



Recommendations For Strengthening Access To Nutrition Through The Supplemental Nutrition Assistance Program (SNAP)

A REPORT BY THE CHILDREN'S DEFENSE FUND-OHIO AND
THE NORTHEAST OHIO BLACK HEALTH COALITION

APRIL 2022

Recommendations For Strengthening Access To Nutrition Through The Supplemental Nutrition Assistance Program (SNAP)

Through support from the Center for Science in the Public Interest (CSP!), Children's Defense Fund-Ohio (CDF-Ohio), in collaboration with five community organizations, facilitated focus groups and interviews with 86 current or former SNAP participants, hosted a statewide SNAP stakeholder convening, and conducted six individual key informant interviews. The goal of these sessions was to identify challenges with and opportunities to strengthen healthy eating through participation in SNAP. This report seeks to elevate SNAP participants', community members', and stakeholders' experiences by recommending initiatives that may improve access to healthy eating through participation in SNAP.

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Founded in 1981, **Children's Defense Fund-Ohio** champions policies and programs that lift children out of poverty, protect them from abuse and neglect and ensure their access to appropriate and targeted health care, quality education and a moral and spiritual foundation. The Children's Defense Fund Leave No Child Behind ® mission is to ensure every child a **Healthy Start, a Head Start, a Fair Start, a Safe Start** and a **Moral Start** in life and successful passage to adulthood with the help of caring families and communities.



The Northeast Ohio Black Health Coalition is a social justice organization created to address the impact of racism on African American disparities including policy inequities, historical trauma, food insecurity, research, behavioral health and addiction, and health promotion by working to empower, educate and advocate for health equity in under-served communities.

PARTNERSHIP

CDF-Ohio thanks the following organizations who helped develop focus group protocols and questions and led focus groups and interviews with SNAP participants (N =86):

APPALACHIAN CHILDREN COALITION (ACC) ¹

The mission of the Appalachian Children Coalition is to bring Southeastern Ohio together behind a collective approach to state and federal advocacy, communication, and collaboration in order to improve the health and well-being of the region's children. ACC hosted focus groups and conducted one-on-one interviews with 26 SNAP participants as a part of this project.

NORTHEAST OHIO BLACK HEALTH COALITION (NEOBHC) ²

The Northeast Ohio Black Health Coalition is a social justice organization created to address the impact of racism on African American disparities including policy inequities, historical trauma, food insecurity, research, behavioral health and addiction, and health promotion by working to empower, educate and advocate for health equity in under-served communities. NEOBHC interviewed 20 SNAP participants from the greater Cleveland area.

US TOGETHER ³

US Together, Inc. is a not-for-profit 501(c)(3) mutual assistance agency founded in 2003 as a response to the needs of refugees and immigrants in central Ohio. They coordinate, organize, and initiate services to refugees and immigrants through education, advocacy, support services, information, referrals, and networking opportunities to strengthen the community that we live in and to promote international understanding through intercultural exchange. US Together interviewed 10 SNAP participants for this project.

ETHIOPIAN TEWAHEDO SOCIAL SERVICES (ETSS) ⁴

ETSS serves as the focal point of integration for immigrants, refugee families, and low-income individuals in Central Ohio to improve the quality of their lives, to facilitate their integration through education, training, supportive services, and self-development opportunities, and to increase the awareness of their culture and heritage in Central Ohio. ETSS interviewed 10 participants from the central Ohio region as part of this effort. ETSS used a translator to help in the facilitation of focus groups and interviews with current or former SNAP participants.

GLADDEN COMMUNITY HOUSE ⁵

Gladden Community House is a settlement house located in Columbus, Ohio. As a mission driven non-profit agency, Gladden offers a broad range of social services to individuals, families, and groups. Gladden hosted focus groups or one-on-one interviews with 20 SNAP participants for this project.

ACKNOWLEDGEMENTS

The qualitative research outlined in this report is informed by community members who experience the role that SNAP benefits play in meeting or failing to meet their nutritional needs. Indeed, these individuals possess a critical element that no policymaker can simulate - firsthand knowledge and lived experience navigating SNAP. This deep understanding and practical expertise with the program are essential to identifying effective strategies and solutions to help strengthen access to healthy foods through SNAP.

The report author would like to express her gratitude to the community members, researchers, and stakeholders who gave generously of their time and offered their perspectives. In particular, the authors would like to thank all the SNAP participants and convening stakeholders who were interviewed

and informed the development of this report. In addition, the author would like to thank the Center for Science in the Public Interest for their support of this project.

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EXECUTIVE SUMMARY

Access to healthy, nutritious food is a basic human need and right. Yet, millions of people experience food insecurity in the United States. Today, more than one in five children in Ohio (22.3%) live in food insecure households (up from 17.3% in 2019) . The purpose of this project was to hear from those individuals who participate or have participated in SNAP and learn more about how our food systems can work better to help participants access all of the food options that they would like for the health of themselves and their families.

Over a one-year period (January 2021-January 2022), Children's Defense Fund (CDF-Ohio) and Northeast Ohio Black Health Coalition (NEOBHC), in collaboration with four community-based organizations, sought to identify challenges with and opportunities for improving access to nutritious foods through participation in SNAP. The findings presented in this report seek to elevate recommendations and ideas of SNAP participants and stakeholders.

PROJECT ACTIVITIES		
Focus groups and interviews with 86 current or former SNAP participants	One-on-one interviews with six key informants	Statewide convening with 25 SNAP stakeholders

The qualitative research outlined in this report is informed by community members who experience the role that SNAP benefits play in meeting or failing to meet their nutritional needs. Indeed, these individuals possess a critical element that no policymaker can simulate - firsthand knowledge and lived experience navigating SNAP. This deep understanding and practical expertise with the program are essential to identifying effective strategies and solutions to help strengthen access to healthy foods.

The following strategies had strong consensus among SNAP participants and stakeholders:

EXPAND PRODUCE PERKS TO MORE RETAILERS AND MORE COUNTIES:

The Produce Perks program gives SNAP participants increased purchasing power to buy fruits and vegetables through a \$1 for \$1 match . Produce Perks is currently available in a limited number of retailers and counties throughout Ohio , but expansion of the program would help more SNAP participants access healthy foods.

PERMANENTLY INCREASE MONTHLY BENEFIT AMOUNTS:

During the COVID-19 public health emergency, SNAP participants received increased benefit amounts, which helped them access foods to meet their nutritional needs. Ohio SNAP participants agree that a permanent increase in benefits would help them access healthier options, which tend to be costlier.

ALLOW HOT, PREPARED FOOD ITEMS TO BE PURCHASED THROUGH SNAP:

Ready-to-eat hot items are currently not allowed to be purchased with SNAP benefits in Ohio . Ohio SNAP participants generally agree that being allowed to buy hot prepared foods with SNAP would support healthier meals and help overcome certain obstacles, such as lack of time for meal preparation or inability to access a kitchen .

We hope these findings will serve as a roadmap for implementing SNAP-participant informed strategies that enhance healthy food access.

SECTION 1

THE OPPORTUNITY

Access to healthy, nutritious food is a basic human need. Yet, millions of people experience food insecurity in the United States.⁶ Today, more than one in five children in Ohio (22.3%) live in food insecure households (up from 17.3% in 2019).⁷

Our current food system is deeply rooted in racist programs and policies. Racially restrictive covenants on wealth generation and community redlining continue to widen the racial gap in food security, which result in Black, Indigenous, and People of Color (BIPOC) suffering disproportionately.

Rates of food insecurity are higher for Black (21.7%) and Latino/a/x (17.2%) households than for white (7.1%) households.⁸ Nationwide, low-socioeconomic income zip codes have 25 percent fewer chain supermarkets and 1.3 times as many convenience stores compared to middle-income zip codes. Zip codes with predominantly Black residents have about half the number of chain supermarkets compared to predominantly white zip codes, and predominantly Latino/a/x areas have only a third as many.⁹ Ohio's rural communities also face barriers to accessing healthy foods, with 24% of rural Ohio households not living within a 10-minute drive of a retail grocery store.⁷ ¹⁰ Of the households living within a driving distance to a retail grocery store, 5% (or 75,223 rural Ohio households) do not own a car, and 75% of rural Ohio households live further than a one-mile walking distance to a grocery store.

Because of these barriers to access, the current food system perpetuates preventable disease. Poor diet quality is a major contributor to chronic preventable health conditions, and food insecurity is associated with diabetes, heart disease, cancer, and poor maternal, infant, and child health outcomes.⁷⁷ The Supplemental Nutrition Assistance Program (SNAP) is one of the most effective anti-hunger programs, providing access to

nutritious meals otherwise unaffordable for many families and helping to alleviate the most extreme poverty and hunger. As of December 2021, over 41 million people across the country received SNAP.¹²

The program is also highly effective at responding to changes in the economy and reducing poverty and food insecurity for children. Research demonstrates that over the long term, these impacts lead to improved health and economic outcomes, especially for those who receive SNAP as children.⁷³

The Food Stamp Program (renamed SNAP in 2008) greatly contributed to reducing hunger and malnutrition for Americans in poverty and had

SNAP is one of the most effective anti-hunger programs, providing access to nutritious meals otherwise unaffordable for many families and helping to alleviate the most extreme poverty and hunger.

far-reaching impacts for the health of Black Americans, reducing both infant mortality and malnutrition rates within five years of its implementation.⁷⁴ There is compelling evidence that SNAP alleviates food insecurity. Efforts to improve access to nutritious foods through the SNAP program are being considered at the federal level.

The appropriate methods to improve diet quality have been a highly disputed topic among public health experts, anti-hunger professionals, and policymakers for decades. SNAP's public health and nutrition impact can only be strengthened if it is informed by a range of evidence-based approaches that are grounded in diverse stakeholder input. It is vital to note, however, that any proposed changes to the SNAP program should be

carefully examined to prevent unintended consequences, such as increased stigma or barriers to food access.

In 2018, the Center for Science in the Public Interest (CSPI) developed a model for identifying and building consensus on strategies to strengthen SNAP's public health and nutrition impact (including those recommended by experts), while working with jurisdictions to study promising and scalable approaches.

Over the last year, the Children's Defense Fund-Ohio (CDF-Ohio) in

collaboration with the Northeast Ohio Black Health Coalition (NEOBHC) sought to develop recommendations for initiatives that support access to healthy eating for Ohioans utilizing SNAP benefits. The project in Ohio is, in part, modeled after similar work in Iowa, North Carolina, Massachusetts, and Pennsylvania.¹⁵

Data gathered from the statewide stakeholder convening, focus groups, and individual interviews with SNAP participants was used to inform the potential impact from, feasibility of, barriers to, and support for expanded strategies to better support access to healthy eating.

With these historical underpinnings in mind, the following report presents qualitative data from Ohioans who utilize the SNAP program, describing their experiences with the program and impressions of some expert-recommended strategies for improving nutrition through SNAP.

SNAP IN OHIO

As of September 2021, over 1.5 million individuals and 645,000 children in Ohio received SNAP.^{7,6} It is a lifeline for children in Ohio, where 40.3% of households receiving SNAP benefits have children.¹⁷ Not only does SNAP increase support for children and families, but it also stimulates the economy. Evidence from the Great Recession demonstrates the effect of higher SNAP benefits on lessening food insecurity among SNAP households, and further, economists rate SNAP as among the fastest and most effective options for economic stimulus and recovery.¹⁸

SNAP is administered through the Ohio Department of Job and Family Services (ODJFS).¹⁹ Participants can apply for SNAP through the Ohio Benefits portal online at benefits.ohio.gov, in person at their local county agency, or through a mailed application. SNAP benefits can be used in Ohio to purchase most food products, excluding hot food that is made to be eaten immediately, like prepared food from grocery stores and restaurants. SNAP participants also cannot use their SNAP benefits to purchase alcoholic beverages, vitamins or medicines, toiletries, or cleaning products.

