

Services for
the UnderServed

Uniting on Food Justice

An Innovative Approach
from a Health and Human
Services Organization

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Executive Summary

Services for the UnderServed (S:US) is not only committed to understanding the primary causes of food insecurity among the communities we serve, we are also looking for innovative approaches to address this need. We define food security as when people have at all times physical, social, and economic access to safe, and nutritious food that meets their dietary needs and food preferences. We examine this through the lens of four major components of food security: availability, access, stability, and utilization.

The current rate of food insecurity in New York City is 12.5% with higher rates in low-income neighborhoods and Black and Hispanic households. S:US' own research found that over half of the people we serve report food insecurity—with 44% specifically reporting, *“I worried whether my food would run out before I got money to buy more,”* was sometimes or often true for them in the past 12 months. Many stated that even when they are able to get enough food from Supplemental Nutrition Assistance Program (SNAP) benefits or pantries, it is often not what they want, and they have little choice in what they eat.

S:US believes that food is a basic right. S:US' White Paper, “Uniting on Food Justice: An Innovative Approach from a Health and Human Services Organization,” discusses the complexities of food insecurity, highlights innovations and best practices in food justice, and calls for collective action to eradicate food insecurity in our communities. S:US food security programs, like our Urban Farming and Community Fridge initiatives, are embedded into our core services to address food insecurity. Highlighting the successes of current food cooperatives, food-as-medicine initiatives, public benefits programs, and culinary skills training that address the four major components of food security, S:US calls for expansion of these innovative programs. Starting with the [*Summit to Serve New York*](#) S:US aims to convene stakeholders and collaborators in the food justice movement to confront food insecurity in a unified, collaborative approach.

S:US: Centering Social Justice in Health Services

As one of the largest providers of community-based health services and housing in New York State, S:US' team of over 1,800 dedicated staff serve over 37,000 New Yorkers each year. For more than four decades, S:US has served individuals and communities who face many complex and intersectional issues and socioeconomic challenges such as people living in poverty, those who have lost their homes, people with mental illnesses and substance use disorders, people living with HIV/AIDS, people with autism and other intellectual/developmental disabilities, survivors of domestic violence, and veterans. Over 90% of people served by S:US programs earn less than the New York City median income and most utilize some form of public assistance. Most of the persons served are people of color and come from diverse cultural backgrounds from predominantly black and brown communities and neighborhoods disproportionately impacted by social and health inequities.

S:US' core mission is to drive scalable solutions to transform the lives of people with disabilities, people in poverty, and people facing homelessness. We embrace solutions that contribute to righting societal imbalances and ultimately creating opportunities for all. At the heart of what we do is a firm commitment to righting the disparities caused by racial discrimination, bias and health inequity, and eradicating these within our practices and programs to help us move towards true social justice. Our program services include a full range of affordable and supportive housing, including permanent housing, shelters, and evic-

tion prevention services; recovery and treatment services, including two Certified Community Behavioral Health Clinics (CCBHCs), residential, and outreach programs; veterans services offering housing, employment and treatment programs; developmental disability services including supported independent living, day habilitation, family supports, clinical treatment, employment assistance, life skills development, advocacy, and enrichment activities; and an urban horticulture program offering therapeutic horticulture nutritional programs, vocational training, and employment opportunities.

We are currently expanding our social justice action framework for what we are doing and what we need to do in order to mitigate these societal imbalances, starting with the following four action areas: Access to Quality/Timely Health Care; Access to Affordable Housing; Expanding Education/Employment Opportunities; and Improving Food Security.

Why Food Security? Why now? And why S:US? Ultimately, we believe in food as a basic right. We also believe in person-centered care: that everyone has a right to choices and direction in their own care. We believe that food should be available and accessible to all communities. These beliefs compel us to engage in the food justice movement, especially given the fact that S:US provides over 2 million meals per year and based on the growing rate of food insecurity experienced by the communities in which we work. In 2020, during the height of the COVID-19 pandemic, we witnessed long lines stretching blocks for food pantries as the communities we serve struggled. The people we serve expressed an increase in need for food resources. To address

this challenge, we partnered with local restaurants and food vendors to deliver meals and groceries to our residences and created the S:US Food Security Resource Hub, an online space for assembling and sharing food security information. In 2022, we expanded our Urban Farming footprint to approximately 20,000 square feet of growing space across 71 locations in the Bronx, Brooklyn, Queens, and Manhattan which produced an estimated 9,100 lbs. of fruits, vegetables, and culinary herbs, equivalent to over 7,500 meals with a market value of over \$45,000. This past year's exceptional harvests from several community farm sites led us to pilot a redistribution program to deliver fresh produce to S:US programs and residents experiencing food insecurity. We engaged a record 624 people in this programming.

Entering its second decade of operation, S:US' Urban Farming program continues to grow and adapt to meet the needs of the people we serve and the larger community. What distinguishes our food security programming from other community gardens and food security initiatives in the city is how we involve the community in every element of the program. Our program is staffed and run by the people we serve. We employ over 20 staff and engage 70 volunteers who are people with intellectual/developmental disabilities and formerly homeless individuals with behavioral health challenges. Our staff members are the farmers who grow and harvest produce and package and distribute food to their neighbors. Our staff know the needs of the people we serve and are advocates for food security programming. They are what makes our program unique and relevant to our communities. We also engage the larger community to shape and participate in the

gardens and harvests. Each year we rely on the generosity and talents of more than 300 community volunteers ranging from neighbors to corporate teams to maintain and scale our community gardens. We believe that this inclusivity is essential to the food justice model.

S:US is committed to understanding what we need to do to mitigate factors related to food insecurity among the communities we serve. We added Social Determinates of Health (SDoH) questions to our annual survey to assess the needs of the people we serve and created solutions and interventions. **As an agency committed to righting societal imbalances, we must take action.** This last year, we have been focusing on learning more about food security, investing in new programming, and collaborating with our community and leaders in the food justice sector to create viable and long-term solutions.

Defining Food Security

Food security is when all people, at all times, have physical, social, and economic access to sufficient, safe, and nutritious food that meets their dietary needs and food preferences for an active and healthy life.¹

When evaluating food security amongst the people we serve, we are looking at four major components, adapted from the 2009 World Summit on Food Security.²



Availability: A community, region, or nation has enough supply of food that is good quality and culturally acceptable.



Access: An individual or household receives enough food to meet all of their needs. Access is not just about having enough quantity of food, but is also about having food of good quality, food that meets the nutritional requirements or dietary needs of the individual or household, and food that matches their cultural and personal choices.



Stability: An individual's or household's food availability remains solid over time.

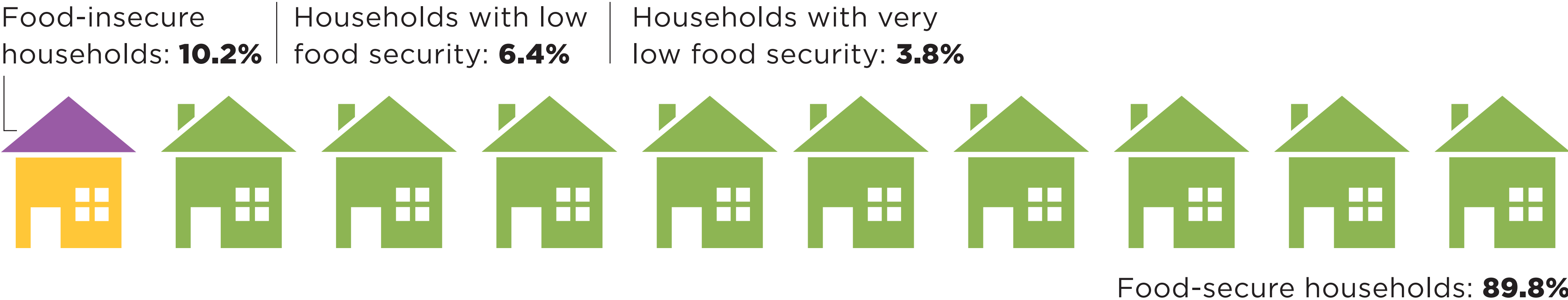


Utilization: An individual or household has the knowledge and resources to transform raw ingredients into nutritious food.

