate data and services in ways that would both expedite assistance and create collaboration for low-income, low-income workers who are underemployed, right, and low-income workers who are seeking to advance in the type of employment that they have and also help those who are currently unemployed but would benefit from a certificate, additional training, work support, and a bridge into a self-sustaining job. I do think that this is an area that's primed for action, coordination and collegiality, and I'm excited to be part of it. I think we will see less hunger, less poverty, less dependency on social safety nets if we help people be employed, stay employed, and we don't undermine employment.

**Commissioner: Thank you.**

**Commissioner: Thank you very much. We haven't finished with you, Jessica. Please, sit back down. [Laughter] Thank you very much for your testimony. It was very touching. So I'd like to ask you a few questions, if that's all right.**

Bartholow: Yes.

**Commissioner: Thank you very much for talking about your own personal experience and I wanted to know if you would be willing to talk a little bit more about some of the other supports that would have been good for your family after your father returned home from Vietnam and was self-medicating with alcohol. You talked about hunger not being the only trauma.**

Bartholow: Uh-huh [yes].

**Commissioner: My sense is that the school lunch program is not the only solution that would've been helpful in those moments of your childhood. Can you talk a little bit about more about the other supports that would've been helpful?**

Bartholow: Well, I think that the good news is, is that our Armed Forces are on their way to or have already begun putting in place safety nets for active duty and veteran families, members, to receive the help that they need. First and foremost, they're doing training before military members leave for war, which means that they've identified that PTSD is an





experience that people will have and that it's not one to be ashamed of. For me, I think that, you know, the story of Vietnam veterans and how they were made to be, to feel ashamed of, of their weakness, what was seen as a weakness, a failing of sorts, if they had a posttraumatic stress, a lack of, of national recognition of the problem, much like hunger and poverty today, that poor people are made to feel ashamed of who they are and, and that it's their fault. So the military has recognized that this is a real thing and that some people are more prone to it and they do training in advance before people go and they have a lot of steps as people come, you know, come back from war, but what happens is that even, even when those steps are in place and they're followed correctly, there is still shame for mental health as there is throughout our country, that we don't talk about mental health, that talking about mental health undermines your safety if you're in the military, your future earning potential inside or outside of the military, and your status in your community, and so people do underreport PTSD just as they do, just as we all do any mental health problem, and there are people who will leave the military with, without a diagnosis and what we see right now with the underfunding of our VA mental health and health system is contributing to a real crisis in, in mental health among the military and veteran community. It's leading to high levels of suicide and, and high levels of family dysfunction and, and I know, for certain, that this will lead to families experiencing, you know, great, great trauma, not just of hunger but of other, you know, other types of trauma, violence in particular, and so I think that having more community mental health clinics, actually, it was a community mental health clinic for veterans where I first sought help. It was embedded in the community where I was going to college for my graduate school and, and I remember when I saw it, I thought, "Oh, look at that, a, a veterans' mental health clinic, wow. I didn't know they had one." And just having them present in communities in small scale I think would be helpful. It would help overcome the barrier that many people in rural communities have to seeking help. A lot of veterans come from rural communities and they return home to rural communities and having to travel for far distances and into cities when, where there's lots of noises and things that are new to them can be very stressful and in fact a great barrier to seeking help and receiving help. Establishing, I've heard establishing telephone processes for group therapy can be helpful and also training people within the community, doctors within the community and, and professionals at, at schools and, and county human services agencies, those are all strategies that could be employed in order to make sure that veterans and military families don't fall through the, the safety net themselves.

**Commissioner: Thank you very much. We're out of time but I wanted to make one request. You said you have your written testimony that you'll submit to us, as well.**

Bartholow: Yeah.

**Commissioner: I'm wondering if you can add to that an answer to this question, which you won't have time to answer now but you talked about your father was fighting for, hunger isn't, I'm not quoting you directly but it's something like this, I'm**



**paraphrasing that it's very un-American that we have hunger in the United States. Can you describe what does it mean to be American, what was your father fighting for? I'm curious to know. Please add it to your testimony.**

**Commissioner: Thank you.**

**Commissioner: Thank you very much.**



**MIA HUBBARD  
MAZON**

**Commissioner: Our next speaker is Mia Hubbard. Mia is Vice President of Programs at Mazon, A Jewish Response to Hunger, and I've known Mia for a few years and admire greatly the work that this organization has done to help strengthen the safety nets across California and across the U.S. and the work that you've done internationally around hunger, as well. So I believe you'll be speaking today about hunger in military families and I appreciate the time and work you've done to research this for us and thank you for being here.**

Hubbard: Thank you. Distinguished members of the Commission, thank you very much for inviting me to testify before you today. My name is Mia Hubbard. I am Vice President of Programs at Mazon, A Jewish Response to Hunger. We're a national organization working to end hunger among people of all faiths and backgrounds in the U.S. and Israel. The organization was founded in 1985 and Mazon partners with food banks and food pantries to provide for people who are hungry today, while advocating for longer term solutions to hunger and its causes. In 2013 our Board of Directors identified hunger among military families as a core priority for Mazon's education and advocacy efforts. Through our Help our Heroes initiative, Mazon works with legislators and activists to identify and eliminate the barriers that prevent military and veteran families from accessing vital safety net programs. Mazon has a strong interest in the development of sensible and compassionate food and nutrition policies for military and veteran families and it's on this topic that I'd like to speak with you today. Mazon believes that those who made great personal sacrifice in service to our country should not have to struggle to provide regular nutritious meals to their families.

Mazon is focused on addressing the food security needs of our military and veteran families by working with the members of Congress, the administration, military service organizations, national organizational partners, and our network of hundreds of food banks, pantries, and antihunger organizations across the country. We first became interested in this issue when our colleagues from the Emergency Food Network began sharing concerns about the uptake in the number of military families who are turning to them for assistance. Across the country service members are showing up at food pantries, sometimes in uniform looking to help, looking for food to help feed their families. While many emergency food providers have responded by developing innovative programs to assist food-insecure military families, these organizations have limited capacity to address this population.

Mazon was very concerned about these anecdotal reports and decided to investigate the issue. We conducted an exhaustive search for accurate data from the Pentagon, the Department of Defense, USDA, Congress, and direct service providers. We found that for



active duty service members, food insecurity is triggered by low pay among enlistees, high unemployment among troops, spouses, large household sizes and personal financial challenges. For veterans experiencing hunger, they often find it difficult to transition back to civilian life or to make ends meet on low disability pay. The prevalence and pervasive reliance on food pantries and distribution programs on and near military bases clearly points to a failure of our government safety net programs to meet the needs of these families. A source at the Pentagon found that there are food pantries operating on or near every single Naval and Marine base in the United States but there are three important steps that the Commission can recommend to begin to address this growing problem. The first is to demand more data, despite strong anecdotal evidence food insecurity among military families is not adequately documented or monitored by government agencies and indeed the problem has long been obscured and ignored. Data are often withheld from the public or are excessively difficult to obtain.

What data we have been able to secure are often contradictory, out of date, or simply incomprehensible. The second is to remove policy barriers. Federal policies are denying active duty military families the resources they need to keep from experiencing food insecurity. And the third is to urge greater agency collaboration. Our growing number of disabled veterans are caught in the middle of bureaucratic delays and federal agency silos, unaware of or unable to access food benefits despite their obvious need.

Unfortunately, there's very little reliable data regarding in food, food insecurity among military families. USDA's most recent data indicate that 5,000 active duty service members participate in the SNAP Program. However, we believe the scope of the need is significantly larger than SNAP participation rates reflect. This figure only counts families that self-report as active duty military and it is derived using a methodology that is skewed to underreport the number of military families for multiple reasons. Indeed, according to the U.S. Census American Community Survey an average of 22,000 active duty service members were estimated to receive SNAP annually between 2009 and 2012. Similar data for WIC isn't even available, so no one really knows how big the need is. Accurately documenting and monitoring military participation in government food programs like SNAP is critical but it's not enough. We need to better understand the scope and characteristics of the growing problem of food insecurity among military families, identify gaps in federal food program usage and provide consideration of the unique challenges confronting these vulnerable families.

DOD, USDA, and Congress must take a greater interest in understanding this problem. Mazon has sought out additional data by working with colleagues in the United States Senate to request a GAO report to more deeply explore these issues. Having the Commission weigh in on the need for better government data and accountability including the issuance of a GAO report would give greater urgency to the call for more government information, monitoring, and oversight. But even if only one military family is going



without adequate nutritious food, this nation is not meeting its responsibility to those who serve this country. Indeed, any service member struggling to make ends meet should be eligible for federal food programs. However, some low-ranking service members, especially those with children who live off-base or in privatized housing are systematically declared ineligible for SNAP because of their housing allowance, which is counted as income. For these families, the best option available for them is to frequent food pantries on and off military bases. The basic allowance for housing or BAH is excluded as income for the purpose of calculating income taxes and eligibility for other government programs. So by the same token, we believe that the BAH should be consistently excluded as income for the purposes of determining eligibility for all nutrition assistance programs. The intent of the BAH was to provide uniform service members with accurate and equitable housing compensation based on the housing costs in the local civilian housing market. The intent was not to put them at a disadvantage or disqualify them from receiving nutrition assistance. A simple policy fix would easily correct this unintended policy flaw and help thousands of military families get the assistance they need.

Mazon has been working with antihunger advocates, food banks, and champions on Capitol Hill to eliminate this unnecessary and unfair policy barrier and we urge the Commission to include the elimination of the BAH barrier to SNAP in its recommendations. Finally, I want to speak about veteran hunger because large portions of the veteran population who used to be able to get three squares a day as soldiers now do not know where their next meal will come from. It is estimated that over 300,000 elderly veterans are food insecure and confront the same barriers faced by all seniors trying to access benefits, stigma, misinformation about potential eligibility and a daunting application process. More recent vets also face unique challenges. According to a 2012 University of Minnesota study of soldiers returning from war in Iraq and Afghanistan, one in four veterans reports being food insecure, 27% and 12% of those vets are classified as having very low food security. That is nearly double the prevalence of food insecurity in the general U.S. population. In addition, we know that many veterans return from combat with disabilities that make it difficult for them to maintain employment and to provide food for themselves and their families. Households with a disabled veteran are nearly twice as likely as those without to be food insecure. Ensuring that all veterans have access to food is critical and providing such access to disabled veterans is the least this nation owes to its returning and injured soldiers.

Unfortunately, despite good intentions and the best efforts, this promise is not always kept. A veteran's food insecurity is impacted when she is denied disability benefits because she does not make as much money and therefore has to make difficult choices about food, shelter, and other vital needs, but a veteran who is awaiting a disability determination feels this impact a second time because this determination can be critical to obtaining additional benefits through the SNAP Program. As we all know, veterans face enormous challenges in making claims through the VA's daunting claim process. Many veterans are unable or



limited in their ability to access nutrition assistance, despite their obvious need. For veterans who do not meet, who do meet the disability eligibility criteria, USDA and VA must do more to help them navigate the application process and to seek out the benefits and resources that they need to meet their basic needs. USDA can help the VA serve as a conduit for outreach and education about SNAP and help vets link to nutritious, nutrition assistance. Better coordination between USDA and VA could go a long way in connecting veterans to consistent nutrition, contributing to longer term health, better long-term health outcomes and reducing unnecessary high rates of poverty and homelessness.

These are smart and cost-effective ways to help ensure that veterans don't come home to hunger, and we ask the Commission to consider including greater interagency cooperation in its, in its recommendations. The unfortunate reality of what I've outlined here today of limited data, unfair policy barriers, and bureaucratic silos come at a time when many military families are experiencing need like no other. The strain of this well-hidden problem is beginning to show up beyond the lines of emergency food sites. Service members and their families, including veterans, retirees, and reservists, have used \$103 million in SNAP benefits at U.S. commissaries in 2013. This is triple the amount before, used before the, before the recession. Despite these warning signs, military families and military hunger issues have a history of obscurity and policy failures. When media stories about military families on SNAP circulated in the late 1990s, Congress was concerned about the optics of members of our military receiving SNAP.

In order to get these families off of SNAP, Congress, in 2000 created a parallel program, the Family Subsistence Supplemental Allowance that is administered by the Department of Defense with the explicit goal of getting military families off of SNAP. This little known and [unclear] administered program does not work either to help them off of SNAP or more importantly, to adequately address the challenges of food insecurity that they face. Therefore, I strongly urge the Commission to shed much needed light on the military hunger issues by including these sensible recommendations in your final report. The principle of leaving no one behind is deeply embedded in the ethos of the U.S. military but if we continue to ignore this problem and the accompanying policy challenges, we are, in essence, leaving these families behind and in the enemy hands of hunger and poverty. As the Commission goes about its difficult deliberations, I urge you not to leave these vulnerable families behind. Soldiers promise to serve with honor and we should be able to promise them the dignity of food security. Thank you.

**Commissioner: Thank you very much.**

**Commissioner: Any questions?**

**Commissioner: Thank you very much for your testimony. I wanted to ask about, first of all, I want to thank you very much for actually answering some of the questions**



**that we had in our letter of request to talk about data and accountability. I'm very impressed by that and am very grateful. Can you talk more about what the accountability means? What do you mean by government accountability?**

Hubbard: Uh-huh [yes]. Well, I think it's interesting. This is a difficult problem. We've been working on it for a couple of years and we have been shocked at the level of reluctance to talk about this issue, much less acknowledge that there's a problem. So data is essential to document and then to be able to make a case for the policy changes that are needed. And I think because of the military culture where there's a great deal of stigma about asking for, for, for something, asking for, for help, that we really need to have kind of the hardcore numbers to show that this is an issue. In terms of government accountability, I mean, I think because there is so little data about how many active duty households are income eligible for programs like SNAP, so that we can see the gap between eligibility versus participation, which is also quite low. Those kinds of data points are really important, I think, for us to get more of a handle on, on the nature of the need. Similarly, what I mentioned about the basic housing allowance, it would be fantastic to know how many active duty members would be eligible for SNAP if the BAH was not counted as income. So these are the kinds of data points that I think we need to better understand the, kind of the scope of the problem and to start to formulate some policy solutions that make sense.

**Commissioner: Thank you.**

**Commissioner: I have more questions. I have another question.**

Hubbard: Yeah.

**Commissioner: So I hate to admit that it was news to me that there is a food bank, I'm hoping, I'm thinking I heard this right. There is at least one food pantry or food bank at every U.S. military base in the United States?**

Hubbard: At every Navy and Marine base.

**Commissioner: Not necessarily the Army bases, sorry?**

Hubbard: Not Army, no.

**Commissioner: Sorry. Can you talk more about why that is and is that Feeding America that's there or are these churches? Who is providing this emergency food? How often is this utilized?**

Hubbard: Yes, so I think it's a mix. So certainly there are Feeding America Food Banks that are located near military bases that are responding to the need of military families who live



close by. There are also many church and faith-based organizations that operate on and near military installations. So for example, I'm from Los Angeles and a couple of months ago I went down to Camp Pendleton, down in San Diego, and they have four different emergency food programs operating on their base and it's a[n] enormous base and so they have one in the northern part of the base, one that operates in the southern part of the base, they have a mobile food pantry that comes onto the base once a month, and there are, there's a church-based distribution and the Jewish Family Services also runs a pantry. So it's a big, it's a big issue and I think, you know, when we went to talk to the chaplain there about the needs among military families and he admitted when we came in to talk to him that he did some investigation to just see, "Well, you know, do we have food pantries? How many food pantries?" and even he was shocked to see how many charitable food programs service the families, either directly on the base or right near the base and unfortunately this is the case around the country. So it's a real indication that there's a great need that's not being met by government programs and we really need to take a closer look at this and to see are there particular regions that are more highly impacted? Are there particular branches of the government, I mean of the military that are being served more by charitable programs than others? Really take a look and see what are, what's the dynamic taking place here and better understand the nature of this problem.