To be eligible for SNAP in Ohio, a household's gross monthly income (total household income before deductions) must be at or below 130

NATIONAL HUNGER COMMISSION RECOMMENDATIONS

In 2016, the National Hunger Commission - a congressionally required and appointed bipartisan panel of experts in domestic hunger - convened to advise Congress and the USDA.³⁴ This commission recommended a number of strategies to support healthy eating through SNAP, including:

- Using financial incentives to encourage SNAP participants to purchase fruits, vegetables, high-quality proteins, whole grains, and other healthy foods;
- Incentivizing purchases of healthy foods through cost-sharing opportunities with states, nonprofits, and municipal governments;
- Employing evidence-based product placement strategies in retail stores that encourage the purchase of healthy products with SNAP benefits and link it to SNAP eligibility for stores;
- Not permitting sugar-sweetened beverages (SSBs) to be purchased with SNAP benefits; and
- Reforming SNAP-Education to ensure that states use state-of-the-art nutrition education that is relevant, meaningful, and likely to demonstrate measurable improvements in the eating patterns of SNAP participants.

percent of the federal poverty line. Some households may still qualify with incomes over the limit if someone in the household is elderly or disabled.

Prior to the pandemic, SNAP participants in Ohio were able to order groceries online at some retailers, but had to pay inside the stores or at curbside. In the summer of 2020, ODJFS received federal approval to test online purchasing with Walmart and Amazon, allowing online purchasing with electronic benefit transfer (EBT) cards.²⁰ Ohioans receiving SNAP are now able to use their Ohio Direction card (also known as the EBT card) to purchase food online at a growing list of retailers and are also able to have those groceries delivered, though federal rules prohibit using SNAP benefits to pay for delivery charges.

Ohio Nutrition Incentive Network is a multi-sector coalition that strives to improve healthy food access across Ohio by increasing affordable access to healthy food and also strengthening local farms and economies.²⁷ The Network supports the statewide Produce Perks Midwest program. Produce Perks provides a \$25 match on SNAP EBT and Pandemic-EBT (P-EBT) purchases.²² Through the Produce Perks nutrition incentive program, any amount an individual spends on fresh fruits and vegetables with their SNAP/EBT or P-EBT, up to \$25, will be matched \$1-for-\$1 at participating locations. Produce Perks' matching dollars must be spent on fruits and vegetables. SNAP participants can utilize Produce Perks at designated healthy food access points, including approximately 100 farmers markets and farm stands, retail grocery stores, and Community Supported Agriculture (CSA) programs.

BIPARTISAN POLICY CENTER'S SNAP TASK FORCE RECOMMENDATIONS

In March 2018, the Bipartisan Policy Center's SNAP Task Force, a bipartisan 13-member task force co-chaired by former Senate Majority Leader Bill Frist and former Agriculture Secretaries Dan Glickman and Ann Veneman, supported similar recommendations. The task force requested \$100 million for research on ways to better support healthy eating through SNAP in the next farm bill. Their analysis emphasized that SNAP benefit amounts were "meager" and that any changes to the program that would decrease benefit levels or overall access should be opposed.

The Task Force recommendations also included:

- Adding diet quality as a core SNAP objective;
- Removing SSBs from the list of items that can be purchased with SNAP benefits;
- Continuing and strengthening incentives for purchasing fruits and vegetables;
- Improving SNAP data collection to include retailer records of purchases (USDA currently lacks the authority to collect product-specific and store-level SNAP food-purchase data, making it difficult to evaluate diet quality and purchasing patterns of SNAP participants);
- Strengthening SNAP retailer standards by implementing stronger stocking rules that increase the availability of healthy foods at SNAP retailers;
- Studying the feasibility of including evidence-based product-placement strategies and restrictions on the marketing of unhealthy products by SNAP retailers; and
- Strengthening SNAP-Education infrastructure to better support implementation and evaluation of the program.

STRENGTHENING THE PUBLIC HEALTH IMPACTS OF THE SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM THROUGH POLICY

In 2020, researchers specializing in SNAP policy issued recommendations for strengthening public health within the program.³⁵ They identified broad policy opportunities including food production and distribution (such as incentivizing fruit and vegetable purchases and promoting healthy retail environments), benefit allocation (such as increasing benefit amounts and optimizing issuance frequency), and eligibility and enrollment (such as increasing enrollment by SNAP-eligible households and coordinating with other safety net programs).

Produce Perks saw a significant increase in coupon redemptions in 2020 and 2021, with over \$1.1 million worth of produce redeemed in 2021 through the program (a 36% increase from 2020).²³ Over 1.5 million servings of fruits and vegetables went to Ohio SNAP or P-EBT households. Produce Perks is committed to expanding the program to reach more SNAP participants, focusing on expansion in counties or communities with over a 12% SNAP participation rate, where no Produce Perks location currently exists, and in retailers who are committed to local produce sourcing.

Produce Perks also operates a produce prescription program (PRx) for fruits and vegetables, which has been piloted in various Ohio communities. The program connects

patients who have diet-related diseases to providers that can write prescriptions for free fruits and vegetables.

FEDERAL COVID RELIEF MEASURES AND RE-EVALUATION OF THRIFTY FOOD PLAN

To address the rising food insecurity rates in the country, Congress initiated a number of temporary changes to the SNAP program to alleviate hunger. Focus groups with individuals who received SNAP occurred between May-September 2021, when the Covid relief measures were in place. Therefore, we believe a discussion of some of those changes is contextually important.

AS OF
SEPTEMBER 2021

**1.5 million
individuals &
645,000 children
participate in
SNAP**



The Families First Coronavirus Response Act temporarily suspended SNAP work requirements and allowed Ohio to increase benefits and access.²⁴ Specifically, the legislation allowed states to issue emergency allotments and P-EBT, and temporarily relaxed administrative barriers to accessing SNAP, including by extending certification periods and adjusting interview requirements.²⁵ Starting in April 2020, ODJFS announced the issuance of emergency allotments to many SNAP households in Ohio, bringing all participants up to their maximum allotment. In response to President Biden's Executive Order on Economic Relief Related to the Covid-19 Pandemic and under new guidance from USDA Food Nutrition Service (FNS) issued April 1, 2021, all households emergency allotment payments were brought up to at least \$95.00.²⁶ This provided needed relief for those families that were already receiving the maximum benefit due to little or no income.

The Covid Recovery and Relief Bill, signed in December 2020, included a 15% SNAP increase for January 1, 2021 through June 30, 2021, and The American Rescue Plan Act extended the 15% boost through September 30, 2021.²⁷ The 15% SNAP increase ended in September 2021.

However, in August of 2021, the USDA announced a re-evaluation of the Thrifty Food Plan, which serves as the basis for calculating SNAP benefits.²⁸ The benefit increase took effect at the beginning of the Federal Fiscal Year 2022 beginning on October 1, 2021. The cost adjustment is the first time the purchasing power of the plan has been modified since its introduction in 1975.

The re-evaluation was driven by four key factors: current food prices; what Americans typically eat; dietary guidance; and nutrients in food items.

While the thrifty food plan reevaluation resulted in an overdue and necessary increase to average benefit payments, many advocates believe this modest increase will still leave families struggling with food insecurity at the end of the monthly benefit cycle when funds have been depleted. Benefits will still only average roughly \$1.80 per meal when all temporary pandemic benefit boosts end. Before the pandemic, benefits averaged only \$1.40 per person per meal.²⁹

Further, advocates argue that additional factors should be taken into consideration in the evaluation, such as the time cost of preparing meals and special diets for those with chronic diseases.³⁰ Continued rigorous reevaluations of the thrifty food plan that evaluate the true cost of a wholesome diet are critical.

Given the aforementioned policy changes, focus group participants were asked about how the Covid-19 relief measures impacted their ability to meet their nutritional needs.

UNITED STATES DEPARTMENT OF AGRICULTURE'S BARRIERS THAT CONSTRAIN THE ADEQUACY OF SNAP STUDY

More recently, in June 2021, the USDA released a study, **Barriers that Constrain the Adequacy of Supplemental Nutrition Assistance Program Allotments**, which found that 88% of SNAP participants reported facing some type of hurdle to achieving a healthy diet.³⁶ Affordability of healthy foods was the most common barrier, reported by 61% of SNAP participants.³⁷ Those who reported difficulties in affording nutritious foods were 2.3 times more likely to experience low or very low household food security. Households that reported having an affordability barrier were also more likely to use all of their SNAP benefits within 2 weeks of issuance. In addition to affordability, individuals and households noted that they experienced other hurdles to healthy eating: 30 percent of SNAP participants reported lack of time to prepare meals from scratch; 20 percent reported lack of transportation to a grocery store or the distance to a grocery store; and 11 to 16 percent reported limited knowledge about healthy food, physical disability, storage of foods, or limited cooking skills.³⁸



SECTION 2

THE OHIO PROJECT

Over a one-year period (January 2021-January 2022), with support from CSPI, CDF-Ohio worked with diverse groups across Ohio to build consensus around SNAP recommendations in Ohio and improve access to wholesome foods. CDF-Ohio used a similar model of consensus building that CSPI implemented in other statewide community engagement projects. This project sought to highlight the importance of direct feedback from SNAP participants, particularly commentary on how they think that changes to the SNAP program could potentially impact healthy eating and their participation in the program (either positively or negatively).


GOALS

The goals of the project were to:

- Engage racially, economically, and geographically diverse perspectives from SNAP participants across the state to capture their feelings and perceptions about potential impact, barriers, opportunities, and support for strategies to support healthy eating and food security through the SNAP program and to identify other opportunities to support access to healthy options through SNAP;
- Work with stakeholders to determine consensus and support around healthy SNAP policy priorities that could be expanded and/or tested in Ohio; and
- Develop a final report that summarizes findings.

To achieve the goals outlined above, major elements of this project included:

- Identification of and partnership with 5 community organizations, including the Northeast Ohio Black Health Coalition, US Together, Ethiopian Tewahedo Social Services (ETSS), Gladden Community House, and Appalachian Children Coalition, all of which work with a diverse group of SNAP participants in various geographic areas in the state;
- Bi-weekly meetings with community organizations to develop focus group protocols and questions and to build organizational capacity through partnership;
- Focus groups and/or individual interviews with a total of 86 SNAP participants in the state;
- A cross-sectoral statewide virtual convening in October 2021 that brought together over 30 key stakeholders in anti-hunger, research, public health, and government; and
- Interviews with 6 key stakeholders in the fields of nutrition, public health, anti-hunger, and anti-poverty.

A stylized illustration of a hand with five fingers, outlined in dark blue, holding a carrot. The carrot is orange with a green leafy top. The background is a light green rectangle.

