Child Hunger in Rhode Island

Hunger and lack of regular access to sufficient food are linked to serious physical, psychological, emotional, and academic problems in children and can interfere with their growth and development. Food insecurity is a method to measure and assess the risk of hunger. The U.S. Department of Agriculture (USDA) defines food insecurity as not always having access to enough food for an active, healthy life. Between 2017-2019, 9.1% of Rhode Island households and 11.1% of U.S. households were food insecure. In 2019, 13.6% of all U.S. households with children were food insecure, while 37.1% of U.S. households with children and incomes below the poverty level experienced food insecurity.

The Effects of COVID-19

- Data from the Census Bureau Household Pulse Survey indicates that households with children are more likely to experience food insecurity during the COVID-19 pandemic than those without. National estimates project that the 2020 the child food insecurity rate will increase to 27-29% in Rhode Island due to the COVID-19 pandemic.

- Collecting data on the scale and nature of the impact on children, expanding public assistance programs that meet the immediate needs of families, and prioritizing child-centered services with a focus on equity will help inform policymakers and minimize the impact of the pandemic on our most vulnerable children and families.
The Rhode Island Life Index

The Rhode Island Life Index, an initiative of Blue Cross & Blue Shield of Rhode Island and the Brown University School of Public Health, determined that 25% of households surveyed were worried about having adequate food during July and August of 2020 and determined that 21% of White families said they lack adequate food compared to 36% of Black families and 40% of Latino families.16

*Hispanic children may be included in any race category. *Hispanic children may be included in any race category.

The Effect of COVID on People of Color

Latino, Black, Indigenous, and immigrant populations are being disproportionately impacted by the pandemic due to longstanding and unacceptable inequities derived from historical and structural racism and bias in health care, housing, employment opportunities, and access to healthy food.10 National and local data demonstrates that People of Color have experienced higher rates of food insecurity during the pandemic than White families. Communities of color will continue to face greater challenges as a result of the pandemic due to loss of employment or income and its long-term effects on economic mobility.11,12,13,14,15

Race Equity

Children in Poverty, by Race and Ethnicity, Rhode Island, 2014-2018

Between 2014 and 2018 in Rhode Island, 63% of Native American, 35% of Hispanic, and 26% of Black children in Rhode Island lived in poverty, compared to 12% of Asian children and 14% of White children.


Black and Latino Households Likelier to Experience Food Insufficiency During Pandemic

SHARE OF U.S. ADULTS SAYING THAT THEIR HOUSEHOLD SOMETIMES OR OFTEN DID NOT HAVE ENOUGH TO EAT IN THE LAST 7 DAYS


Note: Other/Multiracial not Latino includes people identifying as American Indian, Alaka Native, Native Hawaiian or Pacific Islander, or more than one race. Percentages are based on reporting distributions and do not include the populations that did not respond to the question.
The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is a federally-funded preventive program that provides participants with nutritious food, nutrition education, and referrals to health care and social services. WIC serves pregnant, postpartum, and breastfeeding women, infants, and children under age five living in low-income households. Any individual who participates in SNAP (the Supplemental Nutrition Assistance Program, formerly the Food Stamp Program), Riite Care, Medicaid, or Rhode Island Works is automatically income-eligible for WIC. Participants also must have a specified nutritional risk to qualify. These risks include medically-based risks such as anemia or high-risk pregnancy as well as dietary risks such as inadequate nutrition. WIC participation may decrease household food insecurity. Families may receive assistance from WIC irrespective of their immigration status and WIC is not included in public charge determinations.

![Women, Infants, and Children Enrolled in WIC, Rhode Island, September 2019](image)

Source: Rhode Island Department of Health, WIC Program, September 2019. Percentages may not sum to 100% due to rounding.

- Infants and children ages one through four comprised more than three-quarters (78%) of the population being served by WIC in September 2019 in Rhode Island. Women accounted for over one-fifth (9% pregnant and 14% postpartum) of the population being served.

- Revisions to the WIC food package made in 2014 increased access to a wider variety of nutritious foods and strengthened breastfeeding support. As of November 2020, WIC provides an EBT (Electronic benefit transfer) card called eWIC to all Rhode Island users.

![Women, Infants, and Children Enrolled in WIC by Race/Ethnicity, Rhode Island, September 2019](image)

Source: Rhode Island Department of Health, WIC Program, September 2019. Hispanic can be of any race.

