

Finding Food Security in Portland, Oregon: A Qualitative Study among SNAP Recipients

“...food affects all aspects of our life...we don't recognize it is taking a toll on these other aspects of our life until we have a discussion.”

Report prepared by: Nicole Cerra, MA, MPH, Central City Concern

Analysis team:

Chloe Eberhardt, Partners for a Hunger-Free Oregon

Rai McKenzie, Central City Concern

Kimberly Porter, Black Parent Initiative

San Sunowen, CareOregon



TABLE OF CONTENTS

Description of lead organizations on this project.....	3
Acknowledgements.....	4
Executive summary.....	5
Recommendations.....	7
Introduction.....	9
Methodology.....	10
Results.....	12
Discussion and conclusions.....	24
References.....	27
Appendices.....	29

DESCRIPTION OF LEAD ORGANIZATIONS ON THIS PROJECT

Partners for a Hunger-Free Oregon works with the community to end hunger before it begins. We envision an Oregon where everyone is healthy and thriving, with access to affordable, nutritious and culturally appropriate food. To bring that vision into reality, we raise awareness about hunger, connect people to nutrition programs, and advocate for systemic changes.

Central City Concern is a 501(c)(3) nonprofit organization that provides services to single adults and families in Portland, Oregon impacted by homelessness, poverty, and addictions. Founded in 1979, the agency has developed a comprehensive continuum of affordable housing options integrated with direct social services including healthcare, recovery, and employment.

ACKNOWLEDGEMENTS

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EXECUTIVE SUMMARY

The Department of Human Services contracted with Partners for a Hunger-Free Oregon (PHFO) to collect qualitative and quantitative data to understand how to improve rates of food insecurity in the Portland, Oregon region. PHFO sub-contracted with Central City Concern to conduct the qualitative data collection. This report addresses the qualitative data collected during Spring/Summer 2016.

We conducted eight focus groups with 67 Supplemental Nutrition Assistance Program (SNAP) recipients, a pre-focus group survey, and two case study interviews. The following research questions guided our study: what prevents SNAP participants from becoming food secure? How do SNAP participants obtain food security?

This study utilized the social ecological model to understand the focus group data. The social ecological model is a theory used to comprehend health behaviors. This model is useful when attempting to understand the depth of a health issue, such as food insecurity, before designing an intervention to target it. Our model includes six factors— individual, interpersonal, perceived environment, personal environment, built environment, and policy – and 29 sub-factors that affected focus group participants' food security status.

The key finding in this study is this: food insecurity is influenced by multi-level factors presented in the social ecological model constructed during this study (see model on page 13). In our highly individualized society, we believe that one's health and circumstances mostly depend on an individual's actions. However, this study corroborates other research that food insecurity is due to varied, multi-level factors. Food security is therefore found when aspects of individuals' lives discussed in the model – such as housing, employment, living in a safe neighborhood, having a social support network – are stabilized.

For example, focus group participants discussed how activities on the individual level of our model, such as planning for shopping, combining services, and cooking, all contribute to food security. However, an individual's proficiency in these activities depends greatly on other factors presented in our model. Focus group participants described having an injury or disability and being unable travel to an affordable grocery store, therefore preventing them from thrifty shopping. Some participants discussed lacking adequate space to store food and only having a ride to an affordable grocery store once per month. As a result, participants talked about limiting the food that they buy at the affordable store, and supplementing at a more expensive, but nearby, store. Therefore, while a person may have the individual skills to find food security, they lack the circumstances in other aspects of their lives to become food secure.

Furthermore, participants described how policies of agencies, organizations, and programs affect SNAP recipients' food security status. For example, focus group participants described SNAP benefits as essential for finding food security. However, many participants stated that SNAP benefits usually ran out in the middle of month. Participants discussed relying on friends, family, and other food resources

to find food security for the remainder of the month. Unfortunately, participants also described limiting food to make food stretch throughout the month or feeding their children instead of themselves. In this example we can see how the policy level (SNAP benefit amount) affects the individual level (limiting food) and the interpersonal level (relying on social support for food) of our model.

We are then left with this question: how do we begin to tackle such a highly complex issue that seems to evade the domain of a single agency or organization? There are two ways to think about the answer to this question. First, multi-level interventions are most effective in changing behavior (Glanz et al. 2008). That is, tackling food insecurity will require a close look at the social ecological model constructed during this study and will necessitate intervention on several levels of the model. Second, a full-fledged effort to combat hunger in Portland requires collaborations across organizations, agencies, and different levels of government.

We hope that the perspectives of SNAP participants included in this report shed light on how we can improve food resources so that no Oregonian has to experience hunger.

RECOMMENDATIONS

This study utilized the social ecological model to investigate food insecurity in the Portland, Oregon region. We identified six factors in the focus groups – individual, interpersonal, perceived environment, personal environment, built environment, and policy – that affect food security status. Below are recommendations for how to improve the food security status of SNAP participants at each level of our model. Glanz et al. (2008) discuss that multi-level interventions are most effective in changing health behaviors. In order to improve the food security status of individuals in the Portland region, it is suggested that agencies and organizations identify several levels of the model in which to intervene.

Individual

- Ensure that food resource providers, such as food banks and meal sites, are providing healthy food choices to SNAP recipients, particularly diabetics.
- Support SNAP recipients' attempts to maximize their food budget through strategies they identified in these focus groups, including finding sales and deals on healthy food.

Interpersonal

- Provide assistance to families with small children in traveling to grocery stores and transporting groceries.
- Improve translation services to non-English speaking SNAP recipients. Assist non-English speaking recipients in finding translation services to secure housing, healthcare, and other services.

Perceived environment

- Ensure that affordable grocery stores are placed within walking distance of large concentrations of SNAP recipients.
- Reduce the stigma of accessing SNAP and other food resources, particularly food pantries.

Personal environment

- Ensure SNAP recipients have access to affordable housing, healthcare, and employment opportunities.

Built environment

- Ensure SNAP recipients have reliable transportation to affordable grocery stores, which is feasible to use while transporting children.
- Ensure SNAP recipients have access to community gardens.

Policy

- Increase the benefit amount of SNAP to align with the USDA Low Cost Food Plan to more adequately supplement the cost of a healthy diet. Participants expressed the desire to buy more nutrient dense foods, such as fruits, vegetables, meat and dairy if they were able to afford them.
- Extend the eligibility level to ease the "benefit cliff" experienced by SNAP recipients after a change in their financial or personal situation.
- Ensure SNAP benefits adequately reflect increases in housing costs through policy changes such as increasing allowable deduction levels for shelter costs.
- Improve transparency of SNAP program. Streamline SNAP application and renewal process. Communicate clearly to SNAP recipients why they are receiving a specific benefit amount.
- Provide recipients with a list of food resources, and information on how to access those resources, in the Portland region on an annual basis. Ensure all SNAP recipients receive information on SNAP-ED resources, particularly on the most requested topics such as thrifty shopping, healthy cooking, and gardening.
- Provide extensive trainings to SNAP caseworkers focusing on customer service, building rapport with clients, and integrating trauma informed care. Ensure that each SNAP recipient has a consistent caseworker over time.

INTRODUCTION

The Department of Human Services contracted with Partners for a Hunger-Free Oregon (PHFO) to collect qualitative and quantitative data to understand how to improve rates of food insecurity in the Portland, Oregon region. PHFO sub-contracted with Central City Concern to conduct the qualitative data collection. This report will address the qualitative data collected. We conducted eight focus groups with 67 Supplemental Nutrition Assistance Program (SNAP) recipients, a pre-focus group survey, and two case study interviews during Spring/Summer 2016.

We used the United States Department of Agriculture (USDA) definitions of food insecurity to guide our study (see Appendix I). In 2014, the food insecurity rate in Multnomah County, where this study was conducted, was 16.1%, slightly higher than the national rate of 15.4% (Map the Meal Gap 2015). In order to further understand food insecurity in the Portland region, we asked the following research questions: what prevents SNAP participants from becoming food secure? How do SNAP participants obtain food security?

A number of studies have shown that SNAP decreases rates of food insecurity (Nord 2011; Mabli and Ohls 2015; Nord and Prell 2011). However, SNAP recipients tend to have higher rates of food insecurity than non-recipients, which it makes it appear as if SNAP is not effective at reducing food insecurity (Gunderson et al. 2011). Economic research on this topic has shown that this is in large part due to the selection effect: individuals with higher rates of food insecurity more readily access SNAP benefits (Gunderson and Oliveira 2001). Nord (2011) found that SNAP participants are between 20% and 50% less likely to be food insecure than SNAP nonparticipants when controlling for the selection effect. In designing this study, we believed that SNAP would be essential component of how individuals find food security.

Quite a bit of research on food insecurity and low-income populations investigates how the neighborhood food environment affects food security status. Shannon (2014) looked at the degree to which SNAP clients rely on closest retailers for everyday shopping. This study confirms previous research that low-income residents travel outside of their neighborhood to attain food (Hillier et al., 2011; USDA Economic Research Service, 2009). Gustafson et al. (2013) assessed both the neighborhood food environment (i.e. number of stores within walking distance) and the consumer food environment (i.e. food available in stores). SNAP participants who lived within 1/2 mile of farmers' markets, produce stands, grocery stores, and supermarkets consumed more healthy food items than those who lived in neighborhoods with fewer of these types of resources. These studies alerted us to the multi-faceted nature of food insecurity.

