



2023

The Greater Boston Food Bank's Third Annual Statewide Report

OPPORTUNITIES TO IMPROVE
Food Equity and Access
IN MASSACHUSETTS:
ENDING HUNGER—TOGETHER

The Greater Boston
**FOOD
BANK** [®]
Feeding Eastern Massachusetts

In collaboration with

 Mass General Brigham

Supported by the

dese MASSACHUSETTS
Department of Elementary
and Secondary Education

THE SURVEY

GBFB's third annual statewide food equity and access report was created in collaboration with Mass General Brigham and, this year, was supported by the Massachusetts Department of Elementary and Secondary Education through a U.S. Department of Agriculture (USDA) grant.

From November 2022 to January 2023, GBFB conducted an online survey of more than 3,000 adults in Massachusetts. The survey included quotas for income, gender, race/ethnicity, age, education, and region to ensure representation of historically unheard voices. Weighting methods were used to create estimates representative of the Massachusetts population. The survey was developed and adapted with input from state, community, and healthcare partners, including [GBFB's Health and Research Advisory Council](#).

NEW THIS YEAR

For the 2022 survey, the following new features and components were included:

- Data on household and child-level food insecurity rates, including duration and severity according to the USDA Household Food Security Survey Module
- Food insecurity screenings in healthcare settings and referrals to community-based organizations
- Survey delivery in Spanish in addition to English
- Regional data on food insecurity in Massachusetts
- Questions about chronic medical conditions experienced by those with food insecurity
- Questions about coping strategies households use to get enough food
- Questions about the cultural food preferences of food pantry clients



Background

This report highlights research evaluating the state of food insecurity, equity, and access to critical nutrition programs in Massachusetts during 2022. The Greater Boston Food Bank (GBFB) conducted this statewide survey to examine the continued elevated levels of food insecurity households face and their experiences with state and federal nutrition assistance programs. The impact of the persistent high cost of living is revealed through participant responses sharing the difficult choices households are making between food and housing, utilities, medical care, transportation, and education—and the ways they are coping to stretch their food budgets. At the time of this survey, the national COVID-19 Public Health Emergency was still in place, which afforded families extra benefits through the Supplemental Nutrition Assistance Program (SNAP) and reduced the administrative burden of re-enrolling in the program. However, those provisions have since ended, so the data here provides a conservative snapshot of conditions.

The historic national White House Conference on Hunger, Nutrition, and Health—the first of its kind in 50 years—took place in the fall of 2022, and a strategy to end hunger and reduce diet-related disease was announced. Massachusetts has the opportunity to leverage its expertise as a national leader, to support its existing infrastructure and programming, and utilize lessons learned from the pandemic and this research to pursue a statewide holistic multi-sector approach to end hunger in the Commonwealth.

GOALS

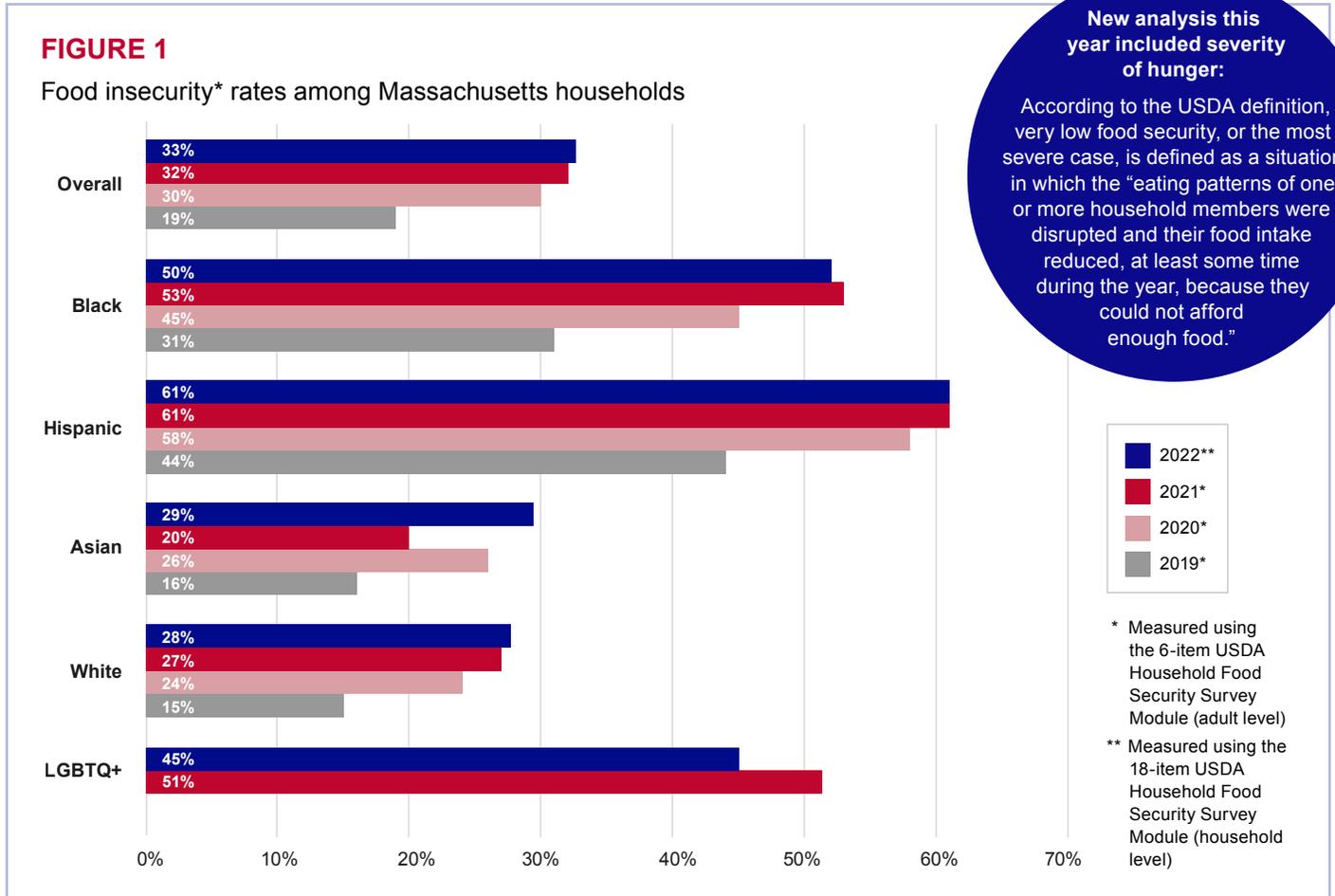
Motivated to further understand food insecurity and food assistance program utilization in the Commonwealth, GBFB conducted this third annual statewide survey. Based on previous report recommendations, the goals were:

- 1 To continue addressing the elevated need and increase awareness of, support for, and enrollment in nutrition assistance programs for entire families.
- 2 Decrease inequities in food access and make nutritious and culturally preferred food available to everyone in need.
- 3 Improve experiences for those receiving services from hunger relief organizations and federal nutrition programs.

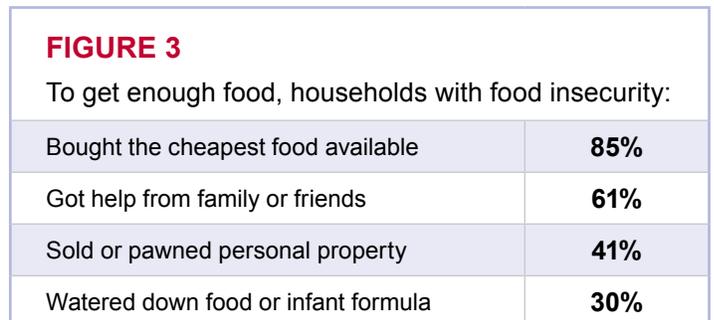
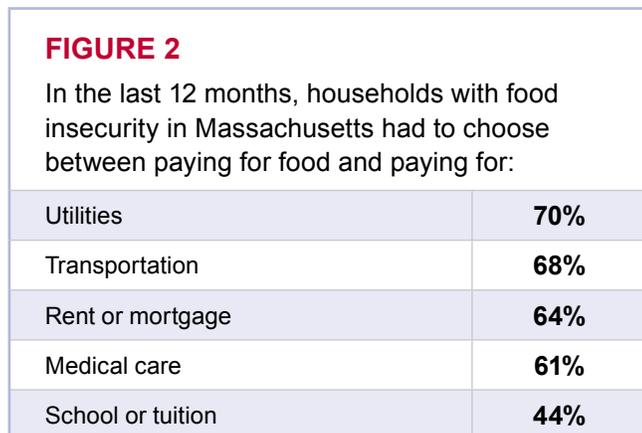
Food Insecurity Rates

During 2022, food insecurity remained high in Massachusetts with approximately **1.8 million** adults reporting household food insecurity, or 33% of the state's population. Many people struggle with food insecurity chronically, with **one in three** individuals reporting running out of food or not having enough money to get more food every month.

Overall, our data found that 20% of households were experiencing “very low food security.”



Trade-offs and Coping Mechanisms



“Eggs where I live are \$8. I’m hardly making enough for bills.”

—HISPANIC MAN, MIDDLESEX COUNTY

Child Food Insecurity Rates

New analysis this year demonstrates that **one in three households in Massachusetts experienced child-level food insecurity.**

This means that a child was hungry, skipped a meal, or did not eat for a whole day because there wasn't enough money for food. Children from households where the adult completing the survey identified as Black, Hispanic, or LGBTQ+ had much higher rates of food insecurity compared with rates overall.

“I worry my child isn’t getting enough food or enough healthy food. As a growing person, nutrition is so important.”

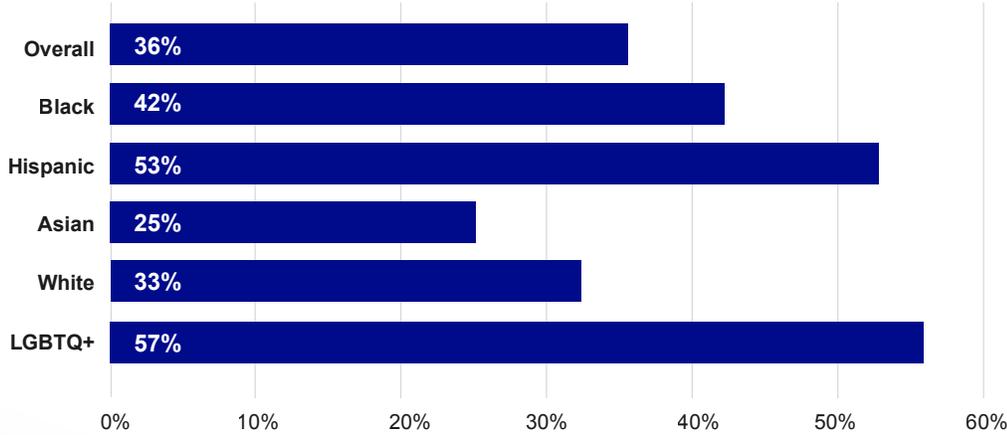
—WHITE MOTHER, NORFOLK COUNTY

“It’s very difficult to have to limit my children on extra food.”