**Commissioner: Thank you. What's the name of the base near LA?**

Hubbard: This was in San Diego.

**Commissioner: Sorry, San Diego, what was the name?**

Hubbard: Camp Pendleton.

**Commissioner: Camp Pendleton?**

Hubbard: Uh-huh [yes].

**Commissioner: Thank you.**

**Commissioner: Talk a little bit, if you would, about what brought Mazon to the point where they, where you made the determination that this was an important issue and was it feedback from organizations that you fund?**

Hubbard: Yes.

**Commissioner: Talk to us a little bit about that, please.**





Hubbard: So Mazon partners with and funds nearly 300 organizations around the country and a fair number of them are emergency food providers and we had been hearing from quite a few of them just on informal conversations and then as we started to hear more, more formal conversations about the increase in demand from military families in their community and a real concern about this. And so we just thought, "You know what? We need to look into this a little bit further," and, and we started to ask some more questions, including having meetings with colleagues at, at FRAC and also going straight to the source, going to have meetings with the Department of Defense, the Pentagon, and meeting with the U.S. Senate Armed Services Committee to see what they knew about this problem and to learn more about the FSSA, the small and not-so-well-run program that the Department of Defense has set up to serve these families. So it's been an evolving interest of ours and we've come to find that it's really a very well hidden problem, that very few people talk about it and know about it and, and it's, there's a lot of complexity here.

The military families, they are, they're not a monolith, you know. Active duty members are hungry because they're, they have a low, low pay, you know, and they're working 50 hours plus a week. They cannot get a second job and so they are very challenged to feed their families and then you have, you know, veterans, senior veterans who are challenged to access programs and as I mentioned, the post-9/11 veterans who are a very different challenge from maybe the previous generations. They tend to be younger. They have had various impacts from the multiple deployments that they've had to endure and they're a lot less likely to ask for help, to turn to the VA system for help, and for those who are in challenge situations, there's a great deal of mistrust of the systems that they think have created some of the situations that they're in. So they're less likely to turn to government and so it's a real challenge, I think, to help address all the different facets of military hunger and to really understand the different kinds of stigma and policy barriers and needs that this particular population has.

**Commissioner: Thank you so very much.**

**Commissioner: One more question.**

Hubbard: Uh-huh [yes].

**Commissioner: I'm sorry, if you could clarify the name of this new program that was developed after there was embarrassment and shame over so many military families participating in SNAP. What's the name of the new program? How is that developed and what kind of Congressional oversight was there for that program?**

Hubbard: So it was developed by, established by Congress in 2000. Its name is the Family Subsistence Supplemental Allowance. So it's money that is given to military families who can demonstrate a need based on their income and their family size and they're able to



receive up to about \$1,100.00 a month and it's, it's very, it's [a] very hidden program. We've spoke to many people at military bases, chaplains, even folks at the Department of Defense who know very little about this program. It's very much under the radar. Only a couple hundred families are actively participating in it. So, again, there's this disconnect. You've got this program that was designed by the Department of Defense to address this issue among military families, only a couple hundred families are participating, primarily because they have to go to their Command to ask and no enlisted person is going to go to their Command and admit that they're having trouble with their, with their finances and that they need help and so you have very little uptake in this program. So you have the disconnect of this, this program and its low participation. You have folks who are turning to SNAP at levels that we're not completely sure of, and then you have, you know, hundreds of millions of, hundreds of thousands of people who are turning to the Emergency Food Network for assistance. So there's, we, we don't really know the whole scope and characteristic of this problem. We really need to get more information, more data and that will enable us to have more government monitoring and oversight of all of these programs and how well or not well they serve military families.

**Commissioner: Thank you very much.**

Hubbard: Sure.



**KIMBERLY McCOY WADE  
ALLIANCE TO TRANSFORM CALFRESH**

**CATHY SENDERLING-McDONALD  
COUNTY WELFARE DIRECTORS  
ASSOCIATION OF CALIFORNIA**

**Commissioner: Our next guests are Kim McCoy Wade, the Public Policy and Philanthropy Consultant in the Alliance to Transform CalFresh and Cathy Senderling-McDonald, the Deputy Executive Director of the County Welfare Directors Association of California. Thank you for being here, welcome. I just wanted to make sure that you understand that this is being audio recorded and video recorded and will be made available to the public.**

McCoy Wade: Thank you, good morning. I am Kim McCoy Wade and I'm here on behalf of the Alliance to Transform CalFresh. The Alliance was founded in 2011 with the goal of making California a top ten state for access to SNAP, known here in California as CalFresh. We have seven members, many of whom are here today. The California Family Resource Association, California Food Policy Advocates, Catholic Charities of California, LA Food Bank, San Francisco Food Bank, Western Center on Law and Poverty, and our convener, the California Association of Food Banks. And I'm particularly happy to be here with my colleague from the CWDA, Cathy Senderling-McDonald. So we all know here in California that SNAP is the number one defense against hunger. We have the largest program in the country, 4.4 million people on the program, providing essential income to seniors, disabled people, children and adults of all ages and stages. Yet, in California, we've also grappled with for too long, we have had one of the worst access rates in the country, according to some measures from USDA, despite strong support for the program from our state and county leaders. So this is the, this problem of access to SNAP is what the Alliance has focused on and I'm pleased to say we've seen some progress on the past few years, and what I'm going to talk about today in terms of the lessons it bears, the four lessons I think it bears for the National Commission.

First of all, it's very clear to us that access to SNAP, and it's about \$150 a month, is more critical than ever. The inequality, the low wages, the underemployment, the weakened safety net, SNAP is really all that's standing between people and extreme suffering, extreme poverty. It responded exactly as we wanted it to in the recession, reaching more people. The benefits that came from the additional funding for the recession is what this program is there for. So our first recommendation is first and foremost, do no harm. We asked our national leaders to continue to strengthen and not undermine this foundation.

Second, but we know that SNAP access depends on smart policy choices and savvy outreach in our communities and we're fortunate, again, in California that we've seen both in partnership with USDA and advocates. We have made smart policy choices to increase access and we have comprehensive outreach to many communities. So again, our second



recommendation would be to Congress and the White House to continue those policy choices that increase access, not make it harder, not burden it and to support community-based outreach.

The third, and this is where I want to focus my time, is where the Alliance has focused our work and where we think there are some low-cost things that could be done to improve access. Access comes down to what happens on the ground when you try to get these benefits. True access does not exist for people as long as it takes hours of time in an office or online with a phone or assembling paperwork from all over, as if it were still 1977 when the program began in earnest or even 1997 and this is critical. This is not your Amazon package is a day late. This is food and it has real and human impacts on suffering, as our State Director Will Lightbourne says, "You would want someone facing a crisis on Monday to know that they could apply for unemployment and SNAP and have food coming into their household by the end of the week, at the least." Unfortunately, we have heard some anecdotes and these anecdotes, I'm sure, could be told from all over the country. One person went to turn their application in at an office here in California and was told, "The person who takes applications is out, you can't turn it in." Another office we know of turns their fax machine off when they get burdened, get behind, get overloaded, which has happened. Another person took her paper application from a lobby that was out of date, turned it in, it wasn't acted on, they never knew.

Those kinds of problems are anecdotes that we have heard and to get to that, we believe that we need some data-driven solutions. So the Alliance has come up with three measures in partnership with our county and state and federal partners, we believe that SNAP needs to be, number one, quick, number two, consistent, and number three, connected. What does quick mean? Quick means that folks should get, currently they are required to get it within 30 days. We think in this day and age, with a great workforce and great technology and the resource needed, most people can get it within three to five days and we'd like to see SNAP food get to people in need quicker.

What does consistent mean? We've found through the leadership of our state and county partners that a lot of new applicants are recent participants and it's not clear that they left because of a change in circumstances. They might have left because they were due for a report or a recert and so the counties and state have been exploring what we call churn. We want to be sure that people are leaving SNAP when their circumstances improve, not because of red tape, so reducing that churn. And the third is connected, we know because SNAP is one of the largest, if not the largest social service program, it's a great way to connect people up also with the health insurance that they qualify for, the WIC and school meal programs, and the refundable tax credits, so that we truly, truly are not just reducing very low food insecurity but helping families thrive. Those connections can also be measured with dual enrollment rates. How many children are getting both WIC and SNAP? How many children, working families are getting MediCal in our state, CalFresh and the



refundable credits. So with that, that mantra of quick, consistent, and connected, we have worked with advocates in, across the state in more than 20 counties have signed up for this Pledge for CalFresh Excellence, where we can work in partnership with counties and states to get, to make sure that it's quick, consistent, and connected and a new area I just want to mention is we're also beginning to look at ways to advance racial equity and inclusion and make sure the program is truly serving the diversity of Californians.

So the good news is there are western states, like Washington and Oregon, who have made great progress in these areas and there are California counties, like San Bernardino and the Inland Empire and Tulare and the Central Valley, that have also, are making great progress in these areas. We know that local offices, whether state or county run, can deliver excellent customer service and in many cases, are with goals, goals for customer service that exceed the federal minimum, with data-driven measurement for, for how customer service and access to the best technology and best business processes so they can deliver a modern, excellent customer service experience and of course, all of that requires the resources to do that. USDA currently tracks states for some key data, like 30-day timeliness for most applicants and participation and having that data state-by-state and even getting below state to local or county has helped shine light on what's working and where there are challenges and helps drive better performance.

So our request is that USDA look at other, these three indices for excellent customer service, not just is it within 30 days but how many days was it? Was it five? Was it ten? Was it fifteen? How fast can we get excellent service to people because it's food? How consistent can we, let's measure churn, how consistently can we keep people in need connected to the program and thirdly, how much can we connect them to everything they need, particularly health care. We know that almost everybody under 65 on SNAP should be getting MediCal, so let's make sure they do. Finally and briefly, I'll just wrap up by saying I would urge this Commission, no matter what its defined scope may be to reiterate the message that we know we can reduce hunger in this, in this country with a plan, with resources and with a commitment to do that. We are seeing the number of people without health insurance go down in this country. We're being successful. We are seeing cities end homelessness, especially among veterans. There is success. We are seeing cities tackle the issue of police-involved shootings and driving towards success. We can do that with hunger, if we have a goal, a commitment, a plan, and the resources and whether you can do that in this report or whether you need to call on that is the next step, I urge you to stay clear of that vision, that this is not a pie in the sky, this is ultimately doable. Thank you.

**Commissioner: Thank you very much.**

**Commissioner: Thank you.**



Senderling-McDonald: Great, thank you so much. I'm Cathy Senderling-McDonald. I'm the Deputy Executive Director of the County Welfare Directors Association of California. As you heard, the counties run human services in the state of California that doesn't just include SNAP but we also do eligibility and welfare to work services in our TANF Program. We provide Medicaid eligibility and also do eligibility for the new Affordable Care Act programs, as well, and we do run our Child Protection and Adult Protection systems. So we believe in any given month, we're probably working with a third of California's population in one or more of these programs. And in addition to representing all of the counties, both at the state and federal levels, CWDA has a strong antipoverty and economic equality platform, as well, and I'll try to weave some of that into my remarks today and be glad to sort of think about the intersections across those, as we do the Q&A portion of the time. First, for California, we do have thousands of eligibility workers across hundreds of offices in our, in our counties and they range from tiny Alpine County with probably 100 people on CalFresh to Los Angeles County, which, of course, has more people receiving our SNAP benefits than many states do.

The program, as Ms. Wade said, definitely has been responsive to the recession. Between December 2007 and December 2009 we added a million people to the [inaudible] and between December '07 the official start of the recession and this past December 2014 we doubled the size of our program, from 2.2 million to 4.4 million. This has been a combination of just, obviously, sky high demand, through the roof, as well as simplification and other outreach and churn reduction measures, as you heard from the previous speaker. In California, particularly, we really are proud of the technology and the advances that we've made in technology. We have a[n] integrated eligibility system, our statewide automated welfare system, that does our Medicaid, TANF, and SNAP eligibility in a comprehensive fashion. We've also developed online applications long before they were available for the ACA for all three of those programs and the individual counties also can extend that. For example, in Los Angeles County they have an app that allows people using their phone to upload photos on the move of documents that they might need to submit for purposes of eligibility or for continued eligibility.

We also have made changes, such as moving away from an automatic face-to-face interview and more toward a phone-based interview and also, when I started fifteen years ago at CWDA, we had a monthly reporting. People were sending in pieces of paper and our eligibility staff were processing hundreds of thousands of those pieces of paper every month. Now we're in a semiannual reporting structure. We managed to go from a quarterly then now to semiannually over the last few years and finally, like I said, multiple ways to apply, not just in person but on the phone, as well as online. I would just thinking about what more is there, what should we do and what can we ask you for your help with and to take under consideration as you do your job? I definitely echo my colleagues' do no harm request. Certainly, we want to work with you to find things that move forward both



participation, as both initial and ongoing participation, as well as reduce food insecurity in the program.

So thinking about sort of three things related to that. First is new applications coming in. The second is churn, as mentioned by the previous speaker and then finally, just thinking a little bit about food insecurity and the SNAP Program. First, I would say despite the increase in absolute numbers, the one million that we added during the recession period, for example, I think only Florida added more in absolute terms. We agree. We're still below average on our participation rate and on the percent of our eligibles who are accessing the program. So thinking about how we can make the program attractive, do the outreach that's needed, make application and processing of those applications as simple as possible, both for the individual family or, or person who's submitting that application, as well as for our eligibility staff because one thing we've learned for many years is if you simplify it for someone to get the piece of paper or get an online application in but it's not simpler to process that, that's where it can hang up that it, it doesn't work if it's only simple for the person filling it in. It also needs to be as simple as possible for the person who's processing those applications, our county eligibility staff.

We definitely want to think about with you ways to increase the ability to participate and keep it simple. One thing that we've done that we've had a lot of success and with the Affordable Care Act is individuals who are already enrolled in CalFresh, we've been able to move them right into our Medicaid program. This was allowed under the Affordable Care Act. We call it Express Lane. Why couldn't we go the other direction? If someone is on the Medicaid program, we know that we've got all the information that we need for them to be able to do that eligibility determination and that they're likely eligible or almost certainly eligible for our SNAP program. Could we figure out a way to go the other direction and have someone who's on the Medicaid program be automatically enrolled for the SNAP program, if they have not yet enrolled? Also, are there ways that we can access the federal hub that's in use for the Affordable Care Act for the Medicaid side of the House? People often, they don't know what they're eligible for when they come to apply. They're having difficulty in their family. They may be TANF eligible, SNAP eligible, and Medicaid eligible, too. We want to be able to use that information that's available that's been compiled and that's been made available electronically to states to be able to verify information that we're receiving from our individuals who are applying for SNAP, as well. It would help cut down the types of verification that we still have to ask for someone for SNAP purposes, even though we no longer have to access that from them for Medicaid purposes.