The research presented in this report provides further insight into the multiple factors that influence the complex problem of food insecurity. Using the social ecological model (discussed further in the methodology section), we will present the perspectives and experiences of SNAP participants as they attempt to find food security in the Portland, Oregon region.

METHODOLOGY

Several methodologies were employed to collect data to address the research questions: focus groups, a brief survey, and case study interviews. Each methodology will be discussed in turn. Our use of the social ecological model will also be discussed in this section.

Focus groups

Eight focus groups were conducted among SNAP recipients in the Portland, Oregon region. Partners for a Hunger-Free Oregon (PHFO) reached out to community partners who recruited participants and organized the focus groups. Focus group participants included a group each of African Americans, Native Americans, Southeast Asian immigrants, Eastern European/Russian immigrants, formerly homeless individuals, Portland Community College students, Spanish-speaking individuals, and seniors. Three focus groups were conducted in languages other than English (Spanish, Russian, and Vietnamese). The only criteria for joining the focus groups was that participants had to currently be receiving SNAP or have received SNAP in the past.

We chose to conduct focus groups with these populations for several reasons. First, we decided to target these particular demographics because research shows that they are disproportionately affected by food insecurity and hunger. Households headed by an African American or Hispanic, and households with children are more likely to be food insecure (Gundersen et al. 2011). Second, we also focused on these populations to better understand particular barriers that may be impacting food insecurity such as language isolation, housing insecurity, health status, mobility, social isolation and underemployment.

A total of 67 participants attended the focus groups. In return for participation in the focus groups, participants received \$25 grocery store gift cards, reimbursement for transportation to the focus group site, free dinner, and free childcare while groups were occurring.

Focus groups were conducted in accordance with methodology discussed in Krueger and Casey (2008). A team of three people from PHFO and Central City Concern (CCC) identified and drafted research questions. The author then drafted the focus group questions (see Appendix II). Multiple individuals edited the questions including practitioners who work with SNAP recipients, an individual currently receiving SNAP, and staff at PHFO and CCC. A professional transcriptionist attended most focus groups and transcribed the conversations. Groups conducted in languages other than English were recorded, transcribed, and translated by partner organizations.

Trained individuals from partner organizations moderated the focus groups. Individuals were provided with one and one-half hours of training in how to encourage conversation, respond to participants, and create an atmosphere where participants could share openly. Community moderators – rather than professional moderators – were chosen to lead focus groups in order to encourage an atmosphere of trust.

A team of five community researchers analyzed the focus group data using thematic analysis. All transcripts were read by each researcher (except for one individual who joined the project late). The group had multiple in-depth discussions on emergent themes, and decided to use the social ecological model as a unit of analysis. After final themes were identified, at least two people coded each transcript and compared coding of themes in a group setting. Differences in coding were identified and agreement was reached. Due to time limitations, only four of the transcripts were discussed in the group setting. The author compared coding of the remaining transcripts and identified where coding agreement existed.

Survey

Each focus group participant filled out a brief, eleven-question survey prior to each group (see Appendix III). Moderators provided assistance to participants with the survey as needed. The survey included two parts: 1) demographic questions; and 2) a food insecurity screener. Demographic questions were modeled after the U.S. Census and the 2015 Central City Concern Community Health Survey. To screen for food insecurity, we utilized the Childhood Hunger Screening & Intervention Algorithm developed by the Childhood Hunger Coalition. An affirmative response to either question one or two indicates that a respondent is food insecure. In one study, this screener provided 97% sensitivity and 83% specificity (i.e. 97% of participants who were truly food insecure as determined by an 18-item test were correctly identified as food insecure by this screener; 83% of those who were food secure as determined by an 18-item test were correctly identified as food secure by the screener) (Hager et al. 2010). Full results of the survey are presented in Appendix IV, and a brief summary is included in the results section.

Case studies

In order to more fully investigate the multiple factors that influence food security status, we conducted two semi-structured, in-depth interviews with focus group participants. We asked questions based on the themes that surfaced in the focus groups (see Appendix V). We selected participants who would likely provide two very different perspectives on how they have attempted to become food secure while on SNAP.

The Social Ecological Model

We chose to look at food insecurity as a health issue. In public health, theory is useful when attempting to understand the depth of a health issue, such as food insecurity, before designing an intervention to target it. Glanz et al. (2008) succinctly describe this relationship between theory and practice in public health: “The best theory is informed by practice; the best practice should be grounded in theory,” (24). Therefore, if the purpose of this research is to design programs or create policies to improve rates of food insecurity in Portland, we felt the use of theory, the social ecological model, would shed light on how those programs or policies could be designed.

There has been an increase in the last two decades in the use of the social ecological model to understand health issues. The use of ecological models in the 1960s were extremely helpful in reducing tobacco use in the United States (Glanz et al. 2008). The social ecological model includes four core principles. First, multiple levels of factors – such as policy, community, interpersonal, and intrapersonal – influence health behaviors. Second, influences operate across levels. There are relationships between factors, for example how a policy affects an individual’s behavior. Third, multi-level interventions are most effective in changing health behavior. For example, building more bike lanes may not in itself improve rates of physical activity without communication and educational campaigns. Fourth, ecological models are most powerful when they focus on a specific health problem, such as food insecurity.

RESULTS

Survey results

In this section, we will briefly describe findings from the survey conducted before the focus group (complete results can be found in Appendix IV). The majority of focus group participants identified as female (72%), white (45%), and not of Hispanic, Latino, or Spanish origin (58%). A little over half (55%) stated they were 55 years or older. This group of participants was also rather educated: 30% of participants had completed at least some college, completed college, completed some graduate school, or completed graduate school. In order to determine food security status, we utilized a food insecurity screener that the Childhood Hunger Coalition developed (for more information, see methodology section). The overwhelming majority of participants screened as food insecure (79%). These findings should be taken into account when interpreting the results of the focus groups. In addition, the individuals in these focus groups are not a representative sample of the larger population of SNAP recipients in Portland or Oregon.

Focus group results

As discussed in the methodology section, we used the social ecological model to guide our analysis of the focus groups conducted for this study. Image 1 is the model that we created for food insecurity in the Portland, Oregon region. Our model includes six factors and 29 sub-factors that affect food security status. These factors and sub-factors include:

Factor 1: Individual, i.e. personal activities of focus group participants

Sub-factors: choice, combining services, planning, limiting food, cooking, knowledge

Factor 2: Interpersonal situation, i.e. the people who surround the focus group participants

Sub-factors: family/living situation, culture, social support

Factor 3: Perceived environment, i.e. how participants assess the environment in which they are living

Sub-factors: safety, stigma, proximity, food storage safety

Factor 4: Personal environment, i.e. the situation in which people are living their daily lives

Sub-factors: financial, health, housing, food storage

Factor 5: Built environment, i.e. the structure of the city such as bike lanes or parks

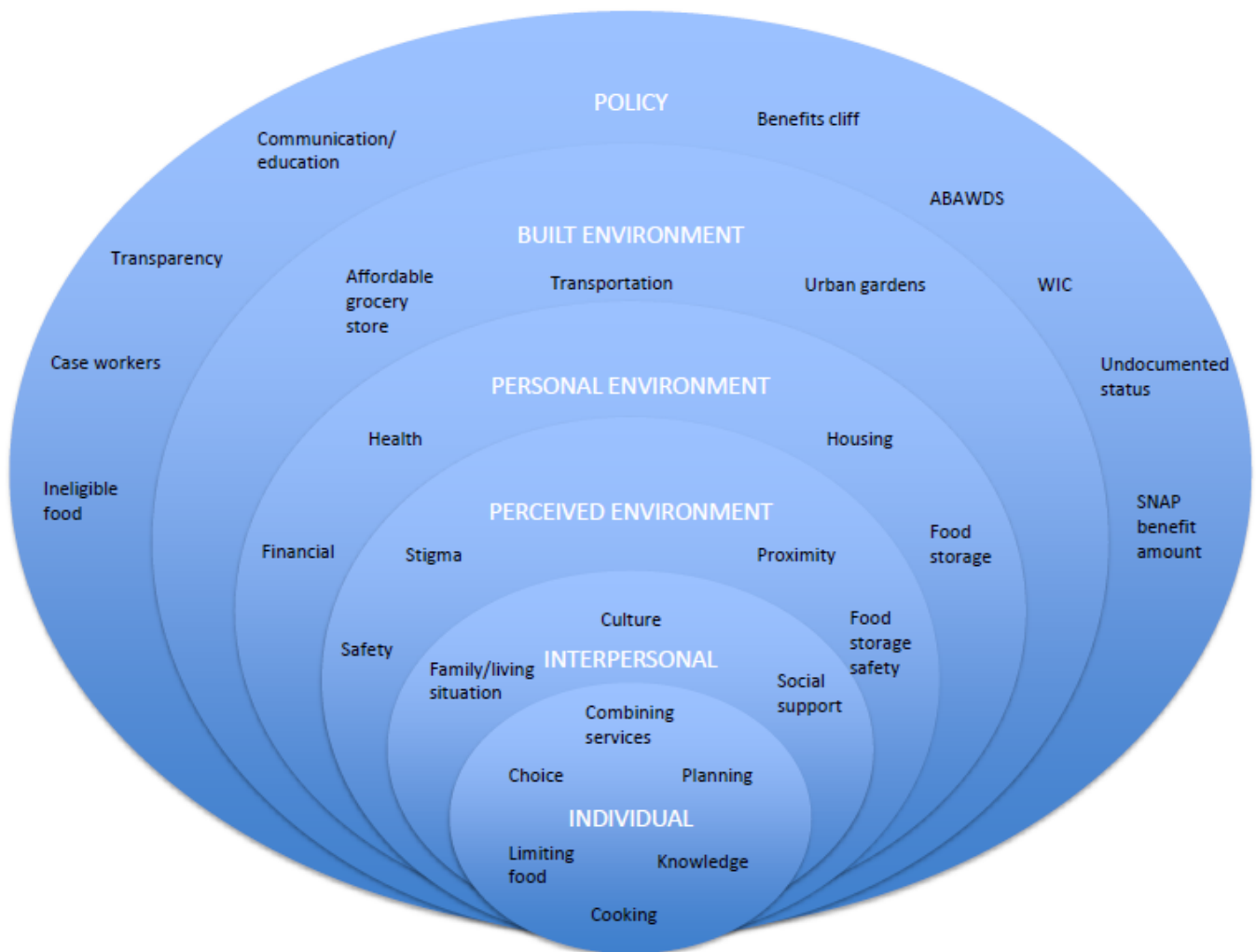
Sub-factors: affordable grocery store, transportation, urban gardens