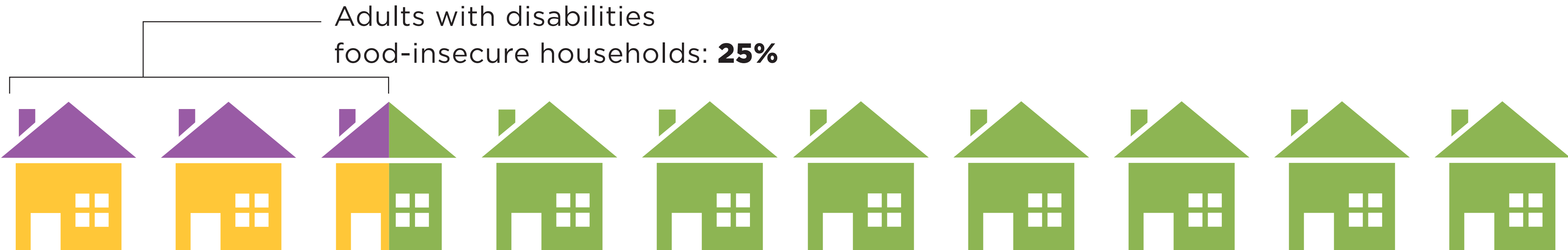
Food Insecurity Impact on Communities

The complexity of food insecurity impacts different communities in different ways. Using the USDA Household Food Security Survey and other databases, we can compare rates of food security across the country, New York City, and different populations.

U.S. Households by Food Security Status, 2021



Source: USDA, Economic Research Service using data from U.S. Department of Commerce, Bureau of the Census, 2021 Current Population Survey Food Security Supplement



Food insecurity rates vary by state, ranging from 5.4% (New Hampshire) to 15.3% (Mississippi) with New York state ranking 22nd in the nation with 10.3% food insecurity rate.³

In New York City, the rate of food insecurity is higher than in other parts of the state. A New York City Council Food Metrics Report estimated NYC food insecurity rates at 12.5%. The rate of food insecurity is highest in the Bronx (16.4%) and Brooklyn (13.5%).⁴

Food insecurity impacts the communities S:US serves in greater portion. Food insecurity disproportionately affects communities of color, people experiencing behavioral health challenges, and people with disabilities. Currently and historically, Black and Hispanic households experience higher levels of food insecurity than White households.⁵ Nationwide, in 2021, 19.8% of Black households reported food insecurity as well as 16.2% of Hispanic households. Rates of anxiety and depression are higher for people experiencing food insecurity (73% versus 31%, respectively).⁶ According to the USDA, rates of food insecurity for adults with disabilities are double that of households without a disability. From a 2021 report, 25% of adults with a disability experienced food insecurity, including 10% who reported very high food insecurity.

Our Research: Food Security Disparities for Underserved Communities

As we focused on food security this year, we conducted mixed method evaluation to guide our next steps. Through a series of surveys, focus groups, and individual interviews, we learned more about what food insecurity looks like with the people we serve and what we could do to promote food justice in our communities.

Over the past three years we asked the people we serve through our annual survey some basic SDoH questions, including one on food resources: Would you like support with accessing a food bank, meal, or grocery delivery?

15% In 2020: 15% (525) of the total 3,458 respondents reported needing support with this resource

13% In 2021: 13% (411) of 3,212 respondents

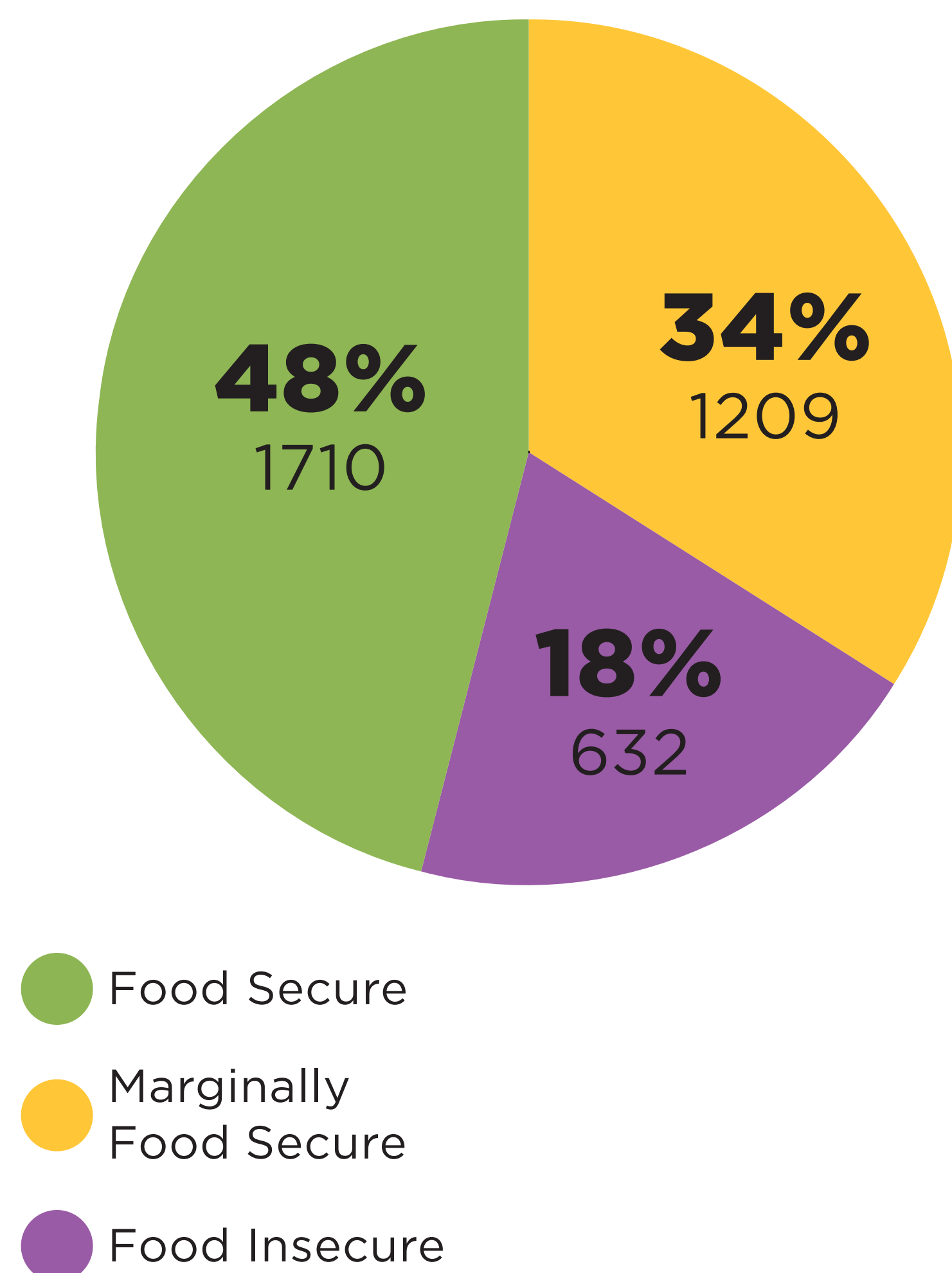
43% In 2022: 43% (1512) of 3,504 respondents

During the fall of 2022, after more than two years of the COVID pandemic, and with increasing reports from staff and people served about growing food security challenges, we wanted to learn more about this need and added more specific questions to our annual survey that would lead us to action. We used questions adapted from USDA Six-Item Short Form of the Food Security Survey (see Appendix). We distributed the survey to over 5,000 individuals who live in our different housing settings or receive services at our various programs.