And then additionally, when someone calls us on the phone, it's not just a one-step process. It's a two-step process because we do have to actually send them the application so they can sign it and send it back. If we could work with the federal government to figure out ways to not have to do that, to be able to verify information on the phone, take a telephonic signature and be done and move on with that application and just process it right then, it



saves us a step in the process and a part where someone could drop off. They had enough need to call us. They had enough time to call us in the first place. We want to be able to take that application and move it through the process and not have to depend on them to respond to yet another request for information.

Additionally, the churn that was discussed, we definitely want to think about ways to ask the federal government to help us reduce the amount of churn in the program. One idea that we have is another change in, in Medicaid rules for the Affordable Care Act is someone now today, if we have contact with them during their twelve-month Medicaid eligibility period and we determine that the information we've received, we take a look at their case. We redetermine their eligibility and they're eligible, we could actually set their redetermination date another twelve months forward but we cannot do that with SNAP and so one of the things that we've been trying to do here in California is think about ways that people who are receiving benefits from multiple programs only need to submit information one time. They don't need to submit things all the time to multiple programs.

We have thought about ways to try to get people on the same twelve-month schedule with Medicaid and with SNAP but this is going to throw that off if we're setting someone forward twelve months for Medicaid but keeping them where they are for SNAP then we've just gotten them back out of sync and now we're having to do two procedures again. So we could think about syncing up that SNAP, as well, for that, that would be very helpful.

Additionally, we'd love support and more support for efforts that we've undertaken in individual counties such as with San Francisco and Code for America, which you may have heard of, a great organization that tries to help think about ways to make changes to public benefits programs and government services to make them more simple. They realize that a lot of times and, and Ms. Wade mentioned this, people drop off for, for procedural reasons. They had a report due, even in the six-month world, we needed that report and they didn't send it in. Well, what Code for America and San Francisco developed was an app called Promptly and what it does is it tells the individual, 'Hey, you still have a report due.' It sends them a message on their phone or other smart device to just prompt them, let them know, 'Hey, something is due,' and they have seen the churn reduced as a result of that app. We're now trying to roll that out to additional counties but support for things like that and the development of things like that from the federal government would be very helpful, probably not hugely costly to help develop an app or some other sort of device to help people keep their coverage but very helpful for those on the ground and also, for our eligibility workers, who would not have to process multiple applications, as you heard from the previous speaker, that takes a lot of time.

We'd also love some help to try to approach underserved groups. We've had a lot of conversation here in California about seniors who are not receiving SSI and who are not receiving SNAP, either, but who have food insecurity and could benefit from that. We also





have tried and unfortunately, been unsuccessful to receive some flexibility from the USDA in helping to target our foster youth population as they move off of the program and into, frankly, adulthood but not always with the supports that they need. As we know, they're a very vulnerable population. What we'd like to be able to do is take an application as we're leading into their emancipation from foster care and then allow us to not process that immediately but not have that count against us. We have the information. We know they're going to be moving out, say, in the next six months and so we want to, when we're talking to them, get that application right then from them and process that to turn it on when they go ahead and emancipate. It would be such a tremendous benefit to enable them to get additional food benefits. When they're potentially very vulnerable, they often end up couch surfing, you know, underemployed and we know, as a group, and so some flexibility in how we work with these underserved populations would be greatly appreciated.

Finally, just briefly on that issue of food insecurity, we know that even more than half in 2013 based on a USDA study of those who receive SNAP still reported that they had food insecurity and so, although, our focus is primarily on access and getting individuals into the program and helping them stay there once they're there, it definitely bears thinking about the benefit levels, whether some cost of living differences should be taken into account or some regional differences in the cost of food, how we can think about, perhaps, increasing the level of benefits during the summer. I think there was a demonstration project by USDA doing that, knowing the children aren't in school. They're not receiving food then and so the family does actually have an increased need for those benefits during the summer, during those breaks. It seemed, from our understanding, of the demonstration project, that it was very successful and was just even a small change for those families that could really help reduce that food insecurity that we're facing. Definitely plan to think about other ideas and work with you both today and also in the future as you're completing and continuing your work and really appreciate the opportunity to give you some ideas and share a bit of the on-the-ground perspective. Thank you.

**Commissioner: Thank you very much. You ladies talk very rapidly and we've had to listen and take notes really rapidly to keep up with you.**

Speaker: We promise to submit written testimony, too.

Speaker: Yeah.

**Commissioner: You got to cram it all in, in ten minutes. I love it. Thank you so much. One question that comes up for me and coming from a state in which we have state-directed application processes is whether there's kind of a victim of geography effect that is driven by the varied methods or procedures or whatever that occur in California from county to county. What's your analysis about how that affects the**



**people that you're serving and whether that, kind of part two is whether that same impact is felt with Medicaid enrollment, as well?**

Senderling-McDonald: Sure, I can tackle that first, certainly. I think it's a great question and in some circumstances you could see where, perhaps, a particular county would be more forward thinking in how it makes its eligibility staff available, for example. I mean, you heard some anecdotes from, from my colleague on the panel about situations that don't sound like they're very family-friendly, I would say. But overall, we think that the county structure really does work because there are a couple of things that it encourages that I think outweigh the anecdotes that we can work on together to address when we hear about them. First is, I think, the innovation that individual counties can achieve, like the San Francisco Code for America partnership that I mentioned. Because they didn't have to go through a lot of state procedures and just say, "Oh, wait, you know, we're the state. We have to work with you."

A county was able to partner very quickly with Code for America to develop and test that process and come up with that app, see how it's working, make tweaks to it and now they've got a pretty good basis to go out to additional counties and when the county staff from San Francisco presented at our, we call it Self-Sufficiency Committee. It includes SNAP, TANF, Medicaid and childcare individuals who have responsibility over all that. They came and they did a presentation to those very high-level deputies and directors from our departments and explained what the app was and then they said, "So who, we have money to, you know, maybe roll it out to another ten," I'm making that number up but it wasn't 57 additional counties. It was some smaller number. "So who wants to be first?" and everybody around the table raised their hands. So they were able to take that step, to take that technological leap and that customer service leap and now everybody wants to piggyback on that. So I think you really see the encouragement of that innovation when you've got a county-based system like we do and counties are encouraged to try to take those steps and move the, the process forward.

I'd also say that in visiting individual county departments, they also really are able to work locally to try to do what works for their communities. One example is I went to Salinas and Monterey County at the height of the recession. I happened to be down there for a conference and so I stopped in to see our Director. That's where his office is located and it is a very farm worker, family, very Latino community and they had made changes in their lobby. Yes, there was a line. Yes, there were many people there to apply and we know that in the Latino community and especially in the, the farm worker community that they serve, they don't really have as much online access. They don't really have the, the smart phone as much and, and are more comfortable, in general, again, generalization but on average, coming in, in person and talking to somebody to make sure that they're understood, they have the right documents and paper. They can provide that right then and hopefully leave with the benefits. And so they had made adjustments in how they, the hours at their office



and making sure that they had Spanish-speaking staff there to, to speak with the families who are coming in and many of our, our offices also had started childcare options because so often it was a whole family that was coming in to apply. So it was, it was great to see that on the ground and I think that's something that you might not need in a, in a different county. I mean, it's just something where they had been able to make changes locally to have, you know, the right language services available to be thoughtful about how they organized their lobby, to know the clientele that they're serving and, and I think that's something else that we get when we have driven down the, the resources to the county level and allow the counties to figure out, "Here's where I need to have my offices, here's how I need to have them staffed and the hours," that they, that they have. So I hope that's helpful feedback.

**Commissioner: Thank you.**

Speaker: And I, I would say absolutely people in SNAP nationwide are a victim of geography. The best story right now or the worst story, if you will, is coming out of New England, right, where Massachusetts had a disastrous rollout of a new system and so you see the Massachusetts caseloads tanking while the rest of New England is not. So whether you're talking at the state level, the regional level, the county level, the, LA County needs to monitor every single one of their 56 offices. So for us the Alliance always comes back to data-driven accountability, data-driven accountability down to the client level. No matter what your structure is. So we're very pleased that our state about a year ago just started putting up a data dashboard on CalFresh performance by county so that we now can look at 58 counties and say, "Wow, their dual enrollment rate looks really good. What's going on down there? Their churn rate is slowly ticking down. What did they implement?" And we would say, "The USDA should be asking that of the states and a state in a state-driven state should be asking that of every single one of their offices. A state in a county-operated state should be asking that of their counties and their counties should be asking that of their offices." And you have to get down to what happens when you call the phone, when you walk in a lobby, when you mail something in, when you fax something in and the only way you get passed the anecdote, there's always going to be anecdotes.

**Commissioner: Sure.**

Speaker The only way to get past that is with system-driven data that is real-time, not six, you know, USDA data, we all struggle with is several years late. It's wonderful. It's verified. It's reliable but it's not a management tool. It's not a real-time management tool. So getting into real-time down to local level management data so we can all hold each other accountable for delivering excellent service to the people who we're all here to serve.

**Commissioner: Excellent. Thank you very much for your testimony, both of you. I have a few questions for Cathy. You talked about, I think I understood that you said**

**that you had tried, you had applied for some kind of flexibility federally, so that you could target programs for seniors and foster youth. Can you describe some of the barriers for targeting those programs? What occurred and what needs to shift?**

Senderling-McDonald: Sure, the application was specific to the foster youth. I'm not sure if there was any, anything that was actually applied for on the senior end. We're thinking about them as an underserved group. We know that participation rate is particularly low but in the foster youth area, we, I was sort of running out of time, I knew, and so I couldn't get into too many details, so thank you for asking the question so I can give you more details. We actually sponsored legislation a few years ago here in the state that would allow the, the County Human Services Department on the foster care side of things, our Child Welfare Department, which when children are getting ready to emancipate from foster care, either at age 18 or thereabouts or now also age 21, we have the same thing because we expanded foster.

It was a federal option that California took, so many of our, our foster youth now become non-minor dependents and they remain in care until 21. So you have the same issue either around 18 or around 21. You've got these youth and you know they're going to be leaving because either they're turning 18 or graduating high school or they're turning 21 and they're going to drop off of this program that we call AB12 Extended Foster Care. So what we said at that time and what we were trying to do with this, with this bill was start a process where we could at the sort of closest point to that drop off point. We knew they were going to be leaving. Court was going to be, you know, ending the dependency jurisdiction on them.

Go ahead and get the information from them about what they know about where they were going to be living. Is this something they should be thinking about, anyway, through independent living? Most likely they have very low income. Many of them do go to college and, and some of them are employed but they're, they're often underemployed, but collecting as much information as we could to at least start an application for them and, and I think, I'm sure you know that you don't need the full application to be filed to pick out the application date because that's a big piece. You only need certain pieces of information, a minimal amount of information, and then we can say an application has been started for this person and protect that application date, so when we do find them eligible, the benefits go back to that date.

So what we wanted to do is take that but then sit on it for three or six months, depending on when we had that conversation with them and then at the point of their emancipation, we could say, "Here, we have this application from them," protect the application date and collect any additional information that we might need, such as their income if they had a new job and that sort of thing, so we could finish the processing but we were, we needed to get a waiver for that because, you know, the way USDA looks at your performance is did

you process that application and you can't just take it and then go, "Oh," sticking this in a file and not, not process it right away. That would count against us in terms of that's been sitting there for three months or six months. You're way out of whack with it. So we, we requested a waiver to say, "Could we, for this group, have a special process where we take the information from them and then we hold it until the point where they emancipate and then we process it going forward and we turn the clock on then?" and we were told, "No," we could not do that. That was denied. I, maybe a waiver wasn't the best thing to go for.

Maybe there was another way to think about but I do think that it bears looking at again, not just for this population but maybe for others like the veterans population, for example. You could think about times where I'm talking to you right now. I know you don't actually need that service or wouldn't even be eligible for it for another few months because you're still deployed or you're still in foster care but I'm going to go ahead and take the information now so I can start that process for you when you do end up sort of moving into the, you know, regular sort of society in the terms of, of foster kids. So that's the idea. That's the concept that we're looking for to try to get the information while we've got them with us and, and process that.

**Commissioner: Thank you very much. I want to ask one more question [inaudible]. I'm sorry, we're a little behind schedule. Kim, you talked about you have a special initiative on racial equity and inclusion to ensure that California is serving all of the populations that are eligible for the programs to make sure that no particular groups are left behind. Can you talk a little bit more about what that effort is and how you measure accountability in reducing either food insecurity or disparities in access to SNAP by race and ethnicity?**

McCoy Wade: Sure, so this is a brand new initiative for us and we're just looking into it and the way that we look at all these things is we look for what's the vision, so what's the goal for customer service? What data can you use to measure accountability? And what are proven practices that help you reach that goal? So we are looking at, the vision is around racial adversity in access and around language access, we have, I think, one in four of the participants in California, according to our new data dashboard is a non-English speaker first language. So we have a high language access but what we haven't done and this is the data, is the disparity. We want to work with our partners to look at of the eligible population, are we reaching those folks and if not, why not? Race is going to be a challenge because that is not required as appropriate on the SNAP application. So about 20% of folks, is my understanding, do not report racial data. So we may not have terrifically complete accurate data especially down to the county level, which is so crucial. And then language access, of course, figuring out the disparity because, of course, there are some restrictions on immigrant populations, so you need to be careful about in calculating the low income eligible population, some folks are not eligible because of the immigrant restrictions. So there are some data challenges in both of those areas but what I'm, and we'll work through



those. We can work through those to find what is a fair and, and useful relevant comparison and again this is the area where we'd like to see USDA doing some leadership on this, as well, because they, they are the experts on this data, but the most exciting part, of course, for me is the proven practices, what are people doing, and so I was very excited to recently learn, I've talked to folks in both Washington, DC about their cultural competency training because, again, I'm sure Cathy will speak to this, the workforce is very diverse, as well, right? We have a very diverse workforce, a very diverse service population and sometimes similar and sometimes cross-cultural. It's quite, we've got it all here in California. [laughter]

Marin County runs a cultural competency training for their staff every month. I'm just, we're now doing a sort of a survey of counties to find out what kind of training. I think the one we're most excited to hear about is in San Diego. Again, we've heard anecdotal great response is a trauma-informed training for all the workforce, recognizing that by the time you're applying for CalFresh, you probably have had some trauma, long or short-term and that having everyone's awareness around it. Again, these are beyond the minimum compliance rules but this is about excellent access to people in their, in their time of need. So we're looking at that, and then we talked to our colleagues in Connecticut who held, a much smaller state than California, but held a series of community-based dinners with their state workers and clients and advocates around race, race and government access. So there's community dinners. There's race-based training. There's trauma-informed training and I literally just put an e-mail out this last week to county advocates to say, 'What is your county doing to really raise the bar on this?' and so we're hoping to learn more. We're planning a webinar in August and I know our colleagues at the CFPA have an annual CalFresh forum and this will be part of that but it's a new topic, obviously, commitment to nondiscrimination is not a new topic but going beyond the minimum to how can we make sure we're as inclusive and equitable as possible is where we want to go next.