- Children enrolled in full-day child care programs consume half to two-thirds of their daily meals while in child care. The Child and Adult Care Food Program (CACFP) helps child care centers, preschools, home-based child care providers, after-school programs, and homeless shelters provide nutritious foods to infants, children, and youth by providing cash reimbursement for serving meals and snacks that meet federal nutrition guidelines to eligible children. Nationally, in Fiscal Year 2019, CACFP served 1.5 million children in child care centers. In Rhode Island, CACFP is administered by the Rhode Island Department of Education. Children who receive CACFP meals are less likely to be in poor health, be hospitalized, or be overweight, and are more likely to drink milk and eat vegetables.
The Supplemental Nutrition Assistance Program (SNAP), formerly the Food Stamp Program, helps low-income individuals and families obtain better nutrition through monthly benefits they can use to purchase food at retail stores and some farmers markets. Child food insecurity has been shown to decrease by almost one-third after families receive SNAP benefits for six months.

Nationally, SNAP is available to households with gross monthly incomes below 130% of the federal poverty level, net monthly incomes below 100% of the federal poverty level, and no more than $2,250 in resources. Rhode Island is one of 39 states that has implemented broad-based categorical eligibility, which allowed Rhode Island to increase the gross income limit and remove the resource limit for most applicants. The gross monthly income limit for Rhode Island is 185% of the federal poverty level ($40,182 per year for a family of three in 2020). Households must still meet the net monthly income limit of 100% of the federal poverty level after allowable deductions, which include deductions for housing costs and child care.

SNAP is an important anti-hunger program that helps individuals and families purchase food when they have limited income, face unemployment or reduced work hours, or experience a crisis. In Rhode Island during October 2019, 75% of SNAP households had gross incomes below the federal poverty level ($21,330 for a family of three in 2019). In October 2019, the average monthly SNAP benefit for a family of three in Rhode Island was $393. The amount of SNAP benefits a household receives is based on a federal formula that takes into account the number of people in the household and its income and expenses. The amount of SNAP benefits families receive is not adequate to meet a family’s nutritional needs.

Of the 150,230 Rhode Islanders enrolled in SNAP in October 2019, 66% were adults and 34% were children. Of the children enrolled in SNAP, 35% were under the age of six.

COVID-19 and SNAP

Since March 2020, SNAP households that were not already receiving the maximum SNAP benefit amount for their household size received an increase to their benefits to bring them to the maximum amount.

Starting June 10, 2020, SNAP participants were able to select and pay for their groceries online using their EBT card at Amazon and participating Walmart stores.
Rhode Island law requires that all public schools make breakfasts and lunches available to all students, including students who qualify for free or reduced-price meals based on their income (less than 130% of the federal poverty level for free meals and between 130% and 185% of the federal poverty level for reduced-price meals). 46,47

The National School Lunch Program provides nutritious free or reduced-price lunches to children while in school. Schools that participate in the lunch program receive subsidies and donated foods from the U.S. Department of Agriculture. In the U.S., in Fiscal Year 2019, 29.6 million children participated in the School Lunch Program. 48 As of October 1, 2019, almost half (48%) of Rhode Island’s 143,557 public school students (68,907 children) were eligible to participate in the National School Lunch Program. Sixty-nine percent of lunches served in Rhode Island are served free or reduced-priced. 49,50

Food-insecure families often do not have sufficient food to provide nutritious breakfasts every morning, and children in these families are at risk of falling behind their peers physically, cognitively, academically, emotionally, and socially. Children who are undernourished are more likely to have poorer cognitive functioning when they miss breakfast. They are more likely to have behavior, emotional, and academic problems, more likely to repeat a grade, and more likely to be suspended. Children experiencing hunger are also more likely to be tardy or absent from school. 51,52,53

The COVID-19 pandemic forced schools across the country to close their physical buildings and transition to hybrid or full distance learning. In Rhode Island, many children risked losing access to free or reduced-priced meals provided by schools. In response, school districts in Rhode Island provided “Grab ’n Go” meals at various sites, allowing parents to pick up free meals for their children. These meals were available to all children regardless of income. Between March and June, 2020, in Rhode Island, 2.3 million "Grab 'n Go" meals were distributed, almost half of the free and reduced-price meals served when school buildings are open. 54