IDENTIFICATION AND PARTNERSHIP WITH 5 COMMUNITY ORGANIZATIONS, INCLUDING THE NORTHEAST OHIO BLACK HEALTH COALITION, US TOGETHER, ETHIOPIAN TEWAHEDO SOCIAL SERVICES CETSSI, GLADDEN COMMUNITY HOUSE, AND APPALACHIAN CHILDREN COALITION

METHODS

Focus Groups/Interviews with SNAP Participants

To understand the perspectives of Ohioans on strategies for improving nutrition security through SNAP, focus groups and interviews were conducted with current or recent (received SNAP sometime in 2020) SNAP program participants. CDF-Ohio subcontracted with five community organizations across the state to conduct SNAP participant focus groups and interviews to gain

knowledge about the potential impact, barriers, opportunities, and support for various strategies to improve healthy eating through SNAP

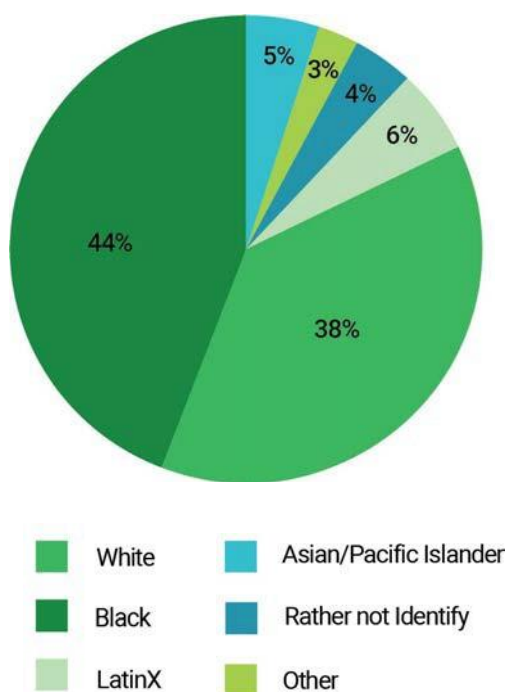
All of the community organizations selected to assist in facilitating focus groups and interviews are trusted and respected organizations within their respective communities. We believe this factor fostered a caring and non-judgmental focus group/interview environment, sparking honest and authentic participation. Community organizations were also intentionally selected to produce a diverse set of SNAP participant responses. The Northeast Ohio Black Health Coalition, for example, primarily works with Black and Latino/a/x individuals in the greater Cleveland area. The Appalachian Children Coalition hosted focus groups and interviews with mostly white individuals who reside in the Southeast Appalachian Ohio region. Notably, CDF-Ohio also partnered with US Together and Ethiopian Tewahedo Social Services to obtain the valued perspectives of New American, immigrant, and refugee communities in central Ohio - a perspective that is oftentimes lacking in public benefit research. Partnering with organizations rooted in and trusted by the communities they serve, communities with diverse populations, was integral to the development of focus group/interview protocols and questions.

All focus group or interview participants were at least 18 years of age and a current or recent SNAP participant, or eligible for SNAP but not currently receiving the benefits. The vast majority of participants were currently receiving SNAP. Focus group and interview participants were recruited through subgrantees' networks. Participants were screened by phone or in-person. A total of 86 SNAP participants from seven counties were represented. Each focus group or interview participant was paid \$50.00 (cash, Venmo, VISA gift card) for sharing their lived experience. Prior to conducting focus groups and interviews, CDF-Ohio and subgrantees met bi-weekly to develop the focus group protocols and questions. Participants were asked the same questions to provide consistency and structure.³⁷ (See Appendix A).

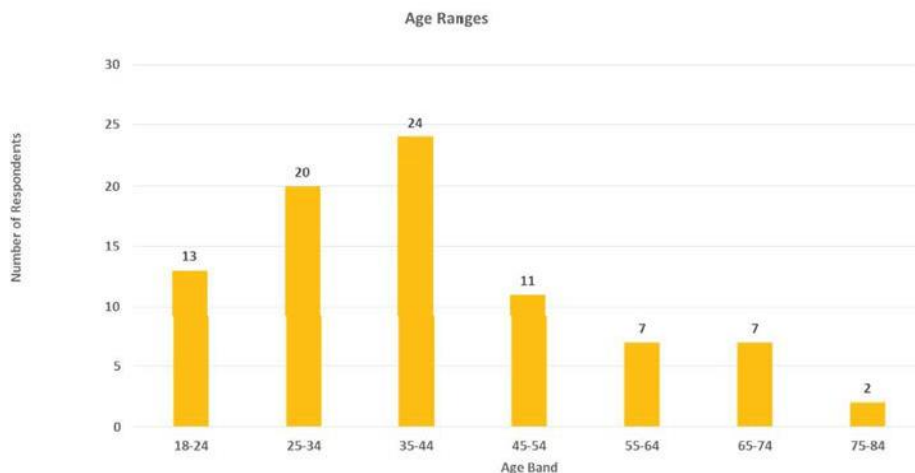
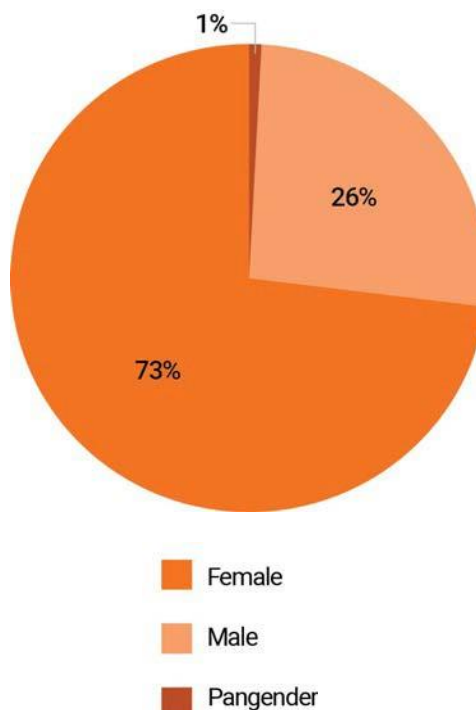
PARTICIPANT DEMOGRAPHICS

At the time of their focus group or interview, 78 of the 86 participants were currently participating in SNAP. There were four participants who were eligible, but not currently receiving benefits at the time of focus group or interview, and four others who were not receiving benefits at the time of interview or focus group, but had participated in SNAP at some point in 2020. Of the 86 participants, 54 {81.8%} reported residing in households with children under the age of 18, and 12 {18.2%} households did not include children.

Racial demographics of participants were as follows: 44% identified as Black; 38% identified as white; 6% identified as Latino/a/x; 4% identified as Asian/Pacific Islander; 4% would rather not identify; and 3% identified as other {Figure 1}.³⁹



Regarding gender, 73% of participants identified as female, 26% as male, and 1% as pangender {Figure 2}.



The ages of focus group/ interview participants ranged from the 18-24 range to the 74-84 range, with 44 participants aged 25-44 {Figure 3}.

STAKEHOLDER CONVENING

Ohio stakeholders were identified through a variety of channels, including: CSPI's national, state, and local partners; statewide efforts such as Creating Healthy Communities; college and university researchers in public health; community organizations that assist SNAP participants; other advocacy organizations; government agencies; and retailers.

Prior to the stakeholder convening, CDF-Ohio shared relevant background information (see Appendix B), including a list of questions for breakout group discussions, a summary of SNAP participant focus groups and interview feedback, an overview of SNAP in Ohio, a summary of COVID-19 federal policy, and an overview of the farm bill.

The stakeholder statewide convening was held virtually due to COVID-19 concerns. Twenty-five stakeholders attended the convening, and follow-up one-on-one interviews were held with individuals who were unable to attend the convening. During the convening, stakeholders were divided into two groups for focused discussion on policy ideas related to (1) incentives and disincentives and (2) in-store marketing. These two themes were selected because they have been proposed by experts as key areas for exploration and further consensus building. CSPI and CDF-Ohio each led one of the facilitated breakout room discussions. During the breakout rooms, stakeholders were asked to share additional ideas for strategies that could support access to healthy eating through the SNAP program. The stakeholder convening lasted for three and a half hours.

The two breakout rooms then reconvened to share their ideas. They engaged in additional discussion to identify key recommendations for improving access to nutritious foods and a virtual ranked-choice poll was used to vote on ideas generated.

KEY INFORMANT INTERVIEWS

Key informant interviewees encompassed those who were unable to attend the statewide convening. These individuals were asked the same questions used in the facilitated breakout room discussions during the statewide convening. Interviewees were also asked to share additional ideas for approaches to supporting healthy eating through SNAP.

Qualitative data from the focus groups and interviews with SNAP participants, statewide convening, and key informant interviews were transcribed and coded for themes. Commonly discussed strategies were ranked as either a strategy with high support, a strategy with mixed levels of support, or a strategy with low levels of support.

Support was assessed through ranking strategies and gauging support through Mentimeter (at statewide convening), directly asking opinions about specific strategies (at SNAP participant focus groups and interviews, key informant interviews, and statewide convening), and discussions during open-ended dialogues about healthy eating (at SNAP participant focus group and interviews, key informant interviews, and statewide convening). Strategies with high support were enthusiastically supported by SNAP participants, convening stakeholders, and key informants with very limited opposition. Strategies with mixed support were generally supported by all three groups, but encountered some opposition. Strategies with low levels of support faced significant opposition with very few expressing support for the initiative.

SECTION 3

RESULTS

Overall, focus group and interview participants expressed general gratitude for SNAP and many individuals credited the enhanced SNAP benefits with allowing them to put and keep food on the table. The table below summarizes SNAP participants general support or lack of support for certain proposed strategies discussed during interviews or focus groups.



TABLE 4: SNAP PARTICIPANTS SUPPORT FOR PROPOSED STRATEGIES

	Northeast Ohio Black Health Coalition	Appalachian Children's Coalition	Ethiopian Tewahedo Social Services	Gladden Community House	US Together	All groups
Increase SNAP benefit amounts	Strong Support	Strong Support	Supported by 9 of 10 (90%) SNAP recipients	Supported by 19 of 20 (95%) SNAP recipients	Supported by 10 of 10 (100%) of SNAP recipients	Strong Support: among all SNAP recipient groups
Expanding existing incentive programs (Produce Perks Midwest) to more retailers and farmers markets in more counties	Supported by 18 of 20 (90%) SNAP recipients	Strong support	Supported by 9 of 10 (90%) SNAP recipients	Supported by 20 of 20 (100%) of SNAP recipients	Supported by 10 of 10 (100%) SNAP recipients	Strong Support: among all SNAP recipient groups
Expanding incentive programs to include other healthy options, such as whole grains, canned vegetables, frozen fruits, etc.	Supported by 20 of 20 (100%) SNAP recipients	Strong Support	Not discussed	Supported by 20 of 20 (100%) of SNAP recipients	Supported by 8 of 10 SNAP recipients (80%)	Strong Support: among all SNAP recipient groups
Opt-in program that provides produce incentives (additional SNAP \$\$ for fruits and vegetables) for not purchasing sugar-sweetened beverages (SSBs)	Supported by 3 of 20 (15%) SNAP recipients	Mixed	Supported by 6 of 10 (60%) SNAP recipients	Supported by 2 of 20 (10%) of SNAP recipients	Supported by 6 of 10 (60%) SNAP recipients	Moderate support
Strategy that decreases cost of produce by 30% and makes sugar-sweetened beverages (SSBs) 30% more expensive when purchased through SNAP	Supported by 6 of 20 (30%) SNAP recipients	Mixed	Supported by 5 of 10 (50%) SNAP recipients	Low support	Supported by 3 of 10 (30%) SNAP recipients	Low support
Tax SSBs, and money generated from tax goes toward allowing fruits and vegetables to be cheaper for SNAP participants at grocery stores	Supported by 7 of 20 (35%) SNAP recipients	Low support	Not discussed	Supported by 0 of 20 (0%) of SNAP recipients	Supported by 5 of 10 (40%) SNAP recipients	Low support
Ability to purchase hot food items with SNAP benefits	Supported by 20 of 20 (100%) SNAP recipients	Strong support	Low support	Supported by 19 of 20 (95%) of SNAP recipients	Supported by 5 of 10 (50%) SNAP recipients	Overall strong support among SNAP recipients, but some variation between SNAP recipient groups

Bright green= 90-100% Light green= 70-90% Yellow= 40-70% Orange= less than 40%

The following graph displays the top five of 12 strategies discussed and ranked by attending stakeholders.

TABLE 5: TOP FIVE STRATEGIES FROM STATEWIDE CONVENING

TOP 5 STRATEGIES FROM STATEWIDE CONVENING	
1 ST PLACE	Streamline SNAP enrollment with other services.
2 ND PLACE	Pilot that tests the amount by which SNAP benefits need to increase in order to measurably improve food security, diet quality, and purchasing behavior.
3 RD PLACE	Expand Produce Perks to more retailers and counties.
4 TH PLACE	Better promotion and coordination of existing programs (Produce Perks, etc.)
5 TH PLACE	Allow hot, prepared foods to be purchased through SNAP

STRATEGIES WITH HIGH LEVELS OF SUPPORT

These strategies had strong consensus among SNAP participants and stakeholders (convening attendees and key-informant interviews):

EXPAND PRODUCE PERKS TO MORE RETAILERS AND MORE COUNTIES

SNAP PARTICIPANTS

Healthy SNAP incentives, such as having more purchasing power when using SNAP benefits to buy fruits and vegetables, were widely supported by focus group/interview participants.