**Commissioner: Thank you. Are there racial and ethnic disparities in access to SNAP and Cathy, what is the support at the state level for these initiatives?**

Senderling-McDonald: That is an excellent question that I cannot answer at this moment. This is a new project to me. I haven't talked to Ms. Wade about it before. I do agree that we strive to be as inclusive as possible and you never get to 100%. So I'd imagine we're going to find in some areas that there is work to be done to improve and then hopefully we'll also find the areas that have done an excellent job and figure out what those practices were that we can extend elsewhere. We definitely want to work together, work closely, as we do with all of the projects that the Alliance undertakes. We're not an official member of the Alliance but we work together very closely on, on their projects. So we appreciate that.

**Commissioner: Thank you very much for your testimonies. We had scheduled a 15-minute break. We have started behind schedule. Can we start in a little bit late,**



**Mary? So we are slated to start in back at 11:10 but I'd say 11:15, is that all right? 10 minutes is enough? 11:15 we'll be back here. Thank you very much.**



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**WILLY ELLIOTT-McCREA  
SECOND HARVEST FOOD BANK**

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**ANDREW SOUZA  
COMMUNITY FOOD BANK**

**Commissioner: Hello everyone, welcome back to the second half of the formal testimonies of the National Commission on Hunger. For those of you who have recently arrived, I'm going to repeat a few things. First of all, the bathrooms are over, around, and to the left. We also have some coffee and tea in the back. Please, help yourself. We're very glad that you are here. Everything that is occurring today is being recorded, both visually and orally and these recordings will be made available to the public on our website. This afternoon between 2:00 and 4:00 we have an open testimony, where anyone can sign up to give formal testimony that will be recorded and transcribed and made available to the public. So, please, communicate with your friends and colleagues and allies and frenemies to come and testify. This is open. This is about public engagement. This is why we are here. The National Commission is a bipartisan commission. We are a ten-member commission appointed by Congress to advise Congress and the United States Department of Agriculture on how to address food insecurity and hunger in America using existing programs and finding innovative solutions that include public and private partnerships and other types of partnerships with faith-based organizations, et cetera. Sherry, did you want to add anything before we launch into our testimonies of the second half?**

**I think for my own personal sense is that we have had extraordinary testimony this morning and expect further extraordinary testimony this afternoon. We are deeply grateful to each of you for taking the time, A, to prepare thoughtful testimony and, B, to be here to deliver it. So we are deeply grateful for that. Our next speakers are Willy Elliott-McCrea, CEO of the Food Bank of Santa Cruz County and Andy Souza, CEO of Community Food Bank in Fresno and they are here to talk to us a little bit about migrant farm worker issues, and thank you very much, gentlemen.**

**Thanks for being here.**

**Elliott-McCrea: Thank you. Thank you so much. Great, we're just really delighted and honored to, to share with the Commission some observations based on 37 years as a food banker. To start with, in the '70s our focus was really on failure-to-thrive babies who lacked the calories needed for their brains and bodies to properly develop. We knew our job. It was to acquire and distribute every pound of food that we could find, no matter what, to help ensure those kids had the calories they needed. By 2000, hunger in America as defined in the '70s and '80s had basically been eliminated. American ingenuity had figured out how to manufacture cheap calories. The average amount of money that Americans spend to feed their families has gone down from 20% of their household income**





to 10%. As we all know, only one trouble with this solution to hunger in America, it's that fast food, snack food, and soda are highly addictive and very unhealthy. In 1980 health care costs in America were \$250 billion. By 1985 health care costs had quadrupled to \$1 trillion a year. And in 2015 health care costs, mostly driven by rapidly escalating nutrition-related chronic disease are projected to exceed \$3 trillion. We see this reality manifest every day in our own community. Second Harvest and our warehouse is located in Watsonville in the heart of the Pajaro Valley.

Over 25,000 farm workers help harvest over \$1 billion a year worth of berries and other ag products. Over 75% of our Watsonville residents live in homes where Spanish is the primary language. Ironically, it's obesity and diabetes that are the biggest manifestations of hunger and malnutrition in our community. Forty-nine percent of our children are obese or overweight. Most of them are at serious risk of a lifetime struggle with diabetes. Too many families are forced to stretch their food budgets by buying cheap food, high in calories, low in nutrients. Too many young people are struggling to find pathways to enter the workforce to support families of their own. Literally, we have thousands of families who are trapped in a downward spiral of chronic underemployment, chronic food insecurity, and chronic health disease. We believe that the very definition of hunger in America has changed from too few calories to too few nutrients with too many calories. We believe that the new definition is the lack of access to healthy food. Second Harvest is deeply committed to increasing both the access and the consumption of nutritious foods to kids and their families.

We believe laser focusing on child hunger and malnutrition provides both a lever and a [unclear] to fundamentally transform the communities we serve and to healthy, strong and vibrant places where no one has their life opportunities curtailed by food insecurity and a lifetime struggle of diabetes and obesity. Our Passion for Produce program has trained and certified over 300 low income parents and grandparents to be our volunteer nutrition ambassadors. Our ambassadors help teach over 600 nutrition classes a year at 34 schools, churches, low income housing, health clinics and community centers. Upon graduating from our six-week train the trainer classes, we put on a graduation ceremony, where our nutrition ambassadors receive certificates of completion and logo wear. In their graduation speeches our embajadores often state they have never been asked to be a leader before and how very powerful that is.

Twice a month our ambassadors teach basic nutrition principles and healthy recipes, featuring the produce being distributed farmer's market style after each class. We teach USDA My Plate. Make sure half of all you eat is fresh fruits and vegetables. Drink water and low fat milk, not soda. Make sure half your grains are whole. Eat more healthy fats and lean proteins. We've found that by combining healthy food and nutrition education and peer support, it's a highly effective approach to helping people change their eating habits and maintain healthy lifestyle changes. Specifically, our evaluation surveys report that over



90% of our participants are eating more produce and drinking less soda. Over 80% are eating smaller portions and exercising more and 75% are losing weight. Our Passion for Produce is a powerful program precisely because it engages low income families as leaders and because it supports our families to take greater responsibility for their own health and wellness.

In the past, many of us in this work have thought of food insecurity as primarily an outcome of poverty and we have thought of our own programs primarily as safety nets but what is increasingly clear is that food insecurity is also one of the biggest drivers of the cycle of poverty. I really enjoyed reading the detailed report from your March Commission Hearing and Meeting. I'd like to focus on two recommendations. First, in my opinion of greatest import is the RTI recommendation for deeper investigation into the impacts of increased food security on long-term health care costs, with special focus on Medicare and Medicaid costs. We know that budgeting for health care is the biggest financial challenge faced by Congress, as well as businesses and families and we know that SNAP education and SNAP nutrition programs are our country's greatest defense against rising health care costs. Our hypothesis is that an additional \$1 billion strategically invested in SNAP education and SNAP nutrition programs would result in a reduction of direct federal outlay for health care costs by at least \$10 billion and equally that a cut of \$1 billion would cost at least \$10 billion in higher health care spending. My most profound hope is that this Commission together with your consultants, RTI International, will commit to do whatever it takes to figure out how to prove this hypothesis beyond the shadow of a doubt. In my opinion, nothing is more important than doing this. Health and nutrition are inextricably linked. Secondly, we recommend that USDA invest more time and attention in identifying and scaling the next wave of effective solutions to increasing the consumption of nutritious foods by children, families, and seniors. We need to go beyond proven practices and assign greater priority on supporting and holding up the kinds of promising practices that you are searching for as innovative community initiatives to reduce the need for assistance programs. Our classes are popular and effective with our farm worker population because they are short, highly interactive, culturally appropriate and low literacy. We find success comes from combining food plus education plus peer support. Instead of a series of three to six classes, we offer families 24 classes all year long. Even though not a proven practice, our nutrition ambassador program has been held up as a promising practice by UC Berkeley School of Weight and Health, Feeding America and others. Fortunately, we received \$120,000 Packard Grant to conduct rigorous program evaluation over the next 30 months so that we can achieve proven practice status.

We recommend that you look at programs like ours as evidence that SNAP education and SNAP nutrition programs are working. We know that greater experimentation and flexibility is key to bringing forth the kinds of truly remarkable, replicable game changers that are needed. In closing, we believe that these two recommendations could change the calculus for health care costs in America, literally freeing up hundreds of billions of dollars



a year for education, for infrastructure, for parks, for defense, for research, for workforce development. We believe your Commission has a historic opportunity to address hunger as an essential part of a broader vision to increase social mobility and reduce the need for assistance programs. We thank you for your commitment to creating true opportunity for all, regardless of birth.

**Commissioner: Thank you.**

Souza: Wow, thank you. That was great. My name is Andy Souza. I am the CEO of the Community Food Bank. Willy has lapped me seven times in his experience at food banking. I've been at it just under five years. Prior to that, I had a life of public administration with the city of Fresno. I spent 25 years, just under 25 years with the city and spent the last 5 years as our City Manager and so what you'll hear today, hopefully, draws on a little bit of wisdom accumulated from both those opportunities. Community Food Bank, we serve five counties, the southern section of the San Joaquin Valley, Fresno, Madera, Kings, Tulare, and Kern Counties. Immediately to the east of Mr. Elliott-McCrea's service area, it's separated by the Diablo Mountains, which is, hopefully, not too telling but we have a little different scenario, very similar demographics but we are the, arguably the most fertile region in this country, if not the nation. Our five counties had, in 2013, had annual crop value of \$25.3 billion, billion dollars. Yet within those five counties, we also have two of the three highest percentages of food hardship in the 2014 FRAC report. Fresno, at the north end of our service area and then Fresno County was number two in the nation at 24.9%, tied for second place, second highest in the nation. Bakersfield, which is the metropolitan center in the southern part of our service area, was the next percentage 24.3%. So arguably, we have the highest concentration of hunger in the most fertile region of our country, if not the world. And that doesn't take into account, as we were just talking earlier, the effects of the current drought that's hammering certainly the Central Valley, California. So at the food bank we, we obviously were not quite in the position what Santa Cruz County is. We are in the business of getting food to people. Obviously, as high nutrition as possible but we are in the business of getting food. We have doubled the amount of food being distributed in the last three years. We're coming close to 40 million pounds. We've doubled the number of people that we're serving every month. We're up to almost 280, well, over 280,000 people per month and yet, when we look at the research from Feeding America, we're only reaching 60% to 65% of the need in our region. So the deeper question is why do people need us? Why do we need it? You've heard a lot of much greater speakers than I'm going to be able to share but I think consistently we know firsthand in the Valley that it's not, it's not the lack of availability of food. We drive by it every day. The families we serve drive by it, they walk past it when they go to school. They walk past it when they go to work. Many of them work in that region. It's barriers to access to that food, both economic and physical barriers.



The San Joaquin Valley has perpetually struggled in the area of economics. We are historically about 150% of the state average of unemployment. Often times twice the national average. Currently our unemployment rate for our five counties is hovering between 11% and 12%. The statewide average is 7.8%. The national average is 6.3% and even though the state is, doesn't get as really granular as we'd like, we're hearing upwards of 50% unemployment in some of the farm communities that are in the west side of our county, Mendota, in particular, that have been impacted by this drought. But not just the drought, I mean, we're also seeing not just the unemployment but we're also seeing a significant amount of underemployment.

Many people have returned to work after the recession and many parts of our region have recovered from the recession but many parts haven't and folks who've returned from, from the recession are either returning at, you know, wages, you know, significantly less than they made in 2007, 2008 or certainly, a larger number of people are having part-time, part-time employment. So those are kind of the key economic impacts that we're seeing front-hand. More than that for us it's, it's actually the physical barriers. I mean, our five counties cover 23,000 square miles and we have a unique and maybe it's not unique but it's, it's an interesting population pattern.

You see, throughout these five counties that you're going to have a metropolitan hub in each of these counties. So I'll use Fresno County, for example. Fresno County has, covers over 6,000 square miles. 60% of the population lives in one metropolitan hub, Fresno/Clovis area, which is about 180 square miles. So we've got 40% of our population spread out over 5,800 square miles, both incorporated cities and unincorporated areas, jurisdictions, five points, which is literally the intersection of three roads converging together. So this, this places some, some challenges, you know, geographically. From my City Hall days, there's an, there's an old adage that retail follows rooftops and that's really the case, grocery stores, as well and if you've got a predominance of small and rural communities, you don't have the economic engine to support a grocery store, to support a supermarket.

So what you have is proliferation of mini-marts and the families that we serve there also are not in a situation to afford really what we would consider adequate personal transportation. Many times multiple families are sharing a vehicle. Many times if that vehicle is taking a group of them to work, families are left at home to walk, to walk to that mini-mart for the day's provisions. And unfortunately, again, it's such a large rural area, public transportation just isn't, isn't very viable, either. So we have both those economic and physical barriers and as I thought about the recommendations and looked at the scope of what we were asked, I thought about my days of budgeting with the city and we were about \$1.1 billion budget. We had fifteen operating departments, everything from public safety to parks and recreation to an airport, to a convention center and you learn there's always competing, competing interests and you learn that you really do choose to invest in



what matters and so with that kind of an overlying theme, my first recommendation would be I'm going to steal something that Ms. Bartholow said earlier because it really summarized it well. And that our hope is that this will lift up the voices and, and why I say that is this, in my years at City Hall, we would get Brookings Institute Report, this report, that report about poverty, about hunger in our community and, and we just categorically considered them the misery index, not pejoratively but they really were, the misery index and if we were seeking federal assistance, we'd pull the numbers out and if we were bringing business to the town, we'd hide the numbers the best we could. We'd take certain pathways to show them how, how to get to where we want to be but then I left City Hall and I went to the food bank and those aren't numbers. Those are people. Those are families. Those are voices. Those are somebody's parents. Those are somebody's children. Those are parents skipping meals like I watched my mom do when my parents divorced when I was in high school. Those are very real.

So I would ask that the Commission be careful and it's, it's, you, I'll use a kind of humorous phrase, we know we're asking you to drink out of a fire hose with the information we're sharing with you today and it's real easy to get caught in the numbers and lost in the numbers but I would just only ask that, that the lesson we've learned at the food bank be shared, as well, and that is that those numbers are people, living voices, as Jessica shared earlier.

Secondly, I'd like to ask that maybe take a look at some of the tools in concept that have worked elsewhere, you know. Tax incentives are a great way to leverage private investment, you know. At the city, we utilized empowerment zones for employment. We utilized redevelopment [inaudible] funds and empowerment zone funds to construct a \$10 million project that addressed the largest food desert in our, in our urban center. We're able to, to leverage those funds. We were able to use Community Reinvestment Act funds to get, I guess, I'd just say get resources into redlined communities, parts of our city and county that didn't make economic sense for banks to invest in and I think if we look at the region we serve, there's a lot of families that, and I apologize, this sounds humorous but they are redlined from food access. They can't get there, whether it's economics, whether it's geography, they just can't get there. And so with some creative thought around tax incentives, maybe it's a, you know, a food zone incentive. Whatever that would look like to, to help leverage private investment because standing on its own, we've seen that private investment just is not going to, going to move the lever on that but finally, in closing, it's back to what I opened with in the recommendations and that is when it comes to governing, you invest in your priorities. You really do. We do it as individuals. We do it as a food bank and we do it as a nation. And we would just hope that through the testimony of these multiple hearings you've had, that it's just challenge to step back and invest because if, if we see this as a cost of governing, we're never going to get there. It's got to be an investment in our future, so thank you for your time.