In March 2020, as part of the Family First Coronavirus Response Act, the U.S. Congress enacted Pandemic-EBT (P-EBT), a new nutrition assistance program that allowed states to provide funds in grocery benefits to make up for meals missed in the spring of 2020 due to school closures. P-EBT provided families whose children qualified for free or reduced-price meals with the funds that otherwise would have gone to schools to provide them with breakfast and lunch. 55

Nationally, approximately two-thirds of school-age children are likely to be eligible for P-EBT, more than half of whom are in households that are also enrolled in SNAP. Households already participating in SNAP received P-EBT benefits on their existing EBT cards while other eligible households were issued new EBT cards with the value of missed school meals. 56

Rhode Island was the second state in the nation to be approved to administer the P-EBT program. In Rhode Island, the program is administered by the Rhode Island Department of Human Services with data-matching occurring in partnership with Rhode Island Department of Education. During the first round of the P-EBT program (April - September 2020), approximately 53,000 P-EBT cards were mailed directly to families at the address on file with the school and there is no need to request additional information or an application from families. 57,58,59

Preliminary national research suggests P-EBT reached a significant number of children quickly and substantially reduced food insecurity. 60,61 In October 2020, Congress extended P-EBT through the 2020-2021 school year with additional considerations and flexibilities to address the combination of in-person, distance learning, and hybrid instruction models and to replace meals missed at child care centers. 62
The School Breakfast Program helps ensure that the nation’s most vulnerable children start their day off with a healthy meal and helps schools support academic success and improved attendance, behavior and health, including reduced obesity rates. The School Breakfast Program offers nutritious meals, which together with school lunches, make up a large proportion of the daily dietary intake of participating children.63,64

During the 2018-2019 school year, 12.4 million low-income children in the U.S. participating in the School Breakfast Program ate breakfast at school each day, a rate that remained stable after a decade of growth in low-income participation.65

During the 2018-2019 school year in Rhode Island, 54 low-income students participated in the School Breakfast Program for every 100 low-income students who participated in the School Lunch Program. Rhode Island ranks 33rd in the U.S. for participation in the School Breakfast Program, the same as the previous year. If Rhode Island increased low-income student participation in the School Breakfast Program to 70% of School Lunch Program participation, the state would receive $2.4 million in additional federal funds to support the School Breakfast Program.66

Strategies to Increase Access to School Meals

The federal Community Eligibility Program (CEP) allows schools and districts with 40% or more students identified as low-income to provide free breakfast and lunch to all students and offers higher reimbursements. Other benefits of CEP include increases in school breakfast participation, reduced administrative work, and elimination of unpaid meal debts.67

Universal School Breakfast Programs, which provide free breakfast to all children regardless of income, increase school breakfast participation by removing the stigma often associated with school breakfast and can reduce the administrative burden for schools.68

Alternative breakfast service makes breakfast part of the school day and is another proven strategy for increasing breakfast participation, reducing stigma, and increasing convenience. Many of the states with the highest school breakfast participation rates have passed legislation requiring high-poverty schools to offer alternative breakfast service and/or free breakfast to all students.69

Children Participating in the School Breakfast Program, Rhode Island, October 2019

Source: Rhode Island Department of Education, Child Nutrition Programs, Office of Statewide Efficiencies, October 2019.
The food budget of many families increases during the summer months due to the lack of access to school meals. Nationally, one out of seven children who receive free or reduced-price meals during the school year continues to receive meals during the summer months. The Summer Food Service Program (“Summer Meal Program”) is a federally-funded program administered by the Rhode Island Department of Education that provides free healthy lunches, breakfasts and, in some cases, dinner or snacks that meet federal nutrition standards to children in low-income communities during the summer months when school is not in session through reimbursements to summer camp providers, public and private school food agencies, state and local governments, and colleges. Many Summer Meal Program sites provide educational, enrichment, and recreational activities in addition to meals, which allow children to learn and stay safe when school is out.

Nationally, in Fiscal Year 2019, the Summer Meal Program provided 142 million meals and served 2.7 million children daily. In Rhode Island, the Summer Meal Program provides more than 450,000 meals and 19,000 snacks every summer.

Eleven states, including Massachusetts and Vermont, provide state funding to support the expansion of Summer Meal Programs or to incentivize enhanced nutritional standards including reimbursements for serving local fruits and vegetables. The State of Rhode Island does not contribute any additional funds to support the Summer Meal Program.