Factor 6: Policy, i.e. polices of agencies, organizations, or programs

Sub-factors: ineligible food, caseworkers, transparency, communication/education, benefits cliff, ABAWDS, WIC, undocumented status, SNAP benefit amount

The remainder of the focus group results section will discuss each factor and sub-factor in turn.

Image 1: Social ecological model of food insecurity in the Portland, Oregon region



Factor 1. Individual

Focus group participants discussed several individual-level activities that contributed to their food security status. Participants discussed how they carefully **planned** what they shopped for in order to meet their food needs. This focus group participant clearly described her thinking on this issue:

“I...do like my mom did when I was growing up, we had ten kids and I was the oldest of the ten...she would always buy in bulk and when I had kids and was married I still bought in bulk. And I still do that. And I go and dig all the way to the bottom to find the cheapest price. And I go with the senior group. They go to WinCo...I go with them and get all my groceries for the month...and then I go and like I said buy in bulk...divide it and wrap it up in the saran wrap and put it in the freezer so it will stretch. And then about -- I guess the third week I go to the harvest share and get the vegetables and go and cook them up and pop them in the freezer so that they will stretch.”

Participants discussed the importance of **combining services** to find food security. Participants talked about how important SNAP benefits are to maintaining food security. The flexibility of being able to shop at most stores made the benefits particularly helpful. However, participants related that SNAP does not cover all their monthly food needs; participants stated that they used multiple food resources to have enough food to eat all month. This participant discussed how she uses SNAP, food banks, and other resources to find food security:

“The most helpful [food resource]...SNAP, of course. Every now and then when I need food pantry...church is awesome. They really give us a lot. Whole turkey. Oh, and I left the school out...they have food. Even Portland Community College have a second floor of free food for the students if you show your ID.”

Focus group participants described the need to have a **choice** of foods that they enjoyed eating. Some participants discussed the desire for healthy food rather than food that simply meets caloric needs. This focus group participant described her desire for healthy food, but she lacked the funds to meet this need:

“...I eat healthy. I try to eat at New Seasons so my food costs more... we go all the way through the month sometimes...I get \$70 worth of New Seasons and that lasts four or five days, you know...it's just not enough. I will say because I have medical reasons, as well...I need to eat healthy. And we need to eat healthy anyway, and the stamps don't cover that.”

Some participants also described a desire for organic food and stated that they would buy organic even if it costs more.

In order to make food stretch throughout the month, focus group participants frequently discussed **limiting food**. Some participants talked about eating one or two meals per day. Other participants, like the young mother quoted below, discussed giving up food so children could eat:

“So it was the end of the month I had some money on me but not a lot. Just had like two or three dollars so we ended up going to Wendy's and I got those value nuggets. And as long as they [the children] eat, I'm cool. I'll worry about me later. But I got them something to eat. I'm starving myself, but I let them eat and I ended up going to my grandma's and eating. But it's hard. It's hard. Especially thinking about that nugget with that ranch. It's hard.”

Focus group participants also talked about their personal **knowledge** of finding food “deals” and of food resources in Portland. The ability to shop for “deals” greatly depends on an individual's personal mobility. Health issues, lack of transportation, or having children could prevent SNAP participants from being able to shop around for food deals.

Having the knowledge of “deals” combined with **cooking skills**, can stretch the number of meals, which can be saved or perhaps shared. This individual described her abilities in these arenas:

“Before I ended up in the wheelchair when I was still working a part-time job, decent hours, I found myself going to Grocery Outlet even when I didn't need anything just to see what deals they happen to have that day. I one day literally spent 1.70. I bought nothing but meat. I saved \$103. And what it was is they had name brand all meat hot dogs 10 cents a package. It's like 17 packages, saved \$103. With those 17 packages though, I was able to put together tater tot casseroles and feed 50 to 60 people in my building with a bring-your-own-bowl-casserole-type thing.”

Factor 2. Interpersonal

The people who surround focus group participants affect their food security status. The **family** in which one grows up affects the cooking, shopping, and planning skills that one retains throughout life. This older woman described the importance of cooking and how she learned these skills from her mother:

“...we come from the cooking generation...my son always ate scratch. And it might have seemed like it was dire, but it wasn't....I'm glad I know how to cook. If we didn't know how to cook then it would have been dire...my mom was a good cook.”

Families with children have a particularly difficult time shopping for food, especially if public transportation is the primary means of transport. This mother of three recalled her experiences shopping and taking the bus with children:

“I had three like within a year apart of each other. And taking the bus and taking all three kids, all the stuff. Plus bringing the bags of the groceries home, that was not easy.”

Focus group participants frequently mentioned relying on their **social support** network – such as friends, family, and religious communities – for food after SNAP benefits ran out. Participants in the focus group with immigrants from Eastern Europe and Russia described the importance of friends and family in meeting food needs and finding food resources:

“Food stamps help with food. But also friends and relatives are a big help. They know we arrived recently and bring us something every time they can. This is a big help, while we still don’t know all the information and addresses. Food stamps are helping us while we get on our feet. It will take some time to get a job and learn the language.”

In contrast, one immigrant from Mexico described her lack of a social support network as contributing to her food security status:

“...here I only have my husband, I’m the only one here, my family is in Mexico. In Mexico, well yes, we also struggled but if we didn’t have we could go with a relative or I would borrow but here I’m alone, only my husband.”

Culture also influenced focus group participants’ food security status. Individuals in the Russian and Eastern European focus group discussed the need for services in their native language. This focus group participant described the varied services that are needed for someone who is sick, and how it is difficult to find these services for Russian speakers:

“I also think about people who are chronically sick. They need services and it’s not always easy to get those services. You need transport, plus being able to go and get food. Sometimes you need to get a home worker who can help you shop and cook, especially if you’re unable to do that yourself. Those services are not easy to get for Russian speakers. Sometimes I try to help people with that if I can.”

Native American focus group participants discussed their desire to live off the land as a means of finding food security. When asked how s/he would find food security, this individual described this perspective:

“I would probably go back in the old days and slap my buckskin dress on and just get a big freezer to hook up at my mom's house. And we would hunt deer and elk and eat chicken and stuff too. But we would pick all of our fruits and vegetables and ask my cousins with the green thumb to do that part.”

Individuals from Russian and Eastern Europe described similar desires for living off the land and eating home-grown food as they did in their native countries.

Factor 3: Perceived environment

Focus group participants discussed how their assessment of their environment affected their food security status. One participant described how the **safety** of her neighborhood influences where she shops:

“The milk at my corner store is \$5.99 for a gallon of milk. And it is three in the morning and my daughter wants a bottle, and I don't want to drive to the [grocery] store right now, but I can walk two blocks and the [corner] store is right here. So I would rather walk two blocks and spend \$6... I live in a terrible neighborhood and there are a lot of shootings in my neighborhood so I have to worry about that when I'm in the car or walking. Is someone going to get shot or stabbed? A lot of bad stuff going on in my neighborhood so

we worry about that. I would rather go to the corner store. I can take different cuts to get through. But if someone pulls up next to me and starts shooting, then what? I can walk because I can run away and take back streets to get back home instead of being in a car stuck at a stop light.”

