

CHILDHOOD FOOD INSECURITY IN NORTH CAROLINA: Policy Recommendations for NC InCK

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*Composed by the 2020-2021
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EXECUTIVE SUMMARY

Childhood food insecurity (food insecurity) affects several domains of health, including developmental trajectory, cognitive performance, social-emotional and physical health.¹ We partnered with North Carolina Integrated Care for Kids (NC InCK) to provide recommendations around community-based resources and strategies to address food insecurity. We conducted 34 semi-structured interviews with informants from programs in various sectors to inform this work.

Identified Challenges	Recommendations	Strategies for Implementation
<p>Increased Need</p> <p>“We do know that there are kids out there that need that food... that’s what we’re really trying to bridge and not have any child hungry.”</p>	<p>Educate InCK partners and community providers to better connect families with resources</p>	<p>Strategy 1: Educate care coordinators to screen for and discuss food insecurity</p> <p>Strategy 2: Educate community organizations on how to better use NCCARE360</p>
<p>High Levels of Stigma</p> <p>“They don’t want charity. It’s embarrassing and it’s denigrating in a way for them to come and get food for free.”</p>	<p>Identify families who may benefit from additional food resources</p>	<p>Strategy 1: Screen for food insecurity using written methods</p> <p>Strategy 2: Encourage PHPs to conduct WIC outreach for all families with children age 5 and under</p>
<p>Enrollment in Federal Programs</p> <p>“A lot of times we hear that, “Yeah, I knew that they were serving free meals at school, but that’s not for my family.” When really, it is.”</p>	<p>Conduct outreach to reduce barriers to federal program enrollment and ensure equitable access to community resources</p>	<p>Strategy 1: Integrate services to increase enrollment in federal programs</p> <p>Strategy 2: Advocate for increased cross-program enrollment</p> <p>Strategy 3: Ensure equitable outreach by addressing language barriers</p> <p>Strategy 4: Conduct community conversations</p>
<p>Access and Enrollment in Community Services and Programs</p> <p>“There are some people that don’t get the support that they need because of where they live or because of lack of knowledge of how to get it...There might be a language barrier... might be because of lack of internet access.”</p>	<p>Connect more patients with food resources by reducing key barriers to access</p>	<p>Strategy 1: Connect patients with delivery resources</p> <p>Strategy 2: Use Uber and Lyft to address transportation barriers</p> <p>Strategy 3: Advocate to extend telehealth waivers for WIC and SNAP</p> <p>Strategy 4: Advocate to expand Food Insecurity Nutrition Incentive</p>

¹ (Gundersen & Ziliak, 2015; Fertig, 2018; Feeding America, 2012; Thomas, Miller, & Morrissey, 2019)

BACKGROUND

Childhood Food Insecurity: Long-Term Consequences

Childhood food insecurity affects several domains of health, including developmental trajectory, cognitive performance, social-emotional and physical health. Longitudinal studies show that children who experience FI any time are at higher risk for developmental delays.² FI is associated with lower rates of school readiness and consequently poorer academic outcomes, including lower reading and cognitive performance. These impacts extend into adulthood, where poor academic outcomes are correlated with worse economic outcomes.³

Childhood food insecurity is also associated with poorer social-emotional health.^{4,5} The severity of childhood FI is associated with increased long-term psychological distress. Food insecurity has been shown to be associated with many acute and chronic health conditions such as asthma.⁶ Poor health outcomes can continue into adulthood as well.⁷ The negative consequences of food insecurity are of particular importance for children who experience FI between birth and age 3, where their rapid development leaves them especially vulnerable to poor outcomes.⁸

Children in North Carolina experienced food insecurity at alarmingly high rates – even before the COVID-19 pandemic. Prior to the COVID-19 pandemic, nearly 1 in 5 (480,000) children in North Carolina lived in families experiencing food insecurity.⁹ Figures 1a and 1b detail current and projected childhood food insecurity rates for the five counties served by NC InCK.¹⁰ Food insecurity (FI) worsened during the pandemic, and racial and ethnic disparities also exist.¹¹ Racial and ethnic disparities also exist. As of 2016, Black, Non-Hispanic families were almost twice as likely to experience FI nationwide and these disparities have worsened since the COVID-19 pandemic.^{12,13}

² (Jyoti, Frongillo, & Jones, 2005)

³ (Hickson et al., 2013; Feeding America, 2012; Johnson & Markowitz, 2018)

⁴ (Hickson, et al., 2013; Johnson & Markowitz, 2018)

⁵ (Hatem et al., 2020)

⁶ (Gunderson & Ziliak, 2015; Fertig, 2018; Feeding America, 2012; Thomas, Miller, & Morrissey, 2019)

⁷ (Fertig, 2019; Thomas, Miller, & Morrissey, 2019)

⁸ (Black et al., 2012; Feeding America, 2012)

⁹ (Curran, 2020)

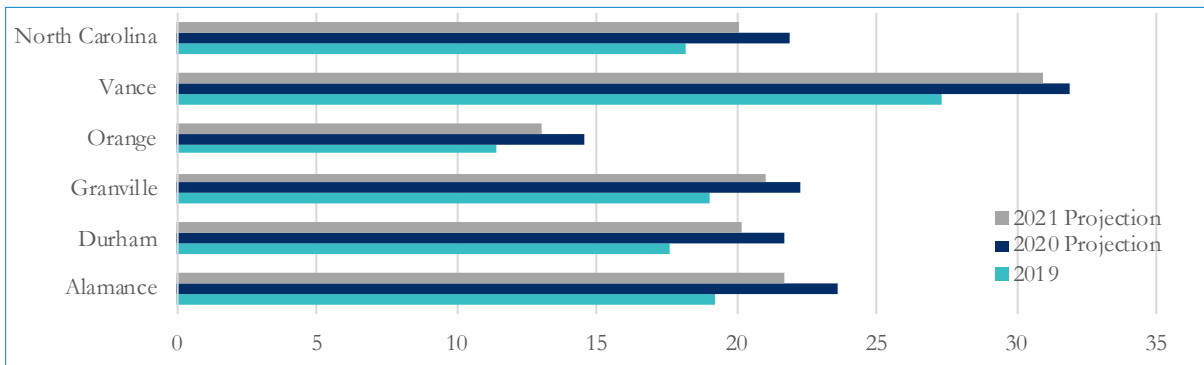
¹⁰ (Feeding America, 2021)

¹¹ (de Oliveira et al., 2020)

¹² (Healthy People 2020 Social Determinants of Health, n.d)

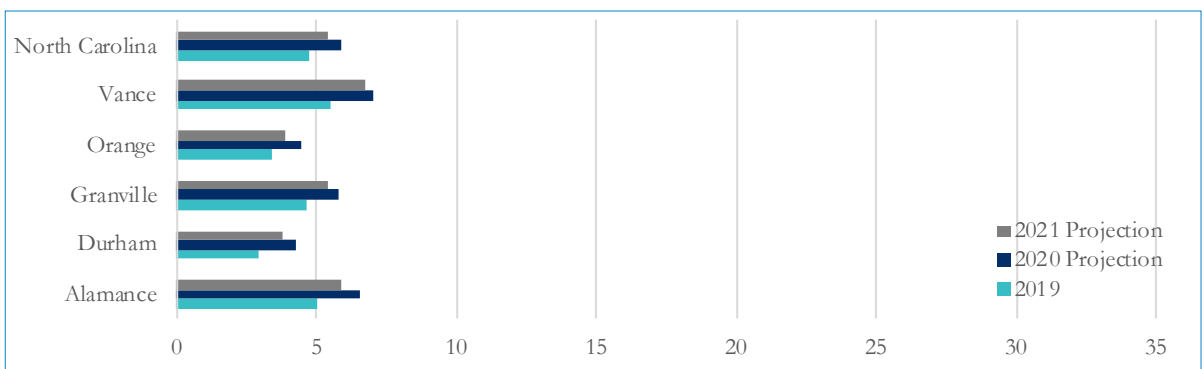
¹³ (Bauer et al., 2020; Feeding America, 2012)

FIGURE 1A. Childhood Food Insecurity Rates 2019-2021



* Food Insecurity is defined as: “a lack of consistent access to enough food for an active, healthy life”

FIGURE 1B. Childhood Very Low Food Security Rates 2019-2021



* Very Low Food Insecurity is defined as: “at times during the year, eating patterns of one or more household members were disrupted and food intake reduced because the household lacked money or other resources for food.”¹⁴

Addressing Childhood Food Insecurity in the Healthcare Setting

The American Academy’s Council on Community Pediatrics and Committee on Nutrition identify pediatricians as crucial players in screen for food insecurity, to connect children and families in need to community resources, and to advocate for their patients at both the state and national level.¹⁵

Within the NC InCK model, Prepaid Health Plans (PHPs) will be required (PHPs) to screen at least 80% of Medicaid recipients for food insecurity using the two-item screener below:

- 1. “We worried whether our food would run out before we got money to buy more.”**
Was that *often true*, *sometimes true*, or *never true* for your household in the last 12 months.
- 2. “The food we bought just didn’t last, and we didn’t have money to get more.”**
Was that *often true*, *sometimes true*, or *never true* for your household in the last 12 months.¹⁶

Families responding “often true” or “sometimes true” will screen positive for food insecurity.

¹⁴ (Feeding America, n.d.)

¹⁵ (Council on Community Pediatrics, & Committee on Nutrition, 2015)

¹⁶ (Feeding America, n.d.)

OBJECTIVE

We partnered with North Carolina Integrated Care for Kids (NC InCK) to investigate existing community-based resources and strategies available to address food insecurity. We then applied findings from local interviews and the literature to develop specific implementation recommendations. Our aim was to help NC InCK effectively implement the screening and care coordination process for families who are experiencing food insecurity.



Our recommendations will help NC InCK identify children at risk for food insecurity, educate family navigators and integration consultants, and conduct outreach to those children and families and the community, with the end goal of connecting families with food resources.

METHODS

To gather more information about food insecurity across the state, we conducted 34 semi-structured interviews. We recruited informants from programs based in various sectors, including community, school, religious, and government organizations (Figure 2). These informants either represented statewide programs or were from one of the five NC InCK counties. We asked questions covering 6 main domains (Figure 3).

FIGURE 2A. Informant Sectors

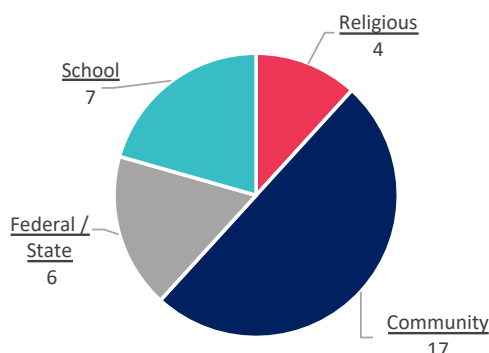


FIGURE 2B. Informant Geographic Breakdown

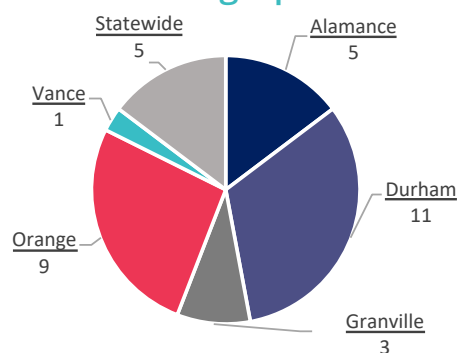


FIGURE 3. Interview Process



We asked questions covering 6 main domains:

1. Programmatic details
2. COVID-19 specific changes
3. Referrals, client engagement, program evaluation
4. Community engagement
5. Gaps & solutions
6. Leading conversations about food insecurity

The majority of the community and religious organizations we interviewed were direct service food distribution sites, but we also spoke with advocacy groups and one food collaborative. Food collaboratives often consist of partnerships between various agencies, organizations, and businesses working to address food insecurity. Within schools, we interviewed school nutrition directors and social workers to understand the school's role in food distribution to children eligible for federal food services. We also spoke with NC directors of federal programs to better understand statewide initiatives for tackling food insecurity.

We then used rapid qualitative analysis and a resulting matrix to inform our findings for NC InCK.¹⁷ Based on our qualitative findings, we completed a review of the literature and relevant landscape analyses to understand current context around the barriers we identified. We synthesized our findings and existing literature to best design recommendations in four key domains: education, identification, outreach, and connection.

FINDINGS

Current Resource Landscape

Even though the scope of our interviews centered on programs combating youth food insecurity, many organizations had target populations that expanded beyond children. Populations served typically included whole families, seniors, and low-income individuals. Several programs tried to embrace an “open to all” approach and several do not require any form of identification to access services.

We found that many community-based programs did not require referrals, and word of mouth was consistently used to share information with others (n=20). Informants shared that school social workers played an important role in identifying food insecurity and connecting families with school and community resources (n=8). Importantly, school social workers, not school nutrition staff, remain the key point of contact to connect students with community food resources due to the confidentiality regulations nutrition directors must follow.

NCCARE360 was one of the least-used methods of referrals as only 2 programs currently utilized the platform. In fact, approximately a third of the informants we spoke with were unfamiliar with NCCARE360. A key barrier cited by organizations regarding their use of the NCCARE360 platform was the consent form (n=6). Informants felt that the wording was difficult to understand and some clients were afraid the platform might not be secure. For many community-based organizations, there is no guide on how to address questions about consent. Additionally, some organizations knew about NCCARE360, but were concerned that they did not have the time and energy to learn how to use it as it did not appear user friendly.

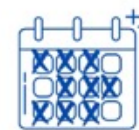
We found that collaboration to identify children and families experiencing food insecurity occurs both within and across sectors. For example, within sector collaboration occurred at schools among school lunch staff, social workers, and nurses to help ensure that students’ food needs are met. We also found frequent collaboration among Federal Nutrition Services (FNS), Department of Social Services (DSS), and Department of Health and Human Services (DHHS). Community-based organizations most frequently shared food, money, and volunteers. Six informants mentioned sharing information or data. This tended to be aggregate or evaluation data – we only spoke with one organization that shared individual level data. Sharing individual level data requires data sharing agreements, and several informants mentioned privacy regulations as a prominent barrier.

COVID-19 Specific Findings

Our COVID-19-related findings demonstrate how the pandemic has increased the need for food assistance programs. Because schools closed, public school districts implemented daily and weekend meal pick-ups and created new pick-up schedules. Additionally, informants emphasized that lack of access to transportation was a primary barrier for many families. COVID-19 also brought about a heightened awareness of food insecurity and increased generosity in the community. However, despite being able to adapt quickly to the pandemic, informants revealed that programs worry that they may not be able to maintain these adaptations in the future, especially if community support dwindles.



Increased Food Need



Weekend Pickup Sites



Heightened Awareness



Sustainability Concerns

General Findings: Key Barriers to Accessing Food Resource Programs

Through interviews and a review of the literature, we identified several key barriers that individuals experiencing food insecurity individuals face when accessing food resource programs: (1) lack of transportation, (2) stigma, (3) technology and language barriers, and (4) a lack of access to federal programs. NC InCK can address these gaps directly through the design of their care delivery and payment models, as well as advocate for funding from sources, such as the American Rescue Plan Act, to enhance the impact of services in these areas.

Transportation

One of the major barriers that individuals and families face in their effort to receive food resources is transportation. In 71% of our interviews, informants cited transportation as a key challenge faced by families facing food insecurity (n=24).

“the ability to have resources to get everybody to where... It’s hard. During this day and time, we don’t think about people who don’t have transportation because we just go out and get in the car and go. I can’t go to all of them, but it would be nice to be able to go to all of them.” (rural community program)

“transportation immediately carries over into the other federal nutrition programs ... it’s either how you get the food to the child or the child to the food and transportation is the key to that and if your family is so poor, that they don’t even have a working vehicle, they’re never going to get a child to a site...If they now have to choose between medicine or fixing that carburetor... they’re going to try to get medicine, they’re trying to get food to their kids first. Transportation is a really big issue.” (statewide community program)

Informants shared that COVID-19 and the shutdown of typical school meal distribution programs further exacerbated transportation challenges. Schools found innovative ways to get food to students, including putting food on buses. However, many schools are unsure whether they will be able to continue these practices due to United States

“But now they’re home and that bus can’t get to where they are.”