—MOTHER, UTILIZING SNAP AND FOOD PANTRY, ESSEX COUNTY

FIGURE 4

Child food insecurity in Massachusetts in 2022*



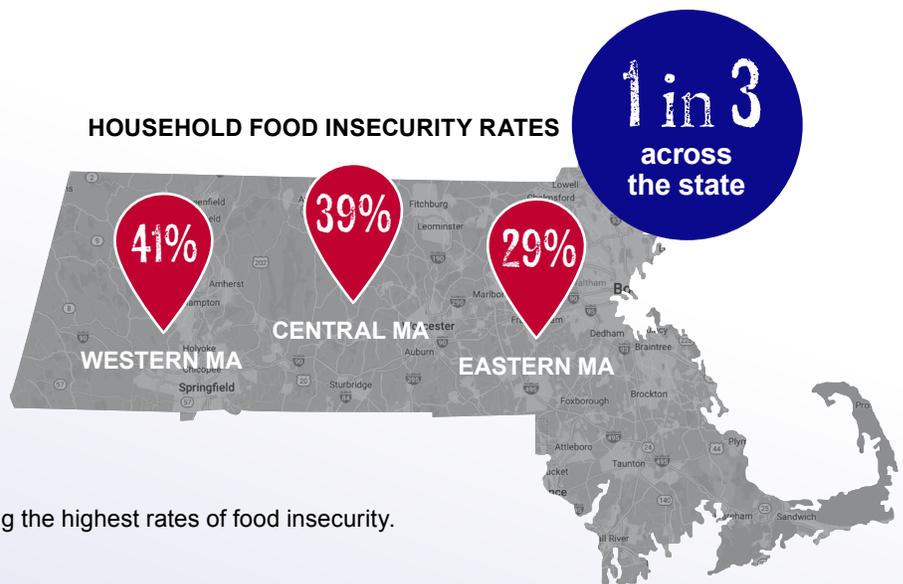
* Measured using the 18-item USDA Household Food Security Survey Module (child-level)

Regional Food Insecurity Rates

Regionally, food insecurity varies greatly across Massachusetts. Our study showed that 29% of households in Eastern Massachusetts—the largest population in the state—are experiencing food insecurity.

Among households with children, the prevalence of child-level food insecurity is 43% in Western Massachusetts, 41% in Central Massachusetts, and 32% in Eastern Massachusetts. Child-level food insecurity data mirrors the household-level data, with Western Massachusetts demonstrating the highest rates of food insecurity.

HOUSEHOLD FOOD INSECURITY RATES

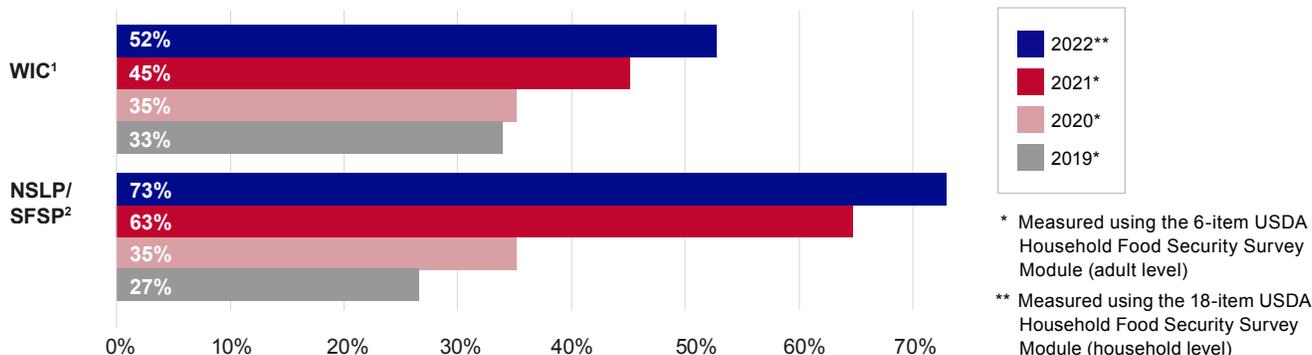


Federal Child Nutrition Program Utilization

Participation in the Federal Child Nutrition Programs increased significantly over the last three years, and qualitative data from respondents demonstrates the need for these programs to address childhood hunger.

FIGURE 5

Child Nutrition Program Utilization



¹ Restricted to households with children under age 5 experiencing food insecurity

² Restricted to households with children under age 18 experiencing food insecurity

“WIC has healthier food options that are too expensive for us to pay for even if using SNAP.”

—LGBTQ+ WHITE WORKING MOTHER UTILIZING FOOD PANTRY, HAMPDEN COUNTY

“WIC doesn’t provide enough for a month, especially if you have a baby on formula.”