The **proximity** of grocery stores to participants’ homes also affects food security status. Many focus group participants discussed how a close, affordable grocery store allowed them to more efficiently utilize SNAP benefits. Likewise, an expensive store in close proximity is more convenient, but results in using SNAP benefits more quickly. One participant described her experiences with this:

“So I would go every day...it was a Mexican grocery store. The food was super expensive. One chicken leg was like \$8...I didn't have a car and it is across the street. You're going to buy it because there is no other choice. So when I was pregnant we ran out of food stamps like nothing. By week two we were out of food stamps living off hidden noodles in my mom's closet.”

We included proximity in perceived environment because one’s personal situation (e.g. health, children) will affect how far one can travel to reach a grocery store. That is, how one perceives distance depends on one’s personal situation.

Focus group participants talked about the **stigma** of using food assistance programs, particularly food pantries. Participants felt uncomfortable asking for help when they could not meet their own food needs. One participant described the shame she felt when she went to a food pantry:

“In the beginning of the year like around September I ran out of food and I didn't know what to do. I ran out of food stamps, and I went to the food pantry. I kind of felt ashamed. So when I went home I was grateful I had food, but it was a feeling I didn't like. And I went home and started crying because I didn't like feeling that vulnerable or that struggle to where I had to ask someone. It's not a shameful thing, but at that time I felt like it was. It was new to me...I just felt really shameful and sad and I just was like, it was a low point.”

Focus group participants also talked about how they felt that other shoppers at grocery stores could tell they were using food stamps, and were passing judgement on their food choices given that they were using SNAP benefits.

Last, focus group participants described how they could not store food in their house without other people eating it (**food storage safety**). These individuals, who are often “doubling up” with friends or family, might have the room to store the food, but are at risk of food insecurity because other people might eat their food. One participant with young children described her experiences with this:

“...when I was pregnant with my daughter, me and my boyfriend were living at his dad's house and there was this grocery store across the street. But even then it would be the end of the month and his Godmom got food stamps too, but so many people living in that

house, you put anything in the refrigerator there is no guarantee it would be there. So we had to go grocery shopping every day.”

Factor 4: Personal environment

Focus group participants discussed their **financial** situation as impacting their food security status. Many participants talked about how they used earned income for utility bills, leaving little remaining funds to spend on food after SNAP benefits ran out. Participants also described working full time in a minimum wage job, and still not making enough to feed their families. This participant described how her boyfriend’s well-paying job could not support her household:

“Even my boyfriend is a mason, he does masonry and he is doing prevailing wage job so right now he is \$40 an hour, but he's paying bills and I'm paying bills, and when I have food stamps, which is \$500, a bunch of us in the house. But even with his really good job and the bills, we still struggle at the end of the month sometimes, too. It doesn't matter, you know, even that's not enough because he has a good job and we're still not able to -- there are times when we're not able to, you know. We struggle and think of something quick.”

Focus group participants’ **health** influences their food security status. An accident that results in injury or a chronic health condition can mean an inability to shop or cook. This focus group participant described how job loss lead to hunger:

“When my job folded from the YWCA and it seemed like right after that I had like two freak accidents where I fell; one on ice and crushed my lumbar...and I didn't have no food in the house. Nobody was taking care of me and nobody would come by and see me even to shop for me or anything like that. So I didn't have no food or nothing. So I was eating, like, I had a big thing of oatmeal and stuff like that.”

Focus group participants discussed how they had food allergies, such as dairy or gluten, and that alternatives were expensive and gobbled up precious SNAP benefits. Participants also related that food boxes and meal sites provide carbohydrate-heavy food, which is not suitable for diabetics.

Participants described **housing** as essential for finding food security. Rising rents and stagnant wages mean that people spend much of their income on housing. This focus group participant described this succinctly:

“... if I'm paying \$1,000 on a place, I'm not going to have enough for food...I might have for a couple of weeks, but that's about it. And then I still have to pay the electric bill and all this. So after you do your rent, and then after you do your utilities, whatever is left for food is what you've got and you have to figure out how to implement that for the month or week. Affordable housing is a great one to implement and keep because if people are using \$1,000 or more and their job doesn't pay enough, what is left for food?”

Focus group participants without adequate **food storage** described how they limited what they purchased at the store because they did not have enough room to store food at home. This participant talked about finding sales, but being unable to capitalize on them because of lack of space for food storage:

“... when you go shopping and you hit, like, the sales but you don't have room to put the meat. And by the time you do have room those sales are done and gone. So then I wanted to get a little upright freezer, but my place is so small I don't have anywhere to put it.”

Focus group participants who are formerly homeless said that when they were homeless, they did not have a place to store or cook food. As a result, they spent their SNAP benefits extremely quickly.

Factor 5: Built environment

Focus group participants frequently discussed how the built environment affects their food security status. Participants described how an **affordable grocery store** allows them to buy more food for less money. This individual talked about his or her perspective on this:

“When I was unemployed...I had my full food stamps. And living in downtown Portland, I realized right away within the first couple weeks that I wouldn't be able to shop at Safeway. There was no way the food was going to last and go that far. I was limited because of my ZIP code.”

An affordable grocery store that is in close proximity to one's home supports food security. Alternatively, one must have reliable **transportation** to the affordable grocery store. Taking public transportation is certainly an option, but limits the amount of food one can bring home, especially if traveling with young children. This participant described how having a car made shopping much easier:

“And now where I live, I have a car now, but the nearest store is Safeway and it is super expensive. I would do anything to get to Winco, but when I didn't have a car, it would have been a struggle. I would have had to walk. There's no bus to that one. I would have to walk with my daughter and her stroller, and we can't shop how we needed because we have nowhere to put the groceries.”

Several participants discussed their desire to grow food in **urban gardens**. Immigrants from Russia and Eastern Europe showed a particular interest in growing their own food. This recent immigrant talked about her/his urban garden with great positivity:

“Whatever we can fit in there, it's stuffed. Potatoes, onion, parsley, tomatoes. This potato dish that I made and brought here was made with potatoes that I grow myself. I also try to grow dill, because herbs are so expensive. It's not as big as the garden I had back home, but it's still nice. We don't have any space in our apartment complex, so I'm happy to have my little garden.”

Factor 6: Policy

There are a number of ways that government, agency, and organizational policies affect how SNAP participants obtain food. The structure of the SNAP program may have an impact on individuals obtaining their benefits, using their benefits, and therefore their overall food security status.

Focus group participants described a need for **transparency** when applying for and receiving SNAP benefits. They expressed confusion with the application and renewal process. Some participants talked about the application as arduous: having to go to multiple buildings, talk with various people, and fill out large amounts of paperwork before benefits were obtained. This individual related these sentiments:

“I think that...some way to check in on...how much you have or the status of it would be nice. Like, last time I applied for it I had to turn in all this paperwork and stuff and it's, like, confusing for me. You have to turn in this and this and a signature and all this stuff for the ABAWD [Able-Bodied Adults Without Dependents] stuff. And I was like -- I emailed a document and then I emailed it twice. And I was like did you get it? Will I get my benefits in a couple days? Is this going to work or not? And I never got any emails back.”

Many individuals were also confused about why they were receiving a certain amount of SNAP benefits, and others who seemed in similar situations were receiving a different amount.

Focus group participants discussed concern about experiences with some **caseworkers**. Participants related that they wished that caseworkers had more empathy for their situation. Some participants described negative experiences with caseworkers, even stating that some caseworkers were downright rude. This participant discussed these issues:

“I would like the people that are handing out the food stamps to be more empathetic, maybe put themselves in our positions and know the fear because I have no way of getting anything. If I run out of food stamps and money, I'm dead in the water. I can go maybe to the Sunshine Division, but there's no way for me to get there and stuff. And I just hit a wall when that happens. And it shouldn't be. I wouldn't ask for stuff if I really didn't need it, so I would ask for a little empathy.”

Focus group participants also described how their worker was frequently switched. One participant discussed how she was assigned a new worker four different times. When she was preparing to call her newest worker, she would receive a letter in the mail notifying her that she had another new worker. This caused a discontinuity in her case, and made her very frustrated.

Many individuals expressed that they wished that the SNAP Program had better **communication** with and **education** of SNAP recipients. Focus group participants described a desire for education on how to cook, shop, garden, and eat healthy. This participant described how classes on growing food should be offered:

“I have a couple things just talking about the growing your own foods...that would be something that they may if they're not already doing to offer everyone that gets SNAP.”

You go through this class or workshop and it teaches you something about gardening. How to plant your food. How to eat healthy.”

Other participants expressed a desire for more education on how to access other food resources. One participant suggested that the SNAP program provide flyers, phone calls, or letters to recipients to educate them on other available food programs. Another participant related that she wished all organizations working to provide food to people could coordinate better to provide assistance.

One common criticism of the SNAP program during the focus groups was the **“benefits cliff”** experienced when their financial or household situation changed and their benefits were dramatically reduced or cut all together. Focus group participants described finding a job, receiving a check, and then getting cut off food stamps immediately. Many participants were surprised they were cut off. They, therefore, planned to have the extra assistance from SNAP, and did not have enough cash for food the month following their first paycheck. This left them food insecure. This individual described this experience:

“When I first start working in the Jobs program...they didn't tell me exactly how that process was going to go. So as soon as I got my first check they cut my food stamps off completely.”