Department of Agriculture (USDA) requirements for congregate summer feeding, which state that students must be present to receive a summer meal and eat at the location where it is given.

“Because if that kid was in school, they would be receiving that meal, because they have no choice at school. But now that they’re home and that bus can’t get to where they are, because the bus isn’t allowed to go down that road, we chose to take it upon ourselves... they have no transportation. When we talked to the one lady that had two small ones and she was pregnant and she’s like, ‘I have no transportation.’” (school-based program)

Informants also shared that the lack of transportation is exceptionally challenging in rural communities due to the lack of public transportation, poor road quality, and overall geographic distance.

“We try to match up with our public transportation, but we have a pretty big part of our county is rural so there’s just absolutely nothing in those parts of the county. That’s really tough” (rural community program)

“So yes, there’s this big rural need out here and I’m going to try my best to reach them, they got transportation issues, they got access issues, they’ve got jobs, long hours... we don’t have the buses. The buses can’t get down on some of those dirt roads and those windy mountain roads...” (statewide community program)

Stigma

Among our informants, 32% mentioned stigma surrounding food insecurity programs (n=11). They reported that people are hesitant to accept help due to fear of judgment or shame.

“Everybody knows everybody, [and] everybody is a relative of everybody. They don’t want to come in our parking lot and risk somebody seeing them, that they’re here” (rural community program)

Informants shared that fears of stigma can be especially prevalent in close-knit communities where members internalize community beliefs around accepting food resources.

“We’re in a very conservative community. I’m not making it political, it’s just the way it is. They hear these negative stereotypes... if you’re brought up in a community with that ideology, it’s going to prevent you from asking for help.” (rural community program)

Interviewees noted that stigma is especially prevalent amongst teenagers in school systems that do not provide free meals to all of the students or where subsidized meal programs do not have high levels of participation.

“Everybody usually goes to get lunch... but only the poor kids show up for breakfast... the embarrassment of going to get breakfast when it’s not offered to everyone is so strong that you have high school kids who’d rather go hungry than to be seen down there, claiming their free breakfast.” (statewide community program)

Because of the stigma surrounding food insecurity, some programs try to limit the interaction they have with clients to increase privacy and avoid the possibility of personal identification. For example, many public-school programs operate backpack food assistance programs to avoid interaction with individual children.

“When people get hungry, they still have their pride, but they have to eat... The beauty of our program and most of the programs in town now is that we have very, very little interaction with them.” (religious program)

“We don’t ask for any qualifications. We assume that they come for food, it’s because they need the food.” (religious program)

Other programs see relationship building as the way to help clients overcome feelings of shame and embarrassment when seeking food resources.

“I think that’s one of the areas that we’re taking a look at, is having more honest conversations with those families. They already know they’re in need, we’ve got to really dig more deep down, and we’ve got to help them to understand that they’re worth that need, they’re worth that assistance, and just try to get them to understand that those stereotypes that they bought into for however long, it’s just a lie”. (rural community program)

Food Choice

Individuals that use food pantries often lack nutritious, culturally appropriate food choices that meet their dietary needs. Of our informants, 38% mentioned the lack of nutritious, culturally specific food as a barrier they would like to address (n=13).

“We are kind of limited as it relates to the type of food that we provide... If they have dietary restrictions, we don’t always get that feedback from the partner agency, but we know that it exists. We know that there are some clients that our partner agency serves who may be getting the food, but it may not be things that they can actually eat. Or may not be culturally fit.” (community program)

Specifically, informants mentioned a need to increase access to fresh produce and appropriate foods for the Latinx community.

“A lot of the folks we serve are Latinx community and you do not find often what they would like to get for themselves at a food pantry. It’s all this very standard processed stuff and not always culturally appropriate for the families we serve.” (rural community program)

A few informants mentioned that individuals may not be choosing nutritious foods due to culturally driven food practices and lack of .

“Here it boils down to some cultural issues whereas a lot of our families weren’t raised to understand healthy eating. When you have families in a food desert, there’s always a McDonald’s nearby or a convenience store so a lot of our kids are raised on what we would call junk food” (rural community program)

Several informants reported they were able to distribute grocery gift cards during the pandemic. Clients enjoyed the gift cards because the cards allowed them to choose their own food, and they also reduce the shame associated with participating in food assistance programs.

Access to Federal Programs

Individuals also face barriers when trying to enroll in federal food programs.

“Looking at ways to streamline that appointment experience.”

In 2017, only 52% of eligible North Carolinians enrolled in WIC and only 40.7% of eligible children ages 1-5 enrolled in WIC. Nationally, WIC coverage rates for children have been steadily declining since 2012.¹⁸ Informants shared several barriers which may contribute to these low enrollment numbers. One informant explained that the application process can be burdensome for many clients. Some clients lack transportation and the necessary technology access to apply for benefits either online or in-person. The paperwork can be quite extensive and language barriers make it challenging for many families to apply. Additionally, clients have to attend multiple in-person appointments, which can be lengthy and often involve long waits.

“Typically if someone went online and completed [a] referral form, that would come to our office and we would pass it out to the responsible local agency and they would make contact with that potential applicant and schedule an appointment... they’re also trying to survive a three hour appointment with their kid, their toddler. So making the environment welcoming, looking at ways to streamline that appointment experience with the local agencies” (federally sponsored program)

¹⁸ (Food and Nutrition Service: U.S. Department of Agriculture, 2020)

School nutrition informants shared that the National School Lunch Program, especially the summer feeding program, is governed by regulations that limit child access. There is typically a congregate feeding requirement, which states that students have to be present to receive a summer meal and must eat at the location where it is given. Schools are also not typically allowed to put meals on buses to help with access barriers.

“It’s normally just so many restrictions. If they would relax some of those things and not tie our hands so much, I think it could be a more successful program, as far as feeding kids.” (federally sponsored school program)

Even for lunch offered during the school year, informants mentioned burdensome paperwork that may deter some families. During the COVID-19 pandemic, the lifting of several regulations led to an increase in participation.

Discussing Food Insecurity

Informants offered advice for providers discussing food insecurity with clients (n=6). Informants described the

“That helps them to feel like they’re not in this journey alone.”

benefits of care coordinators learning key information about their clients including demographics, language, and schedules to inform interactions. Three informants emphasized the importance of discussing food needs in a manner that the client can understand. Strategies include using a language the client is comfortable speaking, using short, simple sentences,

and conversing at an approximately second grade reading level.

Informants also shared that coordinators should be aware of feelings of shame clients may feel during these discussions. Informants recommended open, empathetic conversations to help clients feel supported.

“So being... empathetic towards the families. Also, I guess not being judgmental because sometimes the families are in a vulnerable state... And so, making sure that we come across very understanding, patient, and also trying our best to help them to understand we’re not here to necessarily fix the problem but we want to be able to help you to be in a better place than you were yesterday...” (community program)

Some families may feel more comfortable discussing food needs in writing to minimize uncomfortable in-person interactions. Additionally, informants suggested that some families may feel more comfortable discussing other needs, such as bills or rent, instead of food insecurity. Informants shared that these discussions may serve to alert care providers that access to food may also be a concern, or that federal food benefits could alleviate general financial struggles for a family.

“[Food insecurity is] something that I’ve had to extract... they’ve talked broadly about struggling to pay bills and struggling to pay for other things and the question often, talking to the client, along with one of the social workers on our team has been, “Have you considered SNAP? Would this be something that could reduce your household expenses?” And sometimes we talk in the way of talking to clients through ‘are there some things we could help you get that could free up expenses for other things?’... [food insecurity] comes out in that context a little bit more than someone coming out directly and saying I’m having trouble affording my groceries” (community program)

Select informants also emphasized the importance of follow up (n=2). One informant recommends providing clients with a business card and phone number, so the client can be the one to initiate contact as needed.

“I’ll give them a business card. I’ll say, “I’ll follow up with you in two days, but if you need to get in touch with me sooner than that, here’s my contact information. You can call me.” So then, that helps them to feel like they’re not in this journey alone, but that they have somebody else that’s there supporting them and that they’re able to reach out to them if they needed to and stay connected. (community program)

Additional recommendations include scheduling follow-ups regularly, especially for clients who seem to need more assistance following through with a referral and sending a follow-up note documenting action steps after meeting with a client.

“The ones that we were able to assess and see that mentally and emotionally they’re really down, “Let me just go ahead and put a little side note on my schedule to follow up with that specific family just to make sure that they were able to get the food that they needed or the information resources.” (community program)

“We try for patient centered care... if they need immunizations, if they need dental care, housing, domestic violence all of those, we feel like they should at least look into whether or not they’re eligible... those referrals are made at the local agency.” (federally sponsored program)

“They are afraid that the immigration police will come.”

Informants also mentioned the importance of privacy and ensuring that clients know what specific information will be shared and with what agencies or organizations. Privacy is especially important for clients who may have undocumented family members and who are uncomfortable sharing any sensitive information.

“One thing that you need to understand is that the Latino community, primarily undocumented, they don’t like to share anything. They don’t like to put their name in any place, they put the phone number or anything because they are afraid that the immigration police will come and deport them” (religious program)

SUPPORT FROM EXISTING LITERATURE

Transportation

Recent literature supports our interview findings regarding transportation barriers. According to research, lack of transportation is directly tied to food insecurity and can be due to either the lack of owning an automobile or being able to pay for gas, or the combination of the two.¹⁹ People who live in rural areas have to travel farther for food resources and have a more difficult time accessing nutritious options.²⁰ In addition, communities without public transportation options have a more difficulty accessing food resources. Rural communities are more at risk in situations where public transportation lines do not stretch far enough to include all members of the community. Furthermore, areas of high poverty, communities that are historically marginalized, and food deserts receive less access to food resources.²¹

During the COVID-19 pandemic, families were less capable of accessing food resources due to risk of potential exposure to the virus. For many families, exposure to COVID-19 could mean having to take time off work, exposing members of the family who are immunocompromised, and increasing medical fees. Families may have been less inclined to use public transportation resources during the pandemic or may not want to leave the home at all.²²

Stigma

As we found in our interviews, stigma is one of the most prevalent barriers to food resource acceptance rates and can have a very high physiological burden on individuals.²³ One study found that up to 27% of people would not use public welfare under any circumstance due to fear of stigma and the shame associated with utilizing these resources.²⁴ Federal data also supports these findings. Instead of participating in food resource programs, studies show that families often engage in a variety of strategies such as portion control, bargain shopping, and gardening in order to avoid the stigma associated with receiving assistance.²⁵ Studies have found many residents of rural communities are unlikely to participate in SNAP because they feel pressure to be self-reliant and associate accepting food resources with shame.²⁶

Food Choice

Research also demonstrates that food pantries may lack nutritious food choices that meet dietary and cultural needs. Many food pantries lack healthy food inventory and give clients pre-selected food packages, limiting client choice.²⁷ Even choice food pantries may fail to address the cultural food preferences of immigrants.²⁸

¹⁹ (National Institute for Transportation and Communities, 2017)

²⁰ (Calloway et al., 2020)

²¹ (McLoughlin et al., 2020)

²² (Bolster, 2021)

²³ (Mickelson & Williams, 2008)

²⁴ (Aleccia, 2013)

²⁵ (Vissing, Jones, & Gabriel, 2017)

²⁶ (Haynes-Maslow et al., 2020)

²⁷ (Wetherill et al., 2018; Bryan et al., 2019)

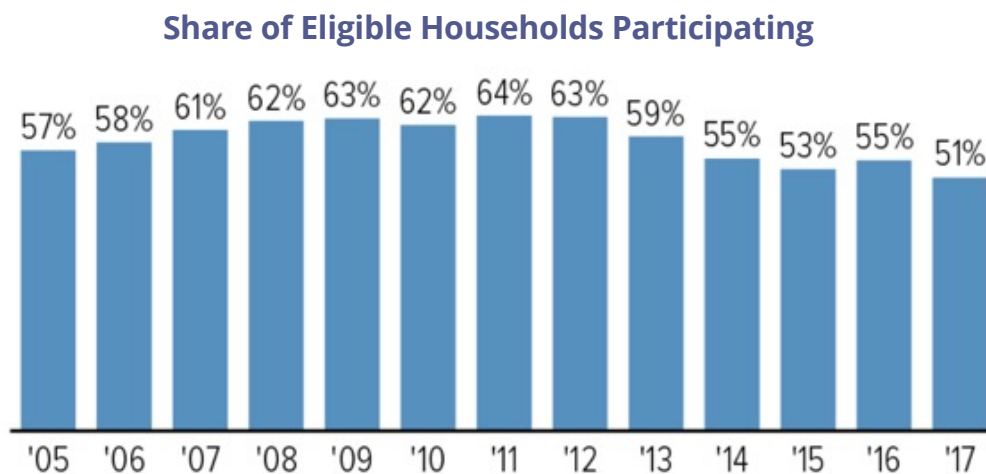
²⁸ (Remley et al., 2010)

Some informants believed that clients may not be choosing nutritious foods due to cultural or health information gaps. However, research shows that nutrition knowledge may not be enough to improve dietary quality in households with food insecurity. An emphasis on nutrition education may actually worsen stigma by suggesting that individuals experiencing food insecurity simply do not want to or do not know how to make healthier choices.²⁹ One source articulated how “the assumption that people do not make healthy choices due to knowledge deficits is problematic and renders people experiencing food insecurity as incompetent, rather than as active social agents responding pragmatically to a lack of resources.”²⁹ In reality, food pantry clients face a number of barriers to healthy eating including financial uncertainty, the high cost of nutritious foods, lack of time to prepare food, lack of transportation, lack of nutrition knowledge and lack of a strong social support network.³⁰

Access to Federal Programs

In 2017, only 52% of eligible North Carolinians enrolled in WIC and only 40.7% of eligible children ages 1-5 were enrolled in WIC. Nationally, WIC coverage rates for children have been steadily declining since around 2012.³¹ Meanwhile, 85% of eligible North Carolinians currently enrolled in SNAP. Studies have documented the administrative burdens discussed in our interviews (transportation, technology, paperwork, burdensome appointments) as barriers to enrollment.³²

FIGURE 4. WIC Coverage Rates Have Trended Downward Since 2011



Source: U.S. Department of Agriculture, “National and State-Level Estimates of Special Supplemental Nutrition Program for Womens, Infants, and Children (WIC) Eligibility and WIC Program Reach in 2017” December 2019.

Center on Budget and Policy Priorities | CBPP.org

<https://www.cbpp.org/research/food-assistance/streamlining-and-modernizing-wic-enrollment>

²⁹ (Graham et al., 2018)

³⁰ (Dave et al., 2017)

³¹ (Food and Nutrition Service: U.S. Department of Agriculture, 2020)

³² (Moynihan et al., 2015)

RECOMMENDATIONS

To align our recommendations within the proposed NC InCK processes, we designed our recommendations to follow a proposed roadmap which includes education, identification, outreach, and connection.



RECOMMENDATION 1:

Educate NC InCK and community providers to better connect families with resources

Strategy 1: Educate Care Coordinators to Screen for and Discuss Food Insecurity: Encourage PHPs to train community health workers as family navigators and as community outreach leaders. Family navigators and integration consultants need [additional training](#) on federal program eligibility requirements and which programs may offer adjunctive eligibility with Medicaid (WIC and NSLP).

North Carolina DHHS offers a [community health worker certification](#) and several NC Community Colleges offer 30-60 hour community health worker training courses. Community health worker certification consists of completion of state-sponsored training modules on communication, capacity building, service coordination, interpersonal, advocacy, and outreach skills.