In 2021, there were 29 grocery stores, 77 farmer's markets; and farm stands participating in Produce Perks Midwest, which provides dollar matching for fruit and vegetable purchases. While any person receiving SNAP in Ohio is eligible for the Produce Perks program, many SNAP participants may not know it exists or face barriers getting to participating locations, such as time and transportation. Participating locations are currently only in 35 of Ohio's 88 counties, demonstrating both a need and an opportunity for expansion.

Efforts to expand Ohio's existing Produce Perks program were widely supported amongst individuals receiving SNAP. Expansion includes allowing SNAP incentives to be redeemed at more types of retailers and in more counties in Ohio. Pilots that would expand allowable incentives (such as accepting more types of foods like whole grains, dairy, and eggs) were also widely supported by focus group participants. Some individuals expressed that it would be helpful to expand incentives to cover frozen fruits and vegetables as well. Several SNAP participants expressed that they did not know Produce Perks existed and wondered if it was available anywhere in their area.

RESPONSES CAPTURED FROM FOCUS GROUP PARTICIPANTS, INTERVIEWEES:

" I've never heard of the [Produce Perks] program until today, but would definitely use it."

" I didn't know you could use SNAP incentives at some farmers markets, that would be wonderful."

" It would be nice to know of farmers markets that are local that you could go to and use SNAP and get double dollars for fruits and vegetables."

" I've never heard of [Produce Perks], but it would be helpful to increase the ability to purchase healthy food. Would need more publicity to know who is offering that service."

" I think that [Produce Perks] would definitely help people make better choices when it comes to either healthier and buying healthier options. It is beneficial for people who aren't able to spend so much for fruits and vegetables, and would pretty much double it where they could get a second amount for whatever they are needing for fruits and vegetables."

STAKEHOLDERS (CONVENING ATTENDEES AND KEY INFORMANTS):

Expansion of the Produce Perks program to more locations and retailers was one of the top three recommendations from the stakeholder convening. Incentive programs, such as Produce Perks, were viewed favorably by stakeholders and many acknowledged the desire to see these incentives available more widely. Some stakeholders noted that expansion to more retailers would require more investment from the state. Challenges to wider implementation are the technological and logistical requirements to implement the Produce Perks program into retailers' point of sale systems.

Stakeholders also recommended increased promotion and broader dissemination of resources, like Produce Perks, available for SNAP participants through coordination with ODJFS and county JFS agencies administering SNAP. One stakeholder emphasized the confusion around the multiple currencies that exist, adding support for better coordination and promotion of these programs: "At our farmers market, our reporting sheet for currencies that we have circulating at our market, there's WIC coupons, and senior coupons, and TANF coupons, and produce perks tokens, and SNAP tokens and credit card tokens...it's a little confusing for the farmers, too."

Many stakeholders liked the idea of expanding Produce Perks to cover more items. However, some noted that it could be challenging to implement within grocery stores due to technological changes and the point-of-sale system. Another stakeholder acknowledged that such a pilot would be easier to implement at farmer's markets where there can be more of a flexibility of produce because the program operates manually through the use of tokens.

RESPONSES CAPTURED FROM CONVENING STAKEHOLDERS:

Incentive programs are great, but need to encapsulate frozen and canned options. In some areas access to fresh fruits and vegetables is more limited ."

The farmer is accepting tokens for eligible products, so it's fairly easy to be flexible and could be a great pilot location to expanding incentive items from fruits and vegetables to other items."



PERMANENTLY INCREASE MONTHLY BENEFIT AMOUNT.

SNAP PARTICIPANTS

Overall, most participants expressed a desire to make healthy food purchases for their families; however, many felt constrained by their limited SNAP benefits, which comprise most of the money they are able to spend on food in their household. When asked about receiving the emergency allotments and the 15% benefit boost to their SNAP benefits during the pandemic, almost all noted that the boost helped them meet their nutritional needs. Some expressed concern for keeping food on the table when the emergency allotments go away.

RESPONSES CAPTURED FROM FOCUS GROUP PARTICIPANTS, INTERVIEWEES:

" I know we get the max amount because of Covid and that has been enough for us. I have been making sure that our choices are healthy and that we get a lot of fruits and vegetables."

" The Covid SNAP increase allows my basic food needs to be met, and for me to have healthy food access at grocery stores. It opens budget for hygiene items & other essentials ."

" [cost] impacts how much I can buy. Still try to go with healthier options. Sometimes I can't. People would be healthier if it doesn't cost more to be healthy."

" On a tight budget, we usually stick to the same fruits and veggies that are cheaper, with more benefits, we would be able to buy more or more expensive fruits and vegetables with more funds."

" The extra for Covid makes it enough, if that gets cut, it would be a stretch especially if you try to healthier options because they cost more."

" Before Covid, I didn't have enough SNAP money to get all of the groceries I needed to feed my family. I am worried for when the extra amount stops and what that means for feeding my kids."

" With a small budget, when you are talking about bread and things like that, sticking to the cheaper option is typically what we do. If it wasn't so expensive for the whole wheat and whole grain, we would definitely buy those instead, but they are a few dollars more than just a regular white loaf of bread."

ALMOST ALL SNAP PARTICIPANTS NOTED THAT AN INCREASE IN THE AMOUNT OF SNAP BENEFITS WOULD HELP THEM ACCESS HEALTHIER OPTIONS THROUGH SNAP. THEY NOTED THAT THE HEALTHIER OPTIONS ARE OFTEN MORE EXPENSIVE WHICH IS A BARRIER WHEN OPERATING ON A TIGHT FOOD BUDGET.





STAKEHOLDERS

Generally, stakeholders agreed that SNAP benefit amounts were meager and insufficient to meet families' needs. They emphasized the connection between adequate benefit funds and the ability to afford healthy food options. One stakeholder recommended a strategy that analyzes the cost of living in communities to determine adequate SNAP allotments. This strategy was in the top three recommendations resulting from the stakeholder convening.

RESPONSES CAPTURED FROM CONVENING STAKEHOLDERS:

- " I just don't think snap allotments actually consider what it actually costs to provide healthy nutritious meals. They use the thrifty food plan budget as opposed to what it actually costs to provide a family with healthy nutritious foods."
- " When we knock on doors in our community and ask [families with barriers to accessing healthy eating], we are overwhelmingly hearing that healthy food is too expensive."
- " The more constrained your resources are-both money and time, the more difficult it is going to be for you to have access."

STREAMLINE SNAP ENROLLMENT AND OTHER BENEFITS LIKE MEDICAID AND WIC.

SNAP PARTICIPANTS

While the focus groups and interviews with SNAP participants did not specifically ask for their opinions about aligning SNAP enrollment with other programs, this topic did emerge during open-ended discussion around the SNAP application process. Some SNAP participants identified barriers to the application process, such as completing significant amounts of paperwork and some language access issues. Another participant described the challenge of managing the various benefit programs, noting that her WIC and SNAP participation required different paperwork and renewals, all while being the full-time caregiver for her newborn child.

RESPONSE CAPTURED FROM FOCUS GROUP PARTICIPANTS, INTERVIEWEES:

- " It was a little hectic, when I first applied. You had to do so much to get a few food stamps. Making copies of stuff I had to have. I felt like if they had your income from other programs I already get, why can't they use that. It takes a while to do all that."

STAKEHOLDERS

The number one ranked strategy amongst stakeholders to improve access to healthy eating for SNAP participants was to align SNAP enrollment with other programs such as Medicaid and WIC. The Bipartisan Policy Center also recommends aligning SNAP and Medicaid as a way to help promote better health outcomes.³²

ALLOW HOT, PREPARED FOOD ITEMS TO BE PURCHASED THROUGH SNAP.

SNAP PARTICIPANTS

Hot, ready -to-eat prepared foods are not currently allowable items for purchase with SNAP benefits in Ohio. Some states do participate in state-run restaurant meals programs that allow SNAP participants to purchase hot prepared food items, but Ohio is not one of them. Almost all of the participants included in the NEOBHC, Gladden Community House, and Appalachian Children Coalition focus groups or interviews noted that allowing hot prepared foods for purchase with SNAP benefits would support healthier meals and overcome barriers faced by some, such as lack of time to prepare meals on busy work days or lack of access to a kitchen or working oven. Those who participated in the focus groups or interviews with US Together and ETSS were mixed on whether they thought hot food items would support their health. Many of those participants noted that they preferred cooking their own meals at home.

RESPONSES CAPTURED FROM FOCUS GROUP PARTICIPANTS, INTERVIEWEES:

" It would be amazing to walk into Walmart and get a chicken already made. Sometimes you don't have access to cooking in your home. Everyone deserves a hot meal. Just because you're on food stamps does not mean you should not be able to get a hot meal. Warm food in family's stomach regardless of income bracket is something that we should be able to do."

" [purchasing hot food items] would impact [me] because sometimes you don't always get the chance to cook a home-prepared food...there would be days where that would be easier than coming home and stressing."

" We would like to be able to buy hot prepared items. We don't see a difference between hot prepared foods and non-hot foods. If we need food now but can't cover it with food stamps. Sometimes we need these things."

" Time to prepare meals can be a stressor when I am working and taking care of my family, so having the option of sometimes purchasing a hot meal item would be great. I don't know why we aren't allowed to use SNAP for these items."

STAKEHOLDERS

Convening stakeholders were supportive of a strategy allowing hot, prepared food items to be purchased through SNAP benefits, noting that many working families don't always have the time to prepare meals. Some stakeholders also voiced that individuals who receive SNAP should be able to purchase the same items as those not receiving SNAP. This strategy was within the top five ranked strategies amongst stakeholders at the convening.

PRODUCT PLACEMENT RESTRICTIONS IN GROCERY AND CONVENIENCE STORES

SNAP PARTICIPANTS Some SNAP participants, particularly those with children, noted that foods and beverages in the check-out line and prominent displays throughout the store sometimes impacted what they would buy or what their children would ask for. Some indicated that if stores sold healthier options, such as water, fruit and healthier snacks at check out, they would purchase those items. Others noted that most marketing strategies (such as placement at checkout line, and prominent displays) did not influence their purchasing behavior. Some explained that with limited funds for food, they are not able to purchase the items in the check-out lines and do not get persuaded by prominent displays.

RESPONSES CAPTURED FROM FOCUS GROUP PARTICIPANTS, INTERVIEWEES:

" It is awful tempting when you are waiting to check out to grab a candy bar, it would be just as easy if they had fresh fruit there that you could just grab something like that."

" [If there were healthy options at checkout] I would let kids pick out what they wanted with no regrets. That would be great. An ideal world."

" It's a full blown free for all if there is a kid [at the grocery store], it is a nightmare and you never know what is going to get into your cart or what meltdown there will be if you say no to something."

" If my kids see paw patrol on a box of cereal, they go for it. They know healthier options, but it's hard to get them to not pick something like that."

" My two youngest kids ask for Fanta & hot cheetos everyday. They put it there at register on purpose - wish it were illegal. Should be behind glass door like when you walk into gas station and want to get a beer."

Others didn't think healthier options at check-out or in prominent displays would impact their shopping habits:

" I am already buying these healthier foods when I am shopping in the store. I am already thinking in my mind "this is on my list; this is in my budget." But if I see these at the checkout, I do not think to add this to my budget and cannot buy it anyways."

STAKEHOLDERS While this strategy was not within the top five strategies discussed by stakeholders, many agreed that programs to incentivize retailers (i.e. establishing a statewide financing program to provide grants to grocery and convenience stores selling healthier foods in underserved areas or incentivizing healthy check-out lines) to serve and prominently display healthier options would be beneficial to consumers. Some of the challenges identified were financial constraints for retailers, many of whom are especially strapped as a result of the pandemic.