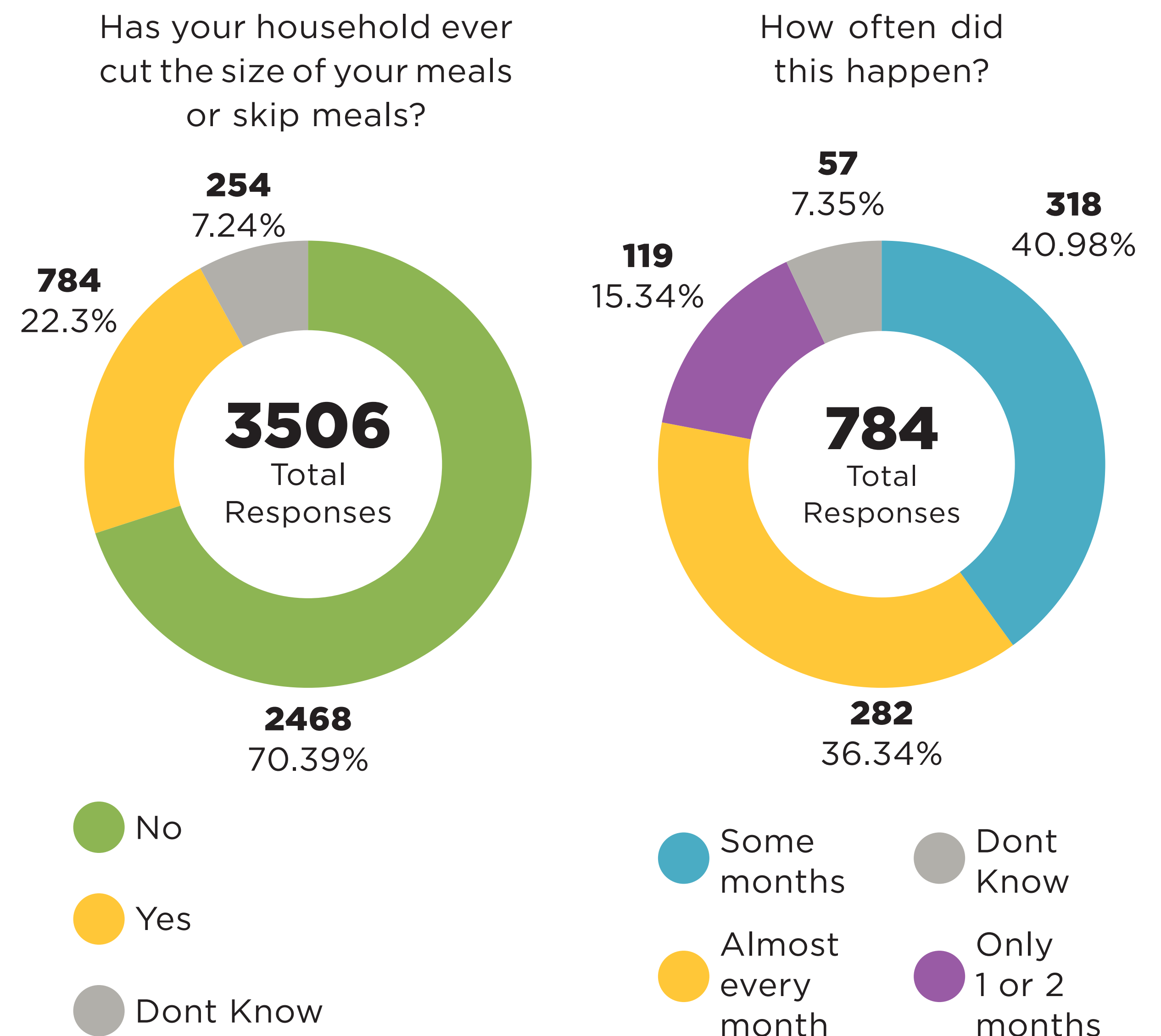
Using USDA’s guidelines to coding and scoring the responses, we developed a Food Security Score for each respondent. The score is on a scale of 0 to 5 from food secure to most food insecure. The scores can be interpreted as two categories: Food Secure or Food Insecure. Another interpretation divides the score into three categories: Food Secure, Marginally Food Secure, and Food Insecure.

Below is the breakdown for all respondents, the total percentage and count of Food Secure, Marginally Food Secure, and Food Insecure. We found that over half of people we surveyed reported some level of food insecurity.