Strategy 2: Educate Community Organizations to Better Use NCCARE360

- 1. Increase awareness:** NC InCK can increase awareness of the platform by advertising trainings to help community organizations understand the benefits and learn to use it.
- 2. Address consent barriers (ensure privacy):** Create guidelines for community-based organizations to help them answer client questions about how data will be shared and the ramifications of a client choosing to submit information. Advocate for the consent form to be offered in multiple languages.
- 3. Address Usability Issues:** Advocate for NCCARE360 to improve functionality of the website including search functions, speed, ability to process forms, and features important to child-centered programs like school system information and other childcare related data.

RECOMMENDATION 2:**Identify families who may benefit from additional food resources**

Strategy 1: Screen for Food Insecurity Using Written Methods and Follow-up Procedures: Research reveals that written screenings produce the most honest responses and that patients prefer them.³³ Email or text message screenings from PHPs could be implemented as a first screening step. If PHPs struggle to reach 80% response rate, they could follow up with a paper screening included in intake forms at visits for non-responsive patients. More intensive screening could include phone calls or home visits. We recommend that all screening be translated into multiple languages and that screening should be conducted through an equity lens. PHPs may struggle to reach the most disadvantaged families, and this should be considered when employing screening measures.

Strategy 2: Encourage PHPs to Conduct WIC Outreach for All Families with Children Age 5 and Under: Families enrolled in Medicaid are adjunctively eligible for WIC - meaning they do not need to submit new income information to be eligible. [Evidence from randomized controlled trials](#) suggests that identifying families who are eligible for WIC, but are not participating, would benefit from text message outreach to boost participation.³⁴

Strategy 3: Encourage PHPs to Conduct outreach for all families eligible for national and state food programs: Families who are enrolled in Medicaid may be eligible for a number of other means, tested programs including SNAP and the NSLP. Care coordinators should ask families about their utilization of these programs and assist with enrollment where possible to improve access to food resources.

RECOMMENDATION 3:**Conduct outreach to communities to reduce barriers to federal program enrollment and ensure equitable access to community resources****Strategy 1: Integrate Services to Increase Enrollment in Federal Programs:**

- Co-locate WIC staff in clinics or schools. In a study examining attitudes of WIC beneficiaries enrollment at a pediatrician's office, found 100% of beneficiaries who had missed a WIC appointment believed it would be easier to recertify in the physician's office.³⁵ Some co-location of WIC staff is happening in DSS offices in North Carolina, but this could be expanded. For example, Houston has multiservice centers that co-locate WIC, food pantries and health clinics that may serve as a model for co-location.³⁶
- Locate application kiosks in clinics, schools, or other food resource locations where clients can complete online applications for federal programs. Guilford and Forsyth counties already have co-located kiosk pilots and the implementation of these kiosks should be expanded to the NC InCK counties.

Strategy 2: Advocate for Increased Cross-Program

Enrollment: Privacy laws create data sharing challenges. InCK can advocate to expand data sharing using the following exemplars:

**Co-Location in Action:
BROOME COUNTY, NY**

The Broome County Department of Social Services in New York has a co-location partnership with Binghamton public schools. In 2017, six elementary schools in Binghamton began a partnership with the Broome County DSS. DSS places child welfare caseworkers in each elementary school to assist families with a variety of needs. These caseworkers have access to services and information from DSS that a typical school social worker would not be able to access.

³³ (Palakshappa et al, 2020)³⁴ (Maneely & Neuberger, 2021)³⁵ (Chang et al., 2015)³⁶ (Crosnoe et al., 2012)³⁷ (United States Department of Agriculture, 2018)

- Direct Certification: Schools pull in SNAP data to directly certify children for free and reduced-price lunch, which has proven to be effective.³⁷
- Fifteen states have piloted direct certification through Medicaid as well, with promising results.³⁸
- Through the Partnership to End Childhood Hunger in Maryland, the Maryland Department of Human Resources uses free and reduced-price lunch data from the Maryland State Department of Education to conduct targeted outreach about SNAP to qualifying families.³⁹
- During the COVID-19 pandemic, SNAP and DPI put new data sharing agreements in place to roll out P-EBT, demonstrating that these agreements are possible when the right motivating factor is in place.

Strategy 3: Ensure Equitable Outreach by Addressing Language Barriers: Employ bilingual care coordinators to ensure patient-facing InCK and NCCARE360 paperwork is translated into multiple languages. Patient-facing written communication should be on an *upper elementary reading level* (approximately fifth grade).⁴⁰ Intake forms for community food agencies should also be offered in multiple languages.

Strategy 4: Conduct Community Conversations: Conduct community listening sessions and disseminate findings to providers addressing food insecurity. Listening sessions can provide insight into how to decrease stigma, promote safe spaces, engage in dialogue surrounding food insecurity and need, and reduce other access barriers.

RECOMMENDATION 4:

Connect more patients with food resources by reducing key barriers to access

Strategy 1: Connect Patients with Delivery Resources:

Care coordinators should ask clients about their transportation needs and keep a list of food resource organizations that will deliver. See Appendix B for a list of available programs. InCK can also encourage more pantries to offer delivery services.

Strategy 2: Use Uber and Lyft to Address Transportation Barriers:

- Lyft currently operates grocery access pilots in [Raleigh](#) and in [Charlotte](#). Residents can get deeply discounted rides to grocery stores and food pantries.
- [Uber Health](#) allows healthcare organizations to arrange rides to healthcare appointments for patients. The dashboard is HIPPA compliant. Uber has partnered with [Feeding America](#) to expand Uber Health to include food resource locations as well.

DELIVERY CASE STUDY: EAT NC

EAT NC began to fill a delivery gap created by the pandemic. EAT NC offers both family and school meal delivery services, made possible by volunteer drivers. They provide a range of food options including frozen meals made by local restaurants, fresh produce, and school meals.

LYFT AND LOAVES & FISHES

Lyft, Loaves & Fishes and other community partners collaborated on a 6-month grocery access pilot (Aug. 2019-Jan 2020). The pilot provided 75 Charlotte families living in food deserts with discounted rides to grocery stores, farmers markets and food pantries. Residents received eight one-way \$2 flat-rate rides each month.

³⁸ (Hulsey et al., 2020)

³⁹ (Lee et al., 2015)

⁴⁰ (Wilson, 2009)

Strategy 3: Advocate to Extend Telehealth Waivers for WIC and SNAP: COVID-19 prompted the expansion of telehealth for federal food program appointments. Telehealth can decrease accessibility barriers including scheduling and transportation. Researchers and policymakers alike suspect that enrollment in WIC increased in North Carolina as a result of the institution of [telehealth appointments](#). Consultants are now able to schedule telehealth appointments more flexibly, allowing for availability outside of 9-5, work hours further decreasing scheduling barriers. The American Rescue Plan will provide funding for WIC to modernization, which can be used to implement these [recommendations](#).

Strategy 4: Advocate to Expand Food Insecurity Nutrition Incentives: Work with Reinvestment Partners in Durham to expand SuperSNAP incentives and eligibility. The SuperSNAP program provides \$40 per month at Food Lion stores across NC and can be used to buy fresh, frozen, and canned fruits and vegetables without added sugar, salt, or fat.⁴¹ Currently, a patient in North Carolina must have an approved medical condition to qualify for SuperSNAP. InCK can advocate to convert SuperSNAP from a produce prescription to an incentive program to allow more people to qualify.

FOOD INSECURITY NUTRITION INCENTIVES (FINI)

FINI are USDA programs created under the 2014 Farm Bill. The farm bill offers funding for either SNAP incentives or Produce Prescriptions. FINI programs incentivize produce purchasing by matching SNAP dollars families spend on fresh produce. These have typically been redeemable at farmer's markets but more recently, states have developed programs where they are redeemable at grocery stores. This is a promising change because many informants reported concerns about access to farmer's markets from interview informants. One study of transactions at 32 grocery stores found that the program does increase purchasing of fresh produce for SNAP recipients.

[Reinvestment Partners](#) in Durham runs the FINI initiative in the Triangle under a USDA grant. SuperSNAP, a produce prescription program, is the largest FINI program, serving clients across the state. An individual experiencing food insecurity must be a patient at a participating clinic, a current SNAP recipient, and have a qualifying medical condition. The individual will receive up to \$40 each month on a Food Lion MVP card after spending the same amount on produce at participating Food Lion stores. During the COVID-19 pandemic, Healthy Helping was a similar program available to all SNAP recipients affected by the pandemic, regardless of medical condition. This program expired December 30, 2020.

Sources:

Fair Food Network, Rummo et al., 2019, Reinvestment Partners.

⁴¹ (Reinvestment Partners, n.d.)

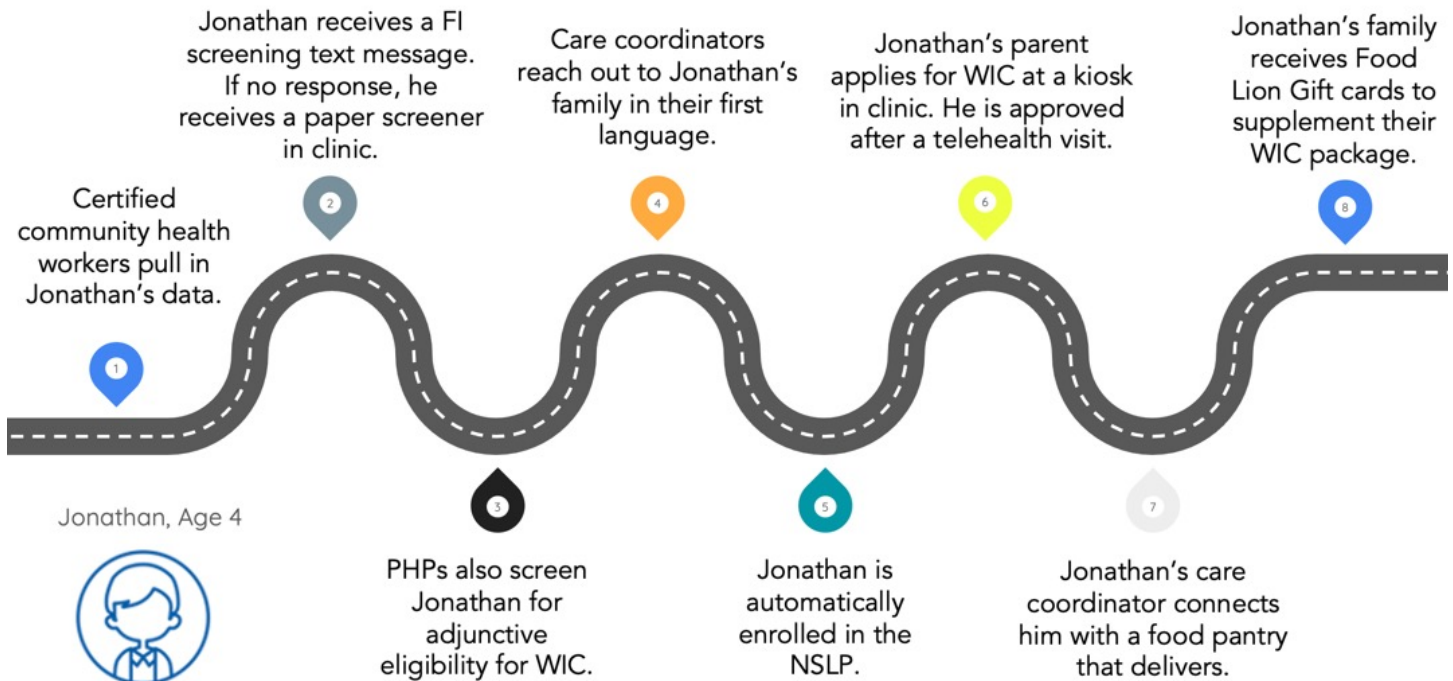
SUMMARY

Below, you can see the journey that a hypothetical patient, Jonathan, might take once he is enrolled in InCK if all of our recommendations come to fruition.

First, care coordinators will access Jonathan's information, and then PHPs will reach out with a food insecurity screening form screener and check to see if Jonathan is eligible for WIC. Care coordinators will then reach back out to Jonathan and he will be enrolled in the school lunch program automatically since he is on Medicaid. Once his parent finds out he is eligible for WIC, they can apply at the clinic and get approved through telehealth. Jonathan is also connected with a food pantry delivery for weekends and receives a Food Lion gift card in his pantry delivery box.

This roadmap depicts a vastly different road than the one families currently experiencing food insecurity must navigate. Our recommendations would put Jonathan on a very different trajectory for the future.

FIGURE 5. Food Insecurity Roadmap



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Appendix A: Informant Interview Guide

Topic 1: Confirm Face Sheet Details

To start, we would like to confirm some information that we found about your program online.

1. We found that your program is based in ____ {insert type of program here} and provides ____ {insert types of services provided} for mainly _____ {insert population here, e.g. children from birth to age 5}.
 - a. Is that correct?
 - b. Is there anything you would add?
2. We also found that you are open {insert a broad overview of the times}.
 - a. Is that correct?
3. Lastly, we found you served approximately ____ {insert size of program, e.g. number of people per week/year}? Is that correct? OR Lastly, we were wondering about how many people your organization serves a week/month/year?

Is there anything else important you would like us to know about your program overall before we move on to the next section?

Topic 2: Referrals, Client Engagement and Program Evaluation

To start, we would like to confirm some information that we found about your program online.

1. How do people find out about your program? Are clients referred to your program?
 - a. Potential probes: Who can refer? Can clients self-refer?
2. Can you explain the specific referral or engagement process for clients who engage with your program?
 - a. For example, what happens once a potential client finds out about your program? What are the steps that must be taken for them to receive services?
 - b. Do you require appointments?
3. Are you familiar with NCCARE360?
 - a. If yes: Do you currently use NCCARE360 for referrals?
 - i. If no, do you plan to?
 - ii. If no, what are the barriers to using NCCARE360?
 - b. If no: NCCARE360 is the first statewide network that aims to connect community organizations to healthcare settings that are increasingly screening for social needs, like food insecurity. It allows for electronic placement of referrals to community resources and also incorporates a feedback system for those placing the referral. I can provide a link to more information online if you are interested in learning more after the interview.
 - Do you measure the food needs of the individuals coming to the program? If so how, and how do you track this?
 - Do you have a specific assessment procedure for children?
 - Can you tell me about how you track utilization of your program?
 - What specific measures do you track and over what time period? For example, number of people using the program, how much food is provided, etc.
 - What are your processes if you think an individual meets criteria for further services, such as SNAP/WIC (if food pantry), more food weekly (if SNAP/WIC), etc.?
 - If you do connect someone with another resource, do you have a way of tracking if your referrals are utilized?
 - How do you measure the success of the program, if at all?

Topic 3: Community Engagement

Now we are interested in hearing more about other organizations and individuals you collaborate with and your organization's network.

- Can you list some of the organizations that your organization works most closely with?
 - Note if they say there are many: Could you please list the 5 most important organizations your program collaborates with?
- Can you tell me about what kinds of resources you share with organizations on your network list? For example, these resources might include food, supplies, financial resources, or staff/personnel.
 - How frequently do you share or receive resources?
 - For those organizations reporting networks: Can you tell me how the collaborations you've described improve the services you offer for your clients?
- Probe: Would you like to develop more collaborations?
- Probe: What are you looking for from these collaborations?
- Does your organization engage with community members or other stakeholders beyond providing food assistance?

Topic 4: Gaps

Next, we are interested in hearing more about the gaps in services your organization sees and the potential opportunities to address these needs.