**Commissioner: Thank you very much.**

**Commissioner: Thank you, gentlemen. One of the questions that comes to me given the population that you both serve is the question of access and availability and use of effective nutrition programs and the barriers that you see. I know in our community there are tremendous myths and barriers that kind of created barriers to families applying for their children in families who exist in deep fear of utilizing any kind of a government program and how does that impact the folks in your communities and do you have any programs or recommendations that could help the Commission think about making these programs more accessible for migrant families and SNAP, school lunch and breakfast, any of those things that, what's your experience that you could share with us?**

Elliott-McCrea: Like I said, there is tremendous fear and anxiety, you know, around immigration issues. There is tremendous fear and anxiety around immigration issues, absolutely and, you know, I think we work really hard at it, you know, and I think it's one of the real strengths of the food bank system, you know, as the food bank system offers a relatively safe environment, where people can go to churches, you know, where they're not as intimidated. They can go and they can get food, no questions asked and that sort of thing, and so you build up a reputation for safety over the years, you know, and then it's a question of, you know, how do you most effectively use that and, you know, it's, it's still challenging for us but, you know, we do have 54,000 people a month that, that come to our, our, our emergency food programs and really utilizing those safe environments to, to reach out to people about SNAP and about school nutrition, which are the two greatest tools. Of course, we're merely a safety net but we're also a referral agency, you know, but that continues to be the tremendous challenge, which is you can talk yourself blue in the face and, you know, people are just still scared to death, so, you know, we do have four outreach workers, you know, that do SNAP outreach at our food bank and, you know, we feel like we're making progress but there's so much more opportunity. I'm not answering your question. It's the tough one. Andy's got the answer. He's said, "Willy, you start and I'll lead finish," so.

Souza: All, right, here we go. [Laughter] And then in conclusion, [Laughter] I'm going to filibuster the remaining 8 minutes of our time, no, just kidding. You know, Willie's true and he uses a term that I think is important that we try to utilize in the Central Valley and that is, "What is a safe place?" Where is, and, and more than that, who are the partners that we can partner with that are safe to that part of our population, you know? We have, recently we had discussions with the United Farm Workers who have an, obviously, in-reach into that community. Just like everything in life, the messenger has to be trusted and if, if, if the messenger isn't trusted then, then we're going to struggle with it and we've seen that, you know. One of the unique things about the drought relief that we're doing is the state has placed no residency requirements, no, no, and so we were able to distribute food and yet



people are still hesitant because, you know, unfortunately there's the feeling that well, if I accept this public assistance, is it going to derail my path to citizenship, and so there's just hundreds of, of messages that you just have to continue to combat but, but it's what we do and we find partners who can help us tell that message and really trusted partners because it's, it's really just a matter of trust. When you watch families being separated, it takes a long time for families to be in a position to be vulnerable and trust.

And you just have to repeat it over and over and over again because there's all the messages from so many folks, you know, whether they be, you know, you know, working for some of these programs or immigration or whatever, that are saying the opposite message and so, you just have to repeat it—

Yeah.

--over and over and over again.

**Commissioner: So if I could build on that, what should the federal government be doing to reduce the fear and increase the safety? I hear you talking about trying to, through the food banks and through the food, the emergency food system create safe places and get beyond the fear but it doesn't sound like you're instilling the fear or the lack of safety. What should the federal government be doing to improve people's lives?**

Speaker: Gosh, I would almost argue, in all due respect, I don't know that they can. For the very simple reason that you have a multifaceted organization that has an enforcement arm but also has, you know, an outreach arm. So I don't know. I'd have to, honestly, I'd have to, if we can try to put an answer back into our written, I would like to, because that's a tough one, I mean, just because the, the conflicting nature of the services that are being provided.

I do think that you can build on it a little bit, which is, I mean, it's really a marketing challenge, isn't it, you know? And so the question is, is how do you get serious about making sure that, that every aspect of government programs and their touch with families, that this is, that this is absolutely required clear marketing material in the same way that, you know, smoking cigarettes causes cancer, if you will, you know, but, but how do you make it so omnipresent in, in front of whether it be INS, you know, whether it be, you know, Food Stamps or other kinds of programs, where that's always put out first. So that, you know, because we do find that subtly and, and unsubtly, you know, some of the messaging does come from, you know, public employees, you know, as well as general anxiety. So I think it would help. I think that if, if we knew that that message was being constantly reinforced, you know, by, you know, the folks that are managing these programs, it would make our job easier to, to reinforce it, you know. It's like the echo chamber.



**Commissioner:** If I could again, I know, Cherie, you probably have more questions but I'm going to go for it, since I'm not from the area. I'm the East Coast. I appreciate you talking about the importance of investing in the priorities and that the people that, there are people and families and communities behind the numbers but knowing that you're primarily talking about immigrants, potentially undocumented immigrants, there are many people in our country who would suggest that there's no reason to care for those communities. Why should we care?

Speaker: Boy, I'm going to dive right into the deep end of the pool.

**Commissioner:** Go for it. I invited you in. [laughter]

Elliott-McCrea: Because candidly, many of those families are providing the workforce that we would not have if they weren't here. I worked in the, I worked a summer in the lettuce fields growing up in Salinas and vowed to never do that again and went off to college and didn't have to. For numerous regulatory reasons, it's tough for kids to work in the fields and many, and for many of the right reasons and some, I would probably have some disagreement with but, having said that, they're providing a service that if, if they were not here, the half a million acres that are going to fallow because of the drought would be a drop in the bucket. You would have no labor because we just, it's, it's labor that's just not being done by other people in our communities in our nation.

**Commissioner:** You see that in New England and the blueberry fields and the cranberry fields and it's just all across, any agricultural community, and most agricultural communities are rural and the transportation issues, which you've addressed and the food desert issues, which you have addressed to some degree, also. This is not just about California, the migrant farm worker issue and the issue of access to affordable food. It's crucial across the nation and that's, how do we pull together to be able to address that? I mean, we serve a rural, most of the area that we serve is rural, also. It's about 90,000 square miles in northern Nevada and these are, the food desert issue is huge in rural communities and transportation is huge. I mean, those two things alone beyond the undocumented and inability to use federal nutrition programs are, I mean, those are the—

**Commissioner:** Thank you and since our timekeeper isn't here, I'm going to go on with another question. [Laughter]

Speaker: All right.

**Commissioner:** Knowing that they're an important part of the labor force, what should the farmers and companies be doing that is utilizing immigrants for this labor force? What type of accountability should they have?





Speaker: Yeah, I'm not, accountability in what sense?

**Commissioner: Well, if they're farm workers, they're not making enough money to feed their families. Is there some responsibility for the employers of the farm workers to be paying people a wage where they can actually feed their families, pay for transportation and pay for the basic needs that you described?**

**Commissioner: And what impact would that have in your community should that happen?**

Speaker: Well, I'll just, I'll step in. That's out of my pay grade. I'll be honest with you, because there are economic studies that show both sides of that, that issue having a positive and a negative impact, so from a narrowly focused food access, yeah, I think it'd have an impact, the overall impact to the agricultural industry. I don't know. I'd have to, I mean, we can certainly include that in our written response, as well, because that's a, it's a fair question but it's a hard one but it's a fair one.

**Commissioner: Do you think that included in your testimony—**

Speaker: I will.

**Commissioner: —I would like to see it. Do you think that employers in your communities would be willing to consider providing access at employment sites to apply for benefits? Would that give it credibility or reduce the fear that families experience?**

Speaker: We do, do that, you know. We work very closely with Ryder Berry Farms in particular and send our outreach workers out there during change of season, you know. As you know, we both have very, very seasonal populations and, you know, so, and that's been a very good, effective strategy for us.

**Commissioner: Thank you. Our timekeeper is back and has given us the red time. [Laughter] Thank you for your testimony.**

Speaker: Thank you.



**MATT NEWELL-CHING  
PARTNERS FOR A HUNGER-FREE OREGON**

**Commissioner: Thank you very, very much. Next we have Matt Newell-Ching who formerly was with Bread for the World and worked a little bit more globally and now is in Oregon and has come to speak to us about how Oregon went from practically the last in line to the head of the line in addressing food security, and we're anxious to hear what you have to say. Thank you.**

Newell-Ching: Thank you very much for this opportunity to testify, members of Committee. For the record, my name is Matt Newell-Ching. I am the Public Affairs Director at Partners for a Hunger-Free Oregon. Partners envisions living in an Oregon and in a nation that is thriving, where everyone has access to healthy culturally appropriate food. I've been very moved today by the panelists today sharing their stories of the various dimensions of hunger. I want to focus a little bit on Oregon's story and first, I just want to ground this discussion in kind of a big picture thought because I have to speak for, you know, an entire state and I don't pretend that in the scope of 10 minutes I'm going to get to all the dimensions of what's unique about hunger in Oregon. I do want to just zoom out a little bit and, and talk about what's possible. This is a quote from Archbishop Desmond Tutu, who was a leader in the antiapartheid movement in South Africa and here's an observation he made about America. He said, "I've noticed that many people in the United States think that mass hunger and poverty are immutable effects of life. They may volunteer at a soup kitchen or contribute to an international charity but do not hope for large scale change. For most of my life many people thought that racial oppression in South Africa was an immutable fact of life. You can certainly overcome mass hunger and poverty in the United States. Your country is so richly blessed."

And I want thank you for the opportunity to share not only testimony of, of what's been happening in Oregon but also, personal testimony because my family's story is part of, you know, is certainly part of my journey here. So just briefly, when my parents were newlyweds right out of college, I have deep roots in the northwest. My mom is from coastal Oregon. My dad's from Seattle. They met at Walla Walla College in Walla Walla, Washington right on the border of Washington and Oregon. When they were right out of college, my dad was in law school, and my mom was the primary breadwinner of the family. They're just kind of getting their start in life and so she was working, earning paychecks while my dad was in law school and one day she was driving down the road and she was in a pretty serious car accident. Her car was hit once moving through an intersection, after it was hit once, it was hit again, it spun around. My mom sustained a back injury that affects her, to some degree, to this day. She was out of work for six months and couldn't earn a paycheck, just because of her, her injury and they were just starting out. For various reasons, they didn't have much in the way of family or friends for whom they could turn and they found



themselves, they didn't see themselves as folks who were going to march down to the social service offices and apply for Food Stamps, but there they were. And for my parents, this was a bridge that got them through a very difficult time.

My dad was able to, you know, stay in law school, finish his degree, you know. Years later they were able to start a small business. They've been working at that small business for over 30 years. They've created jobs and I know we're in California, which is the land of this, the so-called surfer dude out there. I want to tell you that the lived experience of people not only from Oregon but from America are inconsistent with that version of who participates in Food Stamps.

I want to talk a little bit about who's hungry in Oregon. Recent study done by the Oregon State University, and by the way, because we're the sole representatives from Oregon, I do want to acknowledge that the groups such as the Oregon Food Bank, Oregon Center for Public Policy, and Oregon State Extension, specifically Professor Mark Edwards, helped contribute to this testimony today. Who is hungry today in Oregon? Well, about 54% of hungry Oregonians and I'm just going to use the terms *very low food security* and *hunger* interchangeably today. Fifty-four percent of hungry Oregonian households are in the labor market and 39% of those are working, 15% are unemployed but looking for work, 23% are disabled, 10% are retirees. You add all those up, that's eight out of every nine Oregonians are either in the labor market, people with disabilities, or retirees.

That was very moving testimony earlier about people in the Armed Services experiencing hunger. Twelve percent of people, of households experiencing hunger in Oregon are formerly active duty Armed Forces. So I want to talk, as Cherie, invited, Oregon's experience with, we do it because we do have some experience in reducing hunger that's pretty, we've got a long way to go and we're very proud of what we've done at the same time. So in the late 1990s Oregon was identified as the worst in the nation for hunger. We had the highest rate in the entire nation and that surprised a lot of people, including Oregonians. It kind of woke people up a little bit, you know. Usually when you're dubbed the worst at some point, it kind of gets the Governor up and gets, you know, the press and everybody kind of starts paying attention. So I mean, one silver lining was you got a lot of people who started to care all of a sudden and so what we decided to do is try to leverage every available tool that we had, public, private, and otherwise and said, you know, "What, what are all the tools that are disposable and what can government do? What can private entities, such as nonprofits and food banks, faith-based organizations, all do to, to help address this?" And so a major thing that we did was we, we looked at what kinds of program changes can we make within the SNAP program and so around the year 2000, Oregon opted into categorical eligibility and we, we looked at various things like the asset test for, for cars, making sure that people on SNAP can drive a reliable car without being penalized for that and there was also some pretty aggressive outreach that was conducted by our State Department of Human Services combined with various nonprofits in full



disclosure, Partners for a Hunger-Free Oregon is a contractor with our Department of Human Services to conduct SNAP outreach.

We're one of several nonprofits that do that and there's some very forward thinking things that the Department did, as well, in addition just to basic outreach, you know. One is that they, they were really concerned and much credit given to them for listening to or exploring what is the experience of applying for, for SNAP like and they really wanted to make that process a lot simpler. One of the things that they want to do was to get, to do these, you know, secret shopper visits and so the Department of Human Services actually asked our agency to go out to different Department of Human Services offices, go in and, and just see what the process was like, make observations about how we can make the process of applying for SNAP easier. Out of that we came, came things like same-day benefit issuance. I know Kim Wade talked about that a little bit earlier and, you know, other improvements, such as simplifying the SNAP application, making it so that, especially in rural areas, that folks can complete a significant portion of the application over the phone. All these things combined had a tremendous impact. Oregon's hunger rate dropped from 5.2% in, in late 1990s to 3.7% and this came at a time when national hunger rates were increasing. They, national hunger rates, remember, this was during a recession and so another way of saying that is that over a 3-year period during a recession, hunger in Oregon was reduced by nearly a third while it increased nationwide. So that's really, really, you know, impressive on the one hand, you know.

On the other hand, we're still, you know, fairly high. This latest great recession was tough on a lot of families, so we had success in moving from, you know, worst in the nation kind of closer to the national average and being at the national average isn't great, though. It's not just enough to say, "Great, we're not as good as Arkansas," or, "We're not as bad as Arkansas," right, you know. And I don't mean to pick on Arkansas but their hunger rate is about 8.4% right now. We're about 6.1% and so there's a lot that we can do. So we would certainly encourage USDA to, to encourage states to leverage every single opportunity that they have. I'm mindful of time here, so I'll try to just summarize some further thoughts here. We've had, Oregon has been one of the states that has participated in the summer food, the summer EBT for children pilot. We're one of six states that's participated. Last year there were about 13,000 kids that were eligible for this program and so for those not familiar, this is about a \$30.00 benefit increase over the summer months for school-aged children who are eligible for free and reduced priced lunch.