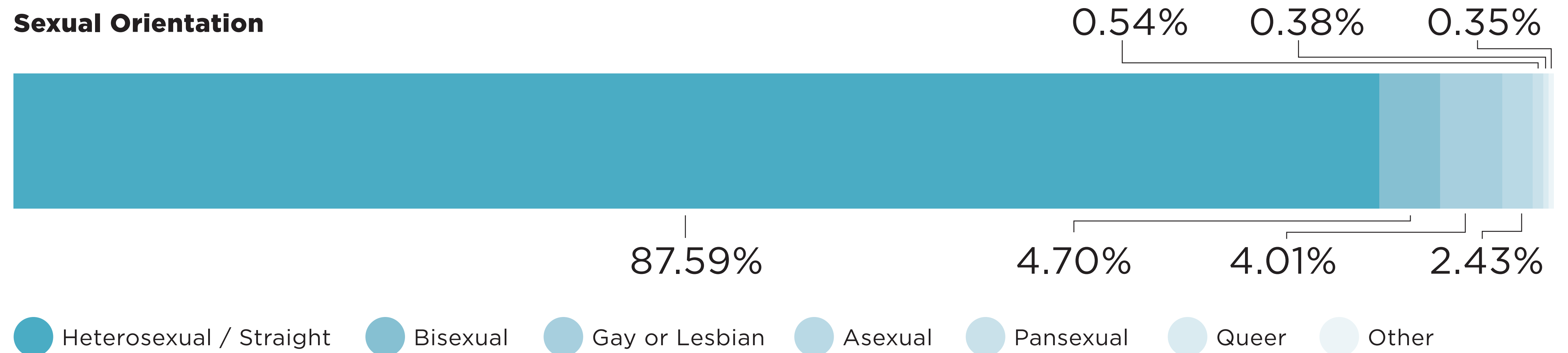
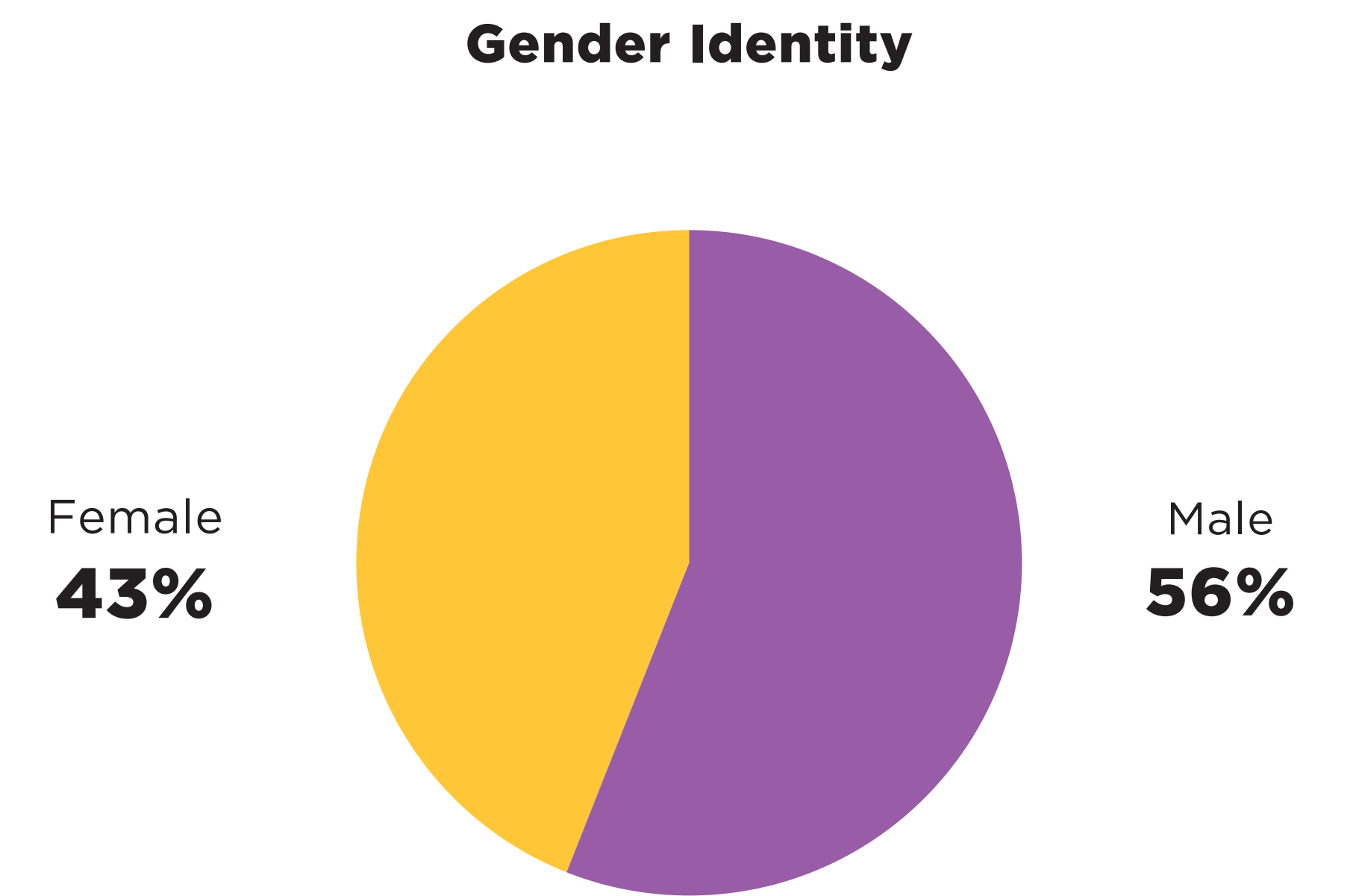
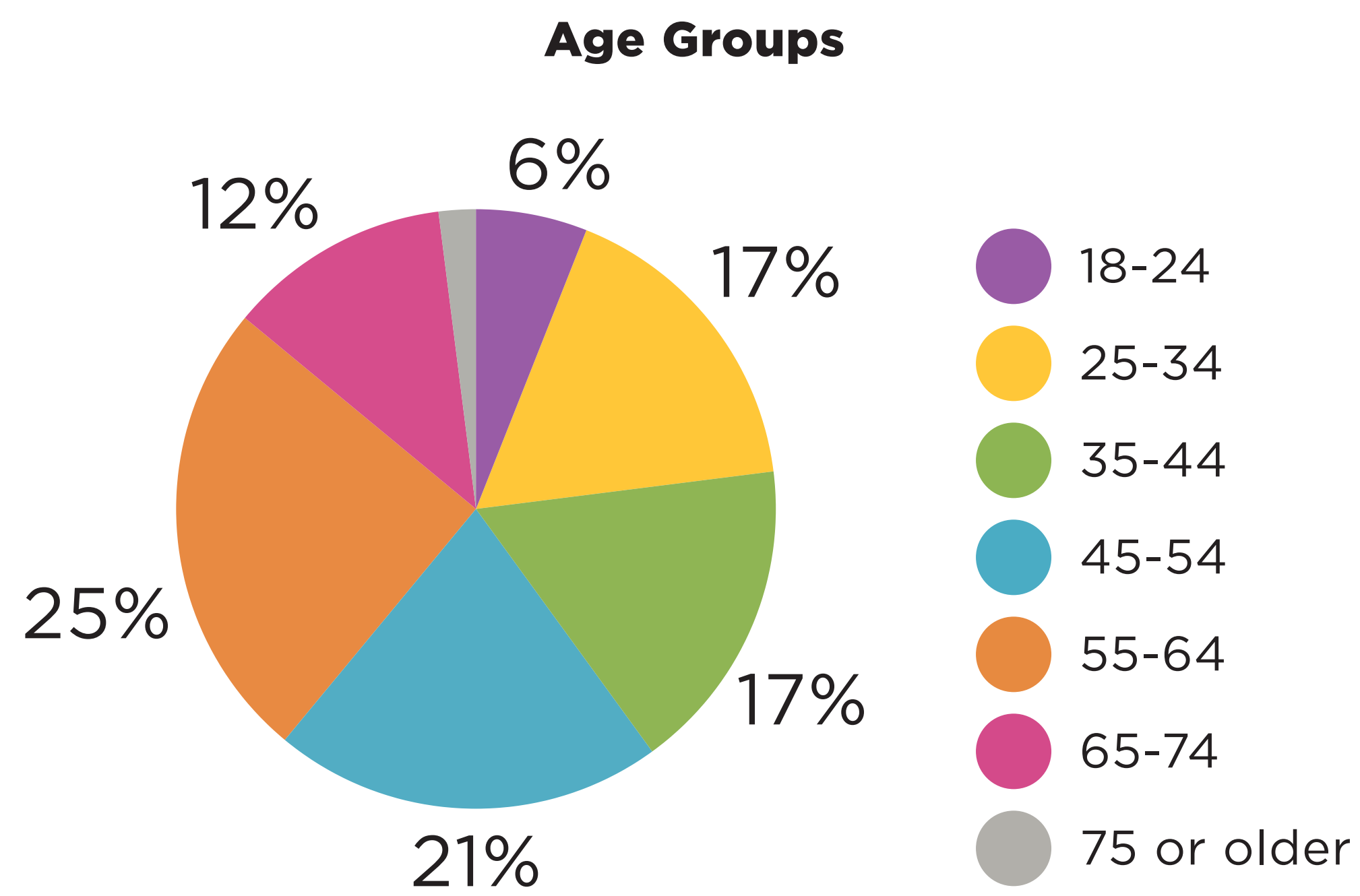
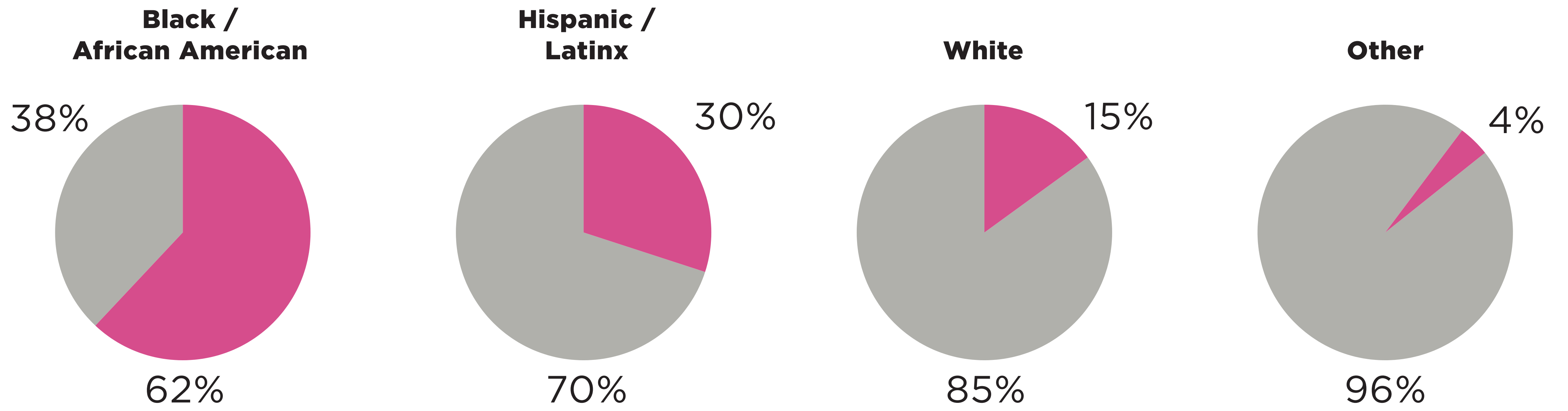
S:US Internal Food Security