- If you had to identify one thing that could better address the food needs of children in your community, what would it be?
- What specific gaps, if any, do you see in your program and or the provision of food resources to populations in need?
 - a. Are there any groups or populations your program is not reaching that could use more services? If so, who? What prevents you from serving these other populations?
 - b. What or who are solutions that you imagine could fill those gaps?
- Would you be interested in being contacted by InCK to discuss a potential partnership with their program?

Topic 5: COVID-19

Finally, we would like to hear how your program has been impacted by the COVID-19 pandemic.

- How has COVID affected your organization?
 - Has it affected the number of people seeking the service your organization provides? How?
 - Have you changed your communication strategy with clients due to COVID? How?
 - Have you made any modifications to your services due to the pandemic?
 - If yes, what changes have been made? How do you anticipate these changes affecting your services in the future as things improve?
- What have you learned about your program or what has changed as a result of COVID that will stick with your program?

As a final questions, do you recommend any other programs/individuals we should reach out to help us with this project. If so, do you mind providing their name, email and the program they work with?

Name _____
 Organization/Affiliation _____
 Contact information _____

Conclusion

Thank you for your time spent answering our questions. May we contact you by email or phone if we have any follow-up questions?

Appendix B: Available Food Assistance Programs

Alamance County					
Program Name	Website	Program Type	Phone Number	Email	Summary
School Based Programs					
Alamance Burlington Public Schools School Nutrition Services	https://www.abss.k12.nc.us/Page/45872	School	336-438-4000 Ext. 20061	pamela_bailey@abss.k12.nc.us	Alamance is offering school breakfasts and lunches at school pick-up sites. Bus Drivers are also delivering meals to school bus stops. Lunch is served from 11:30-1pm daily.
Mac's Food Truck	https://www.meals-foralamancecounty-students.org	School / Religious	336-226-4343	C4C@fumcgraham-nc.org	Food truck donated to the district to deliver school lunches during the summer / COVID. Schedules are posted on Facebook.
Backpack Buddies		School / Community		Elizabeth Sutton: fruccfamily@gmail.com	
Government Programs					
WIC - Alamance County	https://www.alamance-nc.com/health/programs-services/105-2/	Government	336-570-6745		Call ahead for an appointment. Walk-ins are welcome but you may have to wait. Office Hours: M-F 8:00-5:00. The 1st-4th Mondays of each month have extended hours from 5:00pm-6:00pm. You must be seen in person to apply. The health department is located at 319 North Graham-Hopedale Road, Burlington, NC 27217
SNAP - Alamance County	https://epass.nc.gov	Government	336-570-6532	askdss@alamance-nc.com	Apply for SNAP online through ePass. Alamance County DSS is open Monday-Friday from 8:00am-5:00pm. 319 North Graham-Hopedale Road. Burlington, NC 27217
Community / Religious Programs					
Healthy Alamance Farmers Markets	https://healthyalamance.org	Community		ann.meletzke@conehealth.com	Organization working on increasing access to farmer's markets for low-income residents

Alamance County Continued					
Program Name	Website	Program Type	Phone Number	Email	Summary
Southern Alamance Family Empowerment Food Pantry (SAFE)	https://www.safealamance.org/	Community	336-525-2120		Gives food out to families every Tuesday and Saturday. Arrive at 9AM to receive food (seems like first come first served). Each family receives a bag of non-perishable items and a box of perishable items. Families are able to return once a month. 5950 Hwy 87 S. Graham, NC 27253.
Allied Churches	https://www.alliedchurches.org/what-we-do	Religious	336-229-0881		206 N. Fisher St. Burlington, NC 27217: Emergency homeless shelter, also operates a Weekday lunch and dinner meal program for the community.
DreamAlign	https://www.dreamalign.com/	Religious	336-270-5238		Food Pantry: Mondays and Fridays 10-12 and Monday nights at 7pm
Healing Station Community Center	https://www.facebook.com/The-Healing-Station-Community-Resource-Center-686095504753850/	Religious	336-639-1103	gravescurtis7@yahoo.com	Distributes monthly emergency food boxes 802 Chapel Hill Rd:
Salvation Army	https://www.salvationarmycarolinas.org/burlington/programs/socialservices/	Religious	336-227-5529		Food Pantry M-F 1 pm-3:30 pm. 812 Anthony St. Burlington
Piedmont Rescue Mission	https://www.piedmontrescuemission.org/support-pregnant-moms-babies/	Religious	336-222-9195		Offer formula and diapers, but only to pregnant women who participate in their religious program.
Melfield United Church of Christ		Religious	336-578-3163		2144 Melfield Dr. Haw River. M - F: 11 - 11:30a (Produce); Sa: 9a - 1p (2nd Saturday of each month)
Gethsemane Christian Church		Religious	336-270-6136		1650 Burch Bridge Rd, Burlington, M & W: 10a - 11:30a (Bread/Pastries Only); Sa: 8a - until (4th Saturday of each month)
Harvest Baptist Church	https://www.facebook.com/hcbbreadoflife/	Religious	336-584-3333		3741 South Church St. Burlington Wednesdays from 9:00 am or 10:00-12:00 (website had 2 different times listed - first come first served drive-thru).

Alamance County Continued					
Program Name	Website	Program Type	Phone Number	Email	Summary
Burnett's Chapel Christian Church		Religious	336-525-2114		1957 Burnett's Church Rd Graham Sa: 9 - 11a (3rd Saturday of each month)
Breakthrough Community Church	http://break-throughcc.org/benevolence/food-pantry	Religious	919-810-2137		703 S Third Street Mebane Tu: 6p - 7p; Sa: 11a - 12:30p
Trinity Worship Center	https://www.trinityworship.net/care-prayer#join-a-prayer-team	Religious	336-585-0605		3157 S Church Street Burlington F: 10a - 12p (3rd Friday of each month)
Fresh Manna Food Ministries		Religious	336-226-2217		802 Chapel Hill Rd Burlington Tu: 5:30p - 8p; Th: 5:30p - 8p
Blessed Sacrament - Little Portion Food Pantry		Religious	336-226-8796		328 W David St., Burlington Screening on 3rd Thursday of each month; Pantry on 1st Saturday after 3rd Thursday
Christian Tabernacle Church of God		Religious	336-570-0035		1020 Rosenwald St., Burlington M - Sa: Appt. Only; Su: 1p - 3p
Burlington Assembly of God		Religious	336-227-3434		903 Tucker St, Burlington Soup Kitchen: Sa: 11:30a - 12:30p; Su: 12:30p - 1:30p
Al-Aqsa Food Pantry		Religious	336-350-1642		1908 South Mebane St., Burlington NC 27215: The website only has information about the medical clinic, but NC Care 360 says they also have food.
Glen Hope Food Pantry		Religious	336-226-3325	admin@glenhopebc.org	911 North Avenue Burlington, NC 27217. No other information on website.
Union Ridge Church Food Pantry	http://www.union-ridgechurch.org/ministries.html	Religious	336-421-3200	union-ridgechurch@aol.com	115 Altamahaw-Union Ridge Road, Burlington NC 27217. Serves the 3rd Saturday of each month at 10:00 am. Looks like people may have to also attend a Bible study to receive food.

Durham County					
Program Name	Website	Program Type	Phone Number	Email	Summary
School Based Programs					
EatNC		School / Healthcare	301-461-7838	eatnorth-carolina@gmail.com	Eat NC offers delivery service of DPS school meals to families that cannot pick them up. EatNC also delivers food boxes to COVID patients who are identified as food insecure (partners with FarmerFood Share and Duke Hospital). Families can expect one delivery per week containing five frozen meals. Families with children in DPS schools can request that school meals be delivered with the frozen meals. Families may also receive produce boxes, pantry items, and other foods when they are available.
Weekend Power Packs / Burton	https://www.dpsnc.net/Burton	School		Tameko_Piggee@dpsnc.net	The Weekend Power Pack program sends backpacks of food, known as Power Packs, home with students on Fridays to meet the nutritional needs of children who have been identified as at risk of hunger on weekends. Each bag contains enough food to feed a family of four for the weekend, providing hunger relief beyond just the individual child.
Weekend Power Packs / Eastway Elementary	https://www.dpsnc.net/Domain/15	School		genee_murray@dpsnc.net	The Weekend Power Pack program sends backpacks of food, known as Power Packs, home with students on Fridays to meet the nutritional needs of children who have been identified as at risk of hunger on weekends. Each bag contains enough food to feed a family of four for the weekend, providing hunger relief beyond just the individual child.
Weekend Power Packs / Fayetteville St. Elementary	https://www.dpsnc.net/fayetteville-street	School		rachael.norris@dpsnc.net	The Weekend Power Pack program sends backpacks of food, known as Power Packs, home with students on Fridays to meet the nutritional needs of children who have been identified as at risk of hunger on weekends. Each bag contains enough food to feed a family of four for the weekend, providing hunger relief beyond just the individual child.
Weekend Power Packs / IDYL Institute	https://www.theidyl-school.org	School	434-509-2902	gail.brown@theidyl-school.org	The Weekend Power Pack program sends backpacks of food, known as Power Packs, home with students on Fridays to meet the nutritional needs of children who have been identified as at risk of hunger on weekends. Each bag contains enough food to feed a family of four for the weekend, providing hunger relief beyond just the individual child.

Durham County Continued					
Program Name	Website	Program Type	Phone Number	Email	Summary
School Based Programs					
Weekend Power Packs / Walnut Grove ?		School			The Weekend Power Pack program sends backpacks of food, known as Power Packs, home with students on Fridays to meet the nutritional needs of children who have been identified as at risk of hunger on weekends. Each bag contains enough food to feed a family of four for the weekend, providing hunger relief beyond just the individual child.
School Pantry / Durham HeadStart	https://chtop.org/programs/durham-head-start-early-head-start/	School			
School Pantry / Jordan High	https://www.dpsnc.net/Page/101	School		zellua.sistrunk-moor@dpsnc.net	Meals are available for any child under 18, each child can receive one breakfast and one lunch per day. For families unable to pickup at the meal sites, DPS is partnering with EAT NC's weekly meal deliveries. There are 18 sites around Durham that families can pick up meals from.
School Pantry / W.G. Pearson Elementary	https://www.dpsnc.net/Page/101	School		Jacqueline_Love@dpsnc.net	
Durham Public Schools School Nutrition Services	https://www.dpsnc.net	School		James_Keaten@dpsnc.net	DPS is currently offering school breakfasts and lunches to children free of charge to be picked up at 25 school sites. Using USDA grant
FEAST	FEAST https://www.durhamfeast.org/sites	School		info@bullcity-schools.org	Free summer meals for kids available for pick up at a variety of schools.
Government					
Child Care Services Association Meal Services (CACFP)	https://www.childcareservices.org/programs/meal-services/	Daycare			Caters meals to daycare centers that meet CACFP standards
SNAP/WIC - Durham Country	https://www.dconc.gov/government/departments-f-z/social-services/food-nutrition-services-food-stamps	Government			Can complete an application online, in person at Durham County DSS at 414 E. Main Street, Durham, NC 27701 from 7:30 AM-5:30 PM, or can mail in an application.
Durham Food Security Task Force	https://www.tjcog.org/sites/default/files/uploads/General/MemberServices/Roundtables/durham_slides.pdf	Collaborative/ Government	919-560-0062	kwar-nock@dconc.gov, mdavis@dconc.gov, dren-walt@dconc.gov	Housed in Durham's Emergency Operation center. Weekly virtual meetings of 50+ community partners. Resource and information sharing. https://www.dconc.gov/Home/Components/News/News/7667/31

Durham County Continued					
Program Name	Website	Program Type	Phone Number	Email	Summary
Government					
Durham Food Security Task Force	https://www.tjcog.org/sites/default/files/uploads/General/MemberServices/Roundtables/durham_slides.pdf	Collaborative/ Government	919-560-0062	kwar-nock@dconc.gov, mdavis@dconc.gov, dren-walt@dconc.gov	Housed in Durham's Emergency Operation center. Weekly virtual meetings of 50+ community partners. Resource and information sharing. https://www.dconc.gov/Home/Components/News/News/7667/31
Community/Religious					
Fresh Produce Program	https://medicine.duke.edu/medicineneeds/docs-fresh-produce-program	Community		Julian Xie, Medical Student	Duke Outpatient Clinic (DOC) providers and Healthy Lifestyles providers identify patients who may benefit. Food as medicine program that distributes fresh produce to individuals in the community. Since August 2017 the program has had 30 distribution days, the chosen days seem to be random and are publicized to the community as they are planned.
Durham Farm and Food Network					Community action groups that meet every two months to improve food access and the agriculture system locally.
Durham Neighbors Free Lunch Initiative	https://durham-freelunch.com	Community (Student Focus)	910-556-9651	Elijahem-king@gmail.com	Provides free lunch 5 days a week for anyone who needs it. Focused on students and the homeless.
Interfaith Food Shuttle Food Pantry: Durham Community Food Pantry	https://static1.squarespace.com/static/586d2398579fb3ccd8c1dfe5/t/5ee764aa1379786735acdd9/1592222890596/Week+of+June+8+-+Pantry+Service.pdf	Community	919-286-1964 Ext. 4		List of food pantries in Wake, Durham, and Chatham Counties with their operating hours and requirements for service.
Iglesia Episcopal EL Buen Pastor Mobile Market	https://static1.squarespace.com/static/586d2398579fb3ccd8c1dfe5/t/5f4fdab683814b5a8fcd53de/1599068854970/Mobile+Markets+-+Sept+1_.pdf	Community	919-885-2315		The link provides their distribution schedule for September.
Community Collaboration Mobile Market	https://static1.squarespace.com/static/586d2398579fb3ccd8c1dfe5/t/5f4fdab683814b5a8fcd53de/1599068854970/Mobile+Markets+-+Sept+1_.pdf		919-536-4201		
Kids Cafes Program / The Ram Organization		Community (Student Focus)			

Durham County Continued					
Program Name	Website	Program Type	Phone Number	Email	Summary
Community/Religious					
Bull City Bucks	https://reinvestment-partners.org/what-we-do/produce-prescriptions/bull-city-bucks-1.html	Community			Bull City Bucks provides people with \$40 a month to purchase fruits and vegetables from Food Lion stores that do not have added sugar, fat or salt. In order to be eligible a person must be a patient at a participating clinic, receive SNAP benefits, and have a targeted medical condition.
Farmer Foodshare	http://www.farmer-foodshare.org/our-team	Community			Created donation stations at farmers markets for people to donate fresh fruits and vegetables to be given out to people in need. They are currently developing a program that gives community members biweekly shared of food from local farmers and nutrition education.
Fresh Produce Program	https://medicine.duke.edu/medicinenews/docs-fresh-produce-program	Community			
FEAST	FEAST https://www.durhamfeast.org/sites	School		info@bullcity-schools.org	Free summer meals for kids available for pick up at a variety of schools.
List of all food pantries	https://www.end-hungerdurham.org/wp-content/uploads/2020/06/Pantries-List-June-July-20v2-1.pdf	Community	Info for each on link	Info for each on link	Food pantries directory
Urban Ministries of Durham	https://umdurham.org/	Community	919-682-0538	https://umdurham.org/contact-us.html	Cafe is giving out three meals a day seven days a week for people in need. Breakfast and bag lunch pickup is from 8-9am and dinner is from 7-8pm.
Food Not Bombs	https://foodnotbombs.net/new_site/map/northcarolina.html	Community	919-374-0263	sarah@tinfig.com	Protests war and poverty and provides vegetarian food for free to those in need. Very little information on the site we will have to email Sarah Stack for more information.
Food Bank of Central and Eastern NC	https://foodbank-cenc.org/about-us/locations-contact-info/durham/	Community	919-956-2513		Provides meals and food for families in need. Open from Mon-Fri from 8:30AM-5PM. The Food Banks provides food to nonprofit partner food agencies including food pantries, soup kitchens, and shelters.
Care Pantry	https://pointcare-center.com/services/care-pantry	Community	919-467-9159		Offers a food pantry.
Christian Assembly Emergency Food Pantry	https://www.cadurham.org/community	Religious	919-471-0220		Food Assistance: Emergency Food. Open to all. Available once every 90 days.