For families, for households, for kids participating in the program, it reduced hunger in the summer months by one-third. It reduced child hunger by a third in the summer months. The evidence on this is so strong. We've seen a policy that, you know, there's no reason this couldn't be the law of the land, that every, every kid, every school-aged kid who gets free or reduced priced meals during, that during the summer, there's an additional, you know, benefit there. It would make a huge difference for, for kids and this is a program that was



evaluated by mathematics and we also just, you know, we do, we find ourselves, you know, kind of, and this is obviously the mandate of this Commission to say, "Okay, what else can we do?" because we do feel like we've exhausted a lot of the opportunities that we have to address, you know, hunger, you know. We don't have data on what hunger was like in the pre-SNAP era, like before SNAP was a national program and, you know, just a, if I could just close with a thought experiment, which is, you know, what was that number? I mean, was it twice as high as it is now? Was it three times as high? You know, we don't know what it was.

We know, I think, we can say with, I would certainly suggest a working hypothesis that the SNAP program becoming national reduced hunger significantly but you got it low but you didn't get it, you know, to zero and my question to you is, you know, what, what would it take, you know, to meaningfully, you know, get us closer, you know, to zero and so, you know, one idea that's, that's kind of been compelling for us is looking at redefining, you know, the SNAP basket and moving it from the thrifty food plan to the very low cost food plan. The assumptions built into the way we calculate the SNAP benefit right now are just wildly unrealistic for families. It assumes unlimited time for families to prepare meals. It assumes that you can shop for, you know, the best deals at multiple grocery stores, deals which may or may not exist at grocery stores, which may or may not exist, a particular challenge in rural areas, which was very compellingly stated by a previous panelist. So I think there's more that we can, certainly more that we can do. I haven't gotten to the, you know, to the root causes of, of hunger, why people are hungry in the first place and just real quick, one of the reasons that we, or several of the reasons we think that Oregon was a high hunger state to begin with, affordable housing and lack of access to affordable housing. Oregon was very high in terms of the number of families who spent more than 50% of their income on housing and in national studies that seem to correlate, you know, pretty, you know, pretty strongly with the national hunger rate and also, that, you know, when the data was taken and I think this is probably true, you know, today is that many folks in the workforce are, are moving immobile, which and sometimes that can be a good sign, that people are leaving their jobs because they are finding new opportunities but it can also mean for communities, especially communities, smaller towns that are in transition in Oregon, that can mean pretty big disruptions in folks' lives, so I thank you for the opportunity to testify and invite any questions.

**Commissioner: Thank you very much.**

**Commissioner: Thank you, Matt. Just a real quick question before I get to a couple of others, the summer EBT program that you used in Oregon, was it WIC-based or SNAP-based?**

Newell-Ching: SNAP-based, yeah, so, and yeah.



**Commissioner: The reason that I asked is for those who are in the room is the, we heard at the Hunger Commission at a Hunger Commission presentation that the WIC-based program with its directed purchases seemed to be somewhat more effective than the SNAP-based where you can purchase anything that you want.**

Newell-Ching: Sure, yeah.

**Commissioner: I just was curious from you—**

Newell-Ching: In Oregon, WIC is, has yet to become part of the EBT, you know, program, so it, for families, at least in our anecdotal experience, utilizing the SNAP infrastructure because it participates in EBT made a lot of sense.

**Commissioner: Would having WIC electronically in Oregon make a huge difference, in general?**

Newell-Ching: In general, yes, absolutely, I believe so. That's, we've, there's been a lot of groundwork. Oregon WIC Association and public, you know, private momentum to try to, to get us up to, to that level and we're excited. It's still a few years out before implementation but we're, we're excited about it.

**Commissioner: One of the driving forces in Oregon seems to be the creation of effective public/private partnerships. Could you speak to that a little bit?**

Newell-Ching: Absolutely. My organization, Partners for a Hunger-Free Oregon, was actually born out of a, a group that was first convened by the legislature. It's had several different names. I'll just refer to it for purposes of simplicity as the Oregon Hunger Task Force. And the Oregon Hunger Task Force was composed of nonprofit leaders. The Oregon Food Bank is a part of it. State legislators or state agencies and this is, this is a tough thing to measure but there was a study done by, well, and just, just real briefly, the goals of the task force were to make recommendations, make recommendations to the legislature and also look at, you know, administrative things that, you know, DHS, our State Department of Human Services, you know, could improve, you know, for the Oregon Food Bank, you know, where there are, you know, gaps in, in services. You're looking at, you know, all sorts of factors. There were faith-based groups, you know, that were a part of this, as well. And there's a paper written, you know, that discussed the relationship between state agencies and advocates and if something's intangible, it's kind of difficult to quantify but I do think that it's been very helpful to have a very positive working relationship with advocates and state agencies. There is a collegial spirit. I don't quite know exactly how, you know, to define it. When I talk to other advocates in other states, you know, I, they're often surprised that we do have this, you know, this good working relationship. I think it's fair to say that the Oregon Hunger Task Force was, you know, which kind of brought all these folks



together to the same table, you know, was, was a part of that and a positive thing, you know, overall, as far as the science behind that or how to, how to replicate that. I mean, we could certainly, you know, talk a little bit more about our experience and how that was formed, if other states are interested in looking at a similar model.

**Commissioner: If you could do that in writing, that would be extraordinary.**

Newell-Ching: Absolutely.

**Commissioner: Yes, one last question and that would be just talk a little bit about cross-sector collaboration, if you would, please, that seems to have been a factor in your success and Oregon's success in addressing food insecurity.**

Newell-Ching: Sure, I mean, I think—

**Commissioner: I mean, we're about food security—**

Newell-Ching: Right.

**Commissioner: —relative to the USDA nutrition program, so it is a lot bigger than that.**

Newell-Ching: Sure.

**Commissioner: So including that discussion.**

Newell-Ching: Yeah, I mean, you can include it more broadly and also say even just with something as narrow as outreach to SNAP. I think there was great public/private, you know, partnerships. I mean, our agency was involved in, you know, in conducting outreach and again, DHS contracts with, you know, several, you know, organizations that are outside the agency, you know, to conduct outreach. We increased our SNAP. We essentially doubled our SNAP participation over, you know, over about a 4-year period. Again, that correlated with the recession. So that wasn't just, you know, trying to throw everyone on SNAP, you know, willy-nilly, you know, that we could. I mean, more people were becoming eligible because it was a, you know, it was a hardship there but so I don't know if that answers [inaudible] your question.

**Commissioner: I was more interested even in food and housing issues or child care, those kinds of things. So in terms of addressing root causes and I know we're running out of time.**

Newell-Ching: Yeah, sure.



**Commissioner: So when you provide your written testimony, if there is anything about that that you would like to include, we sure would love to hear about it, please.**

Newell-Ching: Absolutely, we'll do that.

**Commissioner: Thank you for taking the time to fly down today.**

**Commissioner: Thank you very much.**

Newell-Ching: You're very welcome.





**PAULA JONES  
OFFICE OF EQUITY AND QUALITY IMPROVEMENT, SAN FRANCISCO DEPARTMENT OF  
PUBLIC HEALTH**

**Commissioner: So I'd like to call up Paula Jones, the Senior Health Planner of the Office of Equity and Quality Improvement at the San Francisco Department of Public Health. Welcome, Paula, thank you for being here today.**

Jones: Thank you very much. Thank you, Commissioners and thank you for the opportunity to speak to you today. As you've said, my name is Paula Jones. I'm with the Department of Public Health in San Francisco and for the past 15 years I've worked on citywide food system research policy and planning, working across city and county agencies and with local community groups and I've also participated in statewide food policy-making bodies. I work, have worked with elected officials at the local level on food assessments, looking at public and private food resources and measuring participation in relation to need. I also work with a public/private collaboration called the San Francisco Health Improvement Partnership and this is a partnership between our nonprofit hospitals, our Public Health Department, community groups, UCSF, our medical school, our school district, nonprofits, and community clinics. And we work together to align assessments on health, as well as implementation plans to improve population health. We're working on aligning our community health needs assessment and subsequent community benefits plans and health improvement plans.

So from a public health perspective, food insecurity is a significant health concern. Food insecurity increases the risk of chronic diseases, lowers adherence to medication and impedes patients' ability to engage in successful self-management of their health conditions and opportunities for health[y] start long before people need medical care. Focusing on prevention lowers long-term health care costs while keeping people well and a focus on making sure people are food secure means making sure that people are not ending up in the emergency room or in their health care providers because they can't manage their health conditions due to lack of food. It also means making sure that people do not get sick because they can't afford healthy food. I feel like it's a high priority, one of the high priorities making sure our public health community fully understands what food security is and food insecurity is and the impact on public health.

Although reducing food insecurity is a national goal through the Healthy People 2020, the role of public health agencies, clinics, and hospitals in reducing food insecurity is unclear. Most physicians don't screen for food security and involving public health, health care providers is a key strategy to make sure that we eliminate food insecurity. Also, public health agencies need to be engaged to take leadership roles at the local jurisdictions to make sure their residents have access to healthy food. I'm going to read a little bit from a story, a client's e-mail to me. It came through a city website and ended up in my e-mail and

this is a person, I'll call him Bob. He lives in San Francisco, 66 years old, has multiple medical conditions for which the diet is critical, including diabetes. He says, "I am barely living on my Social Security check and a small pension check. My rent has risen enough over the past 27 years that I've lived in San Francisco, I usually run out of food. In the last few months I have run out of food from two to four days before I receive my check. I did apply for Food Stamps and have only been granted \$16.00 a month." Bob has a health care provider and he sees his provider. Between his Social Security and his pension and after he pays rent, he has, he's paying 80% of his rent on income. He's left with about \$250 to survive for the month, paying for everything from medicine, dental, food, transportation, and utilities. Bob writes, "I'm not asking for food because I'm rich and I want to save my money for some CD or to buy stocks. I have lost 15 pounds as a result of not having enough food, as I mentioned, and I'm always running out of food by the end of the month." So this is an e-mail that just happened to get to me. This is a profile of somebody who qualifies to be considered very low food secure. He is elderly. He has high housing cost, multiple serious health conditions and it's impacting his health.

My experience with working in food programs has included rolling out food pantries, working with farmer's markets on food stamps, working at the school districts with food programs in the schools, doing food assessments, implementing local policies to address food security and identifying ways that local condition, the local districts can improve food security but I haven't been a patient navigator and now I'm working on doing that, a client navigator. What I did was I e-mailed Bob back and I said, "Although, this is not my job, I don't do direct service," I knew that he might be able to access additional food resources in our community, including food pantries and senior nutrition programs. So I e-mailed him to suggest some of these resources and I asked him if I could follow up and, to see if these programs helped him. He was not aware of any of these programs and he didn't know how they worked and he was very nervous about using them and he thought somebody else probably needed them more than him. So between e-mails and voicemails, I left additional messages and I said, he said he was going to try to access a food pantry and I said I would follow up. So this is going to move me into recommendations.

First of all, maintaining our strong safety net of food programs that we have and we need to make sure that they remain in the same structure that they are as entitlement programs, if they are. We need to really look at the adequacy of benefits. It was very clear from Bob's story that the benefit level that he was, he was eligible for did not help him avoid very low food security and we need to address this. We also need to increase participation as I'm sure others have mentioned and really provide incentives to improve program quality and participation. We need to look at how to increase, recognize local jurisdictions when they coordinate programs and show others what works. The second recommendation is creating alignment at the local, state, and federal level to connect public and private resources to improve food security. We need to, one of the ideas, and I think this is happening in other places but we really need to encourage and support local food planning



bodies since food systems are complex and locally specific. We need to support local food planning bodies, whatever they be called, to coordinate and connect between the multiple private and public agencies that operate federally funded programs and local privately funded programs between local businesses and also the low agricultural community. They can engage other groups to improve food security and find ways within the USDA and other federal and state local agencies to support these local planning bodies. An example from California is the NEOP program, the Nutrition Education Obesity Prevention program, which allows for engagement in local food policy council, whatever they call. I think also through the Community Food Project program at the USDA, they also really encourage planning at the local level for food security and food systems.

The second recommendation in this, under this alignment is comprehensive, engage in comprehensive assessments of the local food security safety net, including federal, state, and local public and private nutrition programs, so all the USDA programs, the Older American Act programs, Ryan White, and all the other local public and private funded programs like food banks, soup kitchens, local agriculture and gardening resources. Looking at the need for the programs, the current usage and the gaps and recommendations to address the gaps and these local planning bodies need to make the recommendations to elected officials at the local, state, and federal levels. So they need to engage leaders from all levels of government to solve this problem. And the third recommendation really involves engaging public health agencies and, and hospitals, nonprofit hospitals into the work.

So first of all, the first thing is promote the importance of food security in local, state, and national public health organizations, like State Health Directors Associations, State Medical Directors Associations, the National Association of City and County Health Agencies, for examples. The health implications of food security and the challenges of obtaining healthy food, if you're food insecure, as well as the complexity of the food safety net is not well understood by most public health practitioners. The second is include food security in local health assessments. So for many public health departments are going through accreditation. That requires a local health assessment. These local health assessments need to include food securities as indicators of health and that would ensure that it's measured and tracked over time at the local level. Also, nonprofit hospitals are required to conduct community health needs assessment every 3 years as part of their IRS requirement and they're required to build partnerships with local health departments and community groups to address community health needs.

These new requirements and the focus on alignment is another opportunity to identify food insecurity as a health need and the development of community benefits plan by these hospitals could include resources to address food security at the local level. And then finally, I believe that we need to connect the health care providers to understanding their patients' food security status. I'm also working on a program, a research project with some

researchers and doctors looking at integrating social indicators into electronic health records. Several teams are focusing on different issues. One is on chronic diseases, another focused on, on different health conditions and the team I'm working on is looking at nutrition, and in a recent meeting of all these teams, my team presented the issue of food security and our plan for testing some of the indicators at, at a clinic. The other team hadn't even thought about the issue of food and these include doctors and working in clinics with patients. They hadn't even thought of the issue of food security for their projects but once they learned about it, they decided to add a screen for food security into their program, too. So the lesson is they hadn't even thought about it and once they did, they completely understood what they had been lacking and they wanted to include it in the project.

So back to the story of Bob, the day, one of the days he wrote me, he was going to see his health care provider and ideally that would've been a place, his physician's office would've been a place where Bob, who has, is elderly, he has diet-sensitive health conditions and is food insecure, in his case, very low food security, including monthly disrupted eating patterns and loss of weight. Ideally, that would've been a place he would've been diagnosed and connected to food resources to not only improve his food security status but his health. Another place that could've happened was potentially when he was applying for Food Stamps. So we need for, in the clinical setting, we need to encourage screening for food security and having a way for doctors to connect their patients to food resources and another way, I think, that this could possibly be helpful is to use patient navigators or community health workers to really help patients connect to the food resources in their community. So this is the role I've been playing with Bob through e-mail and through voicemails and I connected him back with food pantry and I'm going to follow up and this is basically the role of the navigator, that I just happen to be playing because I got the e-mail. So some of your other questions included, you know, what sort of benchmarks and reporting structures to monitor and evaluate progress could we put in place and I think the community health assessments would be one thing, making sure the communities are assessing the food security of their population, local food security assessments, which really are going to have much more complex information and details around the food safety net and then also screening in clinical settings, where an individual patient's food security status could be tracked over time and connected to their health outcomes.