Food Scarcity



S:US Demographics



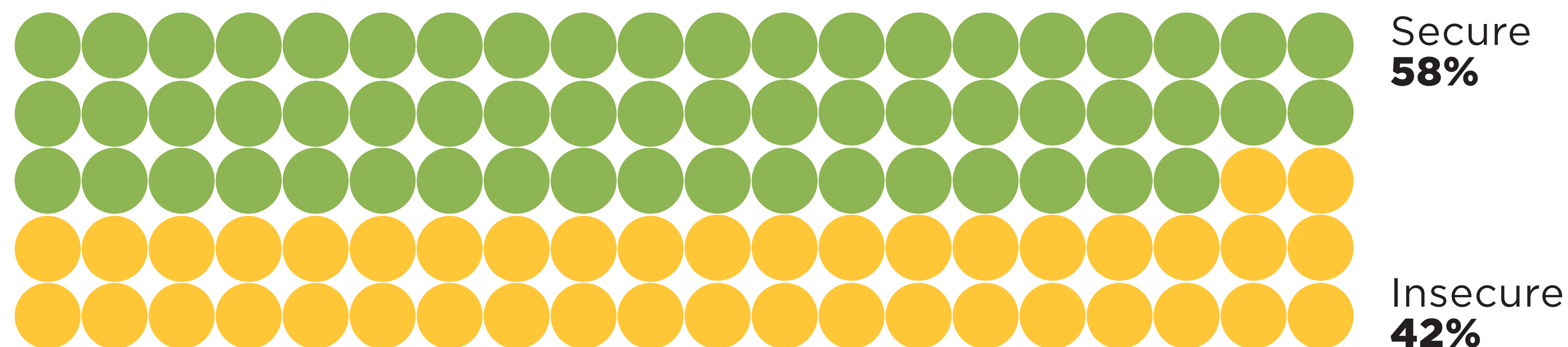
- **22%** of respondents (784 individuals) reported that in the last 12 months they cut the size of a meal or skipped a meal because there wasn't enough money for food. More than one third of those 784 respondents reported that they did this almost every month in the past year.
- **More than one third** of respondents reported that the statement “I couldn't afford to eat balanced meals” was sometimes or often true in the past 12 months.
- **44%** reported that the statement “I worried whether my food would run out before I got money to buy more” was sometimes or often true for them in the past 12 months.
- **41%** reported that the statement “The food that I bought didn't last and I didn't have month to get more” was sometimes or often true for them in the past 12 months.

S:US serves a variety of people in various program types across the city, including our housing, clinics, mobile treatment programs, veteran services, and shelters. We started to drill down to see where these rates were highest and to talk to staff and people we serve to learn more. We saw high rates of food insecurity in our shelters, prompting us to do a more in-depth analysis. S:US currently operates 11 homeless shelters providing services and supports to more than 1,150 people each night. We have shelters for families, survivors of domestic violence, women, people living with HIV/AIDS, and men with mental illness. We were surprised to learn that

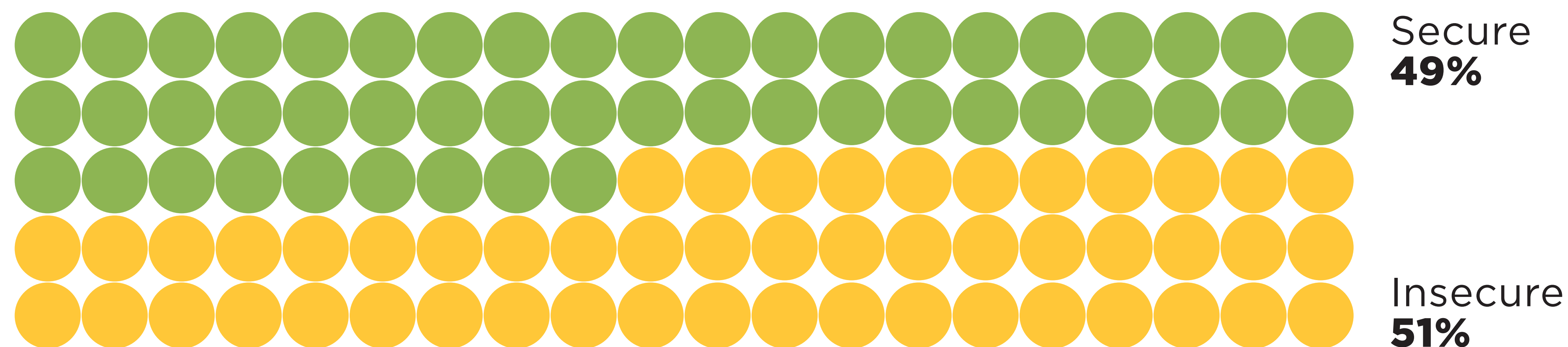
individuals living in our shelters that provide on-site meals reported statistically significantly higher rates of food insecurity.

Shelters

Do Not Serve Meals



Serve Meals



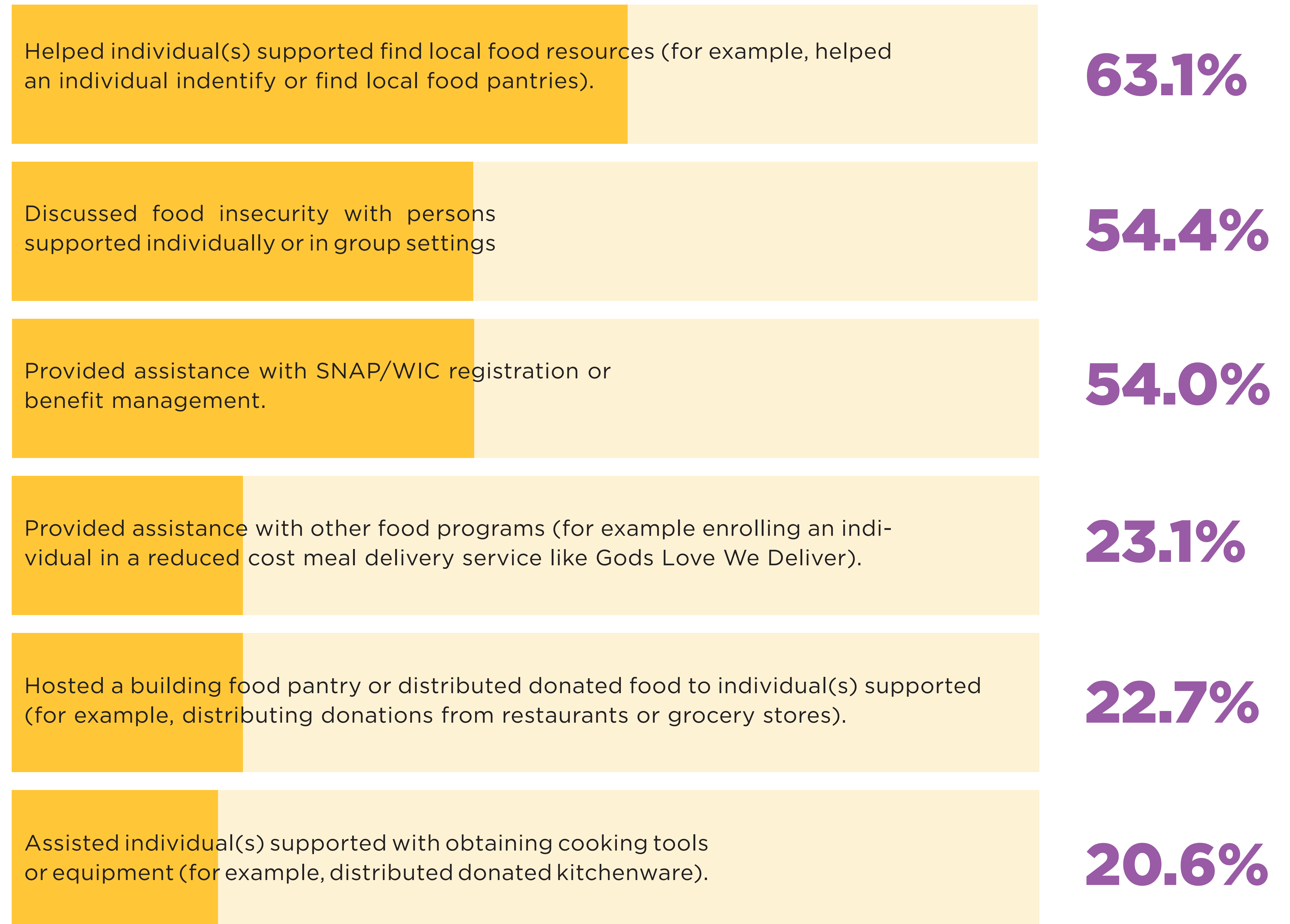
We followed the survey results with a series of focus groups with staff across all programs and individuals served at shelters, and a series of interviews with individuals living in housing. **Echoed by many of the people we serve in focus groups and interviews, food security was more than just having enough food: it was about the availability of affordable, healthy food in their community; accessing foods that meets their cultural and personal choices; and being able to prepare meals.**

When staff were surveyed about food security practices, 85% said that they regularly discuss food security with the people they serve. They also report various and creative ways to improve access to food.

2022 Program Staff Survey on Food Insecurity

Food Security Support

% staff endorsing



0

100

We analyzed the findings from the focus groups and interviews and categorized them by the four areas of food security: Availability, Access, Stability, and Utilization.