Durham County Continued					
Program Name	Website	Program Type	Phone Number	Email	Summary
Community/Religious					
Durham Community Food Pantry	https://www.catholic-charitiesraleigh.org/dcfp/	Community	919-286-1964		Offers a food pantry with non-perishable food items, meat, eggs, and fresh produce. Resident of Durham and Orange Counties. May receive food once every 30 days.
Emanuel Presbyterian Church Food Pantry	https://www.emanueldurham.org/page7.html	Religious	919-451-6626	ihedurham@gmail.com	Offers a food pantry and hot meals.
Salvation Army - Durham, Orange, and Person Counties	https://www.salvation-armydurham.org/	Community	919-688-7306		Offers emergency food. Also offers clothing when available.
Calvary Baptist Church Durham Food Pantry	https://www.calvary-baptistdurham.org/	Religious	919-596-2592	office@calvarybc.com	Food Assistance: Emergency Food. Open to all.
Jewish Federation of Durham and Chapel Hill	https://www.shalom-dch.org/	Religious	919-354-4936		Offers a food pantry and emergency financial help with housing, utilities, and health care costs.
Jonathans Outreach Network Food Pantry			919-491-3661		
Nehemiah Christian Center	http://nehemiahchristiancenter.org/daycenter/	Religious	919-688-4203	info@nehemiah-christian-center.org	
Ministerio Guerreros De Jesucristo Internacional Food Pantry		Religious	919-395-7539		Offers a food pantry with canned and dry goods. Also offers fresh produce, frozen meats, and dairy products when available.
Monument of Faith Church Food Pantry	https://www.mof-church.org/	Religious	919-688-7838		Offers a food pantry with canned and non perishable food.
Mount Zion Christian Church Food Pantry	https://mountzion-christianchurch.com/	Religious	919-688-4245	info@mountzionchristian-church.com	
Second Mile Ministry	https://www.grey-stonechurch.com/secondmile	Religious	919-286-3596		Offers financial help for past-due utilities and rent. Also offers groceries.
Southside Church of Christ Food Pantry	http://www.sside.org/	Religious	919-688-3535		May receive food once a month.
Two Fish Five Loaves Food Pantry	https://mtlevelmbc.org/home	Religious	919-682-6466	mtlevelmbc@mtlevelm-bc.org	Offers a food pantry.
Sheetz Restaurant		Community			Ask an employee at the register for a meal. Families will be offered one bag per child.

Durham County Continued					
Program Name	Website	Program Type	Phone Number	Email	Summary
Community/Religious					
Antioch Baptist Church					Times open: 9:00am -12:00pm, Call for appt., ID, 1x per 3 months
Believers For Progress					Times open: M-F 3:00 - 6:00 pm; Sunday- beginning at 12:30
Bell Yeager Free Will Baptist	https://www.bellyea-gerfwb.org/visit_us	Religious	919-489-3963	bellyea-gerfwb-church@gmail.com	Times open: 10:00am - 12:00pm, summer camp, after school, kids meals
Iglesia Buen Pastor (IFFS)		Religious			Times open: 7:30 -11:00am - Must arrive by 7am for ticket
Kings Park International Church (House of Mercy)					Times open: 6:00-7:00pm, Drive Thru pick-up. Habla Español.
The Mustard Seed Project	www.themustardseed-projectnc.com	Community	919-937-9103	themustardseed-project@gmail.com	

Granville County					
Program Name	Website	Program Type	Phone Number	Email	Summary
School Based Programs					
Granville County Schools School Nutrition Services	https://www.gcs.k12.nc.us/child-nutrition-cbd1a1ae	School	919-693-4613	crutep@gcs.k12.nc.us	Students can apply for free or reduced lunches
Southwick-Tolland-Granville Regional School District	https://www.granvillecounty.org/2020/04/29/pandemic-electronic-benefit-transfer-program-assists-local-families/	School	413-569-6870	food@stgrsd.org	For the foreseeable future, STGRSD will provide free meals to all students for the first several months of the the 2020/2021 School Year, whether in-person or learning remotely, regardless of financial means.
Pandemic Electronic Benefit Transfer (P-EBT) program	https://ncdhs.gov/information/human-services/pandemic-electronic-benefit-transfer-p-ebt-program#:~:text=Pandemic%20Electronic%20Benefits%20(P%20EBT,and%20the%20same%20guidelines%20apply.	School/ Government	866-719-0141		Assist families who have been impacted by school closings, due to COVID-19, in purchasing food for their children.
Creedmoor City Hall Parking Lot	https://nextdoor.com/agency-post/nc/creedmoor/city-of-creedmoor/granville-county-public-school-drive-thru-meal-sites-140822785/	School	919-693-4613	ayersp@gcs.k12.nc.us	Families can visit any of these sites between the hours of and get a FREE bagged lunch and breakfast for the next day. These FREE meals are available for all children between the ages of 2-18.

Granville County Continued					
Program Name	Website	Program Type	Phone Number	Email	Summary
School Based Programs					
Creedmoor Elementary Bus Lot	https://nextdoor.com/agency-post/nc/creedmoor/city-of-creedmoor/granville-county-public-school-drive-thru-meal-sites-140822785/	School	919-693-4614	ayersp@gcs.k12.nc.us	Drive-through site, not sure if still running. Families can visit any of these sites between the hours of and get a FREE bagged lunch and breakfast for the next day. These FREE meals are available for all children between the ages of 2-18.
Mt. Energy Elementary School	https://nextdoor.com/agency-post/nc/creedmoor/city-of-creedmoor/granville-county-public-school-drive-thru-meal-sites-140822785/	School	919-693-4615	ayersp@gcs.k12.nc.us	Drive-through site, not sure if still running. Families can visit any of these sites between the hours of and get a FREE bagged lunch and breakfast for the next day. These FREE meals are available for all children between the ages of 2-18.
Butner Stem Middle School	https://nextdoor.com/agency-post/nc/creedmoor/city-of-creedmoor/granville-county-public-school-drive-thru-meal-sites-140822785/	School	919-693-4616	ayersp@gcs.k12.nc.us	Drive-through site, not sure if still running. Families can visit any of these sites between the hours of and get a FREE bagged lunch and breakfast for the next day. These FREE meals are available for all children between the ages of 2-18.
Government					
SNAP/WIC-Granville County	https://www.granville-county.org/residents/social-services/medicaid/food-nutrition-services-food-stamps/	Government	919-693-1511	granville.dss@granvil-lecounty.org	Food and Nutrition Services is a federal supplemental food assistance program designed to help eligible low-income families or individuals buy food. Families must meet income, residence, citizenship, and work rules. If you buy and cook your food separately from others living with you, you may be able to apply as a separate household.
Community / Religious Programs					
Area Congregations in Ministry	https://www.facebook.com/AreaCongregationsInMinistry/	Community/Religious	919-690-0961	director@acimgranville.org	Food pantry
Belton Creek Baptist Church	https://www.facebook.com/beltoncreekbaptistchurch1/?ref=page_internal	Community/Religious	919-693-2821		Belton Creek Baptist Church is a food pantry. Food pantry service hours: Saturday before 4th Sunday; sometimes they distribute more.
Pettiford Grove Baptist Church	https://www.facebook.com/3579Cannady-MillRoad/	Community/Religious	919-693-3374	pettifordgrovebaptistchurch1@gmail.com	Pettiford Grove Baptist Church has a food pantry.
Upon This Rock Ministry	https://www.utrministries.org/	Community/Religious	919-692-0007		Food pantry service hours: 1st Saturday/month 9:30-11:30am. Please leave a message on phone by Thursday before first Saturday.
Boys and Girls Club: Granville County Unit	thehelpcenternc.com	Community	919-482-0851		Provides daily hot meals to students.

Granville County Continued					
Program Name	Website	Program Type	Phone Number	Email	Summary
Community / Religious Programs					
Christian Faith Center Of Creedmoor	http://www.christianfaithcenternc.com/?fbclid=IwAR-1zLZ5wpS1KtUYhmd-pQvzkijetElk2rwoyd-jtrKmDKv4mLbiDAo8l-pUk2E	Community/ Religious	919-528-1581		Christian Faith Center Of Creedmoor is a food pantry. Food pantry service hours: Thursdays, 12-2pm; 2nd and 4th Mondays 12-2pm.
Pine Grove Baptist Church	https://pinegrove-bc.org/	Community/ Religious	252-767-1057	pastor.greg@pinegrove-bc.org	Pine Grove Baptist Church is a food pantry. Food pantry service hours: 1st and 3rd Thursday/month, 12-2pm; limit one visit/month.
New Hope Granville Missionary Baptist Church	https://www.newhopegranvillenc.org/	Community/ Religious	919-282-8548	https://www.newhopegranvillenc.org/contact.html	Food pantry
Celebrations Church	https://www.celebrationchurchnc.com/	Community/ Religious	919-690-0073	https://www.celebrationchurchnc.com/get-in-touch	Food pantry
LifeLine Outreach Inc.	https://www.facebook.com/LifeLine-Outreach-Ministries-102838868033040/?ref=page_internal	Community/ Religious	252-438-2098	lifeline-outreach27816@gmail.com	Emergency Shelter and Food Assistance for women and children. Fridays between 9AM and 5PM.
Penn Avenue Baptist Church	http://www.fbc-creedmoor.org/fbcc-food-ministry	Community/ Religious	919-693-5396		Food Pantry (Meals on Friday); Clothes Closet
First Baptist Church Creedmoor Food Pantry	https://fbccreedmoor.org/food-clothes-mission/	Community/ Religious	919-528-2351		Provides food and clothing to individuals and families needing assistance with basic needs: fuel and food.
Our Lady of the Rosary	https://olr-nc.org/	Community/ Religious	336-248-2463	parish@olr-nc.org	Tuesday 10-12
Oak Level Christian	https://www.facebook.com/mypantry2020/?ref=py_c&__xts__[0]=	Community/ Religious		denisehall@icloud.com	Wednesday mornings and evenings
Living Stones Church	https://lsfamily.org/?fbclid=IwAR3VivEsOC-QxeGl20UGqs-nqiP-p44vprKLjk-7kETsPs74in_Ngrp-DEVxEhw	Community/ Religious	919-690-1113	info@lsfamily.org	1st Monday 4 pm
Glory Tabernacle International Ministries	http://www.rainingglo-ry.org/	Community/ Religious	919-556-3860		2-5 on Tuesdays
St. Paul's Presbyterian Church, Louisburg	http://www.stpaulpc.org/	Community/ Religious	919-632-6495		Open 24/7

Orange County					
Program Name	Website	Program Type	Phone Number	Email	Summary
School Based Programs					
Weekend Power Packs	https://tablenc.org/	School	717-517-9220	operations@power-packsproject.org	
Orange County Schools School Nutrition Services	https://www.orange-countyfirst.com/Page/839	School	919-732-8126	margie.davison@orange.k12.nc.us	Students can apply for free or reduced lunches
Food for Students	https://www.foodforstudents.info/	School	919-967-8211	https://www.foodforstudents.info/contact-us	
Orange County School District	https://www.orange-countyfirst.com/donate	School	919-732-8126	dena.keeling@orange.k12.nc.us (she is cheif equity officer)	Parents can donate money online that will go to purchasing non-perishable foods for hundreds of families currently experiencing food insecurity
Government					
SNAP/WIC - Orange County	https://www.orange-countync.gov/1869/Eligibility-Information	Government	919-732-8181		
Community / Religious					
TABLE	https://tablenc.org/	Community	919-636-4860	info@tablenc.org	Provides hunger relief and nutrition education services to children in Orange County NC. Only available to families with children.
PORCH	https://chapelhill.porchcommunities.org/	Community		chc@porchcommunities.org	Delivers food to schools, families, and other food pantries.
Kids Cafes Program/ Friends of Chapel Hill Parks & Rec: Hargraves Center					
Orange County Interfaith Network	http://www.ifcweb.org/services/food-pantry	Community	919-929-6380	info@ifcmailbox.org	Food pantry in Carrboro. Gives out food to families once a month.
Senior Food Box Program	https://ocfoodhelp.org/senior-food-box-program/	Community	714-667-0717 Julie Ext. 3613 or Esther Ext. 3612		Residents 60 year old and older are eligible to receive a 30 pound box of food. Has a lot of different sites around NC.
Carrboro Farmers' Market	http://www.carrborofarmersmarket.com/covid-19	Community		manager@carrborofarmersmarket.com	Providing \$10 vouchers to community members who are unemployed due to COVID. They offer Double Bucks for people on SNAP/ EBT, WIC and FMNP
Food Not Bombs	http://foodnotbombs.net/new_site/	Community	919-537-9695	foodnotbombs919@gmail.com	Request food or supplies using their online form and they'll contact you within 48 hours and call/text upon arrival

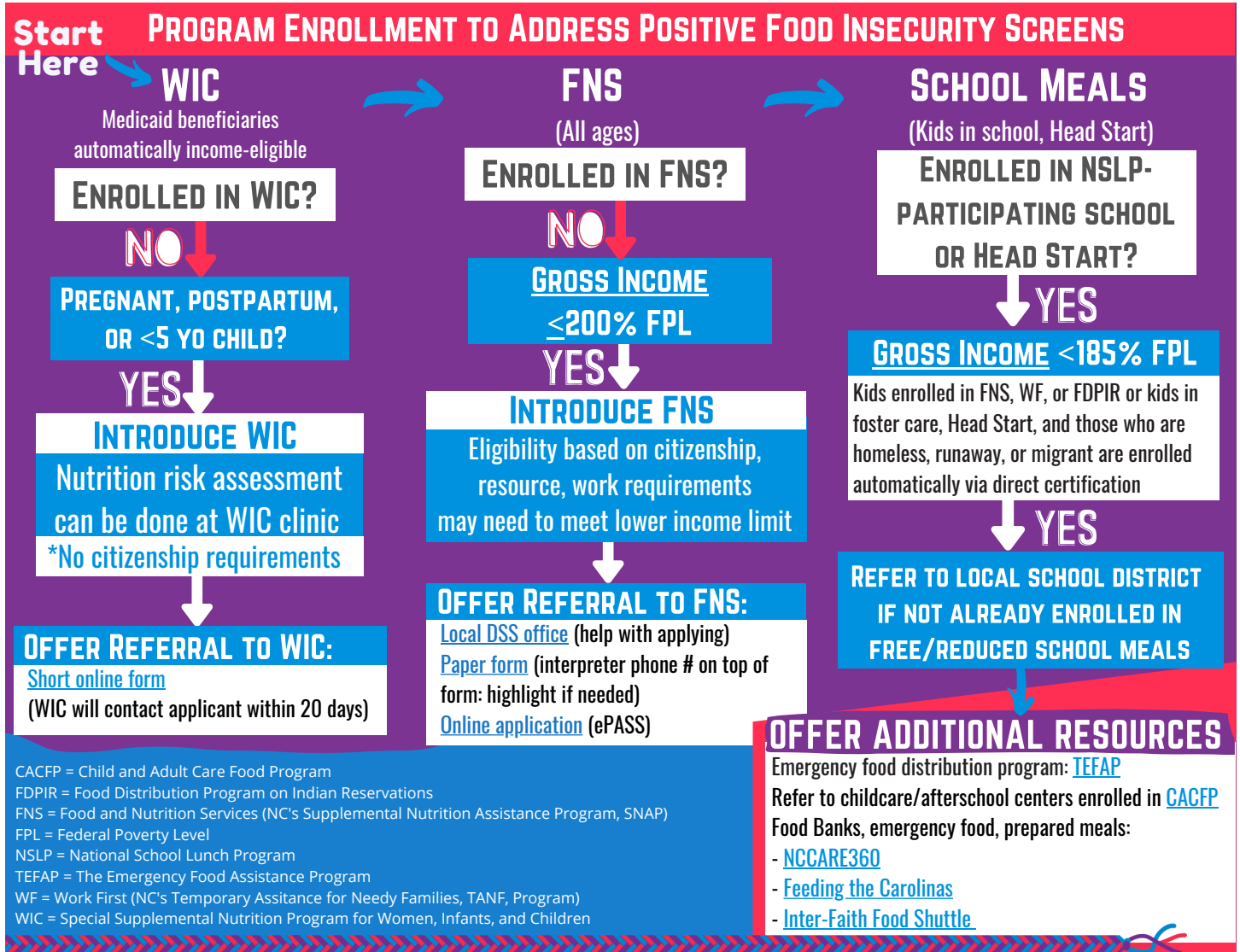
Orange County Continued					
Program Name	Website	Program Type	Phone Number	Email	Summary
Community / Religious					
Second Harvest Food Bank	https://www.feedoc.org/learn/about-hunger/	Community	949-653-2900		Food bank in Orange County
Meals on Wheels	https://www.mealsonwheelsoc.org/	Community	714-220-0224 (main), 714-823-3294 (social services), CEO is main number Ext. 217	info@mealsonwheelsoc.org, lots of more specific contacts through this link: https://www.mealsonwheelsoc.org/about/contact/	Serves older adults living in Chapel Hill, Carrboro, and rural Orange County. Under COVID-19 pandemic conditions, weekday hot meals and check-in visits have been replaced with a weekly delivery of five frozen meals and a bag of fresh fruit as well as every other weekday check-in calls to ensure recipients are healthy, have eaten, and have access to other food beyond the Meals on Wheels delivery.
Orange Congregations in Mission	https://www.ocimnc.org/	Community			
Durham Community Food Pantry	https://www.catholiccharitiesraleigh.org/dcfp/		919-286-1964		Offers a food pantry with non-perishable food items, meat, eggs, and fresh produce. Resident of Durham and Orange Counties. May receive food once every 30 days.
Care Pantry	https://pointcare-center.com/services/care-pantry/	Religious (Point Church)	919-467-9159	info@pointcarecenter.com	Provides a pantry, counseling, clothing, and funds for individuals in need - food pantry includes perishable and non-perishable food. 2 bags of groceries & hot food provided with clothing
RENA Community Center Food Pantry	https://www.renacomunitycenter.com/esl	Community	919-918-2822	rosiecaldwellrena2@gmail.com	Every third Friday of the month non-perishable food is distributed. Distributed after Food Bank application is completed.
Carolina Campus Community Garden	https://ncbg.unc.edu/outreach/cccg/	Community		clorch@email.unc.edu	Access to fruits and vegetables for UNC employees
Carolina Cupboard	https://carolinacupboard.web.unc.edu/	Community		tarahb@email.unc.edu	Food pantry organized by UNC students. Schedule a pickup appointment and collect a prepackaged bag at designated time slot.