Participants also had concerns about work requirements to meet the **Able-Bodied Adults Without Dependents (ABAWD)** requirement. Participants described having grown children who were working, but not enough to meet the ABAWD requirement. Some simply did not understand why this requirement would take effect when so many people are going hungry. One participant had a specific concern with her 18-year old son who was not working because he is in school:

“My son is 18. He doesn't have a job. He goes to school. I had to fall through more hoops because they want him to work. I'm not going to have him work. I would rather have his education before he works. They said he has to work at least 30 hours. There's no way. I am not going to take him out of school to work so he doesn't get his education.”

Focus group participants also felt that the **SNAP benefit amount** that they received was not enough to cover their food expenses. Participants frequently described running out of benefits by the third week of the month, and then having to turn to other food resources to make up the difference. Participants described food insecurity as a *chronic* problem; every month they are scrambling to try to find enough food to eat. This is especially the case as inflation raises the price of food. One participant discussed his or her perspective on this:

“They need to watch how things are getting more expensive and food stamps should be raised based on that. One thing that cost \$2 last month, costs \$2.50 this month. They never take those things into account. Next month, it will go up to \$3, yet our food stamp benefits stay the same. They really need to look at the rising cost of food every month.”

Focus group participants also expressed confusion with **ineligible food** (i.e. food not covered by SNAP), such as hot food. This formerly homeless individual described his experiences with ineligible food:

“We were discussing how the SNAP rules are a little bit arbitrary. If you're on the street you can't cook or people in SROs [Single Room Occupancy]. If you go to the deli and they have chicken prepared, if it's hot, you can't buy it. But if they set it out to cool and they sell it that way, then you can buy it with your food stamps. But you can't buy the hot meals. It's a little arbitrary.”

There are several issues related to participants' **undocumented status** that were discussed during the focus groups. First, one Spanish-speaking immigrant from Cuba, who is a citizen, expressed concern that undocumented single mothers could not receive SNAP benefits, but their children could. Second, focus group participants who were on the path to citizenship said that they felt uncomfortable accessing programs that were available to them – and would free up more cash for food – because they thought it might affect their citizenship status. This individual described his or her hesitancy to receive assistance:

“I know about the program, but I have not come to ask for assistance because there a lot of persons that tell us about the program will tell you that it will affect you if you ask for assistance, that you'll be affected and one is afraid to come and ask for assistance because one day we will have a chance to get our documents and all of that will come out, so we are afraid.”

We received feedback on the **Women, Infants, and Children (WIC)** program during these focus groups. In general, participants were rather satisfied with the WIC program. However, participants offered a few specific suggestions to improve WIC. First, several participants noted that they needed more cans of formula per month. Second, participants expressed a desire for whole milk instead of 1% or 2%. Third, some participants do not drink milk, and wished they could trade the milk vouchers for other foodstuffs. Fourth, participants felt that WIC should roll over to the next month if it goes unused. Last, one participant suggested that WIC discard vouchers and include the benefits on the Oregon Trail Card. This year WIC in Oregon was transitioned from a paper voucher to an electronic card, so this feedback might speak to the need to better publicize the change, or it might express a desire to have both WIC and SNAP administered on one card.

Case Studies

We conducted in-depth interviews with two focus group participants in order to further understand how the various factors described in our social ecological model contributed to food security status (see methodology section for more information). These cases are below.

Case study 1

Laura is a young, single mother of a beautiful sixteen month-old boy. She is currently, “couch surfing,” a living situation that the U.S. Department of Housing and Urban Development classifies as homeless. She stays with her grandfather and aunt in North Portland.

Laura shops at Walmart because of the low prices. Fred Meyer is within walking distance, but she said that the store is too expensive. Laura's grandfather drives her to Walmart once per month and Laura does all of her shopping then. She spends most of her SNAP benefits on that trip, though she said she uses some of her remaining benefits to buy snacks later in the month. On the trip to Walmart, Laura said she buys foods that she can cook and eat in different combinations such as chicken, frozen vegetables, and mashed potatoes. She also picks things that will last all month, like chips and cup of noodles. At times, Laura goes to the convenience store to buy food because it's close and accessible. However, she said one time she spent all of her food stamps at the store on very little food because the prices are high.

Laura runs out of SNAP benefits and food from her trip to the store by the middle of the month. She then depends on her family members to help her out. Her grandfather receives Social Security and gives her money to buy food. She said, though, that her grandfather feels that he is spending too much of his money helping her. She also said that her grandfather has bad knees and she doesn't like to make requests of him. Laura is aware of food resources – like food pantries – available to her, but it is difficult to carry food while managing her young child on public transportation. She also receives WIC.

Although Laura is grateful that she can stay with her family members, not having her own place to live complicates her food security status. Family members routinely eat the food that she buys, specifically the milk that WIC provides for her son. Her aunt is also on SNAP and goes shopping at the same time as Laura each month. Laura feels she has no place to store her food. When she's shopping, she thinks about how she will not have a place to store her food, which affects the quantity and type of foods she buys.

Laura is frustrated because she has to ask her family for assistance. She said at the end of each month she feels broke and hopeless to find enough food to eat. Laura is currently taking steps, with the help of a nonprofit organization, to find her own housing. She hopes this will improve her situation.

Case Study 2

Lois is an adult woman over 60 years old. Despite having a double bachelor's degree and master's degree, Lois became homeless years ago when she could not find work in her field. She obtained temporary housing through a Central City Concern employment program, and subsequently secured permanent housing downtown. She now lives in subsidized housing in the culture district in Southwest Portland.

Lois feels content with her current situation. She lives in a one-bedroom apartment on the fifth floor of a nice building. She said she almost always feels she has enough to eat, except for around the holidays when she buys a few gifts and gives money to charity. When this happens, she said she can borrow money from family, but she doesn't like to do this because she has to pay them back the next month. She said she is resourceful and knows that she can always get the food she needs to eat.

Lois utilizes multiple services to obtain food security. As a senior, Lois receives her SNAP benefits as cash. She uses all of her SNAP benefits the first few weeks of the month by buying a combination of food and hygiene items. She then uses her Social Security to buy food the remaining weeks of the month. Neighborhood House provides her with transportation to Trader Joes and Fred Meyer once per week, and offers rides to Winco once per month. Safeway is one block away, but she does not shop there because it is too expensive. Lois also shops at the Farmer's Market near PSU and uses the SNAP Match Program. However, Lois said that the market is crowded and it is difficult to navigate in her electric wheel chair. Lois said that she feels guilty using food boxes because she knows that other people need the food more than her.

Her building also provides some food services, but she said she does not utilize them. For example, religious communities offer a meal to residents each week. She said residents ostracize her because of her history of homelessness, and she prefers not to go to these events. The building also offers a food pantry, but they do not provide food that she can eat given her health conditions. Aging and Disability provide her with a caregiver who assists Lois with cleaning and cooking three times per week. She greatly appreciates this assistance and enjoys interacting with the caregiver.

Lois goes to the grocery store once per week utilizing the Neighborhood House transportation. She said that she plans her meals so that she can have the food she needs all month. Lois sometimes cooks: she recently made a baked dish with turkey breast, parsnips, and other vegetables. At times, she also buys frozen meals and makes a salad. Lois has bad knees so she can only stand for fifteen minutes, which makes cooking difficult for her. Her caregiver, as stated, also assists with some cooking.

Lois has her own kitchen in her apartment. When she moved in, the kitchen included a refrigerator and a stove. She also feels that she has enough space to store her food. She grows tomatoes on her balcony to supplement fruits and vegetables she buys at the grocery store or farmers' market.

Lois has health issues that impact her food choices and food security status. She has diabetes, so she can't eat the high carbohydrate food that food pantries' provide. Her use of a wheelchair means that she can only buy what she can carry on the back or bottom of her chair. Fortunately, she is able to go to the grocery store once per week, so her use of a wheelchair does not negatively affect her food security status.

DISCUSSION AND CONCLUSIONS

The key finding in this study is this: food insecurity is a complex health issue that is influenced by several multi-level factors. In our highly individualized society, we believe that one's health and circumstances mostly depend on individuals' actions. However, in public health, we have learned that an individual's activities are only one factor that affect human health.

In this study, we looked at how multiple levels of factors in the social ecological model – individual, interpersonal, perceived environment, personal environment, built environment, and policy – affect the

food security status of SNAP participants. As discussed in the methodology section, a key feature of the social ecological model is that factors interact across levels. Activities on the individual level, such as planning, combining services, and cooking, all contribute to food security. However, an individual's proficiency in these activities depends greatly on other factors presented in our model. For example, perhaps an individual who is unable to cook or adequately budget their benefits grew up in a family situation where these skills were not taught. Perhaps, the individual has a disability and cannot travel to an affordable grocery store, therefore preventing her from thrifty shopping. Or perhaps the individual lacks adequate space to store his food and only has a ride to an affordable grocery store once per month. He may limit the food that he buys at the affordable store, and supplement at a more expensive, but nearby, store.