Availability: We heard from people we serve and staff that connection to food resources is part of their ongoing care management. Some programs have created on-site pantries, often stocked by staff themselves, and other program staff plan group grocery store trips to travel to larger, more affordable supermarkets. Several of the focus groups centered around the concept of “food deserts,” which refers to the reality that the locations of our programs and the neighborhoods where the people we serve live do not have affordable, quality food available.

- Echoed by many and stated by one staff working in our supportive housing, **“There are very few supermarkets in the area - bodegas are more expensive, sometimes charge extra and allow purchase of hot foods, which generally isn’t allowed with SNAP.”** This results in running out of food benefits early in the month and needing to turn to other food resources.
- We learned from one respondent that she lives in the Bronx but does her grocery shopping near her family in Brooklyn because the food markets near her do not have enough fresh vegetables or meat.



Access: Many stated that even when they are able to get enough food from meals served by their program, SNAP or pantries, it is often not what they want and they have little choice in what they eat. One individual shared,

“Usually SNAP covers all the food but sometimes it doesn’t. I like to eat vegetables when I can get them, but they’re expensive... At times, I can get the food I like. Sometimes I get the stuff I need but not the stuff I want.”

- This was our hypothesis with the survey finding around the rates of food insecurity in the shelters. It was less about food availability but more about access and food sovereignty (determining the quantity and quality of food and controlling how food is produced and distributed). From the focus groups with shelter residents, we learned that they want more choice, more options for when they can have food, and food that is more familiar and culturally sensitive. “Special dietary needs are not commonly accommodated in shelter kitchens – clients just get extra servings of vegetables/side dishes.” We learned from staff that shelters face restrictions on menu-planning, limited food budgets, and are often understaffed.
- We also heard from others that transportation or mobility challenges impact their ability to get to pantries or affordable grocery stores. “I go to food pantries once in a while. I don’t like going because it’s inconvenient to go wait on the line. The selection isn’t great; sometimes I go over there and waste my time.”



Stability: We learned from the people we serve that SNAP and food pantries are essential. Even with these food resources, they experience food insecurity. An individual that lives in our supportive housing shared,

“I get groceries at the 24-hour market near me. Sometimes I go to Costco. S:US helps me find pantries. I have a son who has autism. He has sensitivity to textures in foods, low tolerance to certain foods. His food is not the same as what I eat. SNAP is usually not enough to cover food. I go to pantries if I have time. Otherwise, I just eat what’s at home. I bring up my food issues with S:US and they help. They gave me a one-time grant to buy groceries and gave me a list of pantries in the neighborhood. If I have enough funds, it’s easy to find food I like. It’s just a matter of having enough funds. Fruits and vegetables cost more. I would like to get them if I had the budget.” This family is able to travel to get the food they need and cook their food, but not always enough food or the kinds of food they need.

- Many staff shared the challenges that occur when SNAP recertifications are missed. “Some [individuals we serve] miss notifications about recertification leading to loss of benefits, leaving them with no way to purchase food.”



Utilization: We learned from staff and people we serve that they often do not have the ability to create meals from the pantry and other food resources and rely primarily on pre-made or quick meals. Individuals in transition to permanent housing, particularly from the shelter system, often lack basic culinary skills. We heard general interest among people served and among staff in improving their culinary skills but they did not have the resources to do this at their program.

It did not surprise us to learn that people who report food insecurity also have other unmet Social Determinants of Health needs. When controlling for age, gender, race, ethnicity, and LGBTQIA identity, survey respondents stated these three needs:

2.3 Support with accessing transportation; 2.3 times more likely to experience food insecurity than their counterparts.

1.8 Support accessing entitlements and benefits; 1.8 times more likely to experience food insecurity than their counterparts.

1.3 Support connecting to educational, job training, or employment services; 1.3 times more likely to experience food insecurity.

What we are learning from these inter-related Social Determinants of Health is that **efforts in food justice need to take into account access, mobility, and food sovereignty.**

This research was a first step. We use data to inform our approaches to services, including food justice. We created a Food Security Workgroup, inclusive of staff across varying departments, programs and levels, to review the data, take stock of our current interventions, and create plans for new programming. We held listening sessions with staff to better understand the challenges of addressing food security and we made inventory of their creative solutions. We conducted focus groups at our shelters to ask for recommendations to improve food security. This work, steeped in the expertise of local New York City food justice leaders, has informed our current proposed model and recommendations.

New York City Food Security Programs: The Current Landscape

When surveying best practices and current interventions in our community, we look at organizations that address the four major components of food insecurity: Availability, Access, Stability, and Utilization.



Availability

A community, region, or nation has enough supply of food that is good quality and culturally acceptable.

- **Food Banks and Pantries** across the city are crucial to making food available to those in need. **Food Bank for NYC** serves as the primary emergency food warehousing and sourcing agency, including citywide management of Emergency Food Assistance Program resources.
- New York City has over **130 community fridges** across the five boroughs. Community fridges provide free food to all members of the community. Fridges are often maintained and stocked by community members or a sourcing agency, like Food Bank for NYC. In 2022, S:US launched two community fridges, one in Brooklyn and one in the Bronx. True to our mission and to support food sovereignty, S:US' Community Fridges are operated by adults with intellectual/developmental disabilities who attend our adult day programs and live in our residential programs.



Access

An individual or household receives enough food to meet all of their needs. Access is not just about having enough quantity of food, but is also about having food of good quality, food that meets the nutritional requirements or dietary needs of the individual or household, and food that matches their cultural and personal choices.

- **Food Cooperative** markets have a strong history as a food resource in some New York City communities and are increasingly recognized as an important tool for addressing barriers to food access while advancing food sovereignty (with community members who have decision-making power in market operations). Brick-and-mortar markets like the Park Slope Food Coop are perhaps the best-known structure for cooperative programs.
- **Urban Farms** and **Community Supported Agriculture (CSA)** programs, when communities are present in decision-making and ownership, offer access to good quality, healthy food that matches the cultural and personal needs of individuals. [East New York Farms!](#) addresses food justice by promoting sustainable agriculture, access to locally grown produce, and community education and engagement on growing, preparing, and preserving food.
- **Food Access through Payor Innovations:** In recent years, other states have piloted and expanded programs that provide food vouchers and nutrition education to Medicaid beneficiaries who are experiencing

food insecurity. Pennsylvania's **Access to Food** Medicaid 1115 waiver program provides education and support to promote healthy eating, access to healthy food options, and referrals to community resources that can help address food insecurity.



Stability

An individual's or household's food availability remains solid over time.

- **Public Benefit Programs**

- The COVID-era increase in SNAP and Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) drastically improved food resources for individuals and families. This and other interventions like school meal programs are vital to keeping low-income individuals and families healthy. Although these programs are effective, there is an estimated 41% of New Yorkers eligible for WIC and 11% eligible for SNAP who do not participate. To help combat this “SNAP gap,” USDA awarded New York State additional funds to create programs to help reach individuals who are qualified for SNAP and WIC but are not enrolled.
- In 2009, S:US created an in-house Entitlements & Benefits Department responsible for establishing and maintaining benefits for the 3,000 individuals we serve through our intellectual/developmental

disabilities and behavioral health housing programs. Each year they help over 500 individuals and families with food stability including educating individuals on SNAP and helping to maximize their earned benefits.



Utilization

An individual or household has the knowledge and resources to transform raw ingredients into nutritious food.

- There is a growing field of food resources addressing utilization that provide **Culinary Skills Training** or provide focused meal planning or **Medically-Tailored Meals** to help create nutritious food.
 - **Brownsville Community Culinary Center** began as a vocational culinary training hub with its strong community integration and now offers other food security programming including emergency food distribution, a Diabetes Wellness Program, and a new Food-is-Medicine initiative. **Other Culinary Skills** Training programs that focus on utilization instead of vocational readiness include **Family Cook Productions** and a variety of active programs at **Teaching Kitchen Collaborative** help with culinary skills training.
 - There are a number of **Medically-Tailored Meals** programs in New York City that help those with chronic health conditions, like HIV/AIDS, get the food they need to stay healthy. **God's Love We Deliver** pro-

vides these services throughout the community using a clinical referral process that creates a meal plan through a licensed dietician and delivery. There are collaborations with health systems that provide “food as medicine” programs. [The Corbin Hill Food Project](#) has a Food-As-Medicine initiative that provides healthy foods to individuals in the communities that need it. S:US partnered with [My25](#) to provide a digital platform for medically-conscious menu design, food procurement planning, and tracking of individual food-related health goals. My25 helps people achieve a healthy Body Mass Index (BMI) and manage diabetic and hypertensive conditions. When we started My25 in March 2021 with 24 people with intellectual/developmental disabilities, approximately 40% of people supported were at a normal BMI. Now, post and ongoing My25, 77% of people supported are at or moving toward a normal BMI.