Orange County Continued					
Program Name	Website	Program Type	Phone Number	Email	Summary
Community / Religious					
Food for All - Amity United Methodist Church	https://amityumc.org/ministeries/	Religious	919-967-7546	amityumc@ncrrbiz.com	Amity United Methodist Church Food Pantry is open Monday and Thursday from 10:00 am – 12:00 pm. Food is available; contact Pastor Donnie or Rachel Kohr.
Heavenly Groceries	https://jacksoncenter.info/our-programs/organizing-advocacy/our-services/heavenly-groceries/	Community	919-960-1670	contact@jackson-center.info	Groceries are provided for every person that arrives, there are neither restrictions nor requirements necessary to be given food. They are one of the only North Carolina certified food banks that allows patrons to select their own food, which provides each person the opportunity to choose food he or she will enjoy and that adheres to particular food traditions.
Al-Aqsa Food Pantry	https://www.al-aqsa-clinic.org/	Religious/Community	336-350-1642		Offers a food pantry - founded by Muslim individuals and specializes in healthcare.
Breakthrough Church Food Pantry	http://breakthroughcc.org/benevolence/food-pantry	Religious	919-810-2137	info@breakthroughcc.org	Offer a food pantry Tuesdays 6-7 pm and Saturdays 11 am - 12:30 pm and
Community Cafe	https://www.umdurham.org/what-we-do/cafe.html	Community	919-682-0538		

Vance County					
Program Name	Website	Program Type	Phone Number	Email	Summary
School Based Programs					
Vance County Schools School Nutrition Services	https://www.vcs.k12.nc.us/Page/2233	School		pnewcomb@vcs.k12.nc.us	Students can apply for free or reduced lunches
Government					
SNAP/WIC - Vance County	http://www.vance-county.org/departments/social-services/food-and-nutrition-services-2/	Government			Families who meet the income requirements are given EBT cards they can use to purchase food.
Food and Nutrition Services - Vance County	http://www.vance-county.org/departments/social-services/food-and-nutrition-services-2/	Government	252-492-5001 (Ext. 3217 to apply; 3214 to recertify)	sharon.parker@vance.nc.gov to apply; cryster.reeder@vance.nc.gov to recertify	Eligible (based on income) families receive EBT card that can be used as a debit card to buy food
Brookston Baptist Church	https://www.foodpantries.org/li/brookston_baptist_church_27537	Government	252-767-3084		4th Sat 7-8:30am by appointment only
Cokesbury United	https://cokesbury-methodist.org/	Government	252-395-8060		1st and 3rd Wednesday 5pm
Cotton Memorial	https://www.foodpantries.org/li/cotton_memorial_presb_church_27536	Government	252-492-3478		2nd and 4th Saturday 9-10am
Greater Ransom Way of Cross Temple	https://www.foodpantries.org/li/greater_ransom_way_of_cross_temple_27537	Government	919-693-1511		1st and 3rd Saturday 9am-12pm
Lifeline Outreach - Henderson	https://www.foodpantries.org/ci/nc-henderson	Government	252-438-2098		Tuesday and Friday 10:15am-
Mt. Zion Christian Church	https://www.foodpantries.org/li/mt_zion_christian_church_27707	Government	252-430-7277 Ext. 24		Thursday 2-4pm
Salvation Army-Henderson	https://www.salvationarmycarolinas.org/henderson/home/	Government	252-438-7107		Wednesday/Thursday 9am-12pm; 1-3:30pm also helps with rent and utility assistance; clothing vouchers available
Shiloh Baptist Church		Government	252-598-0415		4th Saturday 9am and as needed; deliver food on Thursday
Young Memorial United Holy Church	https://www.freefood.org/l/young-memorial-united-holy-church	Government	252-425-1207		1st and 3rd Thursday 9:30-1:30pm, Wednesday 6-7pm
Community					
ACTS of Vance County	https://actsofvance-county.tripod.com/index2.html	Food Pantry	252-492-8231		Monday, Tuesday, Wednesday Thursday 11am-12pm; Tuesday and Thursday 8:30am-10:15am

Vance County Continued					
Program Name	Website	Program Type	Phone Number	Email	Summary
Community					
Anathoth House	http://www.anathoth-house.org/	Food Pantry	301-751-4870		2nd and 4th Wednesday 12-3pm; 3rd Saturday of the month 8-11am, by appointment only
Big Ruin Creek Baptist	http://bigruincreek-baptistchurch.centurylinksite.net/	Food Pantry	252-430-0565		Last 3 Thursdays of every month 12-2pm
Calvary Temple Holy Church	https://www.freefood.org/l/nc_27536_calvary-temple-holy-church	Food Pantry	252-438-7065		3rd Tuesday; 5-6pm
Cooke's Chapel AME Zion	https://loavesandfishes.org/mobile-pantry/mobile-pantry-clinton-chapel-a-m-e-zion-church-5/2020-06-12/	Food Pantry	919-939-5549		
Green Rural Redevelopment Organization	https://www.conservationsfund.org/projects/green-rural-redevelopment-organization	Mobile Food Pantry	252-430-0016		Monday-Friday 9am-4pm
The Help Center Inc.	https://www.christian-helpcenter.net/	Food Pantry	919-725-9431		Monday, Tuesday, Thursday mornings from 9:30-12:30
Pettiford Grove Baptist Church	https://www.local-prayers.com/US/Kittrell/781965875192383/Pettiford-Grove-Baptist-Church	Food Pantry	919-605-7051		2nd Monday 11:30am-2pm; 2nd Tuesday 4-6pm
Lifeline Outreach Inc.	https://www.homelessshelterdirectory.org/cgi-bin/id/shelter.cgi?shelter=7703	Food Pantry			Tuesday and Friday mornings
Oasis of Hope Produce Boxes	https://www.ncchurches.org/oasis-of-hope-ministries/	Produce Specific Food Pantry			Every other Wednesday 4-7pm
Oasis of Hope Ministries	https://www.ncchurches.org/oasis-of-hope-ministries/	Food Pantry			Friday 11-1 pm
Equipping Faith		Food Pantry			Monday 12-1pm
Full Deliverance Christian Church	https://www.foodpantries.org/li/deliverance_church_27501	Food Pantry			1st Tuesday 3-5pm
Gang Free Inc.		Food Pantry			Weekdays, 1-4 pm

Appendix C: Federal/State Nutrition Program Enrollment Flowsheet



Appendix D: Core Child Service Overview: Food and Nutrition

What are the goals of the services delivered to children and families?

There are various programs that fall within the Food and Nutrition Service Program sector. While each program has its own specific aim, the general goal of all of these programs is to supplement the food budget of children and families, increase access to nutritious foods, and improve the diet of kids and their families.

What key legislation impacts services this core child service area?

[Thrifty Food Plan](#)

This sets the standard for Supplemental Nutrition Assistance Program (SNAP) benefits based on the minimum cost of a nutrition diet. Section 4002 of the 2018 Farm Bill allows for re-evaluation of this food plan based on current cost of food and dietary guidelines.

[Healthy Hunger-Free Kids Act](#)

This act, passed in 2010, set national provisions on the nutritional quality of school meals and snacks and made it possible for certain categories of kids to be automatically eligible for school nutrition programs via direct certification. It also created a Community Eligibility Provision (CEP) in which schools located in high-poverty areas are able to provide free meals to all students regardless of income.

Who delivers the services? What is the service structure?

Food and Nutrition Services (FNS) ([NC's Supplemental Nutrition Assistance Program, SNAP](#))

The Food and Nutrition Services (FNS) program (NC's SNAP program, formally known as Food Stamps) is an entitlement program for low-income individuals and families. FNS benefits are fully funded at the federal level by the U.S. Department of Agriculture Food and Nutrition Service. The program is administered at the state level by the Division of Social Services, with the state and federal government sharing administrative costs.

Eligibility determination and benefit allocation occurs at the state level. State agencies also have various policy options that provide them with some flexibility for better targeting the program to meet the needs of their populations.

Each state program is overseen by one of eight regional USDA Food and Nutrition Service offices throughout the United States. In North Carolina, technical assistance and oversight are provided by the Southeast Regional Office in Atlanta, Georgia.

In order to be eligible for FNS, applicants must meet citizenship, residential, income, resource, and work requirements. Certain individuals, such as those authorized to receive Work First Cash Assistance and/or SSI, may meet categorical eligibility for a higher income limit.

Who delivers the services? What is the service structure? Continued

Applicants can apply for benefits online through the ePASS system, in person through the Department of Social Services, or via a paper application that can be mailed to or dropped off at the Department of Social Services. They must also complete an in-person or telephone interview prior to benefit issuance. Benefits are distributed electronically on the same day each month. FNS certification lasts between 3 and 12 months, depending on household composition and circumstances.

FNS applicant data is entered and stored in the North Carolina Families Accessing Services Through Technology (NC FAST) system. Benefits are issued through an Electronic Benefits Transfer (EBT) card, which works similarly to a debit card. FNS participants can use their benefits to purchase food items at USDA authorized retailers, including most grocery stores and farmers' markets.

Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)

WIC is a supplemental nutrition program for at-risk pregnant women, infants, and children up to age 5. WIC receives full discretionary funding at the federal level by the U.S. Department of Agriculture Food and Nutrition Service through annual appropriations. States are not required to contribute to WIC funding though may choose to appropriate funds toward the program from their own revenues.

In North Carolina, the WIC program is administered at the local level with state oversight through the Division of Public Health Nutrition Services Branch. Local agencies have some flexibility in modifying policies and procedures to best fit their local practices.

In order to be eligible for WIC, applicants must meet residential, income, categorical, and nutrition risk criteria. Individuals enrolled in Medicaid, Work First Family Assistance (NC's TANF program), or FNS (NC's SNAP program) are automatically income-eligible for WIC. To be categorically eligible, applicants must be pregnant, postpartum, or breastfeeding women, infants, or children under 5. Nutritional risk eligibility is determined through evaluation by a health professional or at the WIC clinic.

Applicants are required to be physically present with their child at their local WIC office during their initial certification unless they have an allowable exception. After the initial certification visit, participants must attend follow-up appointments every 3 months, with their child present every 6 months. Physical presence is also required for benefit pick-up. Certification lasts for 6 months for infants certified after 6 months of age and for 1 year for children up to age 5.

WIC benefits are intended to supplement the participant's diet with nutritional foods. As such, only certain foods are included in the WIC food package. For the full list of approved foods, please [click here](#). Infant formula is included in the food package as well for non-breastfeeding or partially breastfeeding infants. Along with food benefits, WIC participants also receive additional services including health screening, nutrition counseling, breastfeeding counseling and support, immunization screening and referral, and substance abuse referral.

WIC data are collected and stored in Crosswords, an electronic information system. In North Carolina, WIC benefits are issued through an Electronic Benefits Transfer (EBT) card (NC eWIC), which works similarly to a debit card. WIC benefits must be used at retail stores that have been approved as vendors by the state.

*Who delivers the services? What is the service structure? Continued***WIC Farmers' Market Nutrition Program (FMNP)**

The WIC Farmers' Market Nutrition Program (FMNP) is an extension of the WIC program which provides WIC-eligible participants the ability to obtain fresh fruits and vegetables from farmers' markets. The program is funded by the U.S. Department of Agriculture Food and Nutrition Service, with states covering a portion of the administrative costs.

States have some flexibility in determining which WIC-eligible participants are eligible for this program. In North Carolina, this includes pregnant, postpartum, breastfeeding and partially-breastfeeding women, and children ages 2 to 4. Program implementation is determined at the local level, with 30 counties operating the program across North Carolina.

Participants in the program receive six \$5 coupons per year which can be used to purchase fresh produce at farmers' markets. These coupons are on top of standard WIC benefits.

School Meals Programs

There are several school meals programs, including the [National School Lunch Program \(NSLP\)](#), [School Breakfast Program \(SBP\)](#), and [After School Snack Program \(ASSP\)](#). All of these are entitlement programs that provide low-cost or free nutritious meals/snacks to eligible students attending public schools, nonprofit private schools, and residential child care institutions. These programs receive federal assistance through the U.S. Department of Agriculture Food and Nutrition Service via cash subsidies for reimbursable meals and food donations. State education agencies administer these programs through agreements with local school food authorities.

Individuals must be less than 18 years old, attending a participating school or institution, and meet the income eligibility or categorical criteria to qualify for these programs. Children in households with an annual income below 130% of the federal poverty level qualify for free meals and those in households with an annual income between 130% and 185% of the federal poverty level qualify for reduced-price meals (costing no more than 30 cents for breakfast and 40 cents for lunch). Children living in households receiving Work First Family Assistance (NC's TANF program), FNS (NC's SNAP program), or Food Distribution Programs on Indian Reservations (FDPIR), kids in foster care, those enrolled in Head Start, and kids who are homeless, runaway, or migrant are categorically eligible to receive free meals through these programs without an application through direct certification. Through the Community Eligibility Provision, schools and local educational agencies located in low-income areas can also provide free breakfast and lunch to all students without requiring an application or eligibility determination.

