

JUNE 22, 2022

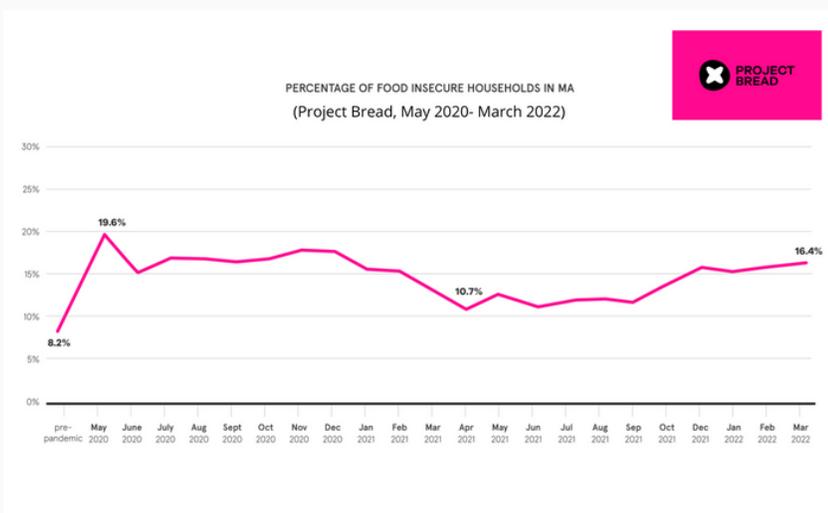
FIX THE SNAP GAP

A food insecurity report

Problem Statement

WHAT'S AT STAKE

Food insecurity has increased in Massachusetts during the pandemic by nearly double, according to Project Bread.¹ There are many factors that contribute to this trend, including awareness of and ability to access available resources. Of the 2,000,000 people who qualify for MassHealth and Supplemental Nutritional Assistance Program (SNAP), 44% of those who are potentially eligible are not enrolled in the program. This gap is referred to as the “SNAP Gap.” We believe that one way to decrease food insecurity is to increase enrollment in SNAP.²



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Background

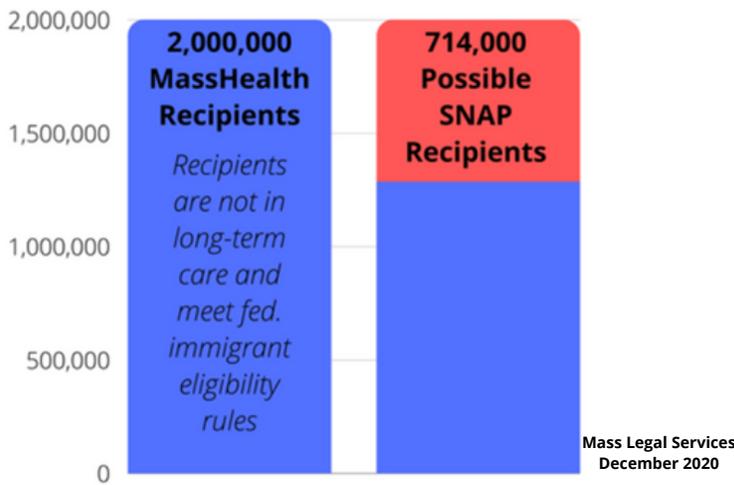
HISTORY SHOWS US THE WAY

Today, the United States Department of Agriculture’s (USDA) Food and Nutrition Service oversees the SNAP program. This program was first conceived in 1930 by Secretary of Agriculture Henry Wallace. By the time it ended in 1943, nearly 20 million people had been served. It was believed that the conditions necessitating the program had ended. However, by the 1960s, it was clear that a need still existed. The Johnson Administration rebooted the program in 1964; by the 1970s the program expanded to all 50 states. The Food and Agriculture Act of 1977 provided more structure and guidance to the process, and reducing fraud.³

714,000 possible SNAP recipients in MA are not receiving services

MASS LEGAL SERVICES

How Big is the SNAP Gap?



SNAP assisted 42 million lower-income Americans in 2021 nationally; in Massachusetts, there are almost one million recipients of SNAP benefits, with the average benefit per household member being \$170 per month for FY22.⁴ Particularly during the COVID-19 pandemic, there are growing disparities being seen among people of color, non-native English speakers, and families with children. In Massachusetts, and elsewhere in the county, this gap is widening. Enrollment data shows that enrollment in the program by December 2021 was 27% higher than in February 2020. In Middlesex County in November 2021, there were 132,421 recipients of SNAP benefits.