And then mechanisms for government or public accountability and I think primarily I'm suggesting some sort of local food planning bodies. I know we have one in San Francisco. Many other places do. I also think that these community health assessments can really engage the public health departments and through the hospitals, through their IRS requirements for community health needs assessments, that could, too. And also, one of the, the NEOP program in California requires a[n] assessment of the public health infrastructure and they include a question about whether the local public health department includes food security as a priority and that's just another way that local public health systems can be, the infrastructure of those systems can be assessed to see whether



they're focusing on food security and if they're not, try to focus them on food security. Eliminating food insecurity and especially very low food security is of the utmost importance and we know that people are food [in]secure because of a variety of complex issues, including medical conditions, high cost of housing. We need to give people the tools to improve their own health.

Bob writes, "I know I can't rely on just one organization. I do have to exert myself," and I think, though, the situation zaps people's energy and takes away hope. So my recommendations offer another piece of possibly a solution by offering some options to engage local public health infrastructure in health care systems and focusing on building connections between the federal, state, and local public and private food programs to make sure that no American is food insecure. Thank you.

**Commissioner: Thank you very much.**

**Commissioner: Thank you, Paula. I'm really impressed that your testimony included so much public health. Thank you very much. When you were saying at the beginning, at the outset of your testimony, you were talking about the public health community really has very little knowledge or awareness of food insecurity and doesn't really track it in any type of systematic way and I think your recommendations are great because they show a way for how public health can get involved. What has been a challenge for getting the public health community involved in addressing food insecurity?**

Jones: Well, I think the public health community is involved in so many other issues be it violence prevention or emergency management or environmental health, whatever. It's just so complex a public health system and I think when it comes to food they're then very focused on nutrition, educating around nutrition but these, these local, these food systems are so complex that it really takes a dedicated focus on the needs of low-income people and how to access different programs and are the programs available even? And many places have not gotten to that level of focus, I believe. They may be taking pieces of it but I have been in a position and very fortunate for the past 15 years that I have been supported to only focus on the needs of low-income people and food security and it's, it's becoming more common. They are more sort of positions like mine in different governments and but I, I've, I participated in, in calls with other public health departments across the country. I know that there hasn't been this focus and I think that it's an infrastructure that could really build capacity at the local level.

**Commissioner: Yeah, and this is in spite of the fact that we actually have a Healthy People 2020 goal and that we missed our goal for Healthy People 2010, which was to reduce food insecurity to 6%, which we did not do. Can you talk about the structure of the local, I think you were calling it, the food policy—**

**Commissioner: Task force.**

**Commissioner: —task force, where you have a food, you're interested in getting people to do food planning bodies but from the local food planning task forces that I've seen in my experience, there's been very little focus on food insecurity and poverty, in general and more focus on community gardens and sustainable agriculture. What can we do to ensure that the local food planning guides can actually or local food planning groups pay more attention to food insecurity?**

Jones: That's a really good question. There's some convening groups. Johns Hopkins is one of them that convenes food policy councils through a list serve. There could be others. I do think that there is a disconnect in some places and some places, you know, it would work really to, I grew up on a farm in central Illinois. We had land. We could grow gardens and we did but not every place could do that and it does take a lot of time. So I'm not saying that's not part of the solution because I do believe in the local place it is but the needs of low-income people are more complex than that, I believe and, you know, possibly getting public health departments a little more involved, I think, in these local planning bodies with the charge of focusing on health disparities and the needs of low income residents, I think, could focus it back on, on sort of the consumption issues or the access issues and resource issues. I don't, I haven't seen a lot of food policy bodies, I would agree with you, making that focus just on the wings of low income and we do have to, you know, I think it's complex and I think really having somebody or a group of people that that is really what they do at the local level is really trying to make sure that there's connectivity, there's understanding, there's capacity is, is a specific focus and that's why I'm saying these, these planning bodies beyond the food system because I also am a food system person but I know that to focus, to really meet the needs of low-income residents, you have to focus on that.

**Commissioner: Thank you.**

Jones: Uh-huh [yes].

**Commissioner: Cherie?**

**Commissioner: Could you talk briefly about the construction of this task force that seems to be across sectors that with whom you work in San Francisco and how that began and why it is not just the Health Department but many different sectors in the community?**

Jones: Yes, this task force that we have was created 10 years ago and it's a little unusual for a task force to actually have a decade-long history. It was created really to focus on bringing in federal nutrition resources. The programs were siloed across different agencies



and organizations, city agencies and nonprofit organizations. So it was created by a member of the Board of Supervisors 10 years ago and it was written in a way that city agencies or county agencies, we're a city and a county, so our agencies were required to be members and then the community-based representatives met certain sector requirements and we were charged with annual assessment of food security at the local level and making recommendations for policy programs and budgets to improve food security. Focusing on bringing in federal funds where we can and then leveraging our local resources to expand those programs. We have found that and we had a sunset date. So this group had a sunset date but every time we approached the sunset date, it felt like there was more to do and we had local legislators that were supportive of the work and could see the progress and agreed to reauthorize. This task force is written into the health code. It's written as the Health Department is charged with staffing, as well as membership, being a member and so this group has always and we, we reexamined whether we, the group should have a broader food system focus and the group has always decided to maintain a strict focus on food insecurity and we know that there's other issues in the food system but they're being dealt with by other bodies and we're very collaborative with those. They sometimes present to us. We present to them. But this idea of local planning body, I had actually recently presented before our HIV Health Services Planning Council, which administers Ryan White funding at the local level and just this idea of like requirements for local planning bodies that focus on food security because these, these systems are so locally specific and complex, you do need a group of people that their focus is on the needs of the, the food needs of low income residents.

**Commissioner: So you're moving the needle?**

Jones: Yeah. [laughter]

**Commissioner: Thank you very, very much.**

Jones: Thank you.

**Commissioner: One last question about the public health leadership in this country. You have the CDC. You had the Surgeon General, the American Public Health Association. What should the leadership and the public health community, you also have Health and Human Services. What should those agencies be doing to address food insecurity?**

Jones: Well, that's a very good question. I think from the way I was looking at this, I think, actually, training the leaders a little more on what food security is, what it isn't, and how it impacts public health would go a long way to get the leadership. I think we can look from both sides, from the leadership of the public health agencies to really understand that this is impacting the health of the populations, as well as from the level of the local planning. So



you've got the support from the medical directors, from the, from the health directors, down to the staff, who will ultimately implement programs and connectivity, so.

**Commissioner: Thank you.**

**Commissioner: Thanks very much.**





**ANNE QUAINANCE  
MEALS ON WHEELS SAN FRANCISCO**

**KAREN GRUNEISEN  
EPISCOPAL COMMUNITY SERVICES**

**Commissioner: Thank you very much. And lastly, we have Anne Quaintance, who is Chief Program and Government Relations Officer for Meals on Wheels in San Francisco and Karen, Karen, I'm going to mangle your last name, is Gruneisen.**

Gruneisen: You said it exactly right.

**Commissioner: Oh, perfect, and unusual, Associate Director of Episcopal Community Services in San Francisco. Thank you very much. The floor is yours.**

Quaintance: Hello, Commissioners and thank you so much for the opportunity to offer recommendations for addressing food security for our country's most vulnerable and for listening to testimony from all sectors and perspectives. Growing up in San Francisco's public schools in the '70s and '80s gave me firsthand experience on how people from all backgrounds and classes get their basic needs met, the choices people make, and that we, the people, make the rules. With an undergraduate degree in sociology and political science that included social work, government internships, and theoretical education, it was evident to me that a handout wasn't the answer and that our society will only advance when all members at a minimum have adequate and reliable nutrition, housing, education, and health care.

And within the framework of capitalism we can build a thriving economy with a strong safety net for the most vulnerable. I thought I would start by addressing food security and move on from there. Over the past 25 years of addressing food security and poverty in San Francisco I have seen how the lack of financial resources and access to food, to nutritious food harmfully affects our disabled children, adults with life threatening illnesses, seniors wanting to stay safely in their homes, disabled veterans, victims of domestic violence, our severely mentally ill, and I could go on. Americans struggle to navigate our safety net system and instead stand for hours at first-come first-serve programs, are placed on waitlists, live on the streets and in emergency shelters.

The more I've listened, struggled, and served, it is evident our safety net needs repair. The safety net was designed to help Americans in emergencies, due to unforeseen circumstance and unemployment. Today Americans are faced with not meeting their basic needs often due to low wages, health care costs, and no pensions to supplement Social Security. I have been involved with supporting those living below the poverty line with access to food cooperatives, SNAP, CSFP, community operated food pantries, school food programs, soup kitchens, senior lunch sites and home-delivered meals. I have worked both in a nonprofit,



nonprofit and public sectors for the past 25 years. I began as a Vista volunteer at a nationwide food cooperative called Share. I don't know if any of us remember it but it was a volunteer-run coop that doubled households, cash for Food Stamps and I stayed as a community organizer and administrator for the next 5 years.

From there, I went to Jewish Family and Children Services to help manage Help at Home, a homecare agency and revenue generator for Jewish Family and Children Services, while pursuing a graduate degree in nonprofit administration. From there I spent the next 9 years at the San Francisco Food Bank to address chronic food [in]security, by building a network of food pantries, developing a school-based SNAP program and managing government contracts. That led to accepting a position as a Senior Analyst at San Francisco Human Services Agency. I would still be there but I joined Meals on Wheels at COO 6 years ago, which allowed me to address food security for seniors and adults, and adult, disabled adults waiting for services that are isolated without any support.

I am a founding and current member of the San Francisco Board of Supervisors Food Security Task Force that Paula just talked about, that we started in 2005 together and a member of the Mayor's Long-term Care Coordinating Council since 2013. For today's testimony, I'm using the definition for food security that all people at all times are able to obtain and consume enough nutritious food to support a healthy, active life. Food insecurity exists when the ability to obtain and prepare nutritious food is uncertain or not possible. Today's testimony focuses on the most vulnerable in America. Food security rests on three pillars, is how we've been looking at it as a framework for evaluating food security in San Francisco, borrowing from the framework from the World Health Organization.

First being sufficient financial resources to actually purchase enough nutritious food, such as SNAP and, and WIC and Social Security, food access to affordable, nutritious and culturally appropriate foods, food pantries, meal programs, ideally food retail and consumption meaning the ability to prepare healthy meals and basic of, and knowledge of basic nutrition safety and cooking. So things, kind of nutrition cooking education, having usable kitchens, things along those lines that can complicate that. In San Francisco, there is one in four residents that are at risk of food insecurity due to low incomes and they struggle to attain and prepare enough nutritious food to support basic physical and mental health.

I'm going to just give a few quick stats but we have 12% residents living at or below the federal poverty line. We have 38% of seniors below 200% of the poverty line. We have a 7% unemployment rate. We have over 50,000 people on CalFresh, known as SNAP. We have 32,000 students eligible for student, for free and price-reduced lunch. We have nearly 100,000 people accessing food pantries. We have over 3,000 people going to senior lunch sites every day. We have 4,200 people receiving home-delivered meals every day and over 7,300 homeless folks in San Francisco, maybe low. Though a main part of my testimony



offers recommendations of effective ways and innovative reforms of existing programs and funding allocations to eliminate hunger and food security in America for the most vulnerable.

Last year the San Francisco Board of Supervisors passed a resolution committing to a food secure and hunger-free San Francisco by 2020. We came up with some key recommendations, which I'll just run through, which is maximizing enrollment in SNAP, ensuring food security for vulnerable seniors and adults with disabilities by instituting a policy committing to a maximum wait list of no more than 30 days for home-delivered meals and in emergencies, 2 to 5 days and increasing funding to grow a home-delivered grocery program to a citywide program, increasing meals during out-of-school time, both after school and summer time.

We have been supporting a new initiative to boost nutrition by changing behaviors for the lowest income San Franciscans with the Healthy Food Purchasing Supplement and a plan for addressing food security in what we call single resident occupancy hotel rooms, improving shelter meals, improving data collection and planning. Additionally, I would like to recommend first that we bring all programs in the 21<sup>st</sup> century to increase access for households by using funding for services instead of administration. We can follow the lead of the private sector in health care industry in two areas, improve customer service and access through technology and conducting cost-benefit analyses to develop policies on the ratio of administrative costs to the actual benefit to the households.

We need to address the digital divide among socioeconomic classes, access to the Internet, social services, and health care. Second, we need USDA FNS to collect and share data from local departments, like we have talked about. With the goal evaluating the unmet, oh, I'm going to go quicker, of the unmet need at the local level, so the communities can provide innovative solutions for reaching those most vulnerable. Included in my written testimony will be a copy of San Francisco's Food Security Task Force report. Third, we must use public/private partnerships to build an effective safety net. We can stimulate the local economies and promote healthy communities by creating innovative ways for the private sector to match federal household benefits, such as SNAP, WIC, and other healthy eating voucher programs. Fourth, we must eliminate barriers for young children to access nutrition programs, by allowing caregivers and parents of young children to access out-of-school time food programs, such as summer lunch.

I also did bring with me a slew of recommendations, which I will shorten for Meals on Wheels of America, which is the oldest and largest national organization supporting more than 5,000 community-based nutrition programs. Specifically, with the Older Americans Act, that was created in 1965, we have seen year-after-year the gap between the number of seniors struggling with hunger and those receiving nutritious meals through programs continue to widen and the waitlist for services are mounting in every state. We would



recommend a bipartisan reauthorization of the Older American Act. We would recommend that we consolidate the triple three C1 programs, hunger and nutrition and C2, which is the home-delivered meal programs under one Title 3C. This will make a little more sense in the written testimony but there is some logistics that would really improve how we're able to help people and not keep people in certain silos. We need to develop policies for adequate funding levels for, for the Older American Act nutrition programs. I don't know if we know but we, seniors are turned away every day at nutrition lunch sites and are placed on waitlists with no maximum wait time.

Senior nutrition programs rely heavily on volunteers to deliver these meals and there is an effort to really bring that charitable mileage deduction rates to the same levels as the business rates, to encourage and sustain the volunteerism. We want to enhance food donation tax credits and maximize voluntary contributions for meals via SNAP. In closing, thank you for your commitment to our nation and the millions of Americans struggling with hunger and food insecurity. This is a nationwide issue that I believe is best addressed with bipartisan solutions.

**Commissioner: Thank you very much.**

**Commissioner: Thank you.**

Gruneisen: Hi, I'm Karen Gruneisen. I'm the Associate Director at Episcopal Community Services of San Francisco. We're the largest provider of housing and services to homeless folks in San Francisco and we do that through four departments. We have a Permanent Supportive Housing Department. We have a Shelters Department. We have an Education and Employment Department that's adult basic education and a Culinary Employment Program. We have a senior center. So we're part of the congregate meals that are provided to seniors, there are socialization activities, anti-isolation, case management work. We serve about 7,000 people, different people and duplicated people a year. Ninety-five percent of them are below the federal poverty level and 65% of them are homeless when they're our clients. I wanted to talk to you today about the food security and nutritional issues that impact our tenants in permanent supportive housing, as well as our residents in shelter. I'm going to start with the permanent supportive housing.