Applications must be resubmitted yearly, typically at the start of the school year. Individuals can also request an application any time during the year.

Summer Food Service Program (SFSP)

The Summer Food Service Program (SFSP) is an entitlement program intended to provide kids with nutritious meals when school is not in session. It receives federal funding through the U.S. Department of Agriculture Food and Nutrition Service and is administered at the state level through state education agencies.

Children eligible for the NSLP/SBP also qualify for the SFSP.

*Who delivers the services? What is the service structure? Continued***Child and Adult Care Food Program (CACFP)**

The Child and Adult Care Program (CACFP) is an entitlement program that provides nutritious meals to kids and adults in non-residential care facilities including at-risk afterschool programs, child care centers, day care homes, and emergency shelters. The program receives federal funding through the U.S. Department of Agriculture Food and Nutrition Service and is administered at the state level through the Division of Public Health Nutrition Services Branch.

Children eligible for the NSLP/SBP also qualify for the CACFP when they attend participating centers.

Fresh Fruit and Vegetable Program (FFVP)

The Fresh Fruit and Vegetable Program (FFVP) is a program that provides fresh fruits and vegetables to eligible kids in elementary schools. The program receives limited federal funding through the U.S. Department of Agriculture Food and Nutrition Service and is administered at the state level through state education agencies.

Elementary schools that offer the NSLP are also eligible to operate the FFVP. Schools must apply for funding, with determination made on the basis of percentage of enrolled kids eligible for the NSLP. Priority is given to schools with a higher percentage of low-income students.

The Emergency Food Assistance Program (TEFAP)

The Emergency Food Assistance Program (TEFAP) is a food distribution program that provides no-cost food to income-eligible individuals. The program is funded at the federal level via annual appropriations through the U.S. Department of Agriculture Food and Nutrition Service. In NC, the program is overseen at the state level through the NC Department of Agriculture and at the county level either through the local Division of Social Services or through non-profit organizations.

Individuals eligible for FNS are also eligible for TEFAP.

Food Distribution Program on Indian Reservations (FDPIR)

The Food Distribution Program on Indian Reservations (FDPIR) is a food distribution program that provides income-eligible households on or near Indian reservations access to USDA foods. The program is funded at the federal level through the U.S. Department of Agriculture Food and Nutrition Service and at the state level through Indian Tribal Organizations (Eastern Band of Cherokee Indians in NC).

It is an alternative to the Supplemental Nutrition Assistance Program (SNAP) for those who do not have easy access to SNAP offices or stores in which SNAP benefits can be used.

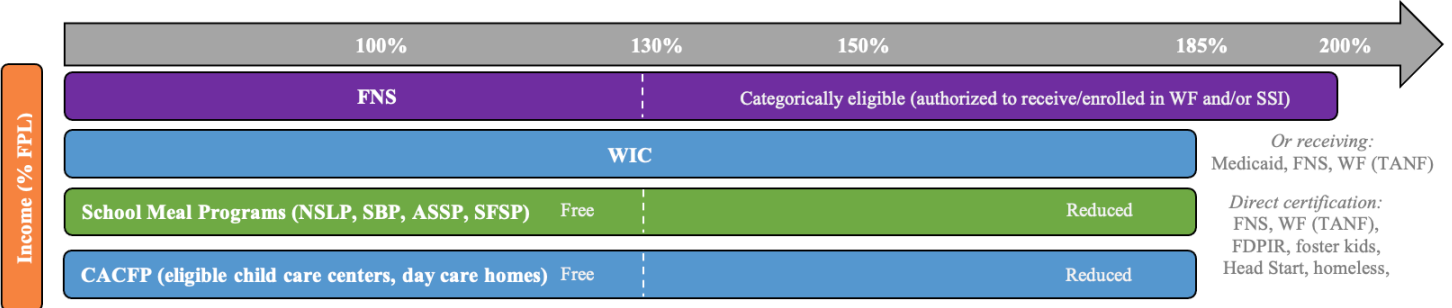
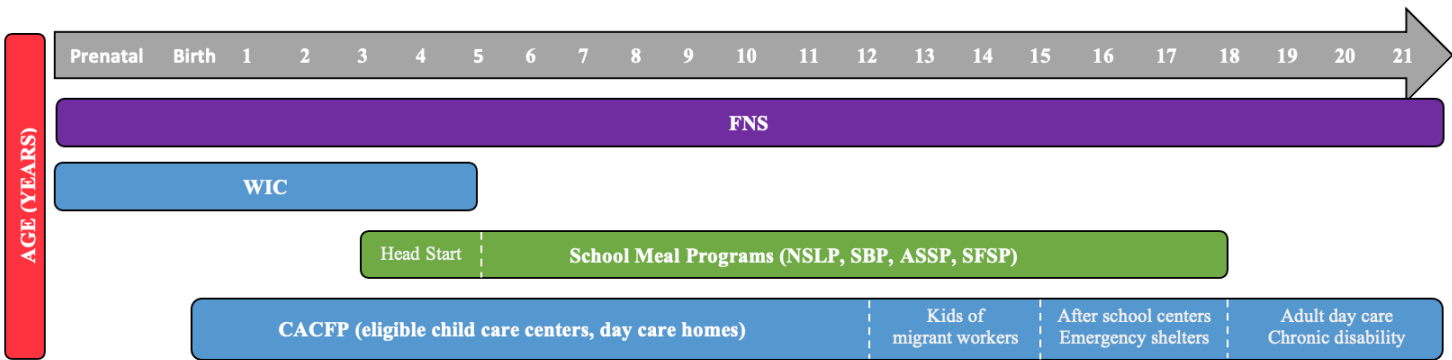
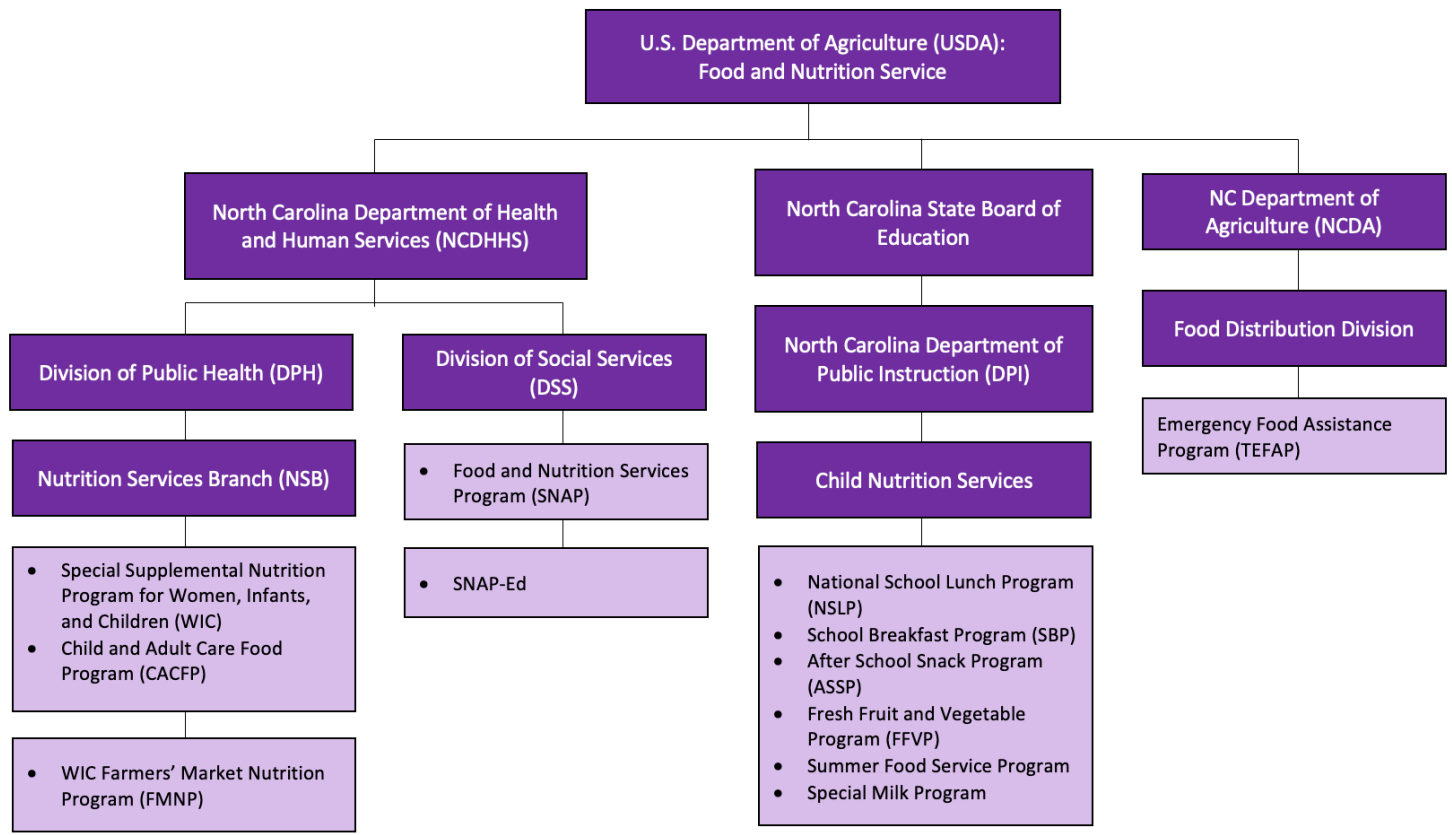
*Educational Programs***SNAP-Ed**

The SNAP-Ed program is a subset of the FNS (SNAP) program. It is administered at the state level by the Division of Social Services. Its role is to teach people who are on or eligible for SNAP how to maximize their food benefits and improve their nutrition.

Expanded Food and Nutrition Education Program (EFNEP)

The Expanded Food and Nutrition Education Program (EFNEP) offers free nutrition classes to income-eligible participants to promote nutritious cooking. It also encourages families to be active and teaches them how to save money on food and handle food properly. It is funded at the federal level by the US Department of Agriculture; National Institute of Food and Agriculture.

Key NC Food and Nutrition Programs



- = NCDHHS, Division of Social Services
- = NCDHHS Division of Public Health
- = NC DPI

FNS = Food and Nutrition Services (NC's SNAP program); WIC = Special Supplemental Nutrition Program for Women, Infants, and Children; NSLP = National School Lunch Program; SBP = School Breakfast Program; ASSP = After School Snack Program; SFSP = Summer Food Service Program; CACFP = Child and Adult Care Food Program; FPL = Federal Poverty Level; WF = Work First Family Assistance, NC's Temporary Assistance For Needy Families (TANF) program

Who are the key stakeholders (individuals/entities) in this Core Child Service area for NC InCK?

U.S. Department of Agriculture: Food and Nutrition Service (FNS)

The USDA FNS funds most of the federal nutrition programs noted above.

State Nutrition Action Coalition (SNAC)

The North Carolina State Nutrition Coalition is a collaboration between state agencies and nonprofit organizations that administer U. S. Department of Agriculture Food and Nutrition Service programs. It provides a 1-page resource of the various USDA nutrition programs in English and Spanish that can be distributed to patients.

Breastfeeding Promotion Consortium (BPC)

The BPC is a consortium of 25 organizations with the unified goal of promoting and supporting breastfeeding. Participating organizations include the American Academy of Pediatrics, American Medical Association, U.S. Department of Health and Human Services, and U.S. Department of Agriculture.

North Carolina WIC Retailer Advisory Council

The North Carolina WIC Retailer Advisory Council is a collaboration between the NC WIC Program and retailers established to discuss vendor-related topics. This group meets quarterly.

Farmers Market Coalition

The Farmers Market Coalition is a 501(c)(3) nonprofit organization designed to support farmers markets.

CDC Healthy Schools

CDC Healthy Schools works with states, schools, and community partners to promote health in schools.

Feeding the Carolinas

Feeding the Carolinas is a partner association of Feeding America. It includes a network of 10 member food banks throughout North Carolina and South Carolina that support local food distribution agencies.

Feeding America

Feeding America is a nationwide organization that aims to increase food access to individuals in need. It includes a network of 200 food banks and 60,000 food pantries.

Food Research & Action Center

The Food Research & Action Center is a 501(c)(3) organization focused on eradicating poverty-related hunger through research, policy improvement, public education, and advocacy.

The Food Trust

The Food Trust aims to increase access to food and improve healthy decisions by working with stakeholders to improve nutrition education and increase availability of nutritious, affordable foods.

Center for Healthy Food Access

The Center for Healthy Food Access is led by the Food Trust, with support from the Robert Wood Johnson Foundation. Its aim is to improve access to nutritious, affordable food for children in the United States through means such as strengthening federal food programs, improving food quality in schools, increasing access to grocery stores, and partnering with local businesses.

Who are the key stakeholders (individuals/entities) in this Core Child Service area for NC InCK? Continued

Healthy Eating Research

Healthy Eating Research is a Robert Wood Johnson Foundation program that promotes research around policies and systems that impact child nutrition and health.

Inter-Faith Food Shuttle

Inter-Faith Food Shuttle is a 501(c)(3) member of Feeding America that aims to improve access to nutritious foods for low-income families living in food deserts. In partnership with community housing and churches, it provides Mobile Markets that distribute free food to individuals. There are 10 Mobile Market sites throughout NC that are open to anyone in need.

North Carolina Nutrition Education Partners

The North Carolina Nutrition Education Partners includes various organizations and programs that promote nutrition education in North Carolina, including the Alice Aycock Poe Center, the Down East Partnership for Children, Durham's Innovative Nutrition Education (DINE), UNC Greensboro's Recipe for Success, UNC Chapel Hill's Food, Fitness and Opportunity Research Collaborative, NC State's Steps to Health.

Second Harvest Food Bank of Metrolina

This organization distributes food to charitable agencies in 24 counties in North Carolina.

Division of Social Services: Food and Nutrition Services (SNAP)

Division of Social Services: 919-527-6335

NC EBT Call Center: 1-866-719-0141

Division of Public Health: Nutrition Services

Nutrition Services Branch/WIC (Branch Head – Mary Anne Burghardt): 919.707.5800

Breastfeeding Coordinator (Grisel Rivera): 919-707-5781

WIC Farmers' Market Nutrition Program (FMNP): 919-707-5800

Child and Adult Care Food Program (CACFP): 919-707-5799

School Nutrition Programs

North Carolina Department of Public Instruction: 984-236-2632

Federal Program Monitoring and Support: 984-236-2786

North Carolina Department of Agriculture

The Emergency Food Assistance Program (TEFAP): 919-575-4490

Eastern Band of Cherokee Indians

Cherokee Tribal Food Distribution Program (Frank Dunn): 828-788-3432

Who are the key stakeholders (individuals/entities) in this Core Child Service area for NC InCK? Continued

Select Counties

Durham

Durham County WIC: 919-403-1300

Durham County DSS/Food and Nutrition Services: 919-560-8000

Durham Public Schools Nutrition Services (Supervisor – Gregory Braswell): 919-560-2370 Ext. 26224

Orange

Orange County WIC: 919-245-2422

Orange County DSS/Food and Nutrition Services: 919-245-2800

Orange County Schools Child Nutrition: 919-245-4002

Alamance

Alamance County WIC: 336-570-6745

Alamance County DSS/Food and Nutrition Services: 336-570-6532

Alamance-Burlington Schools Child Nutrition (Executive Director – Pamela Bailey): 336-438-4000 Ext. 20061

Vance

Vance County WIC: 252-492-3147

Vance County DSS/Food and Nutrition Services: 252-492-5001

Vance County Schools Child Nutrition (Director - Phyllis W. Newcomb): 252-492-2127

Granville

Granville County WIC: 919-693-1333

Granville County DSS/Food and Nutrition Services: 919-693-1511

Granville County Schools Child Nutrition (Director – Patricia Crute): 919-693-9349

Health/Wellbeing Initiatives: Food and Nutrition

What health/wellbeing initiatives exist in this Core Child Service area?