RESPONSES CAPTURED FROM CONVENING STAKEHOLDERS:

" There's a cheetah person and a coke person and they put infrastructure in stores to sell their product, but there is no veggie person, no whole grain person. When we talk about availability and affordability, these are the real things retailers are dealing with when stocking their stores."

" Unless we are going to get broad incentives for every SNAP participant funded through public dollars, then to realize change for access, we have to look at addressing barrier on the retail side of things."

PROGRAM LINKING INCENTIVES TO DISINCENTIVES

SNAP PARTICIPANTS

In the focus groups and interviews, some SNAP participants expressed support for an opt-in approach that would provide additional SNAP benefits for produce when the individual did not use SNAP to purchase sugar-sweetened beverages. Participants who supported this idea appreciated that it still allowed individuals to have choice and autonomy in their decisions, rather than limiting what items could be purchased via SNAP benefits. Those who supported this strategy also appreciated the concept of being rewarded with additional benefits for healthy decisions.

However, many participants expressed concern and dissatisfaction with taking away choice even when the program was opt-in. Some felt that while it would be great to receive additional benefits for fresh produce, someone should not be "punished" for occasionally purchasing a soda. Many who opposed this type of pilot program thought it unfairly stigmatized SNAP participants and overall could lead to limitations of even more food options.

RESPONSES CAPTURED FROM FOCUS GROUP PARTICIPANTS, INTERVIEWEES:

" I don't think that this is a good idea, sometimes we want to buy these items and for example if we are with my nephew and they want a soda we don't want to say no but if the EBT didn't cover that then we wouldn't be able to buy it. Of course, we buy healthy options most of the time, but we like to have the option."

" I like the idea of an opt-in program, I would rather have the fruits than buy the soda."

" Dislike [the idea of incentive linked to disincentive program], because it takes [the] ability to choose away from the participant."

! I don't want to be told what I can buy, I want to make my own choices."

! "I am mixed on this idea, every once in a while we get pop."

" I kind of think it wouldn't be a good idea, we tend to go for juices that are less sugar, but sometimes we do get a soda. I shouldn't be punished for that."

STAKEHOLDERS

This strategy was generally disliked by stakeholders and was ranked last of the 12 strategies discussed at the convening. Stakeholders generally did not like the idea of punitive actions for SNAP participants, noting that SNAP already has in place barriers to access and that SNAP participants' diets are not worse than those who do not use SNAP.

RESPONSES CAPTURED FROM CONVENING STAKEHOLDERS:

" I think anything we do to restrict what people can buy increases the stigma of using it in the first place. It just makes it even more difficult."

" When you look at SNAP purchases versus general population purchases we are purchasing the same things in the same amounts. There's not a difference. So these kind of punitive paternalistic things trying to control what SNAP customers can purchase are challenging."

STRATEGIES WITH LOW LEVELS OF SUPPORT

The following strategies had low levels of support among SNAP participants and stakeholders:

SUGAR-SWEETENED BEVERAGE TAX

SNAP PARTICIPANTS

Excise taxes on SSBs have been proposed in many areas of the United States to address the high consumption of sugary beverages across all income levels and its associated contribution to chronic diseases while also generating tax revenue. Most SNAP participants did not like the idea of implementing a statewide sugary beverage tax. However, some SNAP participants did like that this policy would impact all consumers, rather than singling out SNAP participants, noting that consumers who do not use SNAP purchase sodas.

" I dislike the idea of a tax, it's really not fair, we all know that the extra sugars aren't healthy, It's almost like you are benefiting from someone else's health dwindling and that's not a great idea."

STAKEHOLDERS

While the SSB tax was not included in the final ranking amongst stakeholders, stakeholders in breakout room 1 were asked to assess their support for an SSB tax as a healthy eating strategy using a 1-5 scale, 1 being not supportive and 5 being very supportive. Overall, 6 individuals ranked this approach as a 1, 1 individual as a 2, 3 ranked this approach as a 3, 2 as a 4, and 0 as a five, demonstrating overall low support.



OTHER IDEAS FOR IMPROVING ACCESS TO HEALTHY EATING THROUGH SNAP:

The following additional ideas were raised by stakeholders during the open-ended discussion portion of the stakeholder convening, and these topics were not raised during focus groups and key informant interviews:

Waive delivery fees for online SNAP

While stakeholders and some SNAP participants liked having the opportunity to order groceries online, delivery costs, which can be very expensive and are not able to be covered under SNAP, pose a barrier for individuals receiving SNAP with limited food budgets. Some stakeholders thought that eliminating delivery fees for individuals using their SNAP benefits to purchase groceries could improve access for some.

Raise gross income eligibility threshold for SNAP from 130% to 185% of the federal poverty line

Several stakeholders brought up the idea of expanding SNAP eligibility as a way to improve overall access to funds to support health, noting that strengthening access to the program overall helps ensure more widespread and equitable improvements in public health. Research suggests that this strategy of raising the gross income eligibility threshold for SNAP to bring it in line with other programs for children (e.g., NSLP, WIC) would reduce food insecurity rates by 60.3% among currently ineligible households with children.³³

Expanded Nutrition and Health education

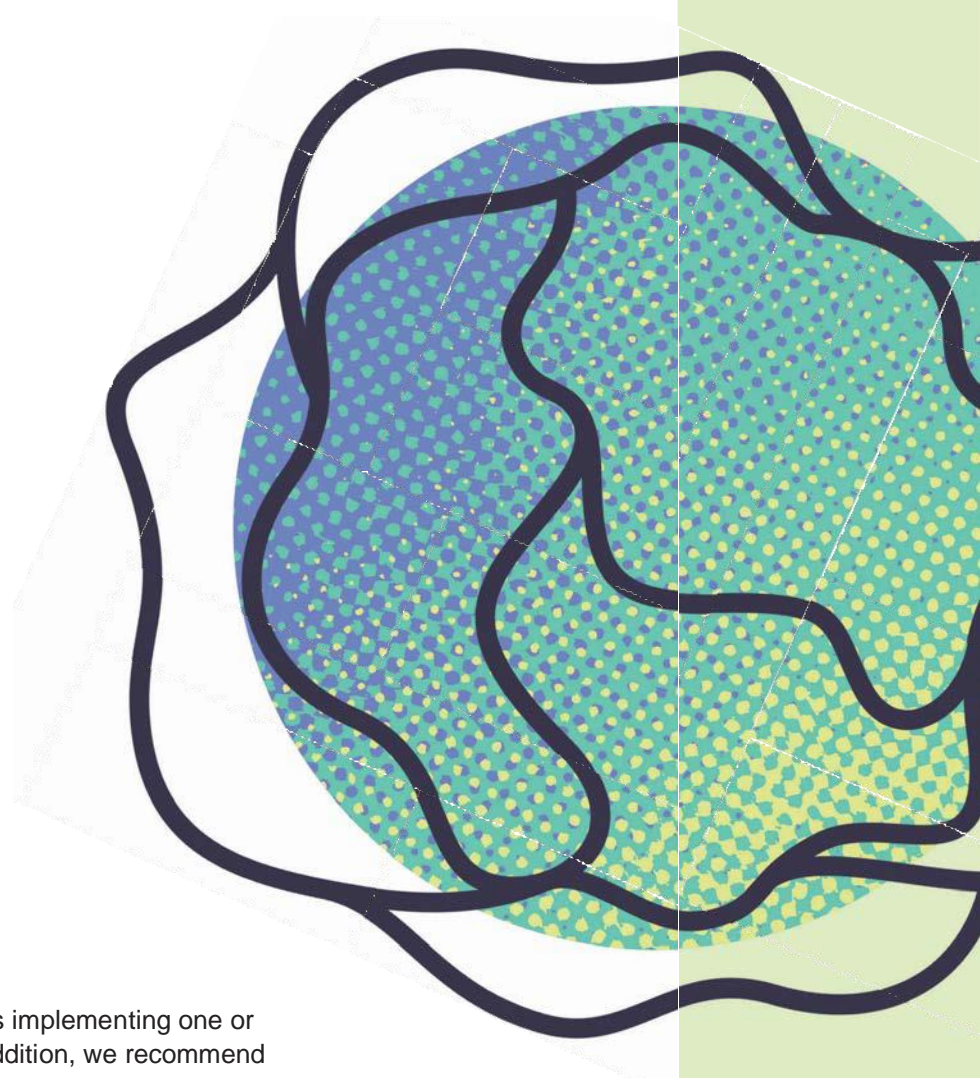
Nutrition education was recommended by some stakeholders as an opportunity to enhance healthy eating. In addition, some SNAP participants expressed a desire to better understand how to read product labels and how to prepare healthy, balanced meals.

In-store promotions for healthy food options

Addressing accessible transportation to access points for wholesome nutritious foods (grocery stores, farmer's markets, mobile markets) Some stakeholders and SNAP participants thought that promotions for healthier food items, such as coupons and / or displays with healthy items would lead to shoppers buying those healthy items.

Addressing Accessible Transportation to Access Points for Wholesome Nutritious Foods (grocery stores, farmer's markets, mobile markets)

Several stakeholders discussed transportation as a barrier to accessing healthy food items and indicated that transportation vouchers or grants might be a strategy to help people access grocery stores or farmer's markets.



SECTION LI

NEXT STEPS

The next phase of this project will work towards implementing one or more of the strategies with broad support. In addition, we recommend ongoing cross-sectoral discussion and collaboration amongst Ohio stakeholders in a anti-hunger, public health, academic research, government, and SNAP participants to further develop strategies and programs that can enhance access to healthy foods across Ohio. While some of our stakeholders were connected to one another through other coalitions and work, many were meeting for the first time. At the conclusion of the convening, several stakeholders expressed interest in ongoing conversations and collaboration.

Given the number of strategies for supporting healthy eating through SNAP that emerged during these discussions, we also recommend that anti-hunger and public health groups consider incorporating these ideas into some of their programmatic goals.

CSPI will also communicate the results and recommendations with policymakers, researchers, and SNAP advocates at the federal level.