Food Security: Community Action Plan

We believe in food as a basic right. We believe in person-centered care: that everyone has a right to choices and direction in their own care. We believe that food should be available and accessible to all communities.

S:US has embedded food security programming into our core services but it's not enough. We are only a small part of food justice movement. We are investing in new programming and partnership expansion as part of our social justice action commitment.

We call upon our neighbors, our partners and collaborators, and leaders in New York to dedicate themselves to making food available and accessible to all communities.

We need to convene leaders across sectors—including health services, community-based organizations, city and state officials, and academia—to share strategies and advocate for resources.

We support the City's efforts to strengthen stakeholder engagement through the NYC Regional Food Working Group that can address the unique challenges and opportunities that present in New York City.

As health and human services providers, we need a regional peer council on food security for individuals with additional behavioral health, chronic health conditions and disabilities that steers intervention design through a public health perspective and enables data sharing and collaboration, especially critical in preparation for New York’s proposed Medicaid 1115 waiver to address Social Determinants of Health like food access.

To lead this charge, look to food justice leaders in organizations like **Just Food**, the **NYC Community Garden Coalition**, and **Community Food Advocates**; partners and collaborators like **God’s Love We Deliver**, **City Harvest** and **Food Bank for NYC**; and fellow community growers: GrowNYC community garden network, **East New York Farms!** and **Rise & Root Farm**. It’s not enough to alleviate food insecurity – we must eradicate it.

Here is the framework for action through which S:US seeks to do its part in advancing the food justice movement:

Availability



When there is enough supply of food that is good quality and culturally acceptable at a community, regional, or national level.

- **Proliferation of Community Fridges.** New York City’s community fridge network is creating the foundation for a mutual aid approach to community food security. As part of that movement, we are expanding the

S:US' Community Fridge program to better serve our communities. We are launching our third community fridge in the Brownsville neighborhood of Brooklyn; an area we identified from our internal data and city data as a high need for food resources. We are also creating a manual for "Community Fridge Best Practices" that details stocking, cleaning, communications policies, and guidance on volunteer and employment opportunities for people with intellectual/developmental disabilities.

- **Creation of a Food Bank and Mobile Pantry Program.** When meeting with our staff and people we serve, a frequent suggestion was to have an on-site food pantry at our programs and that food should be open to all to take what they need, when they need it. 15 of our supportive housing programs expressed a desire to build or expand an on-site food pantry. Some programs have the space to create an on-site pantry but many do not. We propose creating a centralized storage space capable of receiving, storing, and processing donations combined with a distribution route. The distribution of food may look different based on the preferences and needs of the individuals we serve, including pre-prepared ingredient bags at each home or a market table where people can take the food items they need. We will work with our current food vendors to create a regular stream of fresh produce and we are holding a series of food drives to stock the food pantry.
- **Increase Food Budgets in Service Contracts.** As a large health and human services provider with contracts with various city, state, and federal agencies, we've experienced underfunding or no funding for food procurement. Our programs that are required to provide meals (e.g., shelters

and residential treatment) have tight budgets that limit what we serve. Some contracts explicitly do not allow us to purchase food, even for those in an emergency situation. We are advocating that our current program budgets be allowed to make food available to all those who need it.



Access

An individual or household receives enough food to meet all of their needs. Access is not just about having enough quantity of food, but is also about having food of good quality, food that meets the nutritional requirements or dietary needs of the individual or household, and food that matches their cultural and personal choices.

- **Creation of a Mobile Food Co-op Market** with the principles of Community Supported Agriculture (CSA) where community members partner with regional farmers to purchase harvest shares that are often delivered weekly in pop-up market formats offer an intriguing model for a mobile cooperative market initiative. A mobile food coop intervention would address a number of correlated determinants for food insecurity, from relieving personal transportation and mobility barriers, to creating employment opportunities, to reducing stigma-related concerns on the use of food security resources (with a farmers' market style into which other interventions can be integrated like

food-as-medicine distributions, culinary skills trainings, and benefit and wellness outreach).

- **Food Sovereignty in Meal Service.** We learned through our survey data and focus groups that even though we provide meals in many of our programs, there is still food insecurity. For example, in our shelters and community residences, we are limited to the types of food we serve. Food is restricted and menus are prescribed, resulting in boring, bland meals and denying individuals access and autonomy in their food selection. We need more inclusive, responsive, compassionate food practices at these programs that promote food sovereignty. We recognize the importance of individual agency and dignity for the people we serve in achieving food justice. We, the social service community, must advocate for our licensing bodies to have more choice in the food we serve and to ensure that the food is of good quality, meets the nutritional requirements or dietary needs of the individual or household, and food that matches their cultural and personal choices. S:US has taken steps to create the roles of an agency-wide Wellness Manager and Food Service Managers in our shelters to evaluate the meals served, improve quality, and find opportunities to involve the people we serve in meal planning and preparation of food.
- **Advocate for Continued Expansion of Innovative Policy Levers to Improve Access.** S:US plans to advocate for the expansion of payor innovations to address health-related social needs like food insecurity. The anticipated approval of New York State's Medicaid 1115 Waiver Amendment in 2023 is an important step towards the kind of flexibility

needed in existing payment structures in order to meaningfully address the social determinants of health. Using lessons learned from states that have already begun to implement new and creative models, New York has a unique opportunity to become a leader in this space and community-based providers should be at the forefront of the development and implementation of these policies and programs.

- **Expand the Network of Community Gardens.** The White House National Strategy on Hunger, Nutrition, and Health encourages increasing access to food with urban gardens by leveraging “housing and other community programs to increase food access.” S:US does this by sustaining our 71 growing spaces and expanding our community gardens at current and new programs. For example, any new S:US housing or program development allocates growing space and staffing to engage residents of the housing and community in planning, harvesting, and distributing the produce.



Stability

An individual’s or household’s food availability remains solid over time.

- **Sustain and Expand Nutrition Expansion Programs.** We agree with the recommendations of State Comptroller Thomas P. DiNapoli and the New York Office of Budget Policy and Analysis to improve outreach and access, and to implement further expansions to SNAP and WIC.

- For Medicaid/Medicare enrollees, automate the SNAP and WIC processes, include NYC Health Bucks with all SNAP and WIC accounts.
- Automate renewal processes for SNAP to ensure stability and continuation of benefits.
- Restore the Emergency Allotments (EAs) to SNAP recipients. The increased COVID-era SNAP benefit expired in March 2023. Although we are not in the same state of a public health emergency, the price of groceries and other household goods remains high.
- **Food Insecurity Screening and SNAP benefit assistance for all.** Our goal is to expand our current Entitlements team, which currently focuses on our residential programs, to offer additional assistance with SNAP and distribute Health Bucks to all who are qualified and interested. This would include food insecurity screening, as part of a universal Social Determinates of Health (SDoH) assessment for all who come to S:US for services, as well as help for staff who may qualify. Our Entitlements team will also be hosting community-facing events in 2023-2024 to reach New York City communities where participation in SNAP is limited, including low-income seniors and immigrant communities.
- **Student Backpack Program.** On any given day, S:US serves 685 children and their families in our supportive housing, shelters, and homeless prevention programs. The student backpack program model is used across the country for low-income families. Free school breakfast and lunch is available to all low-income students in New York City, and making it nation-wide is part of The White House's plan to eliminate hunger

by 2030.⁸ We envision a student backpack program as a stopgap measure for many of our families where heads-of-household may not have a capacity to address family food needs (e.g., mobility issues in accessing traditional or emergency food resources, substance use challenges as a driver of household food insecurity, etc.) Many of our students in supportive housing and shelters benefit from year-round school breakfasts and lunches in New York City public schools but still experience food insecurity on weekends and during academic breaks when at home and unable to travel.