Food banks play a critical role in addressing food insecurity by distributing donated and purchased groceries directly to food insecure families. The Rhode Island Community Food Bank (RI Food Bank) distributes food to people in need through a statewide network of 168 member agencies. These agencies include food pantries, meal sites, shelters, youth programs and senior centers.

During the COVID-19 pandemic, demand for food assistance from the RI Food Bank and member agencies increased by 26%. Before the pandemic, food pantries and soup kitchens provided emergency food assistance to 53,700 Rhode Islanders each month. By the end of April 2020, 67,900 individuals were being served - nearly as many people as at the height of the recession. This effort included the distribution of 330,000 pre-packaged meals from FEMA ensuring that food reached vulnerable low-income seniors and families who could not safely access grocery stores or food pantries.

Findings from the 2019 Rhode Island Hunger Survey

The Hassenfeld Child Health Innovation Institute at Brown University conducted the 2019 Rhode Island Hunger Survey to gain a comprehensive understanding of the population served by the RI Food Bank.

The RI Food Bank serves about 9,300 households with children age 0 to 17.

26% of households served had children.

Sixty-nine percent of households with children had at least one person in the household employed.

89% of households with children were living below the poverty line.

Most of the households seeking food assistance receive additional benefits elsewhere. Among households with a child age 0 to 5, 56% receive benefits from WIC. Among households with children age 6 to 17, 80% have a child who participates in the free or reduced-price school lunch program. Sixty percent of households with children reported receiving SNAP benefits.

Stigma Associated With Participation in Federal Nutrition Programs

- Individuals often feel stigma associated with participating in federal nutrition programs. This stigma may result in feelings of discomfort as well as a decrease in the likelihood that benefits will be used. Nationally, many participants express frustration that stores do not include signs designating which items qualify for WIC and feel stigmatized by store employees and other customers during checkout. Granting flexibility for the quantity of items purchased, improving signage for eligible products, allowing WIC items to be rung up along with SNAP and other food purchases, and allowing self-checkout for WIC items may help to reduce stigma. Technology could be used to address some of these issues. Participants also could be given the opportunity to check their EBT balance before shopping or to pre-select food before shopping. Text messages could be used to send alerts before benefits expire, so participants get the full benefit of nutrition programs. 79,80

Cultural Relevance of Food Nutrition Programs

- People of color and people from low-income families are twice as likely to suffer from diet-related chronic diseases and are more likely to consume meals funded by the U.S. Department of Agriculture Feeding Assistance Programs, the content of which is largely determined by the Dietary Guidelines for Americans (DGA). The DGA do not reflect the nutritional needs and habits of many people of color, align with traditional food norms of immigrant families, or take into account the growing diversity in the United States. 81,82

- Nationally, one-half of WIC participants are from culturally diverse groups with a variety of eating patterns, traditions, and food sensitivities. Many WIC participants often feel forced into Western food patterns and habits that may not be as healthy as their own eating habits. Changes to federal regulations to allow states to grant food substitutions and flexibility to offer regionally or locally available, culturally appropriate foods that reflect the cultural diet of participants would help to improve the cultural relevance of nutrition programs and help to address the nutritional needs of participants while still honoring cultural norms and traditions. 83

Food Deserts

Food deserts are areas with limited food access and commonly exist in low-income neighborhoods with predominantly Black and Hispanic populations. 84 The designation of “food desert” takes into account:

- Accessibility to sources of healthy food, as measured by distance to a store or by the number of stores in an area. 85

- Individual-level resources that may affect accessibility, such as family income or vehicle availability. 86

- Neighborhood-level indicators of resources, such as the average income of the neighborhood and the availability of public transportation. 87

Discriminatory housing practices throughout the twentieth century have created conditions where families of color are more likely to live in high-poverty neighborhoods that lack adequate investment in infrastructure and resources compared to more affluent neighborhoods. In addition to being byproducts of economic and racial injustice, food deserts impact the health and well-being of children. For example, children with a chronic lack of access to adequate food resources have higher rates of obesity and are more likely to develop type 2 diabetes and cardiovascular disease later in life. 88 Rhode Island’s Health Equity Zones (HEZ) are geographic areas where opportunities emerge and investments are made to address differences in health outcomes. Addressing food access is a focus area of many HEZs. 89
Equity

- **Identify the needs of communities of color that are rooted in and are exacerbated by systemic racism.** Dismantle these systems by creating racially aware and equity-focused policies that decrease disparities and increase access to healthy and nutritious foods for children and their families.