ENDNOTES

- Learn more about the Appalachian Children Coalition : appalachianchildrencoalition.org
- 2 Learn more about the Northeast Ohio Black Health Coalition: neoblackhealthcoalition.org
- 3 Learn more about US Together : ustogether.us
- 4 Learn more about Ethiopian Tewahedo Social Services: ethiotss.org
- 5 Learn more about Gladden Community House: GladdenHouse.org
- 6 Food insecurity is defined by the United States Department of Agriculture (USDA) as a lack of consistent access to enough food for an active, healthy life. See: *USDA ERS - Food Security in the U.S.* (2022, January 19). [USDA ERS](http://USDAERS)
- 7 State-By-State Resource: *The Impact of Coronavirus on Food Insecurity*. (2021, May 5). Feeding America Action. [The Impact of Coronavirus on Food Insecurity - Feeding America Action](http://TheImpactofCoronavirusonFoodInsecurity-FeedingAmericaAction)
- 8 *Household Food Security in the United States in 2020*. (2021, September) . USDA-Economic Research Service . ers.usda.gov
- 9 Raja, S., Ma, C., and Yadav, P. "Beyond Food Deserts : Measuring and Mapping Racial Disparities in Neighborhood Food Environments." *Journal of Planning Education and Research* 27 (2008): 469-482. Rose, D., and Richards, R. "Food Store Access and Household Fruit and Vegetable Use among Participants in the US Food Stamp Program." *Public Health Nutrition* 7, no. 8 (2004): 1081-1088.
- 10 *Identifying and Measuring Food Deserts in Rural Ohio* . (2012, June). The Journal of Extension (JOE). joe.org
- 11 Micha R, Shulkin ML, Penalvo JL, Khatibzadeh S, Singh GM, Rao M, et al. (2017) Etiologic effects and optimal intakes of foods and nutrients for risk of cardiovascular diseases and diabetes: Systematic reviews and meta-analyses from the Nutrition and Chronic Diseases Expert Group (NutriCoDE). *PLoS ONE* 12(4): e0175149. [https:// doi.org/10.1371/ journal.pone.0175149](https://doi.org/10.1371/journal.pone.0175149), [Food Insecurity, Chronic Disease, and Health Among Working-Age Adults Summary \(usda.gov\)](http://FoodInsecurity,ChronicDisease,andHealthAmongWorking-AgeAdultsSummary(usda.gov)); [Food Insecurity And Health Outcomes | Health Affairs](http://FoodInsecurityAndHealthOutcomesHealthAffairs)
- 12 [29SNAPcurrPP.xls \(azureedge.net\)](http://29SNAPcurrPP.xls(azureedge.net))
- 13 Ettinger de Cuba, S. A., A. R. Bovell-Ammon, J. T. Cook, S. M. Coleman, M. M. Black, M. M. Chilton, P. H. Casey, et al. Snap, Young Children's Health, and Family Food Security and Healthcare Access. *Am J Prev Med*. 2019; 57 (4):525-32.
- 14 Williams, L. F. (2003). *The Constraint of Race: Legacies of White Skin Privilege in America* (61053rd ed.). Penn State University Press. psupress.org
- 15 Ramos, C., Johnson, J., & Sandalow, M. (2021, June). [Recommendations for a Healthy Eating SNAP Pilot in North Carolina](http://RecommendationsforaHealthyEatingSNAPPilotinNorthCarolina); The Harkin Institute, Drake University, & Center for Science in the Public Interest (2021). [Strategies to Improve Healthy Eating in SNAP, An Iowa Perspective](http://StrategiesToImproveHealthyEatinginSNAP,AnIowaPerspective); The Center for Science in the Public Interest. (2021, Dec.). [Recommendations for a Healthy Eating SNAP Pilot in Massachusetts](http://RecommendationsforaHealthyEatingSNAPPilotinMassachusetts);
- 16 [Public Assistance Monthly Statistics \(PAMS\) Report | Public Assistance Monthly Statistics](http://PublicAssistanceMonthlyStatistics(PAMS)ReportPublicAssistanceMonthlyStatistics)
- 17 [Ohio | Feeding America \(2019\)](http://OhioFeedingAmerica(2019))
- 18 Chad Stone, "Fiscal Stimulus Needed to Fight Recessions," CBPP, April 16, 2020, cbpp.org; see also Patrick Canning and Rosanna Mentzer Morrison, "Quantifying the Impact of SNAP Benefits on the U.S. Economy and Jobs," USDA, Economic Research Service, July 18, 2019, ers.usda.gov/
- 19 [Office of Family Assistance | Ohio Department of Job and Family Services](http://OfficeofFamilyAssistanceOhioDepartmentofJobandFamilyServices) .
- 20 [060320-SNAP-online-purchasing-avl.stm \(ohio.gov\)](http://060320-SNAP-online-purchasing-avl.stm(ohio.gov)).
- 21 [Produce Perks Midwest - Spend a little, Save a lot.](http://ProducePerksMidwest-Spendalittle,Savealot)

- 22 In 2020, federal legislation allowed states to offer meal replacement benefits for households with children who lost subsidized school meals through a program known as Pandemic-EST.
- 23 In 2021, Produce Perks served 28,140 households, a 40% increase from 2020. The program served over 1.5 million servings of fruits and vegetables to Ohio SNAP participants, for a total of \$1,789,959.00 in SNAP and P-EBT sales (a 65% increase from 2020). Produce Perks impacted 29 grocery stores, 77 farmers markets and food stands, 572 farmers and 639 small food business and livestock farms.
- 24 Families First Coronavirus Response Act, H.R. 6201- 116th Congress (2019-2020) <https://www.congress.gov/bill/116th-congress/house-bill/6201>.
- 25 *Id.*
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- 27 <https://rules.house.gov/sites/democrats.rules.house.gov/files/BILLS-116HR133SA-RCP-116-68.pdf>; <https://www.congress.gov/bill/117th-congress/house-bill/1319/text>
- 28 **USDA Modernizes the Thrifty Food Plan, Updates SNAP Benefits.** (2021, August 16). USDA. <https://www.usda.gov/media/press-releases/2021/08/16/usda-modernizes-thrifty-food-plan-updates-snap-benefits>.
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- 31 Interviews conducted by ETSS were shortened to accommodate the additional time through utilization of a translator.
- 32 The Bipartisan Policy Center. (2018, March). *Leading with Nutrition: Leveraging Federal Programs for Better Health*. Bipartisan Policy Center. [Leading with Nutrition: Leveraging Federal Programs for Better Health \(2018\)](#).
- 33 Gundersen, C., Kreider, B., & Pepper, J. (2018). Reconstructing SNAP to more effectively alleviate food insecurity in the U.S., RSF: The Russell Sage Foundation Journal of Social Sciences, 4, 113-130.
- 34 **Freedom from Hunger: An Achievable Goal for the United States of America.** Recommendations for the [National Commission on Hunger. Freedom from Hunger: An Achievable Goal for the United States of America \(2015\)](#)
- 35 Bleich, S. N., Moran, A. J., Vercammen, K. A., Frelief, J. M., Dunn, C. G., Zhong, A., & Fleischhacker, S. E. (2020). [Strengthening the Public Health Impacts of the Supplemental Nutrition Assistance Program Through Policy. Annual review of public health, 41, 453- 480.](#) <https://doi.org/10.1146/annurev-publhealth-040119-094143> .
- 36 Maeve Gearing, Sujata Dixit-Joshi , and Laurie May. Barriers that Constrain the Adequacy of Supplemental Nutrition Assistance Program (SNAP) Allotments: Survey Findings. Report prepared by Westat, Inc. for the U.S. Department of Agriculture, Food and Nutrition Service, June 2021. Project Officer Rosemarie Dwyer. Available online at fns.usda.gov/research-and-analysis
- 37 *Id.*
- 38 *Id.*
- 39 **Compare to statewide** 34.9% of all SNAP participants in Ohio identify as Black, 29.5% identify as Mixed, 24% identify as Hispanic, 11.4% identify as white, and 7.7% identify as Asian. [The Demographic Statistical Atlas of the United States - Statistical Atlas](#).

APPENDIX A

FARM BILL OVERVIEW

SNAP IN OHIO

GUIDING QUESTIONS

SNAP COMMUNITY ENGAGEMENT
OCTOBER CONVENING AGENDA

The Farm Bill

What is the farm bill?

The farm bill is a package of agriculture and nutrition legislation passed roughly every five years, which includes a nutrition title (Title IV) that authorizes most federal food programs. The nutrition title [comprises nearly 80% of the budget](#) for the farm bill, and the Supplemental Nutrition Assistance Program (SNAP) accounts for most of Title IV spending.

How did the 2018 Farm Bill impact the SNAP program?

Following [months of contentious negotiations](#), the [Agriculture Improvement Act of 2018](#) (2018 Farm Bill) preserved SNAP eligibility and benefit levels for the greater than 40 million individuals who rely on the program. The final legislation also enhanced some SNAP initiatives and introduced several innovative programs:

SNAP Benefits

- Protected the structure and funding of SNAP. Rejected all measures included in the [House version](#) to cut benefits and eligibility and attempts in the Senate to expand work requirements and require photo identification when using the SNAP EBT card.
- Required USDA, by 2022 and in 5-year intervals, to re-evaluate and publish market baskets of the Thrifty Food Plan (TFP) based on current food prices, food composition data, USDA dietary guidelines, and consumption patterns.
 - o Note: USDA announced the [results of this update](#) in August 2021, which found that "the cost of a nutritious, practical, cost-effective diet is 21 percent higher than the current Thrifty Food Plan." SNAP benefits will incorporate the update starting October 1, 2021.

Incentives

- Reauthorized the Gus Schumacher Nutrition Incentive Program (GusNIP, formerly the Food Insecurity Nutrition Initiative or FINI) and established mandatory baseline funding of \$250 million over five years (\$50 million per year). GusNIP funds nutrition incentives, produce prescriptions, and technical assistance and evaluation support.
- Established a \$20 million incentive pilot for milk (discretionary funding).

Additional Initiatives and Programs

- SNAP-Ed: protected funding for evidence-based nutrition education interventions and required an electronic reporting system, technical assistance, and annual reports to USDA. Established an online information clearinghouse to share best practices.

- Public-Private Partnerships: Authorized \$5 million for up to ten pilot projects to test public-private partnerships that improve the effectiveness and impact of SNAP, develop contextualized solutions to poverty, and strengthen the capacity for communities to mitigate food insecurity and poverty.
- Mobile pilot projects: Created mobile pilot projects to leverage technology to verify applicant identities and income.
- Online SNAP: Required nationwide implementation of online acceptance of SNAP benefits following completion of the pilots created in the 2014 Farm Bill and removed the requirement for USDA to report to Congress on the pilot results.
- SNAP Employment and Training (SNAP E&T): expanded SNAP E&T operations and slightly increased funding.
- Child support cooperation requirements: Directed USDA and HHS to evaluate state policies on SNAP child support cooperation requirements.

September 10, 2021

For more information, please contact the Center for Science in the Public Interest at policy@cspinet.org.



SNAP in Ohio

Ohioans experience high rates of food insecurity and diet-related chronic diseases, conditions that can co-exist due to risk factors associated with economic and social disadvantage. The pandemic and economic downturn are [exacerbating nutrition disparities](#) in Ohio and across the nation. A projected 16.0% of Ohioans [may face hunger](#), up from 13.3% pre-pandemic.

The Supplemental Nutrition Assistance Program (SNAP) is the nation's largest food program and a powerful tool for mitigating suffering. At the federal level, Ohio policymakers play an important role in SNAP policies. Senator Sherrod Brown is a member of the Agriculture, Nutrition, & Forestry Committee, which is responsible for a range of federal agricultural and nutrition policy.

SNAP at the State Level

SNAP is sometimes referred to as "food stamps" in Ohio and is run by the Ohio Department of Jobs and Family Services (OD JFS). It is one of ten states that shares program administration with county jobs and family services agencies.

Participation and Benefits:

- In June 2021, SNAP reached [1,535,857](#) individuals in Ohio.
- Participants are mostly households with children and nearly [30% of children](#) in Ohio received SNAP in 2020
- In [2018](#):
 - 40.3% of SNAP participants lived in households with children, 25.9% lived with elderly individuals and 25.3% lived with non-elderly individuals with disabilities.
 - 67.3% of households were headed by a White, non-Hispanic participant and 29.4% by a Black participant
- Benefits are modest. In [June 2021](#), the average monthly household benefit was \$224, roughly \$7.23/ day for the entire household. This is an increase from pre-pandemic levels.

Retail:

- Most benefits are redeemed at large food stores .
 - In 2020, approximately [9,714](#) Ohio retailers were authorized to accept SNAP.
 - In 2019, large retailers (superstores, supermarkets, and grocery stores) accounted for about [80% of redemptions](#).
 - The vast majority of SNAP authorized retailers, [about 80% in 2019](#), are locally owned business, such as convenience stores, dairies, butchers, bakeries, and farm stands.

- Access to nutritious food is unevenly distributed in Ohio.
 - There are many areas with few or no full-service grocery stores and in 2015 about [14% of low income Ohioans were also in an area with low access to food](#).

Programs

Ohio Food Program (OFP)

OFP is funded by the Ohio Department of Job and Family Services through an annual grant for the purchase and distribution of food products by the Ohio Association of Second Harvest Foodbanks to eligible households through the Ohio foodbank network. These food items supplement the distribution of food products acquired through TEFAP, private purchase and/or donation. Food items purchased include canned vegetables, applesauce, beef stew, tuna, hot dogs, canned soup, macaroni & cheese, spaghetti sauce and pasta.