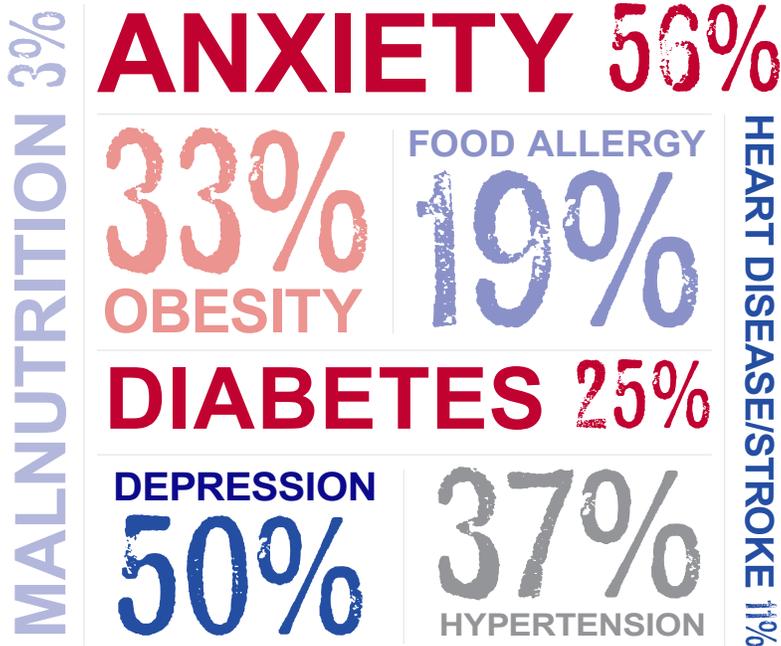
—BLACK STUDENT MOTHER UTILIZING SNAP, HAMPDEN COUNTY



Healthcare and Chronic Health Conditions

This year's survey included questions to address the intersectionality between food insecurity, chronic medical conditions, and healthcare experiences. Participants experiencing food insecurity reported these chronic health conditions diagnosed by a health provider—with many experiencing multiple conditions in their households at the same time.

Among populations receiving SNAP benefits and utilizing food pantries, anxiety and depression rates were found to be nearly double the rate of the rest of the state.



“I think that perhaps healthcare providers can be equipped with information on how their patients can improve their quality of lives and address their food insecurity problems and how to solve it; for example, where to look for help and advocate for them. Also, they can advise on alternatives to nutrition that the patients lack ... that is affordable.”

—ASIAN WOMAN, ESSEX COUNTY

Food Insecurity Screening Experiences in Healthcare Settings

“I think people find expressing the need for help difficult. Ensuring questions are asked in an empathetic and inclusive manner while also paying attention to language barriers is critical.”

—WHITE WORKING WOMAN, MIDDLESEX COUNTY

Participants were asked if they had been screened for food insecurity by a medical provider. Overall, 22% reported being screened and screening rates were higher among those with food insecurity (33%).

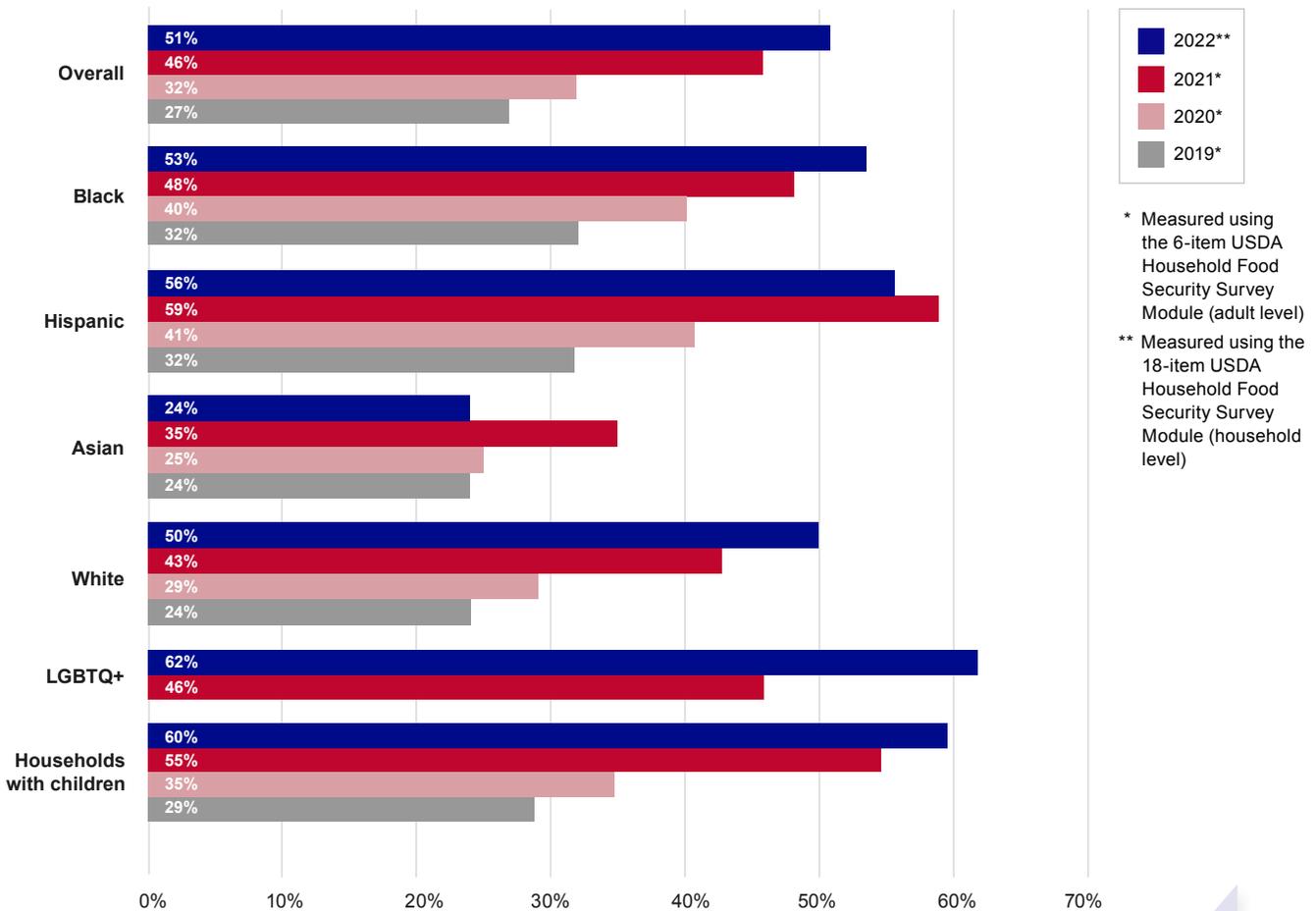
Among those with food insecurity who had been screened, 78% were offered resources and 83% used the resources provided.