- Increase **cultural competency, reduce bias, and improve program outcomes** by providing and requiring equity training for all state staff, administrators, and school officials that interact with program participants. Hire diverse professionals and providers to meet the needs of participants.

- **Empower participants** by creating mechanisms for feedback and evaluation of programs. Acknowledge the value of the lived experiences of participants and provide opportunities for authentic participation in program design and implementation.

- Continue to **collaborate with community organizations** to effectively deliver programs and benefits including developing messaging that addresses family concerns, connecting immigrant families to available food and nutrition programs, and supporting the work of Health Equity Zones.

SNAP

- Pass federal legislation to **increase SNAP benefits** for all recipients.

- Increase access to SNAP incentives, which double the value of SNAP benefits when used to purchase fruits and vegetables.

- Ensure **adequate outreach to families** who may be eligible but not enrolled.

P-EBT/School Meals

- Continue **regular data matching** between the Rhode Island Department of Human Services and Rhode Island Department of Education to capture newly qualified families regularly throughout the school year so new families are included in the P-EBT program.

- **Continue P-EBT** during the summer months, incorporating lessons learned during COVID-19.

- Encourage districts and individual schools to participate in the Community Eligibility Provision (CEP) program for school meals by **decreasing financial barriers** to participation. Create new poverty measures for the education funding formula that do not rely on data collected from the school meal program application.

- Encourage all schools to offer breakfast at no charge to all students using the Community Eligibility Provision (CEP) if eligible or by implementing **Universal School Breakfast** in order to increase access to schools meals and reduce lunch shaming for students.

- Pass legislation requiring that high-poverty districts and schools provide “**breakfast after the bell**” as a key strategy for increasing school breakfast participation.

- Encourage all schools to offer “breakfast after the bell” through **breakfast in the classroom,** which is most effective at the elementary school level, or through “**grab and go**” or “**second chance breakfast**” models, which may be more effective at the secondary school level.

- Provide funding to **support districts and schools implementing alternative breakfast service** so they can purchase equipment and supplies like meal carts and tablets that make alternative breakfast service work more efficiently.
Raise awareness about how increasing school breakfast can be part of a comprehensive statewide strategy to reduce chronic absence, improve grade-level reading, reduce childhood hunger and obesity, and improve children’s emotional well-being.

Provide state funding to expand the Summer Food Service Program to reach more children experiencing food insecurity during the summer months.

WIC

Allow for WIC benefits to be used for online grocery shopping and ordering.

Allow WIC recipients to use their benefits to purchase food that further meets their families’ cultural and nutritional needs and preferences.

State and local WIC agencies, Medicaid, neighborhood clinics, and Head Start should implement innovative options for assisting WIC participants with transportation to stores that accept WIC benefits.

State WIC agencies should adopt and promote a one-year certification period for children, rather than requiring recertification semi-annually.

Resources for Children and Families

How to apply for WIC benefits

Find your local WIC site at https://health.ri.gov/find/services/detail.php?id=44.

How to apply for Supplemental Nutrition Assistance Program (SNAP) benefits

Apply online or download and mail in an application form found at http://dhs.ri.gov/Programs/SNAPApplyNow.php or call DHS at 1-855-MY-RIDHS (1-855-697-4347) for assistance.

How to apply for school meals

Contact your school or school district directly or find instructions on how to apply and downloadable forms at https://www.ride.ri.gov/cnp/NutritionPrograms/NationalSchoolLunchProgram.aspx#2138983-documents-resources--links-library

How to find a summer food service site

To find a summer food service site near you, visit https://www.ride.ri.gov/cnp/NutritionPrograms/SummerFoodServiceProgram.aspx#21421278-2020-summer-food-service-sites or reach out to the United Way of Rhode Island by calling 2-1-1 from any phone.

How to obtain food assistance through the RI Food Bank, pantries, and meal sites

To find a pantry or meal site near you, visit rifoodbank.org/find-food or reach out to the United Way of Rhode Island by calling 2-1-1 from any phone.

How to find other sources of food assistance for children and families

The Rhode Island Food Bank has information on other sources of food assistance for children and families, including school-based pantries, the Kids Café, and Meals4Kids Boxes. Find out more about these programs at https://rifoodbank.org/what-we-do/food-bank-programs/serving-children-risk/
R hode Island K I D S C O U N T  is a children’s policy organization that provides information on child well-being, stimulates dialogue on children’s issues, and promotes accountability and action.

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