These types of relationships exist across all levels of the social ecological model. One further example is how organizational or agency policies affect how SNAP participants attain food. For example, focus group participants described how their SNAP benefits usually ran out in the middle of month. Participants discussed relying on friends, family, and other food resources to find food security for the remainder of the month. Unfortunately, participants also described limiting food to make food stretch throughout the month or feeding their children instead of themselves. In this example we can see how the policy level (SNAP benefit amount) affects the individual level (limiting food) and the interpersonal level (relying on social support for food).

The case studies presented in this study show how the factors that were revealed in the focus groups manifest in the lives of two specific individuals. In Laura's case, she plans her meals and shopping trips. However, her family situation (having a young child) makes shopping difficult without a car. She does not live in close proximity to an affordable grocery store and only has a ride to a store once per month. However, because Laura is couch surfing, she cannot buy all the food she needs on that trip as she does not have a reliable location to store her food. Laura is living in a precarious situation, and her food security status is affected by multiple factors across all levels of the model.

In contrast, Lois, though also a SNAP recipient, has access to many services, which help her to feel content with her life. Lois lives in subsidized housing in a convenient downtown location. A nonprofit organization provides her with transportation to several grocery stores multiple times per month. She has access to an in-home caregiver who helps her cook and clean. Lois does have struggles: her health impacts her ability to cook, travel, and eat certain kinds of foods (e.g. high carbohydrate foods found at food pantries). Overall, however, Lois is able to feel more content and food secure than Laura because she has access to services that affect her personal environment and perceived environment, and limit barriers to food security caused by the built environment. Her individual activities or choices related to food are positively affected because other aspects of her life are stabilized.

If through this study we have discovered the complexity of food insecurity as a health issue, we are then left with this question: how do we begin to tackle such a highly complex issue that seems to evade the domain of a single agency or organization? There are two ways to think about the answer to this

question. First, multi-level interventions are most effective in changing behavior (Glanz et al. 2008). Tackling hunger will require a close look at the social ecological model constructed during this study and will necessitate intervention on several levels of the model. For example, perhaps one might decide to provide transportation to affordable grocery stores for SNAP participants (intervention on the built environment level). In addition, one might also provide education about this service to SNAP recipients (intervention on the policy level). A clear example of a successful multi-component campaign is smoking cessation: this campaign utilized public education, taxes on cigarettes, smoking prevention programs, and outreach to diverse populations. Evaluations reveal the importance of multiple components in campaigns to change human health at the population level (Siegel 2002).

Second, a full-fledged effort to combat hunger in Portland requires collaborations across organizations, agencies, and different levels of government. The Department of Human Services (DHS) does not have control over SNAP participants having access to adequate transportation or living near an affordable grocery store. However, perhaps DHS can work with organizations that provide affordable housing or other services to SNAP participants to coordinate transportation to an affordable grocery store, similar to the Neighborhood House transportation that Lois from case study two described.

Focus group participants reported that they limited food for two reasons: 1) to make food stretch throughout the month; or 2) to feed their children instead of themselves. No Oregonian should have to make these types of choices. We hope that the perspectives of SNAP participants included in this report shed light on how we can improve food resources so that all Oregonians can experience food security.

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APPENDICES

Appendix I: Definitions of food security and food insecurity

The information below can be found at the following website: <http://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us/definitions-of-food-security.aspx>

Ranges of Food Security and Food Insecurity

In 2006, USDA introduced new language to describe ranges of severity of food insecurity. USDA made these changes in response to recommendations by an expert panel convened at USDA's request by the Committee on National Statistics (CNSTAT) of the National Academies. Even though new labels were introduced, the methods used to assess households' food security remained unchanged, so statistics for 2005 and later years are directly comparable with those for earlier years for the corresponding categories.

USDA's labels describe ranges of food security

Food Security

- **High food security** (*old label=Food security*): no reported indications of food-access problems or limitations.
- **Marginal food security** (*old label=Food security*): one or two reported indications—typically of anxiety over food sufficiency or shortage of food in the house. Little or no indication of changes in diets or food intake.

Food Insecurity

- **Low food security** (*old label=Food insecurity without hunger*): reports of reduced quality, variety, or desirability of diet. Little or no indication of reduced food intake.
- **Very low food security** (*old label=Food insecurity with hunger*): Reports of multiple indications of disrupted eating patterns and reduced food intake.

Appendix II: Focus group questioning route

I. Introduction – 5 minutes

Hello everyone, and welcome. Thank you for joining our discussion today. My name is _____ and I will be guiding today's discussion. [Introduce assistant moderator and transcriptionist, if applicable]

We'd like to spend some time today to learn about how you get food to eat. We will ask you questions about the different ways you obtain food, and how you try to make sure you and your family have the food you want to eat every day. The reason that we're doing this is so that we can learn how to improve services so nobody in Portland has to go without the food that they need.

The purpose of a focus group is to create a space where a researcher or evaluator can listen to and learn from people who have had particular experiences. It's about exploration and discovery. So, we really don't want just yes or no answers. We really want to know about your experiences and ideas.

I know that everyone has lots of information and ideas to share. So if you're kind-of quiet, and I call on you, it's not to put you on the spot, but because I want to know your ideas. And if someone is sharing a lot, I may ask you to let others talk.

Before we begin, let me suggest some things that will make our discussion most productive. Please take a moment to silence and put away your cell phones. Please speak up---only one person should talk at a time. We're recording the session because we don't want to miss any of your comments. When we include the information you share in any reports or other written things, there won't be any names attached to comments. All information provided in this focus group is confidential, and what you say will not affect any food benefits, such as SNAP or WIC, that you receive.

It's also very important that you each agree to keep the things you hear today private. This will help make this a safe place for people to share their stories.

My role here is to ask questions and listen. I'll be asking ten questions, and I'll be moving the discussion from one question to the next. It's really important that we hear from each of you because you have different experiences.

II. Opening question: 5 minutes

Let's start by finding out a little more about each other by going one-by-one around the table.

1. Please let the group know your name and your favorite food or meal.

III. Introductory questions: 15 minutes

2. Here is a list of services that help people get the food they need to eat. Let's talk about how you first learned about some of these services.

- a. How did you first learn about SNAP?
- b. How about WIC?
- c. And some of these other services, how did you learn about them?

IV. Key questions: 50-60 minutes

4. Which of these services are most helpful to you? What is helpful to you about these services?
5. What other factors – besides services – helped you feel like you had enough food?

[After respondents discuss or respondents have no ideas, please say, "For example, maybe you lived close to an affordable grocery store or you had good housing or a job that paid enough to cover your expenses."]

6. We've heard from some people on SNAP that they also need to use other services and eat with friends or family in order to have enough food to eat each month.

a. Does SNAP cover all your food needs each month?

b. If SNAP does not cover all of your food needs each month, talk for a bit about when you use services during the month. For example, do you use your SNAP benefits first and then rely on other services, friends, or family for the rest of the month? Or maybe you save your SNAP benefits and use them at different times of the month? Or something else?

7. We all know sometimes people hit a bump, where times are tight, which can leave families in situations where they don't always have all of the food they want to eat. Tell me about a time when your food got pretty limited.

[After respondents discuss, please say: "did you have transportation? Or was a program hard to use?"]

8. Here is a magic wand. I'll pass it around the table and when you receive it, give your magical solution so that you will always have the food you and your family want to eat. The only limitation is you cannot ask for unlimited money. Otherwise, by waving the wand, your solution will come true. Take the wand and tell us your solution.

9. We want to talk for a while about SNAP and WIC services specifically. The people who run SNAP and WIC would love to hear your opinions about how to make these programs work better, so please openly express what you are thinking and feeling.

a. What is one way to make SNAP better for you?

b. What is one way to make WIC better for you? Or, if you have never participated in this program, have you heard anything from friends or relatives about their experience that you could share?

VI. Ending questions: 5 minutes

10. We're going to wrap up now. As we have discussed, we want to know how to improve services so that you and your family have all the food that you want to eat. Is there anything that we should have talked about but didn't?

VII. Conclusion: 5 minutes

Thank you for your time – your opinions and perspectives are very important!

We will look at your responses and type up a report by September. We will provide the report to you if you are interested.

If you would like to share your story with us further, please let me know by talking to me after this, or by writing down your contact information on this yellow card and leaving it in this box. Also, if you have any further questions about this focus group, we will be around for a while to answer them.