Food Pantry Utilization

Among households experiencing food insecurity, food pantry use remained high at 51%, a dramatic increase from 27% in 2019. The largest increases were seen among adults identifying as LGBTQ+ and households with children.

FIGURE 6

Food pantry use among Massachusetts households with food insecurity



“Rents are skyrocketing and so are the cost of bills but the threshold for SNAP has not been raised. My dollar earned has not changed but it buys less now.”

—LGBTQ+ WHITE WORKING WOMAN UTILIZING FOOD PANTRY, BRISTOL COUNTY



Food Pantry Experience

FIGURE 7

Food pantry clients on their pantry experience

Staff speak their language	83%
Felt the food was helpful	79%
Food the food pantry provided are foods that they know how to prepare	79%
Food is what their household likes to eat	73%
Food aligned with their cultural beliefs	72%
Reported pantries had good quality food	72%
Got half or more of their groceries from a food pantry	37%
Reported going monthly	35%

Overall, our report shows decreasing stigma (63% in 2020 vs. 53% in 2022) and less perceived discrimination at food pantries (67% in 2021 vs. 61% in 2022) but more improvements need to be made. This year, more food pantry clients reported that they would recommend food pantries to others compared with last year. Most food pantry clients (60%) received food in less than 30 minutes from when they arrived. Reasons for not using food pantries included being worried about having to share documents to access food, having too many personal assets to qualify, and not knowing when the food pantries were open, which has remained unchanged since 2020.

FIGURE 8

Why new clients started using food pantries in 2022

Increased cost of groceries	54%
Decreased income	27%
Only recently learned about food pantries/banks	21%
Lost job	16%
Reduced hours at work	14%
Lost housing/housing costs increased	12%
Lost federal assistance	9%
Healthcare expenses	8%

Access to Culturally Preferred Foods

The survey included questions addressing the availability of culturally preferred foods.

- One in three food pantry clients identified with a country or culture outside of the United States. Of those clients, 68% reported eating traditional foods from their culture at least one to two times per week.
- Of those identifying with a culture outside of the United States, 70% reported having trouble accessing these foods in general (i.e., at grocery stores, supermarkets, or convenience stores). The most difficult foods to access included meat (70%), seafood (39%), vegetables (35%), fruits (32%), grains (25%), legumes/beans (20%), oils (21%), herbs/spices (21%); Kosher foods (13%), and halal foods (13%).



