

Policy Approaches to Healthier Food Banking



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Executive Summary

The COVID-19 pandemic has triggered unprecedented financial and health hardship for millions of U.S. households and placed tremendous stress on the charitable food system (CFS). At least 1 in 5 people, or 60 million individuals, turned to the CFS in 2020,¹ and food banks are serving 55 percent more people than before the pandemic.²

Due to discrimination and structural racism, food and nutrition insecurity disproportionately affect racial and ethnic minorities. While the national food insecurity rate of 10.5 remained constant from 2019 to 2020,³ the rate increased for Black households (19.1 percent to 21.7 percent),⁴ Hispanic households (15.6 percent to 17.2 percent),⁵ and households with children.⁶

The CFS, our nation's network of emergency feeding programs, is meant to be a last resort. Federal food assistance programs, like the Supplemental Nutrition Assistance Program (SNAP) and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), serve as a first line of defense against food insecurity. SNAP alone provides nine meals for every one that Feeding America food banks provide.⁷ Yet, food assistance benefit levels and coverage are inadequate.⁸ Despite USDA recently increasing SNAP benefits by adjusting the basis for calculating them,⁹ when current pandemic boosts to SNAP end benefits will only average about \$1.80 per person, per meal.¹⁰ And eligibility rules, like SNAP's income and work requirements,¹¹ limit participation. For many, SNAP remains inaccessible and insufficient to meet their needs, leaving them with little choice but to turn to an already overburdened and under-resourced CFS.

Food insecurity and inadequate nutrition often co-exist in populations with low incomes, leading many to conceptualize food insecurity as a social welfare problem. Food insecurity is better framed as a public health issue: adults and children in food insecure households are at greater risk of developing chronic disease and illness than adults and children in food secure households.¹²

People who rely on the CFS both want and deserve nutritious food and beverages that support their health.¹³ Yet a 2018 report

by MAZON: A Jewish Response to Hunger and the Rudd Center for Food Policy and Obesity found that, on average, 25 percent of food bank distributions remain unhealthy.¹⁴ Many food banks have adopted nutrition policies to encourage healthier donations and discourage donations of “junk food,” such as candy and soda, and one in seven formally ban certain unhealthy items.¹⁵ Yet even food banks with formal bans still struggle with unwanted donations and insufficient donations of healthy food.

Improving the nutritional quality of CFS offerings requires prioritizing nutrition across all donation streams. Food banks receive most of their inventory from the food industry (retailers, distributors, manufacturers, farmers, growers, hotels, and restaurants) (60 percent) or the government (23 percent) and purchase the rest.¹⁶ Federal and state public policies impact both industry and government donation streams. Therefore, policy interventions have great potential to shape the nutritional quality of CFS food.

We conducted research to determine how federal and state governments can better leverage public policy to increase the amount of nutritious food and decrease the amount of unhealthy food donated to food banks.¹⁷

Our methods were: 1) a policy scan of the laws, regulations, and administrative decisions affecting food donations to food banks, sorting these policies into ten categories, and analysis of whether the policies support or hinder nutritious donations; and 2) structured key informant interviews (KIIs) of food bank executives, food retail company executives, and other CFS stakeholders and subject matter experts on eight of the policy categories¹⁸ roles in encouraging or hindering nutritious donation, and challenges and barriers to donation.

We found that of 295 laws, regulations, and administrative decisions related to the CFS—42 federal and 253 state—only 43 (14.6 percent) prioritize nutritious food donation over unhealthy food donation.

KII interviewees reported that:

- USDA Food Distribution Programs and state direct-

spending programs largely provide nutritious food.

- Organic waste bans have either a positive or neutral impact on the nutritional quality of donations.
- Date labeling policies hinder the amount of nutritious, packaged food that donors send to the CFS.
- Tax incentives have either a neutral or unclear impact on donation generally and nutritious donation specifically.
- Game donation policies promote nutritious donation but food banks only receive these donations in modest quantities or not at all.
- Policies impacting school donation have little impact on nutritious donation because food banks receive a small amount of food via school donation.
- Food safety policies are inadequate in providing regulatory guidance on food donation and strengthening them could boost donation, particularly of often-nutritious, highly perishable food.
- Liability protection policies encourage donation of all food, regardless of nutritional quality.

Informed by the KIIs, we formed 18 public policy recommendations to improve the proportion of healthy food donated to the CFS ranging from improvements to federal food assistance programs to amending regulations governing food safety. The three most impactful policy reforms, because they would result in high volumes of nutritious donations, would be to:

The three most impactful policy reforms...

1. **Strengthen** the nutritional quality of United States Department of Agriculture (USDA) Food Distribution Programs, which include the Emergency Food Assistance Program (TEFAP), the Commodity Supplemental Food Program (CSFP), and the Food Distribution Program on Indian Reservations (FDPIR);
2. **Introduce or strengthen** government farm-to-food bank programs; and
3. **Implement** additional state-level organic waste bans.

We encourage legislators and advocates to use the following policy recommendations to ensure that CFS clients have sufficient access to quality, nutritious food.



Endnotes

- 1 Feeding America. *Feeding America Estimates at Least 60 Million People Turned to Charitable Food Assistance in 2020*. September 1, 2021. <https://www.feedingamerica.org/about-us/press-room/60-million-turned-to-charitable-food-2020>. Accessed October 28, 2021.
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- 7 Feeding America. *The charitable sector can't solve hunger alone*, n.d. <https://www.feedingamerica.org/sites/default/files/2020-03/Feeding%20America%20orange%20slice%20AHPC%202020.pdf>. Accessed June 23, 2021.
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- 12 Gregory C, Coleman-Jensen A. *Food Insecurity, Chronic Disease, and Healthy Among Working-Age Adults*. United States Department of Agriculture. July 2017. <https://www.ers.usda.gov/webdocs/publications/84467/err-235.pdf>. Accessed June 23, 2021; Gundersen C, Ziliak JP. Food Insecurity and Health Outcomes. *Health Affairs*. 2015; 34(11):1830-1839; Weinreb, et al. Hunger: Its Impact on Children's Health and Mental Health. *Pediatrics*. 2002; 110(4):e41; Skalicky, et al. Child Food

Insecurity & Iron Deficiency Anemia in Low-Income Infants & Toddlers in the US. *Maternal and Child Health Journal*. 2006; 10(2):177-185.

- 13 Campbell, et al. Food Preferences of Users of the Emergency Food System. *Journal of Hunger & Environmental Nutrition*. 2011; 6:2, 179-187. Herein, “food” will be used for brevity, but refers to both foods and beverages.
- 14 Feldman M, Schwartz MB, PhD. *A Tipping Point*. MAZON: A Jewish Response to Hunger. 2018. <https://mazon.org/wp-content/uploads/MAZON-Report-TippingPoint.pdf> Accessed December 19, 2020.
- 15 Feldman, 2018.
- 16 Feldman, 2018.
- 17 The aim is to accomplish these goals without increasing the volume of food waste generated in food systems, but rather by capturing more of the available but currently wasted food.
- 18 We did not ask interviewees questions about policies in two categories – grant programs and policies authorizing donation of certain food(s) - because policies in these categories were too disparate.