Appendix III: Pre-focus group survey

Thank you for participating in the focus groups! Filling out this brief questionnaire will help us better understand the participants of this group. *All information is confidential and will not be connected to you.*

1. Does anyone in your household currently get: (Check one or more boxes)

- SNAP (food stamps)
- WIC
- Free or reduced-price school breakfast
- Free or reduced-price school lunch
- Snacks or meals in an after-school program
- Meals at a summer site

2. How do you identify your gender? (Check one box)

- Female
- Male
- Transgender
- Don't identify a gender
- Other

3. Are you of Hispanic, Latino, or Spanish origin? (Check one box)

- No, not of Hispanic, Latino, or Spanish origin
- Yes, Mexican, Mexican American, Chicano
- Yes, Puerto Rican
- Yes, Cuban
- Yes, another Hispanic, Latino, or Spanish origin, please write in space provided (for example, Argentinian, Columbian, Dominican, Salvadorian, Spanish):

4. What is your race? (Check one or more boxes)

- | | | |
|--|---|--|
| <input type="checkbox"/> White/Caucasian | <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Some other race, please write other race here:
_____ |
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> Asian or Pacific Islander | |

5. In what country were you born? Please write the name of the country here:

6. What is the highest level of school you have completed? (Check one box)

- | | | | | |
|---|--|--|--|--|
| <input type="checkbox"/> Less than high school | <input type="checkbox"/> Two-year Associate's degree, incomplete | <input type="checkbox"/> Four-year Bachelor's degree, incomplete | <input type="checkbox"/> Graduate school, incomplete | <input type="checkbox"/> Technical school or certificate |
| <input type="checkbox"/> Completed high school or GED | <input type="checkbox"/> Two-year Associate's degree, complete | <input type="checkbox"/> Four-year Bachelor's degree, complete | <input type="checkbox"/> Graduate school, complete | |

7. How many people live in your household, including you? (Check one box)

- | | |
|----------------------------|-----------------------------|
| <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| <input type="checkbox"/> 2 | <input type="checkbox"/> 7 |
| <input type="checkbox"/> 3 | <input type="checkbox"/> 8 |
| <input type="checkbox"/> 4 | <input type="checkbox"/> 9 |
| <input type="checkbox"/> 5 | <input type="checkbox"/> 10 |

8. Please write the age of everyone living in your household:

Your age: ____ Person 3: ____ Person 5: ____ Person 7: ____ Person 9: ____
Person 2: ____ Person 4: ____ Person 6: ____ Person 8: ____ Person 10: ____

9. Please write your monthly household income after taxes:

\$ ____

For the last two questions, please check one box next to the answer that was, "often true, sometimes true, or never true" for your household.

10. Within the past 12 months, we worried whether our food would run out before we got money to buy more. (Check one box)

- Often true
- Sometimes true
- Never true
- Don't know

11. Within the last 12 months, the food we bought just didn't last and we didn't have money to get more. (*Check one box*)

- Often true
- Sometimes true
- Never true
- Don't know

Appendix IV: Results of pre-focus group survey

Chart 1 shows the gender composition of the focus groups. The majority of focus group participants (72%) identified as female. About one third (28%) identified as male. Although we provided transgender, other, and don't know as response options, no participants chose those options.

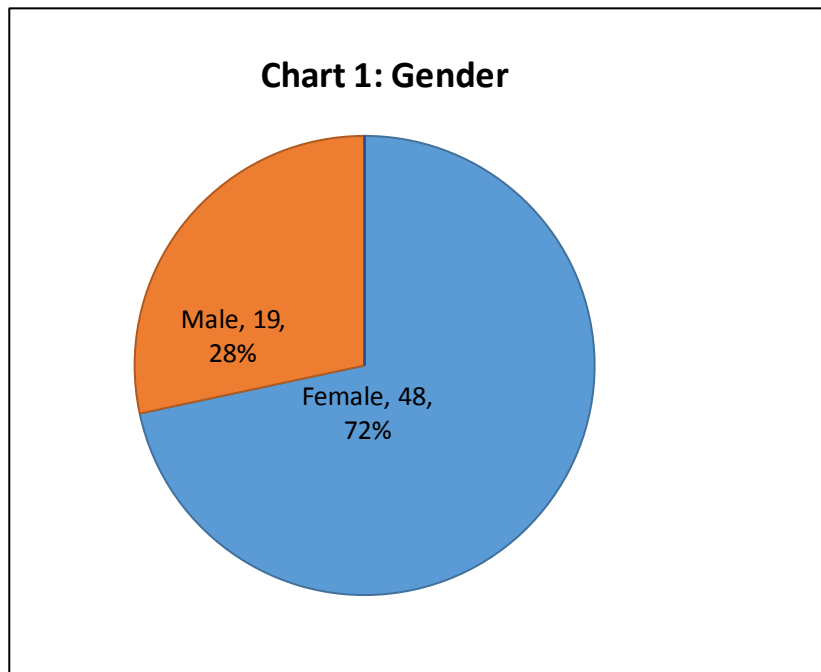


Chart 2 indicates how individuals in the focus groups identified their race. A little under half of participants identified as white (45%), about one-fifth identified as black (18%), and about one-sixth identified as Asian (15%). Only a few individuals identified as Native American (6%), biracial (6%), or other (3%). Seven percent of participants provided no response to this question.

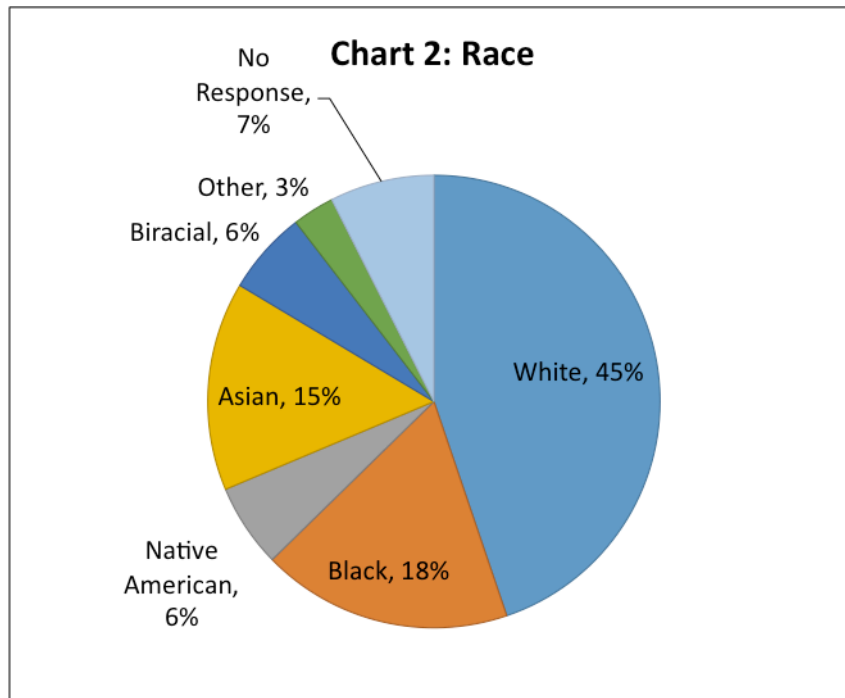


Chart 3 shows how individuals identified their ethnicity. Most participants did not identify as Hispanic, Latino, or of Spanish origin (58%). About one-fifth (22%) of participants identified as Latino from various countries, and one-fifth (20%) provided no response to this question.

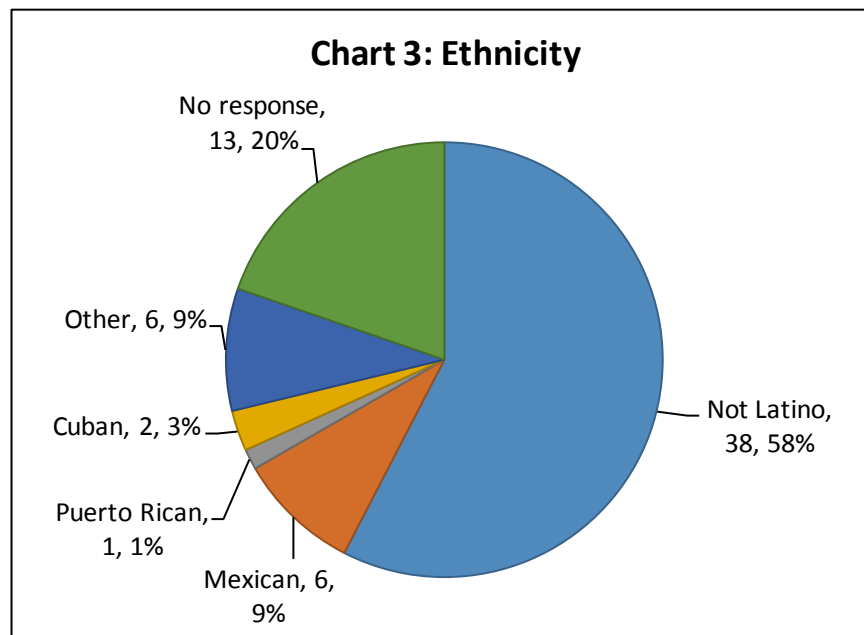


Chart 4 shows how the focus group participants identified their age. Over half of focus group participants (55%) were over 55 years of age. About one-sixth (16%) of participants were 18-24 years

old. A little over 10% of participants were both 35-44 years old and 45-55 years old. Only 6% were 35-44 years of age.