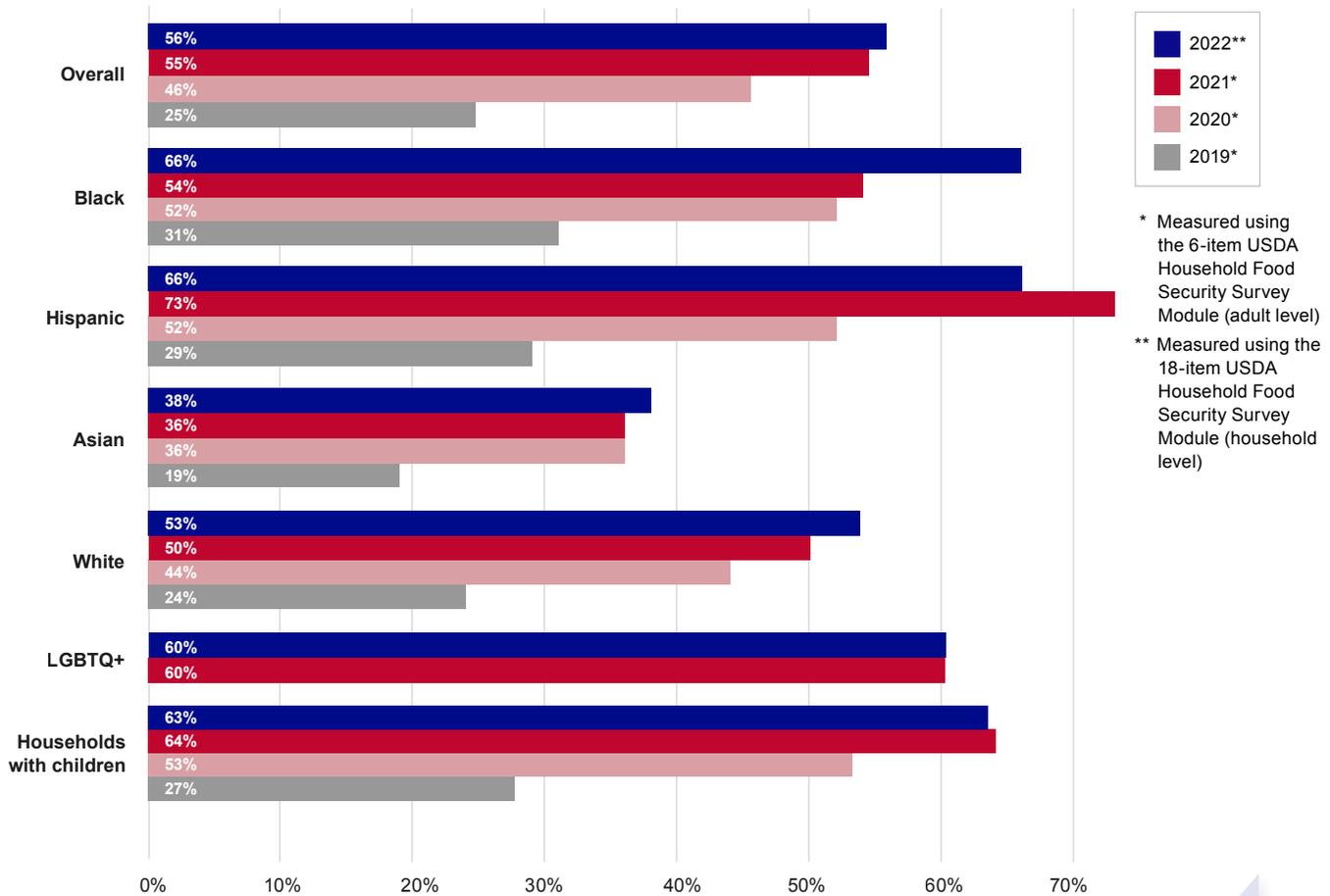
Food pantry clients reported various reasons why they started using food pantries in 2022; the increased cost of groceries was the leading driver of food pantry use.

SNAP Utilization

According to the survey, enrollment in SNAP during 2022 by those experiencing food insecurity was the highest since the start of the pandemic, with 56% of food insecure households reporting enrollment. Households with children reported the biggest increase in enrollment since before the COVID-19 pandemic. In 2022, participants' overall experiences with SNAP were excellent, improving since 2019 due to SNAP benefit increases, the flexibility in enrollment practices authorized by the national public health declaration, statewide awareness campaigns around pandemic-EBT, and the adoption of the state's streamlined application portal for SNAP and MassHealth. Many expressed concern qualitatively over potentially losing increased pandemic SNAP benefits.

FIGURE 9

SNAP use among Massachusetts households experiencing food insecurity



“Currently the plan is to stop the extra SNAP that was provided during COVID. That will certainly cause food insecurity for hundreds of families. For some, it is all they have to buy food.”

—BLACK RETIRED WOMAN UTILIZING SNAP AND FOOD PANTRY, HAMPDEN COUNTY

“I think SNAP is an amazing program and I feel guilty saying it just isn’t enough ... I appreciate it more than I could begin to explain.”

—WHITE PART-TIME WORKING WOMAN UTILIZING SNAP, WORCESTER COUNTY



SNAP Matters

Most adults reported that SNAP was helpful for their household (91%) and felt it was easy to use (92%), and 51% were using SNAP to order groceries online. However, most SNAP participants needed to seek additional food assistance (74%), and nearly half felt the money was not enough (46%).

Over half (58%) of SNAP users reported that they would need \$100 or more per week to meet their household's food needs.

FIGURE 10

Participants relied on the increase in SNAP benefits during the pandemic

Worried about being able to afford enough food if the SNAP increase ended	87%
Were able to pay more of their bills	65%
Reported that they visited a food pantry less because of the increase	58%

“Don’t cut off the extra SNAP benefits given for the pandemic; inflation is making things worse than ever.”

—WHITE RETIRED WOMAN UTILIZING SNAP AND FOOD PANTRY, HAMPDEN COUNTY

“It would be a weight off my shoulders to know I could continue to feed my kids without money out of my pocket that I need to spend on things like rent and bills. As a single mother without any financial support, SNAP helps a great deal.”

—WHITE PART-TIME WORKING MOTHER UTILIZING SNAP, MIDDLESEX COUNTY

SNAP Experience

FIGURE 11

Reasons for not using SNAP reported by households experiencing food insecurity in 2022*

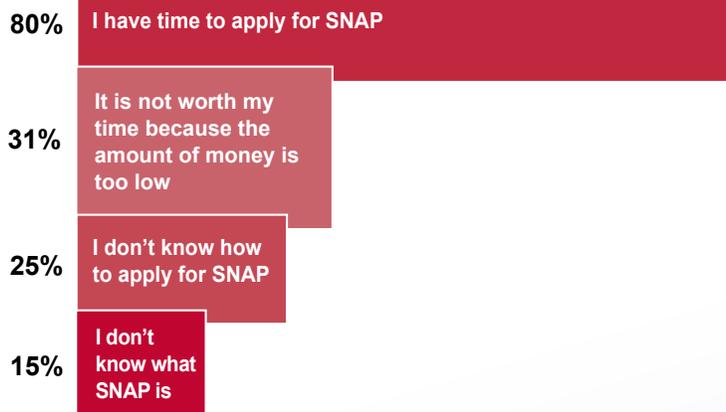
STIGMA AND SELF-RELIANCE



“My partner and I both work two jobs. Our wages are staying the same but the prices of everything else including rent, utilities, gas, groceries, etc. are going up. Our quality of life has dramatically decreased within the past two years.”