Utilization

Having the knowledge and resources to transform raw ingredients into nutritious food.

- **Food-As-Medicine: Produce Prescription Program/Medically-Tailored Meals (MTM) Program.** Produce prescription and medically-tailored meal programs typically involve a clinical referral process, meal plan design through a licensed dietitian, and then various ways of providing the meal (from vouchers, to contracting out production/delivery, to internalized meal preparation, to providing ingredient kits/recipe books for the individual to prepare themselves). We are looking to reduce barriers to this service.
 - Expand use of My25 and other healthy eating platforms. We plan to explore the opportunity to pilot My25 beyond other areas of S:US, including as a resource for staff.

- **Culinary Skills Training Program for People with Intellectual/Developmental Disabilities (I/DD) and Individuals Transitioning Out of Shelters.** Drawing on our existing training and employment experience, we will pilot a Culinary Skills Training Program that focuses on building culinary life skills for individuals transitioning from homelessness to permanent housing. In providing training on menu preparation, grocery budgeting and purchasing (including use of SNAP/WIC benefits and other food resources), and basic food preparation skills, this initiative intends to address a unique food insecurity challenge for new residents to S:US supportive housing. The program could also be made available to other members of the S:US community, including people with I/DD or behavioral health challenges, as well as S:US staff (particularly those with a role in preparing meals in small, supported home settings). The program could easily be integrated with available resources like S:US' newly hired Wellness Manager and our urban agriculture initiative.

Moving Ahead Together for Food Justice

Food is a right. Food is social justice. It takes all of us to eradicate food insecurity.

S:US is dedicated to our core mission of driving scalable solutions to transform the lives of people with disabilities, people in poverty, and people facing homelessness. Food justice is one of the cornerstones of this mission. Through our work, we seek to create whole health for the people we serve. This includes crisis and transitional housing, permanent and supportive housing, behavioral health, and access to medical services. These services have increased in number and type in recent years, in direct response to community need. Tackling food insecurity through food justice work is natural and complementary to this work.

We recognize the significant work ahead in achieving true social justice and we look forward to expanding our community food programs as one significant tool for building health equity. Food insecurity has been an intractable challenge within New York City for too long and we look not just internally, but also to the wider food justice and public health communities to confront this challenge with a unified approach and collaborative effort. The incredible work already taking place needs elevation and replication, the amazing voices that have been at the forefront of this work need amplification, and the innovative ideas we all are developing need space for collaboration and cultivation. For

those within the food justice movement, S:US is excited to join you in a more deliberate and focused way as a human services provider focused on achieving social justice. For others who work alongside us in community-based services, we invite you to join us in defining food as a basic right, defining food justice as social justice, and seeing the essential role we provide in embracing food security as an integral part of community health.

Food justice is not achieved in isolation. Community voices, shared problem-solving, or problem identification, and frank discussions are essential. To move forward, S:US is bringing together these voices at our first annual [Summit to Serve New York](#) on April 19 that will focus on food security. The Summit is a call to action to come together and work collaboratively on food justice in New York. We have gathered community and content experts, and government organizations. In the spirit of combatting inequity through building access, we have made the event free for attendees. We are hoping to empower community voices through this approach. From this event we plan to work closely with communities, people served, and our workforce to improve access to the quantity and types of food that promote each person's definition of wholeness for themselves. S:US is proud and excited to host this Summit and recognizes this is the first step of many in engaging partners. Thank you to the many organizations who are leading this work and your contributions to food justice. There is much work to be done and we look forward to uniting on food justice for all, together.

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Appendix: Adapted Food Security Questions

1. Which of these statements best describes the food you or your household ate in the past 12 months?

a. I (We) had enough of the kinds of food I (we) want to eat.

b. I (We) had enough but not always the kinds of food I (we) want.

c. I (We) sometimes did not have enough to eat.

d. I (We) often did not have enough to eat.

e. I don't know.

	Often True	Sometimes True	Never True	Don't Know
2. I (We) worried whether my (our) food would run out before I (we) got money to buy more.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. The food that I (we) bought just didn't last, and I (we) didn't have money to get more.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I (we) couldn't afford to eat balanced meals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	No	Yes	Don't Know		
5. In the past 12 months, did you (or other adults in your household) ever cut the size of your meal or skip meals because there wasn't enough money for food?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
How often did this happen?	Almost every month	Some months, but not every month	Only 1 or 2 months	Never	Don't Know
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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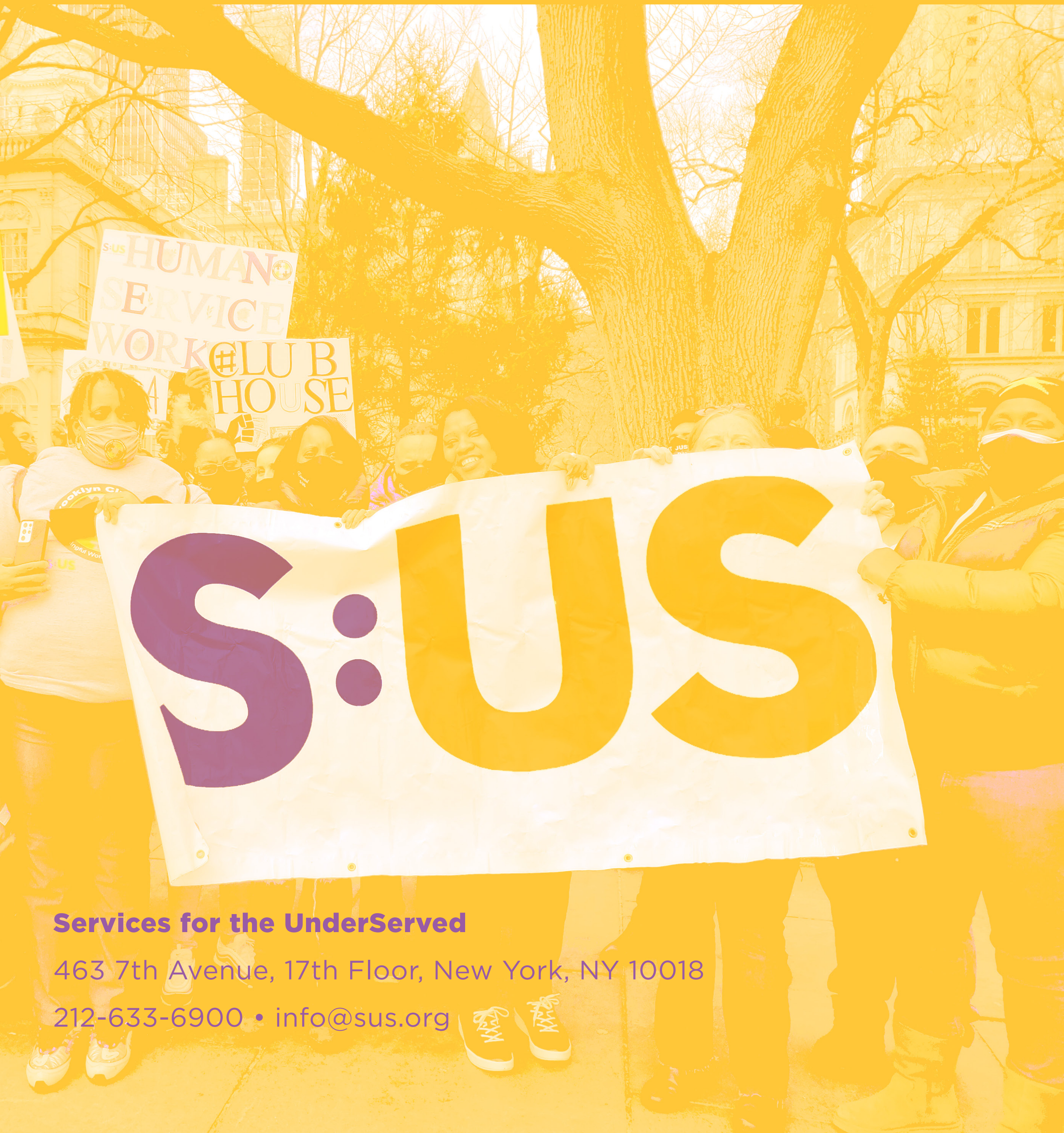
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