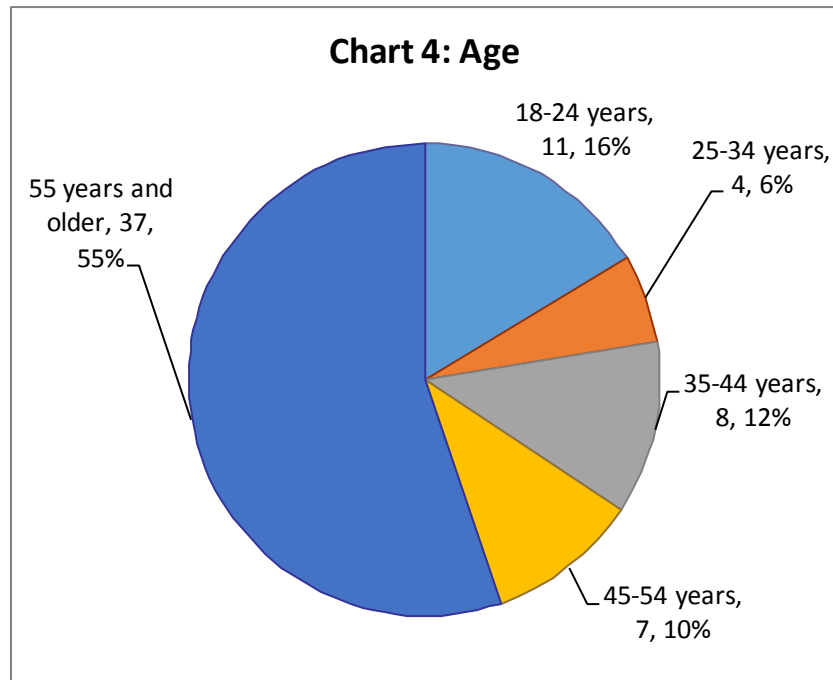


Chart 5 illustrates percent of federal poverty level of focus group participants. A little over one quarter (27%) of participants are living at 51-75% of the federal poverty level, and about one fifth of participants (22%) are living at 76-100% of the federal poverty level. About one sixth of participants (15%) are living at both 0-24% and 101% or more of the federal poverty level. About 10% either did not respond to this question or are living at 25-50% of the federal poverty level.

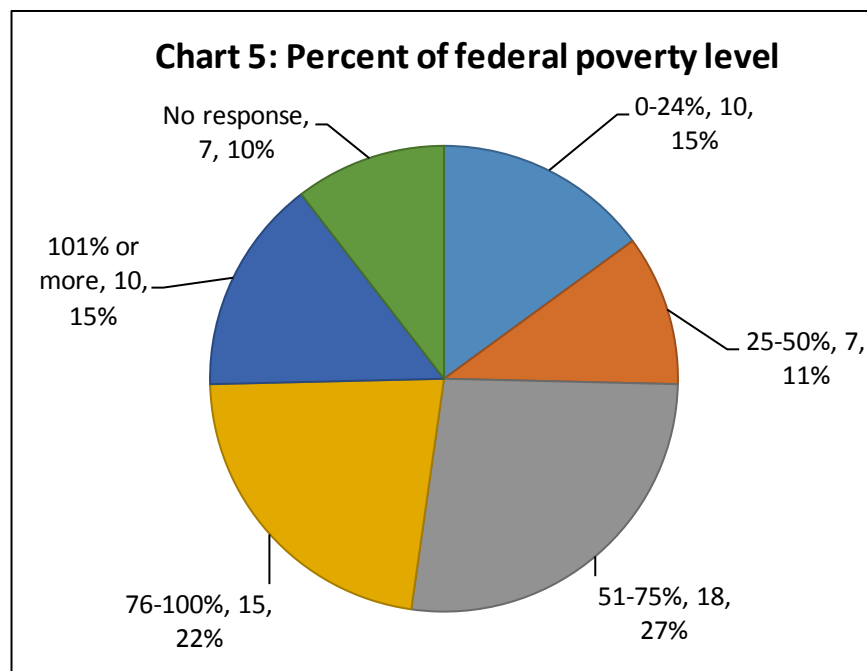
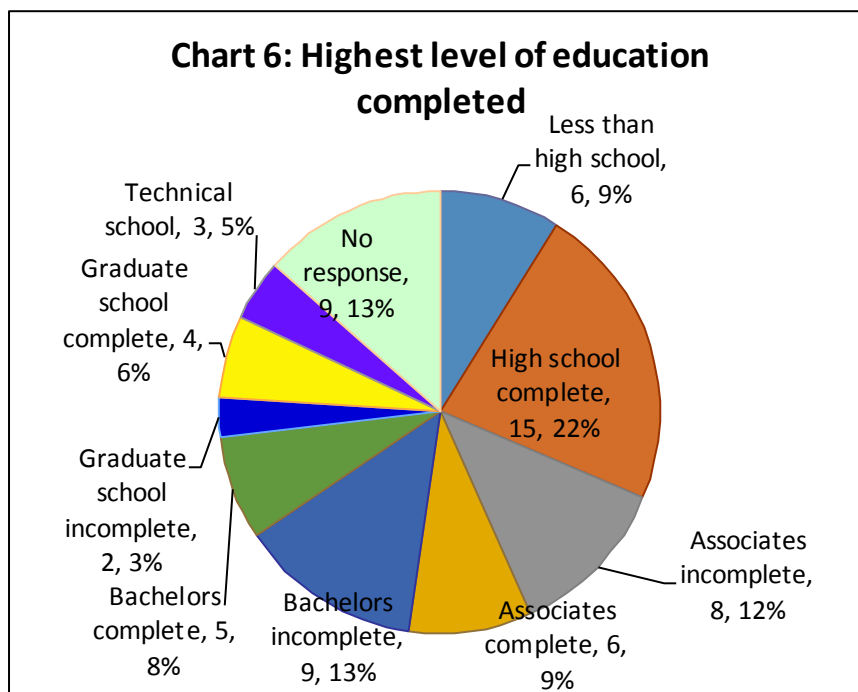
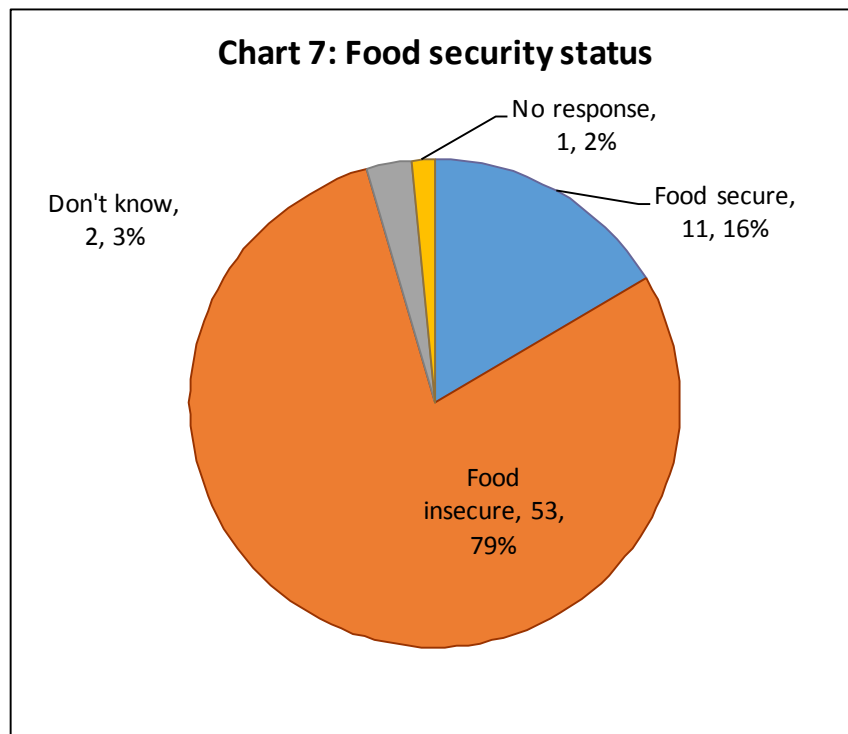


Chart 6 describes the diverse array of educational backgrounds that focus group participants reported. Nine percent of participants completed less than high school degree and 22% of participants completed a high school degree. Twelve percent of participants completed some courses for an Associate’s degree, and 9% completed their Associates. About 5% completed technical school. Thirteen percent reported that they completed some college, and 8% of participants completed their bachelor’s degree. Three percent of participants completed some graduate school while 6% of participants completed a graduate degree. Thirteen percent of participants did not respond to this question.



In order to determine food security status, we utilized a food insecurity screener that the Childhood Hunger Coalition developed (for more information, see methodology section). Chart 7 shows the results of this screener. The overwhelming majority of participants screened as food insecure (79%). Only about one sixth of participants screened as food secure (16%). The remaining individuals either did not respond to the question or answered “don’t know” to both screening questions.



Appendix V: Case study interview questions

How often and where do you shop/get food?

How do you get there? Do you have difficulties getting to the grocery store?

Does safety impact where you buy your food? How about proximity?

Where do you store your food?

Do you plan your meals?

How do you cook your food? Do you have adequate kitchen space to cook your food?

Do you have a plan for when you use your benefits each month?

Do you use other services and friends/family to make sure you have enough food each month? (food banks, etc.)

Do you ever avoid food banks or other services because you do not feel comfortable there?

Does your health or your family's health impact how, where, and when you get your food?

Ask only if appropriate: Do you limit the amount of food you eat at times each month so you or your children have enough to eat? Can you discuss an example?