—WHITE WORKING WOMAN,
MIDDLESEX COUNTY

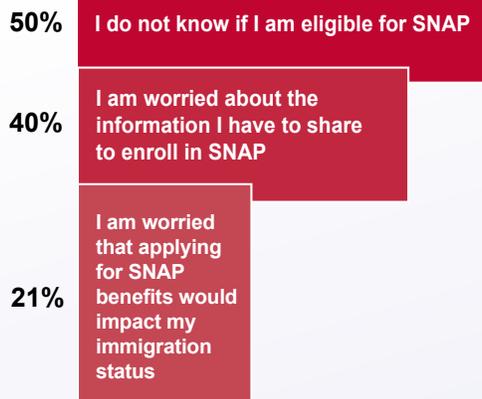
KNOWLEDGE AND CONVENIENCE



“When you get to be my age, you worry over questions like, ‘Are you going to have enough food to eat for the month? Do you have to buy groceries instead of paying for your medicine?’ I have to make that choice most of the time.”

—WHITE WOMAN WITH A
DISABILITY UTILIZING SNAP,
SUFFOLK COUNTY

ELIGIBILITY CONCERNS



* Measured using the 18-item USDA Household Food Security Survey Module (household level)

“Our high rent is making it hard to afford other necessities of life.”

—WHITE WORKING SENIOR UTILIZING FOOD PANTRY, ESSEX COUNTY

“Prices are out of control... never thought I would need assistance.”

—WHITE SENIOR WOMAN UTILIZING FOOD PANTRY, DUKES COUNTY

Summary of Findings

During 2022, obtaining healthy food remained a challenge for many households, as evidenced by persistent food insecurity rates among households and reported reliance on food assistance programs such as SNAP, WIC, and NSLP/SFSP, which reached the highest levels since the start of the pandemic. Concurrently, economic challenges continued due to inflation and the end of key programs such as the Child Tax Credit.

Households facing food insecurity experienced some relief, as stigma and perceived discrimination at food pantries seem to be decreasing, and most clients reported improved experiences. Data reveals that promising interventions in healthcare settings—like food insecurity screenings and resources referrals by trusted clinicians—are beneficial. In addition, an October 2022 reevaluation of the Thrifty Food Plan led to increased SNAP benefits and enrollment access. All demonstrating that more upstream solutions in addition to the helpful pandemic allotment increases allowing people to purchase food at the grocery store are needed to address food equity and access.

The end of the pandemic public health emergency relief benefits may lead to household spending trade-offs and a higher reliance on food distribution programs like pantries, especially for those at greatest risk. For example, many households reported buying the cheapest food available or watering down food or infant formula. Participants also expressed the challenge of acquiring culturally preferred foods as an additional barrier to equitable food access.

Addressing the ongoing hunger crisis requires a renewed and holistic coordination of efforts across community and healthcare settings in order to position the Commonwealth to thrive in the future.

“Buying fruits and veggies has gotten so much more expensive. Trying to eat healthy has become very difficult.”

—WHITE WORKING MOTHER UTILIZING SNAP, MIDDLESEX COUNTY



Recommendations for Improving Food and Nutrition Security in Massachusetts

Food insecurity and nutrition-related chronic disease are largely preventable when policies and programs have a coordinated approach and prioritize improving health through multisector collaboration. As outlined in the National Strategy on Hunger, Nutrition, and Health, hunger relief organizations, federal and state food assistance programs, and the healthcare, education, and retail sectors can continue to strive to meet the needs of those experiencing food insecurity by:

- Supporting public policy that prioritizes adequate and sustainable funding
- Promoting equitable access
- Removing systemic barriers from federal nutrition programs



Public Policy Recommendations

FEDERAL

- Support the [National Strategy on Hunger, Nutrition, and Health](#) and specifically prioritize:
 - 1 Improving food access and affordability
 - 2 Integrating nutrition and health services
 - 3 Investing in nutrition and food security research
- Support adequate funding and increase equitable access to nutrition programs in the 2023 Farm Bill and Child Nutrition Reauthorization

STATE

Follow the roadmap identified by Massachusetts anti-hunger leaders after the Conference on Hunger, Nutrition, and Health and prioritize:

- 1 Increasing access to and improving the quality of child nutrition programs
- 2 Increasing access to and the affordability of food for all
- 3 Integrating food access into healthcare
- 4 Strengthening and integrating the local food system
- 5 Ensuring economic stability and promoting economic opportunities to address the root causes of hunger

“Feeding a growing child and two adults in this economy is tough. Inflation is at an all-time high, and we only get \$250 a month from SNAP. One trip to the grocery store is \$120.”

