July 15, 2021

Secretary Tom Vilsack  
Office of the Secretary  
U.S. Department of Agriculture  
1400 Independence Avenue, SW  
Washington, DC 20250  

RE: Identifying Barriers in USDA Programs and Services; Advancing Racial Justice and Equity and Support for Underserved Communities at USDA

Dear Secretary Vilsack:

On behalf of Trust for America’s Health (TFAH), I thank you for the opportunity to comment on the U.S. Department of Agriculture’s (USDA) efforts to advance racial justice and equity. TFAH is a nonprofit, nonpartisan organization that promotes optimal health for every person and community and envisions a nation where prevention and health equity are foundational to policymaking at all levels of society.

Although social, economic, and health disparities have long existed, the COVID-19 pandemic has exacerbated existing inequities and underscored the impacts of the social determinants of health – the conditions in which people are born, grow, work, live, and age – including income, education, and environmental factors on health.\(^1,2\) We applaud President Biden’s commitment to ending the COVID-19 pandemic and addressing these challenges. As Executive Order 13985 makes clear, structural racism and discrimination have endured and are manifested in disparities in federal laws and policies.\(^3\) At TFAH, we have long supported a systems approach to improving population health. That is why all federal agencies and programs must actively work to ensure that they are serving all Americans equitably.

As research has made clear, the social determinants of health that have disproportionately put people of color and low-income communities at-risk of contracting COVID-19 are the same ones that have led these communities to experience increased rates of obesity, food insecurity, and mental illness.\(^4\) Even prior to the pandemic, people living in the most impoverished neighborhoods were most prone to obesity and poor nutrition, in part due to a lack of grocery stores, a lack of access to affordable, nutritious foods, and limited income.\(^5,6\) USDA’s programs, including those provided through the Food and Nutrition Service (FNS), have long worked to end hunger and obesity throughout the country, and currently serve one-quarter of all Americans. Consequently, USDA is in a prime position to help people who are disproportionately impacted access and participate in the agency’s programs and services. To advance racial justice and equity, TFAH’s comments highlight several barriers across programs that are currently preventing too many Americans from receiving USDA assistance.
Supplemental Nutrition Assistance Program (SNAP)

While at least 2 million more individuals enrolled in SNAP between February and April 2020, overall enrollment in the program has decreased annually since 2015. Evidence shows that SNAP reduces poverty and food insecurity, however, low monthly allotments do not allow participants to cover their entire meal budgets, and a lack of nutritional requirements for purchases may contribute to obesity and food insecurity. Studies show that children who receive SNAP drink more sugar-sweetened beverages than their peers, potentially due to these foods being more affordable and convenient than healthier alternatives. The pandemic has exacerbated food insecurity, with an estimated 45 million people experiencing food insecurity in 2020 and 42 million projected to experiencing food insecurity in 2021. These challenges have disproportionately impacted households of color.

Many of TFAH’s recommendations for the SNAP program, including increasing monthly SNAP benefits, would require congressional action. However, there are also ways USDA can take action administratively to adjust the SNAP program to meet the needs of Americans in an equitable way.

Specifically, TFAH recommends that USDA work to permanently extend certification periods, eliminate or suspend work-requirement time limits, and allow participants to use their SNAP benefits online in all 50 states. As a result of the COVID-19 pandemic, USDA permitted states to apply for waivers to enact these flexibilities, and while many states have and continue to do so, these flexibilities are currently not permanent and have not served beneficiaries in all 50 states. These measures are critical both to state SNAP agencies who may have been short-staffed as well as for beneficiaries who may have lacked the resources to meet requirements prior to the pandemic.

Additionally, without decreasing benefit allotments, USDA should identify ways to incentivize or improve diet quality in SNAP purchases and increase access to food retailers. USDA approved many more states for online purchasing pilots early in the pandemic which increased access to food, but TFAH suggests that other pilot projects be promoted to increase consumption of fruits and vegetables. TFAH appreciates the $75 million appropriated by Congress to award additional grantees under the Gus Schumacher Nutrition Incentive Program (GusNIP) program following the success of the Hampden County, MA pilot in which participants received an additional thirty cents to spend on food for every dollar spent on fruits and vegetables. TFAH would however recommend that USDA conduct culturally and linguistically tailored outreach and education about these opportunities to communities at higher risk for food insecurity and assist local organizations with the application process to ensure communities are given a fair chance to benefit from these programs.

Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
WIC serves as a nutrition assistance program for roughly 6.3 million women and their young children. Beneficiaries receive quality nutrition education, breastfeeding support, access to maternal and pediatric health care and a monthly package of nutritious food. These benefits have been shown to increase Healthy Eating Index scores for households, reduce the prevalence of food insecurity among children by at least 20% and improve health outcomes later in life.

Previous federal regulations, namely the 2019 “public charge” rule, have created fear among many WIC-eligible mothers who believe they may be at-risk of deportation or separation from loved ones if they enroll in the program. Additionally, a burdensome application process has been cited as a barrier to increased enrollment in the program. While, the public charge rule has been rescinded, USDA should work to ease fears in communities and promote enrollment among eligible populations by making applications easy to complete and submit.

In addition, emergency COVID-19 flexibilities have been instituted, including waivers of certain requirements. One key flexibility waived the requirement that participants be physically present for an interview at a WIC clinic in order to be recertified for benefits. Acknowledging that many WIC families already have limited transportation options and would unnecessarily risk exposing themselves or their children to COVID-19, Congress and USDA modified rules to allow for phone and video appointments which have been critical in ensuring sustained participation in the program.

While important, these steps to make WIC accessible are not sufficient to successfully expand access equitably and are only temporary. USDA should make it easier for individuals to enroll and participate in WIC, such as by allowing remote certification and attendance of nutrition education and breastfeeding classes. In addition, allowing online purchasing and making WIC packages more culturally and racially inclusive could make WIC more accessible to women of color. These goals can be accomplished by fulfilling these goals by adding more food options and tailoring breastfeeding supports for women and infants of color by working with trusted local organizations and by prioritizing the need to address disparities in these populations.

Such changes, alongside potential Congressional actions including increasing funding to extend postpartum care, to prioritize and fund tailored outreach to certain communities of color and under-resourced communities, and to hire community health workers at WIC agencies will ensure that more individuals can equitably access healthy options and nutrition early on in life and that mothers can adequately provide nutritious meals to their children.

**School Nutrition Programs**

Access to nutritious food supports stronger academic achievement and improved children’s health. The National School Lunch Program (NSLP) serves 30 million students daily, and the National School Breakfast Program (NSBP) serves 15 million. Children in households with incomes at or below 130% of the federal poverty level (FPL) are eligible for free meals, and those in households with incomes of 130-185% FPL are eligible for reduced priced meals.

Several challenges and barriers have arisen regarding enrollment and participation of children in school nutrition programs. First, schools currently spend a significant amount of time and
resources processing applications. Despite this effort, a 2011 USDA analysis found that nearly one-third of families did not verify their eligibility status and thus their children were not enrolled in school nutrition programs. USDA should examine and address the challenges families face in the application process, including streamlining the application and improving language access. Even for those students who are verified, as many as one-third choose not to participate, often because of associated stigma and feeling that the program identifies them as “poor.”

Prior to the pandemic, stories about students being served partial meals or shamed for their inability to pay for reduced price or full-priced meals were common. COVID-19 flexibilities instituted by Congress included allowing school districts to offer free nutritious school meals to all students through the end of the 2021-2022 school year. TFAH believes USDA should provide no-cost meals to all students through the end of the public health emergency, which would eliminate enrollment obstacles and lunch shaming and allow students to receive adequate nutrition throughout the day.

To further destigmatize and streamline school lunch access, USDA should:

- Improve outreach and make enrollment for schools via the Community Eligibility Provision (CEP) as easy as possible. USDA should provide schools with education and technical assistance regarding CEP.
- Permanently incorporate some of the waivers that the agency granted to states during the pandemic, including allowing schools to serve meals in non-group settings and waiving requirements that students be present when meals get picked up, given that many may still be attending classes virtually.
- Issue guidance clarifying that local wellness policies apply to school-issued digital devices and applications to prevent unhealthy food and drink marketing to children even when they are not physically at school.

Conclusion

USDA has both the responsibility and the opportunity to promote health equity and reduce health disparities associated with obesity, food insecurity, and hunger. These efforts should empower the communities they seek to assist and allow flexible support and technical assistance tailored to and meeting the community’s needs. We again appreciate USDA’s willingness to understand and address how the agency may advance racial justice and equity among those who benefit from USDA’s programs. If you have any questions, please contact Dara Lieberman, Director of Government Relations, at dlieberman@tfah.org.

Sincerely,

J. Nadine Gracia, MD, MSCE
President and CEO
Trust for America’s Health


Id.

Id.

Id.