Agriculture Surplus Production Alliance (OASPA)

OASPA develops a statewide link between farmers, growers and food processors who have nutritious, surplus agricultural products, and the Ohio foodbank network, and strengthens the infrastructure of the emergency food providers through capacity building. Funded by the Ohio Department of Job & Family Services through the Ohio Association of Second Harvest Foodbanks, this partnership provides fresh processed Ohio-grown products to eligible persons and supports enhancements to the emergency food provider to improve storage and distribution systems. Fresh products include fresh fruits and vegetables, eggs and meat, all Ohio grown!

ProducePERKS

The [Produce Perks Midwest](#) program provides up to a \$25 match on SNAP purchases. ProducePerks matches SNAP dollars \$1 -for- \$1 up to \$25.00 per day. Produce Perks matching dollars can be spent on fruits and vegetables. Some stores will produce a coupon for free fruits and vegetables, some give discount on the fruits and vegetables bought that day. It is also available at participating Farmers' Markets. ProducePerks is available at over 100 locations across Ohio. In 2019, the program reached [16.126 Snap Consumers](#), and resulted in [\\$912,000 in healthy food sales](#).

PRx Prescriptions for Fruits and Vegetables

[The Produce Prescription Program](#) connects patients with certain diseases (diabetes, obesity, cardiovascular, etc.) to providers that write prescriptions for free fruits and vegetables. Patients are screened for food insecurity and providers issue monthly prescriptions to meet the family's recommended daily servings of fruits and vegetables. The program is operating in limited locations across the state, and the program in [Columbus](#), for example, runs for three-months and focused on pregnant patients and their newborns.

Online SNAP

- Ohio began participating in the [SNAP Online Purchasing Pilot](#) in June 2020.
- Aldi, Amazon, BJ's Wholesale Club, Giant Eagle, Walmart, and some Kroger stores are the only retailers accepting SNAP payments online in the state.

SNAP Education and Training (E&T) Plan

The E&T program is coordinated with Ohio's Temporary Assistance for Needy Families (TANF) work and training program called Ohio Works First (OWF). The purpose of SNAP E&T is to assist individuals participating in the

Policy

- The [Families First Coronavirus Response Act](#) temporarily suspends SNAP work requirements and allowed Ohio to increase benefits and access. Specifically, Ohio:
 - Allotted emergency supplemental benefits for participants not previously receiving the maximum monthly amount ([but left out](#) the 40% already receiving the max)
 - Offered meal replacement benefits through SNAP for households with children who lost subsidized school meals (called Pandemic EBT or [P-EBT](#))
 - Temporarily relaxed administrative barriers to accessing SNAP, including by extending certification periods and adjusting interview requirements. USDA has indicated it [may begin rolling back](#) these flexibilities in September.
- The [Coronavirus Aid, Relief, and Economic Security \(CARES\) Act](#) allocates funds to cover existing SNAP benefits for the rising number of applicants due to the pandemic; does not expand eligibility or increase benefits.
- The [Covid Recovery and Relief Bill](#), signed in December, 2020, includes a 15% SNAP increase for January 1, 2021 through June 30, 2021
 - [The American Rescue Plan Act](#) extended the 15% boost through September 30, 2021.
- On April 1, 2021 the USDA announced that households already receiving maximum benefit prior to the pandemic and households receiving less than \$95 in emergency allotment benefits, would start receiving a total of \$95.00/month in EA benefits.
- [The American Rescue Plan Act of 2021](#) extended the 15% increase in SNAP benefits through September 2021, provides additional resources for administration as states respond to increased demand for SNAP benefits, extended the P-EBT program through the summer months, providing food dollars to families to buy groceries to make up for meals missed when schools are closed during the summer months; invests in modernizing the WIC program, provides 25 million to USDA to help expand SNAP online purchasing and the development of mobile payment technologies. The 15% boost will conclude at the end of September, 2021.
- In August of 2021, the USDA announced a [re-evaluation of the Thrifty Food Plan](#), used to calculate SNAP benefits. Average SNAP benefits will increase for FY 2022 starting on October 1, 2021. The cost adjustment is the first time the purchasing power of the plan has been modified since its introduction in 1975. The re-evaluation was driven by four key factors: current food prices, what Americans typically eat, dietary guidance, and nutrients in food items

The graph illustrates the projected increase in SNAP average monthly per person benefits from FY 2019 to FY 2022. The y-axis represents the benefit amount in dollars, ranging from \$50 to \$350. The x-axis shows the fiscal years. A solid line represents the historical data, while a dashed line represents the projected data for FY 2022. Key data points are labeled: \$121 in FY 2019, \$240 in FY 2020, and \$251 in FY 2021. The projected FY 2022 benefit is \$169. A red dashed line shows a projected decrease to \$133, which is then corrected back to \$169. Annotations include 'Emergency Food Assistance' and 'Re-evaluation of the Thrifty Food Plan'.

Fiscal Year	Average Monthly Per Person Benefits (\$)
FY 2019	\$121
FY 2020	\$240
FY 2021	\$251
FY 2022 (Projected)	\$169

- [Ohio Leverages BBCE](#) to allow households that meet requirements of other state and federal benefits such as TANF, to be automatically eligible for SNAP benefits and to allow any elderly individuals. BBCE allows the state to utilize a less prohibitive asset test.



- A USDA proposed rule in 2019 that would restrict categorical eligibility would cause [8% of SNAP households in Ohio](#) to lose all benefits by re-imposing the asset test. It would also cause many children to lose automatic eligibility for free or reduced-price school meals.

Waiver for Eligible Foods

- Ohio has not submitted a waiver request to allow hot foods and hot food products prepared for immediate consumption to be considered "eligible foods" when purchased from FNS-authorized retailers.

Drug Felony Disqualification

- Federal law permanently disqualifies individuals convicted of a felony drug offense from receiving SNAP benefits but allows states to modify or opt out of the ban.
- Ohio does not impose disqualification or drug screenings as part of the application process or for continued participation

Requirements for Able-Bodied Adults Without Dependents

- Federal law states that able-bodied adults without dependents (ABAWDs) can only participate in SNAP for three months out of a 36-month period. States may waive this policy for SNAP participants who live in areas of high unemployment or lack of sufficient jobs.
- 42 counties in Ohio currently have waivers from these requirements
- Ohio law imposes [a 20-hour per week work requirement](#) for ABAWDs aged 18-50 who live in a county that is not subject to a waiver.

State Legislation

- During the 2020-2021, and 2021-2022 legislative sessions, the following SNAP related bills were introduced:
 - [Senate Bill 17](#)- SB 17 was introduced in January 2021 and sought to require a color photo identification from at least one adult in every household on SNAP EBT cards (also referred to as Ohio Director cards), implement strict asset test limits for SNAP participation, required change reporting of income within 10 days of learning of such changes, require a parent to cooperate with child support enforcement as a condition of SNAP eligibility
 - [House Bill 288](#) - HB 288 was introduced in the House on May 5, 2021 and would require color photo identification from at least one adult in every households on SNAP EBT cards, as well as a telephone number and website on the back of the card to report suspected fraud
 - State 2022-2023 Budget Bill, [HB 110](#)- Advocates worked to ensure that provisions of SB 17 were not included in the final Budget Bill. The Budget bill did create a task force comprised of 15 members to review, among other things, fraud prevention efforts in SNAP, how overpayments in SNAP can be prevented, and the costs and benefits associated with implementing a requirement that each SNAP card include a color photograph of at least one member in the household.
 - The Budget did include the commitment of \$24.55 million per year for the Ohio Association of Food Banks to be used to purchase and distribute food products, support innovative summer meals programs for children, provide SNAP outreach and free tax filing services, and provide capacity building equipment for food pantries and soup kitchens.

- The Budget also included a requirement that the Ohio Department of Jobs and Family Services pursue the Elderly/Disabled Simplified Application Project waiver allowed by the USDA.

Ohio SNAP Pilot Roundtable Discussion

Guiding Questions for Group #1

Incentives and Disincentives

1. One proposed strategy to support healthy eating through SNAP is to offer incentives to participants to facilitate the purchase of fruits and vegetables. Ohio currently operates ProducePerks in some counties. During our focus groups with SNAP participants, most expressed that they were interested in incentive programs for healthy items (i.e. additional money that can only be used for fruits and vegetables, 1-to-1 match programs, coupons, etc.).
 - a. Do you think there is need for additional pilot for fruit and veggie incentives in Ohio?
 - b. Do you think that a wider variety of incentives (for example, expanding the types of items that can be purchased using incentive dollars) have on good security and diet quality for SNAP participants?
 - c. What challenges or benefits do you anticipate with the implementation of an incentives pilot?
 - d. Do you recommend this as a strategy for supporting healthy eating among SNAP participants? Why or why not?
 - i. What are your opinions on how a program like this should be funded? Should sustained funding for incentives be done at the national, state, or county level?
 2. Another strategy, proposed by the National Commission on Hunger and others, is to no longer include sugary drinks as eligible foods for purchase using SNAP benefits. In our SNAP participant focus groups, disincentives were generally disliked, and much more unpopular than incentives. Many SNAP participants in our focus groups believed that there should be freedom to choose and to be allowed to purchase everything non-SNAP participants can at the grocery store. Though a number of SNAP participants did support removing "energy drinks, and high sugar drinks" from SNAP eligible foods.
 - a. How do you feel about an approach combining a disincentive (such as not allowing SSB purchases with SNAP) and an incentive (such as additional \$\$ for fruits and vegetables or other healthier options)? (Participants would be allowed to choose if they want to use regular SNAP or this other version)
 - b. What challenges or benefits do you see with this type of implementation?
 - c. Would you recommend this as a strategy for healthy eating?
 3. Another proposal is to implement a tax on sugary sweetened beverages with revenue earmarked for F&V incentives or other health initiatives. Do you think a state or local SSB tax in Ohio would help support health eating among SNAP participants and the overall population? Why or why not?
-
-

4. A study conducted in 2018, Barriers that Constrain the Adequacy of Supplemental Nutrition Assistance Program Allotments, found that nearly 88% of participants reported encountering some type of hurdle to a healthy diet. The most common, reported by 61% of SNAP participants, is the cost of healthy foods. Many focus group participants noticed and were helped by the emergency allotments and the 15% boost in their SNAP benefits. Many focus group participants noted that healthier foods (whole grain breads vs. white bread, organic foods vs. nonorganic, fresh protein, etc.) are more expensive than unhealthier options and emphasized the importance of increasing SNAP benefits to improve diet quality. One focus groups participant said "I would love to buy the whole grain and whole wheat options, but they cost double the price of the white bread. So, when shopping on such a tight food budget, I have to purchase the white bread."
 - a. One pilot that has been recommended in other states is to run a pilot that tests the amount by which SNAP benefits would need to increase to measurably improve food insecurity, diet quality, and purchasing behavior. What do you think of this idea?
5. In that same study, Barriers that Constrain the Adequacy of Supplemental Nutrition Assistance Program Allotments, the lack of time to prepare meals from scratch was a barrier. Currently, hot, ready-to-eat foods are not eligible purchases through SNAP. A large majority of SNAP focus group participants indicated that having access to prepared foods (salad bars, hot prepared foods like rotisserie chickens, etc.) would be beneficial to their overall well-being, reducing stress of having to prepare food on long days, and also opening opportunities for purchasing healthier options in a time crunch. This would also benefit people who have physical disabilities or who do not have access to a kitchen and cannot prepare meals.
 - a. What do you think of this idea?
 - b. What challenges or benefit do you see with this strategy?
 - c. Would you recommend this as a strategy to improve SNAP program?
6. The Bipartisan Policy Center recommended aligning SNAP and Medicaid to help leverage these programs for better overall health. And one of our focus group participants noted how much they benefited from WIC when it came to healthy eating. Do you think streamlining enrollment in SNAP, WIC, and Medicaid is a good idea to support participants health?