—LGBTQ+ WOMAN, HAMPDEN COUNTY



Specific Policy Priorities

- Make School Meals for All permanent.
- Support the emergency food provider network by adequately funding the Massachusetts Emergency Food Assistance Program (MEFAP).
- Continue to support a robust Common Application that streamlines public benefit program applications.
- Pass 2023 Farm Bill that strengthens and Protects SNAP, TEFAP, and CSFP.
- Prioritize a Child Nutrition Reauthorization bill that strengthens, protects and increases access to the NSLP, SFSP and Summer Meal EBT, and WIC.
- Support policies that provide economic opportunities to low-income families through mechanisms such as the Earned Income Tax Credit and the Child and Family Tax Credit, Transitional Aid to Families with Dependent Children (TAFDC), and Emergency Aid to the Elderly, Disabled, and Children (EAEDC).
- Strengthen and support policies that reimburse for services that integrate nutrition and healthcare, such as the MassHealth 1115 Flex Services Program, medically tailored meals, produce prescriptions, and food insecurity screenings and referrals from providers.



Programmatic Recommendations for Anti-Hunger Efforts

- Prioritize the recommendations and voices of those with lived experiences of food insecurity.
- Strengthen multi-sector collaborations, including healthcare and community partnerships, to increase public awareness of food insecurity, maximize enrollment, and decrease stigma in accessing state and federal benefits.
- Ensure continued distribution of high-quality, nutritious foods with a focus on produce and increase the variety and availability of culturally preferred foods at food banks and pantries.
- Continue to expand and utilize community-centered best practices among hunger relief organizations, staff, and volunteers, including: partnerships for home delivery, trauma-informed care training, language translation, and expanded hours and days of operation.
- To improve services and access, focus investments on food pantries that serve sizable communities of Black, Hispanic, and LGBTQ+ individuals.
- Continue to promote equitable data collection and data-informed food access investments that centers voices of lived hunger experience.



Glossary

Child Nutrition Reauthorization Every five years, Child Nutrition Reauthorization provides Congress with an opportunity to improve and strengthen child nutrition and school meal programs. Although the current law—the [Healthy, Hunger-Free Kids Act of 2010 \(Public Law 111-296\)](#)—expired on September 30, 2015, the programs continue to operate.

Commodity Supplemental Food Program (CSFP) The CSFP works to improve the health of low-income persons at least 60 years of age by supplementing their diets with nutritious USDA foods.

Farm Bill Every five years, Congress reauthorizes the Farm Bill, a comprehensive piece of legislation that authorizes most federal policies governing food and agriculture programs, including the Supplemental Nutrition Assistance Program (SNAP), The Emergency Food Assistance Program (TEFAP), and the Commodity Supplemental Food Program (CSFP).

Massachusetts Emergency Food Assistance Program (MEFAP) MEFAP ensures a consistent supply of quality, nutrient-dense foods and locally grown fresh produce to a statewide network of 1,000 emergency food providers.

National School Lunch Program (NSLP) NSLP is a federally assisted meal program operating in public and nonprofit private schools and residential child care institutions. It provides nutritionally balanced, low-cost or free lunches to children each school day.

Special Supplemental Nutrition Program for Women Infants and Children (WIC) WIC provides federal funding to states for supplemental foods, healthcare referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women and for infants and children up to age 5 who are found to be at nutritional risk.

SNAP – Supplemental Nutrition Assistance Program SNAP provides benefits to supplement the food budgets of needy families so they can purchase healthy food and move toward self-sufficiency.

Summer Food Service Program (SFSP) SFSP is a federally-funded, state-administered program. USDA reimburses program operators who serve no-cost, healthy meals and snacks to children and teens in low-income areas.

The Emergency Food Assistance Program (TEFAP) TEFAP is a federal program that helps supplement the diets of low-income Americans by providing them with emergency food assistance at no cost. To operate TEFAP, the USDA provides 100% American-grown USDA foods and administrative funding to states.

Thrifty Food Plan SNAP maximum allotments (benefit amounts) are updated each year based on the cost of the Thrifty Food Plan, which is the cost of groceries needed to provide a healthy, budget-conscious diet for a family of four.

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Acknowledgments: We thank the survey participants, GBFB's Health and Research Council, and our community partners. We want to thank Mass General Brigham for collaborating with us on this survey. We also thank the Massachusetts Department of Elementary and Secondary Education for funding through a USDA grant.

Suggested Citation: Ruggiero CF, Luo M, Lynn CD, Adams K, Murtha C, Taitelbaum D, Tienken C, Fiechtner L. Opportunities to Improve Food Equity and Access in Massachusetts: Ending Hunger—Together: The Greater Boston Food Bank, 2023.



For more information

Email data@gbfb.org
Visit [GBFB.org/what-we-do/data-research/](https://gbfb.org/what-we-do/data-research/)

ABOUT GBFB

The Greater Boston Food Bank (GBFB) is the largest hunger relief organization in New England and among the largest food banks in the country. In response to the economic impact of the COVID-19 pandemic, GBFB distributed the equivalent of 90 million healthy meals in 2022 through its network of 600 dedicated food distribution partners and programs in 190 communities across Eastern Massachusetts. A member of Feeding America, the nation's food bank network, GBFB's mission is to end hunger here and is committed to providing at least 3 healthy meals a day to everyone in need. To learn more, visit [GBFB.org](https://gbfb.org).

ABOUT MASS GENERAL BRIGHAM

Mass General Brigham is an integrated academic healthcare system, uniting great minds to solve the hardest problems in medicine for our communities and the world. Mass General Brigham connects a full continuum of care across a system of academic medical centers, community and specialty hospitals, a health insurance plan, physician networks, community health centers, home care, and long-term care services. Mass General Brigham is a nonprofit organization committed to patient care, research, teaching, and service to the community. In addition, Mass General Brigham is one of the nation's leading biomedical research organizations with several Harvard Medical School teaching hospitals.



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