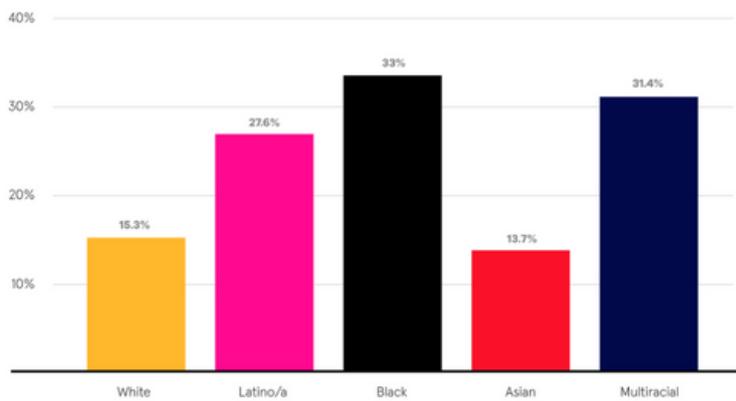




Where We Are Today

The rise of unemployment in Massachusetts throughout the COVID-19 pandemic brought millions closer to or below the poverty threshold. The peak unemployment rate in Massachusetts reached 16% in April 2020. Even as we see a steady climb in the number of filled jobs in Massachusetts, there are approximately 155,000 fewer jobs than before the pandemic in February 2020.⁶

Inequities: BIPOC Households and Food Insecurity



US Census Household Pulse Survey; October 2021 - March 2022

Project Bread reports a rate of 8.2% of food-insecure households in Massachusetts immediately prior to the COVID-19 pandemic. However, the pandemic increased the levels of food insecurity almost immediately. In May 2020, the overall rate soared to 19.6%, but for houses with children, the rate was 23.6%. By April of 2021, there had been substantial improvement as rates in Massachusetts dropped to 10.7% overall and 12.5% for families with children. However, as of March 2022, the overall rate increased to 16.4%, and the rate for families with children was 21%. The impact is being felt even more significantly in BIPOC families: 33% for Black families and 27.6% for Latino/a families as compared to 15.3% for white families.⁷

"The food pantry really helps me; I get all my diapers here."

METROWEST FOOD PANTRY CUSTOMER





Increased Impact

During the pandemic, households experiencing food insecurity were able to obtain assistance from SNAP, food pantries, Women, Infants and Children (WIC), and Pandemic EBT (P-EBT). According to the Greater Boston Food Bank, approximately 50% of food-insecure adults were either using SNAP or food pantries; 30% of those using a food pantry during the pandemic were using it for the first time. SNAP usage also increased among all races and ethnicities. For families with children, the rate of 29% was almost double the rate of 16% pre-pandemic.

The key barriers that households reported to Greater Boston Food Bank about food pantries were:

- the belief that the household should be self-sufficient,
- not knowing when the food pantries were open
- feeling embarrassed

In addition, the key barriers for SNAP were not knowing eligibility requirements, and believing the household should be self-sufficient. ⁸



Key barriers about food pantries:

- BELIEF THAT HOUSEHOLD SHOULD BE SELF-SUFFICIENT
- NOT KNOWING WHEN THE FOOD PANTRIES WERE OPEN
- FEELING EMBARRASSED





Recommendations

1. In order to close the SNAP Gap in Massachusetts, we recommend an education campaign aimed at promoting the SNAP program to potential applicants, service providers and participating or eligible retailers. A multi-media campaign format is encouraged including, but not limited to: digital, video, print, radio, and in-person education sessions. The education campaign must be designed with diverse accessibility accommodations in mind such as offering materials and services for the visually impaired, in multiple languages and ASL. Lessons learned through the recent COVID-19 vaccine rollout tells us to also recommend the use of trusted community messengers to deliver SNAP enrollment information.

2. Support bills S.761/H.1290, currently before the State Legislature, which would streamline the application process by using a Common Application. This application would include SNAP, MassHealth, fuel assistance, child care, and housing subsidies, making it easier for the applicants who have other challenges filling out multiple applications like limited English proficiency, access to computers. Input from all the stakeholders should be taken while building the platform to understand the challenges faced with the current system of separate applications. This will assist the local and state agencies as it will reduce their workload.

3. Stakeholders, such as municipal staff and nonprofit agencies who assist potential SNAP recipients, should work towards reducing the SNAP Gap based on a percentage that the local cities or towns agree to and create the additional resources to bridge the gap. Each city and town needs to initially quantify their municipality's gap and, based on its size, define their percentage goal in reducing that gap. We recommend a regional, cross-collaborative working group to pool resources and meet these objectives. This approach has worked well in other sectors such as elder services.

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Ideally, the following should be included in the plan: identifying the existing barriers (such as unaware the program exists, unaware of eligibility, complexity of the application, stigma, etc.), a targeted approach for each barrier, defined milestones for achieving their percentage goal, and a method of communicating progress. The MetroWest Food Collaborative is an existing council leading the food access policy change efforts in Massachusetts. Updates on such efforts should be made available by municipal Health Departments.

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