Federal Initiatives

SNAP Online Purchasing Pilot

This pilot was launched in 2019 in response to Section 4001 of the 2018 Farm Bill, which places a requirement for online acceptance of benefits. North Carolina joined this pilot in April 2020. Retailers accepting online payments include ALDI, Amazon, BJs Wholesale Club, Carlie C's, Food Lion, Publix, and Walmart.

Food Research & Action Center (FRAC) Screen and Intervene Toolkit

This toolkit was developed to help pediatricians identify and address food insecurity during the primary care visit.

Voices for Healthy Kids

This initiative, in partnership with the American Heart Association, aims to improve children's access to healthy foods and safe places to be active by supporting advocacy, spreading awareness, assisting with research, and building partnerships.

*What health/wellbeing initiatives exist in this Core Child Service area? Continued***State Initiatives****Healthy Opportunities**

NNC DHHS initiative to address social determinants of health by mapping relevant indicators in various regions of North Carolina, developing standardized screening questions to identify need, creating a network (NCCARE360) to connect individuals to community resources, developing Healthy Opportunities Pilots in select regions of the state, and assessing ways to streamline program benefits.

No Kid Hungry NC / Carolina Hunger Initiative

No Kid Hungry NC is based out of the University of North Carolina at Chapel Hill Center for Health Promotion and Disease Prevention. It aims to connect kids to federal nutrition programs, teach families how to cook nutritious meals, and raise public awareness about child hunger. The Carolina Hunger Initiative is working in collaboration with No Kid Hungry NC to improve food access.

Healthy Food Small Retailer Program

This program is administered by the NC Department of Agriculture and aims to increase access to nutritious foods in food deserts. It reimburses small stores for infrastructure such as refrigerators, freezers, and shelving that would allow them to stock their stores with healthy foods. The program also helps stores develop signs and marketing techniques to encourage customers to purchase these items.

County-Level Initiatives**Durham Free Lunch Initiative**

This initiative was started during the COVID-19 pandemic by a high school student partnering with a local business owner. It's intended to provide meals to Durham Public School students with food insecurity.

TABLE (Orange County)

This is a local, non-profit organization that delivers meals to kids in Orange County every week and teaches them about nutrition.

Free Summer Breakfast and Lunch (Charlotte Mecklenburg Schools)

This initiative, funded by the USDA, provides free breakfast and lunch to kids age 1 to 18 attending eligible schools. It does not require an application process to participate. In some areas where it may be particularly difficult to get to a feeding location, the meals may be delivered directly to the apartment complex or mobile home.

Loaves and Fishes (Mecklenburg)

This organization works with local food pantries to deliver a week's worth of groceries to individuals in need in Mecklenburg County.

Medical Food Pantry

This is a partnership between the Food Bank of Central and Eastern NC, Brody School of Medicine and Vidant Health. The program provides emergency food assistance to Vidant Medical Center patients.

COVID-19 Related Programs and Waivers**Pandemic Electronic Benefit Transfer (P-EBT)**

This program is a collaboration between the NC DHHS and the NC DPI and is intended to help families obtain food for children whose access to school meals has been affected by the COVID-19 pandemic. In January 2021, President Biden placed an executive order to increase these benefits by 15%.

Multiple FNS, WIC, and CACFP waivers have been initiated in the setting of COVID-19. These include WIC physical presence waivers, WIC remote benefit issuance waivers, and orders to increase FNS benefits.

What innovative health/wellbeing initiatives are planned for the future for this Core Child Service area?

Federal Initiatives

Universal School Meals Act

This bill, proposed by Sen. Bernie Sanders (I-Vt.), Rep. Ilhan Omar (D-Minn.), Sen. Kirsten Gillibrand (D-N.Y.), and Rep. Gwen Moore (D-Wis.), calls for the provision of free school meals to all children, regardless of income.

Executive order to modernize the Thrifty Food Plan

The Thrifty Food Plan is the basis for determining FNS benefits; however, it is outdated and no longer an accurate reflection of the actual cost of maintaining a nutritious diet. The 2018 Farm Bill mandated that the USDA revise this plan, and President Biden placed an executive order encouraging the USDA to begin this process.

Statewide Initiatives

Telehealth Intervention Strategies for WIC (THIS-WIC) Grant

This grant, funded by the USDA and Tufts, is intended to provide innovative telehealth solutions to assist with education and breastfeeding support delivery to WIC participants.

Blue Cross and Blue Shield of North Carolina

Blue Cross is partnering with several organizations to promote enrollment in Food and Nutrition Services. It is also providing members access to Eat Well.

Eat Well

Eat Well is a prescription program based in Durham that provides participants with monthly benefits to purchase fruits and vegetables.

Plan(s) of Care: Food and Nutrition

Note: "Plan of care" refers to a care plan written by a health or social service sector staff, or a team of staff, that is both individualized and person-centered to address the needs of the child.

Are plans of care developed in this Core Child Service area?

Yes.

If so, what are the plans of care called in this Core Child Service area?

Medical Statement for Students with Unique Mealtime Needs for School Meals

This provides in-school meal modifications for students who require them.

WIC Program Medical Documentation (Infant and Child forms available)

This form is used to request specialty exempt infant or child formulas not included in the standard North Carolina WIC milk- or soy-based formula contract. This form is also to be used to request whole milk or a child age 24 months or older.

Crossroads Care Plan

Each WIC member receives a comprehensive, individualized WIC nutrition care plan through Crossroads.

CACFP Medical Statement for Meal Modification

This form is used to request meal modifications for individuals with medical conditions participating in the CACFP.

Who develops the plan(s) of care?

Medical Statement for Students with Unique Mealtime Needs for School Meals

This plan is developed through a collaborative effort among the school nurse, other school staff (school nutrition administrator, school district, etc), parents, and healthcare professionals.

WIC Program Medical Documentation (Infant and Child forms available)

This plan is developed by a health care provider and is subject to WIC approval.

Crossroads Care Plan

WIC staff develop the care plan during their visit with the participant.

CACFP Medical Statement for Meal Modification

The plan is developed by a healthcare professional.

How is the plan of care organized? (E.g., What sections are included?)

Medical Statement for Students with Unique Mealtime Needs for School Meals

Parent/Guardian Information

- Student information
- School-based program in which student is participating
- Parent/guardian information
- Nutritional need concerns
- Concerns about ability to participate in mealtimes at school
- Inquiry regarding presence of Individualized Education Plan (IEP)
- Inquiry regarding presence of 504 plan
- Parent signature

Medical Authority Information

(IEP or 504 Plan containing the appropriate information can be used as a substitute for this section)

- Description of impairment
- Role of impairment in the student's diet
- Major life activities affected
- Food allergies/intolerances
- Dietary restrictions
- Foods to be omitted and their recommended substitutions
- Food consistency requirements for foods and liquids
- Other descriptions of eating patterns
- Medical authority signature

School District Administrator Information

- School Nutrition Administrator signature
- IEP/504 Coordinator signature

WIC Program Medical Documentation (Infant and Child forms available)

Participant Information

- Name
- Medical condition requiring prescription

Formula/Product

- Formula/product name
- Amount per day
- Special preparation instructions
- Duration of prescription

Supplemental Foods

- Specifications for exclusion of infant cereal and infant fruits/vegetables (infant form)
- Specifications for exclusion of other supplemental foods (child form)

While Milk Request (child 24 months of age or older) Health Care Provider Information

- Signature of health care provider
- Provider name
- Medical office/clinic
- Phone number
- Fax
- Date

How is the plan of care organized? (E.g., What sections are included?) Continued

Crossroads Care Plan

The WIC Care Plan includes nutritional education, breastfeeding support (if applicable), goals, referrals, WIC food package prescription, and follow-up.

CACFP Medical Statement for Meal Modification

Participant Information:

- Name
- DOB
- Parent/Guardian name

CACFP Facility Information:

- Facility name
- Facility phone
- Facility representative name
- Facility address

Health Care Provider Information

- Description of medical condition
- Beverages/foods to omit
- Beverages/foods to be substituted
- Other dietary needs or modifications
- Signature

Where is the plan of care stored?

Medical Statement for Students with Unique Mealtime Needs for School Meals

School Food Authorities must store a copy of the medical statements related to meal modification. The recommendation is for this to be stored in the child's Cumulative Health Record with the school nurse.

WIC Program Medical Documentation

Medical documentation is stored in the patient's record in Crossroads (the WIC information system).

Crossroads Care Plan

The WIC Care Plan is stored in Crossroads.

CACFP Medical Statement for Meal Modification

The CACFP Medical Statement for Meal Modification is stored with the institution administering the program.

Improving Integration for Child Well-Being: Food and Nutrition

In what ways does this Core Child Service area currently collaborate with any of the other Core Child Service areas?

The Food and Nutrition service area works closely with early care and education (Head Start) and is integrated in schools through the school-based nutrition programs, which are overseen by the North Carolina Department of Public Instruction. School nutrition programs also interact with child welfare to determine direct certification eligibility. This service area, and especially the WIC program, also collaborates with clinical health and with Title V.

What are the gaps and needed capabilities in this Core Child Service area?

Lack of communication and technology infrastructure/data sharing between systems

- There is no technology infrastructure or data sharing to support communication between certain nutrition programs, such as FNS and WIC. This creates repetitive application processes and limits identification and referral of eligible participants enrolled in one but not another of these programs.
- There is limited communication between health care providers and WIC, and patients must fill out an Exchange of Information form in order to allow for data sharing. This can lead to duplicate measurements, labs, and assessments.
- Primary care visits and WIC visits are not aligned, which means individuals may need to come in for a WIC recertification physical, then follow up with their primary care provider for a separate physical.

Varying income, resource, and citizenship eligibility requirements for federal programs

- Different eligibility requirements for various food and nutrition programs creates confusion and misinformation around who may be eligible.
- Lack of awareness around citizenship and requirements can create hesitancy in seeking program enrollment among working and/or immigrant families

Stigma limiting program reach

- Participants in certain programs can be easily identified by their peers/community. For instance, kids enrolled in the School Breakfast Program can be identified by their peers, as they have to go to the cafeteria to eat their free meals. This can lead to shame and can cause some kids to forgo breakfast. In grocery stores that have special aisles for WIC-eligible foods, participants may avoid entering the aisle do to shame of being seen.

Transportation barriers

- Traditionally, the WIC intake visit, quarterly follow-up visits, and benefit issuance require physical presence at the local WIC office, creating barriers for patients with alternate daytime commitment or transportation barriers. These requirements have been temporarily waived during COVID-19.
- Using WIC benefits for food purchasing requires physical presence at authorized WIC vendors, with no online purchasing allowed. This creates time and transportation barriers, especially with increased availability of online shopping/delivery as an alternative.

*What are the gaps and needed capabilities in this Core Child Service area? Continued**Food purchasing limitations*

- Both WIC and FNS benefits must be redeemed at authorized vendors. This can create limitations among families who prefer to shop at alternate retailers.
- WIC food packages limit which foods can be purchased based on their nutritional profile. Families therefore have to navigate the grocery store and select foods that are approved in the package. This can be time-consuming and burdensome.

Language barriers

- Individuals who speak a language other than English can face difficulty navigating program resources and the application process.

Community Eligibility Provision (CEP) Schools

- Not all schools eligible for school-wide NSLP access through the Community Eligibility Provision participate in the program

Have you seen any of these solutions tried before, and if so, how successful do you feel they were?*Lack of communication and technology infrastructure/data sharing between systems*

- School systems use direct certification to automatically enroll kids in households receiving SNAP/TANF/FDPIR for school meal programs. As a result, over 90% of SNAP-eligible kids are directly certified for free school meals.
- Several states have pilots in place that allow for data matching and text outreach to WIC-eligible families enrolled in SNAP. Initial results from these pilots have shown some promise in improving certification rates.
- Some states have information systems in place that inform Medicaid, TANF, SNAP, and Child Care applicants that they may be eligible for WIC

Varying income, resource, and citizenship eligibility requirements for federal programs

- FNS enrollees are automatically eligible for school meals, which has simplified cross-program enrollment

Stigma limiting program reach

- Some states have implemented apps with WIC barcode scanners for an easier shopping experience

Transportation barriers

- NC has existing WIC waiver in place to bypass physical presence requirements, which has improved enrollment
- The FNS program is undergoing an online purchasing pilot to allow for online shopping

Language barriers

- In New York, the WIC Strong Campaign was developed to improve community awareness and outreach. As part of this, a user-friendly website was developed that can be automatically translated into over 100 languages.

For additional barriers and potential solutions involving the WIC program specifically, please see the following report by the Food Research & Action Center (FRAC)

Suggested Activities for Service Integration Coordinator in Food and Nutrition

What are some suggested activities, including roles and responsibilities, that the Service Integration Coordinator in this Core Child Service area could do to better integrate care and reduce out of home placements of youth?

Inform families about federal food/nutrition programs, including general eligibility requirements, and direct them to appropriate resources and application forms

- Provide information about various food and nutrition programs and identify individuals/families who may qualify
- Provide families with appropriate website links and phone numbers to their local DHHS/DPI offices
- Provide families with paper or online forms, depending on their access to and comfort with technology
- Direct families to emergency food resources and food banks
- Inform families eligible for CACFP about participating institutions

Assist families with applying for federal food assistance programs

- Assist with filling out WIC referrals
- Highlight phone number to FNS interpreter services, if needed
- Ask families if they need assistance with the FNS application process and if so, check the appropriate box on the FNS form in order to facilitate outreach from the local DHHS department
- Make sure eligible families are enrolled in school meals

Facilitate cross-program communication

- Ensure that kids qualifying for school meals through direct certification are enrolled
- Ensure individuals who meet categorical eligibility criteria for FNS are aware of their higher income limits for program participation
- Ensure individuals enrolled in the National School Lunch Program are also enrolled in other school meal programs

Provide emergency resources to complement federal programs

- Provide families with information about how to access food banks and pantries

Provide information about educational programs

- Discuss educational programs such as SNAP-Ed and EFNEP that help individuals maximize their food benefits, improve their nutrition, and handle food properly

Provide education on how to use WIC package

- Assist families with discovering ways to use their WIC package

Assist with arranging transportation to appointments

- Ensure transportation provisions to local DHHS offices and to WIC appointments
- Ensure transportation to authorized grocery stores/vendors

Appendix E: Nutrition Program Use: Barriers and Suggestions Infographics

Transportation

Getting food to people's doorsteps
Getting to appointments

Stigma

Participants can be easy to identify:
can lead to shame

Language

Communication and application barriers

Technology Access

Limitations accessing online applications/resources

Enrollment

Complex applications
Eligibility misinformation
Appointment wait times

Nutrition program use: barriers

NC InCK
NC INTEGRATED CARE FOR KIDS

Identify



1. Screen for food insecurity
2. Assess for eligibility for various federal nutrition programs (Food Nutrition Services, Special Supplemental Nutrition Program for Women, Infants, and Children, school meals, etc)

Educate



1. Teach Care Coordinators and Community Health Workers about federal nutrition programs and eligibility criteria
2. Increase awareness about programs such as NCCARE360, which can help connect individuals to community resources

Outreach



1. Place staff from various federal nutrition programs in clinics, schools, and other sites where potentially eligible individuals are located
2. Use enrollment in one federal program to identify potential eligibility for other programs
3. Provide interpreters and translators to communicate with individuals who speak a language other than English

Connect



1. Provide delivery services to individuals with transportation barriers. This can be done in the form of vouchers for ride services such as Uber and Lyft.
2. Use telehealth appointments for follow-up visits
3. Develop pop-up food pantry services

Suggestions



Systemic Recommendations



Extend existing COVID waivers to increase access to federal nutrition programs.

Provide universal, free school meals to all students.

Increase transportation access to all individuals.

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