When I listen to everybody talk about what nutritious food inures to with respect to health care benefits, in my head, I was listening to every permanent supportive housing presentation I've heard about the health care benefits of that kind of housing and permanent supportive housing is a model of housing that's also cost effective. So housing and health care are inextricably linked. Nutrition and health care are inextricably linked. Our own Department of Public Health holds homelessness as a health issue. A 2014 study by Dr. Josh Bamberger of our Department of Public Health found that there was a \$1.5 million cost reduction in hospital-based health compared with, with the cost prior to



placement of 51 seniors in permanent supportive housing and that primary savings came from days of care that weren't necessary in skilled nursing facilities anymore. That was a core, that corresponded to a cost to Medicaid and Medicare of about \$9.2 million over a 7-year period. That's for 51 people. That's a new study.

There are lots of studies showing the cost effectiveness of permanent supportive housing, the same reason that good nutrition is cost effective and the health care benefits. In San Francisco, we've got about almost 4,000 units of permanent supportive housing for single adults and I'm focusing on them for a reason, which I'll tell you in a second. My agency owns and operates or provides services in about 20% of those and for our tenants, health is compromised at entry. About 29% have a mental health diagnosis, 24% have a physical disability, 28% have a chronic health condition. The income of the folks living in permanent supportive housing in the city depends on what type of benefit they are on, a county benefit or a federal benefit, like SSI or SSDI but the range is after paying for housing \$65.00 put CalFresh benefit for the month or \$350.00 a month without CalFresh benefit because you're getting SSI.

So that's what you have for the month to pay for everything else that you need and here's the kicker, 76% of those units are SROs in old buildings because that's San Francisco's stock. These were residential hotels built at the turn of the century and that's the housing that's available for folks who would otherwise be on the streets. Now it's a kicker because those units don't have kitchens. So we have folks who are in the supported housing environment, which is supposed to inure to better outcomes but we don't have a kind of a key element for the consumption tier of the World Health Organization's Path to Food Security. So the Board of Supervisors asked the Food Security Task Force what should be done to improve the food security of people living in SROs.

So we surveyed just over 600 of the tenants and asked them. The survey showed us that 79% of the tenants in the SROs are at high nutritional risk. Eighty-nine percent are food insecure, 87% use the food safety net program at least once a week, 43% used it every day, so those are free groceries, free dining rooms, free home-delivered meals. What they said that the city should do to increase their food security was overwhelmingly highest priority additional funds to purchase healthy food. The next cluster of priorities, 50% to 56% of respondents had a highest, high-priority, full-service grocery store closer to where I live, food pantries closer to where I live, access to a kitchen or a better kitchen I can cook in, free or low-cost microwave meals, more free meals prepared by others delivered to me. So we're crafting a recommendation to the Board of Supervisors to pilot several interventions in a couple of SRO buildings to study what interventions will be the most effective for increased food security and at this stage of our work, we're looking at some cost projections for marrying interventions within a building.

Now I'm going to segue for a second and talk to, oh, I should tell you that these SRO buildings that I was referring to are for single adults. This afternoon, I bet you hear some



testimony from members of, who live in families in SRO buildings in San Francisco and those are not city subsidized buildings because the city doesn't think that families should live in SROs but those folks have a very powerful tale to tell, as well, where they've got kids, doubled up in a space that's no bigger than a parking space in some circumstances without a place to cook, without resources to cook. I'm sure that you'll hear about that this afternoon. In our shelters, at a point of time my agency serves 534 single adults in these shelters 24/7 365 days. We are, most of those shelter residents, at most, have a \$65.00 to \$72.00 a month general assistance benefit. So that's their monthly income. About  $\frac{1}{3}$  of them are on CalFresh. There are more that, that are eligible. They can have two free meals that we provide but only 1.2 meals are consumed instead of the two. So I averaged that out. There are various reasons for that. It includes that are mealtimes aren't convenient if you're working, that they aren't healthy enough, that there is not enough on the plate. They don't like what's being offered. Our concerns are these meals are very expensive to prepare. They are \$5.21 to prepare, which in the world is not expensive but because it's not subsidized, that's the way I should've said it, because they aren't subsidized meals, it's expensive for an agency like mine to, to prepare them and it's not particularly interesting to private funders to contribute to a shelter.

The same way that it may, that hopefully, it is enticing to, to give to the food bank and I see that I have a minute left, so I'm going to go quickly then to the recommendations that I have. I'll say quickly what others have. CalFresh, SNAP benefits are integral part of our solution. We can't have reductions in those benefits. They're at inadequate levels now. I think it would be really good to build on the recently published findings that allowed from the study that allowed CBOs to support SNAP operations by doing the interviews, collect verifications, submitting client applications, to see how that works, especially within programs such as homeless programs or formerly homeless programs where there's a captive audience. I mean, folks are around for a while and they have relationships or build relationships that, with the folks that work there, so it's a safe place for people to access benefits, as well. I think that the USDA needs to take a page out of the HUD Playbook around ending veterans' homelessness, that's the HUD Playbook to engage the private sector in making significant contributions to ending hunger. I think that there needs to be much better federal interagency coordination between HUD, the USDA, and HHS, where we're all talking about the same issues, many of the similar barriers.

We have aligned goals and yet, those departments, despite being coordinated in some respects at the federal level, like through the Interagency Council on Homelessness still are siloed very much as respect to food security and housing, for instance, and the California's Medicaid 1115 Waiver is doing a very good job of recognizing the connections between housing, health, and food under this waiver, the state would provide access to intensive housing-based care management services and intensive care management to tenants. One of the interventions is around nutrition and food and the intervention is meant to be supporting tenants in permanent supportive housing, especially the high users of the



hospital and health system and I also appreciate all of the time that you are spending in order to make the life so much better for folks that we all care about.

**Commissioner: Thank you very much for your testimony. Cherie, do you want to ask some questions?**

**Commissioner: I'd be very interested to hear more. You come from, the San Francisco Hunger Task Force comes from, members come from a variety of backgrounds, services, and orientations. I would be really interested to hear how that group worked together to meld and for recommendation purposes, what are the best practices that you would recommend for melding those backgrounds, interests, focus, and services to move the needle on hunger and how that relates to so A, here, and B, how does that relate to, how could that relate to recommendations for what you just said, Karen, and that is a closer, whether it's driven by MOUs or whatever, closer coordination at the federal level? How can we drive that kind of an outcome to better improve food security?**

Speaker: Sure, I, I would say I think there's, we can certainly, even in our written testimony really include some detail of how we formed that in 2005. I think the forming of it and, and the partners that we had and the ordinance that we put together, I think that was all so very thoughtful and continues to drive us today. I think we have amended it a couple times but it is driving that. I think, also, every member at that table does have a voice. We do use Robert's Rules of Order, departments can abstain. So there really is an opportunity for people to look at policy, to look at programming, to look at funding and be able to discuss that, whether it's at the Task Force or whether that it is at a subcommittee meeting so that their voice is heard and potentially they may need to abstain from a vote occasionally. I think federally, and I'm going to let Karen take over, is I think that at the federal level there needs to be something that is, is, whether it's starting with places like San Francisco and seeing that cities and counties having something like that to state and federal level. I think that is where there isn't, there is some forced collaborations that we see federally that we've mentioned but I don't think anybody is looking at it from kind of that overall food security perspective.

Speaker: I would add on the Food Security Task Force the leader as really important, so the Chair and you'll probably hear from Terry Ollie later from the San Francisco Maron Food Bank, who's our current leader and we've had past very strong leaders. So this is not a paid position. The agency within which the leader works needs to be committed to the leader being able to have the resources to spend on the preparation that every great facilitator needs to do. While we use Robert's Rules of Order, we invite the community and they, we sit around the same table and the times that you know who's a Task Force member and who's not is at introduction time and when it's time to vote. Otherwise, the community's actively participating. So we have really rich conversations and that, that paradigm is



intentional. I'd also say that we're good at data, that's been one of Paula's real gifts to the Food Security Task Force is we pay attention to what the data shows us and draw conclusions from that. We've had a very supportive Board of Supervisors, which encourages the work in real ways when we go and we present findings and the, and we make recommendations and that ends up in millions of dollars of additional dollars for the activities that we've endorsed. So those are some other things that I would pull out. The Interagency Council on Homelessness is the paradigm that comes to mind, that was legislatively created when the McKinney Vento Act was reauthorized. It had a really slow start but I do think that the experience of, especially, HHS and HUD with the USDA there in, in working this way already around issues of poverty that come out of homelessness is a good start. So we don't have to begin again with that. The USDA's contribution to the Federal Strategic Plan to End Homelessness seemed to be make sure that people are on Cal or on SNAP, make sure that homeless people are accessing mainstream benefits and not much more than that. So there are little disconnects that seem that it'd be so easy to heal if those three agencies are working together.

**Commissioner: Thank you. What kind of a difference would it make for Aging Services and the USDA to work more closely together for your clients?**

Speaker: Bring attention to the, really the wait time and the wait lists that and the unmet need that exists between USDA FNS and OOA would be tremendous for them to really look at that together and, and make some targeted plans on how we're going to meet those needs. There are people across our country that are waiting literally could be 12 months, 18 months, and at that point you have probably gone to a nursing home unnecessarily.

**Commissioner: Thank you very much. Question?**

**Commissioner: Thank you for your testimony, Ann. I wanted to follow up on a comment that you made that I'd love for you to unpack a little bit more. One of your recommendations was to look at the ratio of the administrative costs versus the cost of services. What did you mean there? What specific programs are you thinking about? What should we be doing to investigate that?**

Quaintance: Sure, what I specifically mean is really the benefit at that household level, so what did it cost for us to provide that, that potentially cash benefit, such as SNAP and making sure that that administrative cost certainly is, is an acceptable ratio or an acceptable percentage of the cost to provide that service. So there are, if we investigated and looked at different counties and states across the country, there are potentially people, actually, we are spending more money to try to give somebody that benefit than the benefit itself. And so at some point it makes sense to really just give people the cash at that point. It's how far can, we really have to look that the administrative burden that we are putting on, whether it's individuals, whether it's staffing, whether it's eligibility, whether it's facing





history because with technology today, we really can streamline. We can really see how people are using their dollars. So I think there is an incredible opportunity to reduce the bureaucracy and the paperwork and the stigma involved and really, and really put a policy out there that says, you know, what, what, how much can you really spend on a benefit compared to what it is and at some point, it's not worth it. So I think those are things that we really need to dive into and I think it's political. It is tough.

**Commissioner: And just to that particular point, California's administrative cost per enrollee \$67.84 per month, is that what you're addressing?**

Speaker: Right.

**Commissioner: Versus Washington State at \$18.24, Oregon at \$25.00-plus, that's the issue you're addressing?**

Speaker: There's no standard—

**Commissioner: What are you looking at?**

Speaker: —or a new standard is what we need.

**Commissioner: Will these numbers be included in your testimony?**

Speaker: I'd be happy to—

**Commissioner: Because that will help give us some leads on how we can work with RTI to find out that information for us to and to develop a recommendation, if it's meaningful. So thank you. We need numbers.**

Speaker: Could I add something? I'm embarrassed when I was talking about the Food Security Task Force and what made it effective, not to have said that the presence of our, the Director of our CalFresh program being on the Task Force makes a huge difference. To have that kind of spirit and leadership in the food, in the CalFresh department is extremely important and while I complimented our Board of Supervisors, I failed to compliment the Mayor, who also has included additional dollars in his budget.

**Commissioner: Outstanding.**

Speaker: So I should do that and I do.

**Commissioner: Thank you.**



**Commissioner: Outstanding.**

**Commissioner: Thank you so very much.**

**Commissioner: I have more questions. I'm not done yet. Karen—**

Speaker: Yes.

**Commissioner: —I'd like to ask about these SROs. The SRO that you were talking about where almost 90% or maybe it was more of the people who reported food insecurity.**

Gruneisen: Yes.

**Commissioner: Are these city-subsidized or who pays for these SROs? Who's in charge of this housing situation?**

Gruneisen: So the folks that we surveyed were in SROs, most of which are subsidized by the city, by the Human Services Agency and when I say, "Most of which," I'm talking about our survey respondents.

**Commissioner: So when you say, "Subsidized," are they fully, are people paying anything for these housing units or these rooms where they are?**

Gruneisen: Yes, so the folks who get the Human Services Agency subsidy, let me just get to my right piece of paper here, oh, I don't have the raw number, sorry. I just have the net, the 65% to 72%. I'll put it in my written remarks. The city had been paying higher than other counties in general assistance. Back in 2004 it decided to try a different paradigm, where it gave less money to folks in exchange for having a shelter bed or in exchange for subsidizing rent in permanent supportive housing and given our city's stock, that was primarily these SRO units.

**Commissioner: So you're referring to SRO as permanent supportive housing?**

Gruneisen: That's correct.

**Commissioner: And that they have no kitchens?**

Gruneisen: That is correct.

**Commissioner: That's considered a permanent supportive housing condition?**



Gruneisen: That's correct. Now those aren't HUD subsidized because HUD requires different for the kitchen but in our city, it is for single adults, not for families.

**Commissioner: And for families, what would be considered to be permanent supportive housing?**

Gruneisen: Most of the family supportive housing in San Francisco is, has been privately developed over the years. A lot of it is HUD-funded. It has, now I'm talking about permanent supportive housing as a solution to homelessness have complete kitchens, so—

**Commissioner: New market tax credit funded stuff, are you talking about?**

Gruneisen: Some of them are low-income housing tax credit, more.

**Commissioner: Thanks for the clarification.**

Gruneisen: Sure.

**Commissioner: Thank you very much for your testimony, very informative. This concludes our formal invited testimony for the National Commission. I want to thank each of you for coming today. I know it's a major investment in time and also an emotional investment and cognitive investment and I appreciate you all being here. I have learned a tremendous amount and am very impressed with these testimonies. What is the deadline, Mary, for getting the written pieces to us? July 30<sup>th</sup>, please, fix your written testimony if you want it, you want to make it earlier? Earlier is better because then the public needs to know because we'll put it up on the website. The faster we can get it up onto our website, the more public engagement that we can invite. So thank you very much for your testimonies here, again, these will also be transcribed. So your written testimony, also, is an opportunity for you to supplement what you were able to talk about here today and it gives us a lot more information, so throughout the morning we have requested further information from each of you, so please, do find a way to insert that so that we can include it for the National Commission Report. Anything else you wanted to say, Cherie, before we end this section?**

**Only that we have to start writing pretty quickly, so July 30<sup>th</sup> is great but earlier would be better because then there's a better chance of having everything thoroughly perused by those who are not present, if you will. So again, our deep appreciation for everything that you've done to provide information to us this morning and thank you.**



**So, lastly, you should know that our website is [HungerCommission.rti.org](http://HungerCommission.rti.org). On that website, you can get people to submit public comments. You can check to see, you can track us and look at our minutes. You can find not only your own testimonies that you have provided but you can find other people's testimonies as they're coming into us. So please, help us to engage with the public through this website. It's not an impressive website but if your testimonies could get submitted, it would be impressive. [Laughter] So we're going to take a break. We'll come back at 2:00 sharp to open it up for the public aspects of the hearing. Anyone can sign up. Those of you who were formally invited, if you have more to say, you are welcome to sign up again or get your friends to come or other people who you know are true experts on hunger and poverty, we would like to hear from you. Thank you all for being here. We'll see you at 2:00.**