Retail Environment

- 1) Do you think that marketing strategies are important for healthy eating for SNAP participants? What are your thoughts on having marketing standards for retailers that accept SNAP? For example, a store that accepts SNAP would not be allowed to display SSBs at the checkout aisle.
- 2) Studies and market research show that in-store promotions, pricing, and shelf placement-placing items at eye level, or putting products in promotional displays, end-of-aisle displays, or at checkout-affect what people purchase. We know that in store marketing influences shopper purchasing decisions. One of our SNAP participants stated: "When we go to the store my child will always find the box with Paw Patrol on the front or back, whether its chips or cereal. He begs

me to buy those items, which sometimes are not healthy." In our focus groups with SNAP participants, they expressed that healthy eating required healthful shopping practices

- a. Do you think in-store marketing strategies could help discourage unhealthy eating and encourage healthy eating? Why or why not? What approaches do you think are likely to be most effective to encourage healthy eating?
 - b. Do you think OH retailers would be willing to work with a researcher and participate in a healthy in-store marketing pilot project? Why or why not?
 - c. What do you think would be the most promising pilots to test related to shelf placement, displays, pricing, or other in-store promotions to support healthy eating and reduce unhealthy eating among SNAP participants?
- 3) In response to the pandemic, USDA has rapidly expanded the SNAP online purchasing pilot. This expansion helps to offer participants shopping options online. Innovative strategies can help ensure delivery services are affordable and widely accessible to participants and that online platforms promote healthy, and not unhealthy options.
- a. Do you think increasing access to online shopping and encouraging an online grocery environment that promotes healthy eating is an important SNAP strategy to promote health? Why or why not?
 - b. Are you at all concerned about online marketing tactics that promote unhealthy options and make it harder to select healthy options? Why or why not?
 - c. What challenges or benefits do you foresee with implementing online marketing strategies to improve nutrition?
 - d. What are some of these strategies? (Waiving delivery fees, providing healthier online options, combining stocking standards with marketing standards for both in-store and online retailers)
- 1) What other ideas do you have for improving access to healthy eating among SNAP participants?
-
-

OHIO SNAP Virtual Convening Agenda

Date: October 13 1:30-4:30

Time: 3 hours (including breaks)

Meeting Platform: Zoom

Agenda

1:30pm

Welcome and Introductions (15 minutes)

- Introduction of project
- Introduction of some of our partners in the work
- CSPI intros
 - o CSPI org + staff intros
 - o Overarching goals of SNAP Community Engagement projects
- Participant introductions (10 minutes)
 - o Brief (name, pronouns, organization, role)

1:55-2:10

Project summary and goals (15 minutes)

- Logistics (recorded meeting, Zoom logistics)
- Review agenda
- Overview of some information learned from SNAP participants (10 minutes)
- Purpose of convenings and ground rules

2:10 pm-3:10

Moderated Small Group Discussions (1 hour)

- o **Group #1:** Incentives/Disincentives/Retail Food Environment
- o **Group #2:** Retail Food Environment/Incentives/Disincentives

3:10 -3:25 - Break (15 minutes)

3:25-4:05

Report out and group discussion (40 minutes)

- discussion to try to reach a consensus on the recommendations
- We will keep a "parking lot" of ideas that the group does not agree on but that may come up in other convenings

4:05-4:15- Break (10 minutes)

4:15pm

Vote on recommendations (15 minutes)

4:25 pm

Next steps and closing remarks (5 minutes)

APPENDIX B

FOCUS GROUP INTERVIEWS AND PROTOCOLS

CSPI SNAP COMMUNITY ENGAGEMENT FOCUS GROUP/INTERVIEW PROTOCOLS

Focus Group Protocol

Moderator will read the welcome letter verbally. Each participant will receive (if in person) or be read (if virtual) the following to review (and sign in some cases or provide verbal agreement):

- Participant consent form,
- Permission for their focus group be recorded,
- Photo release form (if someone does not agree to be in photos, that is fine)
- Agenda/Outline of what they will be asked in the focus group.

Participant Qualifications: Current SNAP users and persons eligible for SNAP that are not currently using SNAP

Compensation for Time: All participants will receive a \$50 gift card for their time and participation.

Focus Group/ One-on-One Interview Length: 60 minutes

Location: Host at a location/office in a space that is familiar and comfortable and/or virtually through Zoom, Google Meets, or any other platform.

Recording information: The location chosen, whether in-person or virtual, must allow for the responses to be recorded. Each subgrantee can decide how they would like to record the information, through a note-taker, a tape recorder, zoom or online platform recording. Note that no additional\$\$ will be available for recording devices.

Welcome all participants! (10 minutes)

We have invited you here today to better understand your personal experiences with accessing nutritious food through SNAP as part of a statewide research study. We want to hear what your experience has been like and how you think the program might be improved. We would love to learn your thoughts about potential changes to the SNAP program. We are having discussions like this with several groups across the State. Our goal is to gather input from you about your experiences with the SNAP program and food security to identify how SNAP can better support health outcomes for participants. Your input is needed and appreciated for this work in Ohio.

- *We're going to discuss some important topics today. There are no wrong answers because this is based on your lived expertise. We are just as interested in the negative comments as positive comments.*
- *The report will be made available later this year and if you would like a copy, we will definitely send that to you*
- *We are briefly going to review focus group ground rules*

- *What is said here stays here so that everyone's responses will be anonymous, unless otherwise indicated*
- *Please speak your mind*
- *We will all be kind to and respectful of one another; it is okay to disagree*
- *Please focus on our discussion today, turn off your cell phone*
- *One voice at a time (for focus groups, N/A for one-on-one interview)*
- *We are now going to read and complete the consent form and the media consent form*
 - *Questions?*
 - *Further detail on media consent form: If you are agreeable, we may take pictures during the focus group or after to put a face to the conversations we are having, and we may even use some in our report, which would be preferable to stock photos, because they would most accurately reflect the community.*
 - *Participant does not need to sign or agree to a media consent form to participate. If they do not agree to media form, then no pictures/videos of participant.*
- *Facilitator reminds participants that their responses will be recorded.*
 - *"As a reminder, we will be recording. At this point everyone has consented to having this meeting recorded but if you have any objections please let us know."*
 - *Your responses will be kept confidential to the best of our ability*
 - *For those participants that don't want to be shown, please turn off their video*
- *Note agenda verbally and include in chat (if virtual) or write on board (if in person)*
- *Start recording device: "I will now begin recording your responses as we move forward with the first topic."*

"Let's begin!"

If Focus Group- "Let's find out some more about one another by going around the "table". Tell us your first name and your favorite food or favorite dish to cook?"

If one-on-one Interview- "Tell us your first name and your favorite food or favorite dish"

Now I am going to ask you about your experiences applying for SNAP or reasons for not applying for SNAP and your experience with the program

QUESTIONS (A. B. C. D. + E about 25 Minutes)

A. SNAP interaction

1. Tell me about your experience applying for SNAP.
 - Did anything make it difficult?
 - If not enrolled "How did you find out about SNAP?"
2. Have there been times when you've stopped or almost stopped participating in SNAP? Why?

- [PROBE: Did you have a problem with any workers at the Department of Children and Family Services? You didn't need it anymore? You were removed from the program?]
- 3. For those eligible but have not enrolled: What are the main reasons you have not applied to SNAP? Or, why don't you participate in SNAP?

Thank you so much for your engagement so far. We are now going to talk about you and/or your family's food and health needs

B. Experience with Food Security + Health

1. Is food and/or access to food a stressor in your life?
 - If yes, how so? If no, why not?
2. Have SNAP benefits provided enough to meet your food and nutrition needs?
3. The American Rescue Plan provided an increase in SNAP benefits (around \$100 per month for a family of 4). This increase extends until September, 2021. Did you notice this increase in SNAP benefits?
 - PROBE: Did these benefits help you? If so, how?
4. How do SNAP benefits support your health?
 - How do SNAP benefits open up room in your budget for other needs that support health?

C. Food preferences (about 8 minutes)

1. What items do you currently buy with SNAP benefits for your household?
2. Are there items (food or non-food) that you would like to be able to purchase using SNAP, but currently cannot?

PROBE: This could include food or non-food related items (toiletries, diapers, etc.?)

3. Would access to hot prepared meals through SNAP impact you and your family? How so?
 - If Yes, ask what kinds of hot foods they would like to purchase?
4. What items do you believe should not be covered by SNAP benefits but are currently allowed?
5. Do you or anyone in your household have any chronic health conditions that require certain types of foods? If so, how does this affect what you buy with SNAP?

D. Shopping habits

1. What do you think that you do well when it comes to eating healthy and providing healthy options for your family?

[NOTE for Moderator: Based on previous CSPI research in other states, after answering this question participants often follow up by noting things that make it harder to eat healthy and the items they prefer to buy but cannot afford. You can PROBE on some of the following:

- How do your shopping habits change when you have your kids with you?

- Do your kids ask for candy/soda at checkout?
- If stores sold healthier options, like water, fruit, and snacks with less sugar, at checkout, would you buy them?
- Do prominent displays throughout the store impact what you buy?
- Does the cost of healthy food, like whole wheat bread or fruits and vegetables impact what you buy?
- Is there a lack of availability of healthy options in stores where you shop?

Thank you so much for your feedback so far. We will now discuss SNAP policies that impact costs of various items you may be purchasing. Policymakers are considering different ways to make nutritious food more available and affordable for SNAP users. We are now going to walk through some of their ideas for policies and ask for some of your feedback.

E. Policy responses (F + G about 25-30 minutes)

1. Would you support receiving *additional* SNAP benefits that can only be used for fruits and vegetables?
 - Are you interested in programs that provide extra produce?
 - Are you interested in having additional funds for healthy foods?
2. Some stores and farmer's markets offer extra SNAP benefits for fresh fruits and vegetables, like for every dollar you spend on fresh fruits and vegetables, you get an extra dollar to spend there, or you get a set of coupons to buy more fruits and vegetables.
 - For those who haven't had these incentives, what are your thoughts? Would you like to have additional SNAP benefits specifically to buy fresh fruits and vegetables?
 - For everyone, would you like to get extra SNAP benefits to use for other items besides fresh fruits and vegetables-like for frozen fruits and vegetables, for whole wheat bread and other whole grains, or for milk?
3. Some lawmakers are considering a policy where you would receive extra SNAP benefits-like more money specifically for fruits and vegetables-as an incentive to use a version of SNAP where sugary drinks are not SNAP-eligible foods. [Note to moderator: this does not include 100% juice, flavored milk or diet soda]
 - Do you like or dislike this idea? Why?
 - How would this affect what you/ your family buys/drinks?
 - Would you feel differently if the incentive for not purchasing soda was extra money on your SNAP EBT card every month that could be used to purchase all foods (other than sugary drinks) and not restricted to only fruits and vegetables?
4. Another idea would be to automatically make all fruit and vegetable purchases 30% cheaper and sugary drinks 30% more expensive when purchased with your SNAP EBT card.
 - Do you like or dislike this idea? Why?
5. One last strategy to ask you about: some lawmakers are discussing using the tax on sugary drinks. This would be about 1 cent per ounce, so a 12 ounce soda can would be taxed an extra 12 cents. This would affect everyone who purchases

sodas, not just people using SNAP. The money generated from the tax would go towards allowing fruits and vegetables to be cheaper for SNAP participants at grocery stores.

- Do you like or dislike this idea? Why? (If no, probe for reasons why- is it because they prefer another revenue allocation, they would not like to pay the tax, etc.?)

6. [REDACTED]
- [REDACTED]
 - [REDACTED]
 - [REDACTED]

F. Open-Ended

1. What is one thing you would change to the SNAP program to help you meet your needs?
2. Is there anything else you'd like to share today?
3. Would you like to be included in future components of the project?
 - a. such as receiving a copy of the final report or
 - b. webinars about the results?

"Thank you for your time!"