

FOOD ACCESS & FOOD SECURITY

in the District of Columbia:

RESPONDING TO THE COVID-19 PUBLIC HEALTH EMERGENCY

2020



District of Columbia
Office of Planning



WE ARE
WASHINGTON
DC GOVERNMENT OF THE
DISTRICT OF COLUMBIA
MURIEL BOWSER, MAYOR

INTRODUCTION & OVERVIEW

The COVID-19 public health emergency (herein “public health emergency”) has underscored the

critical importance of ensuring that every resident in the District of Columbia has access to healthy, affordable, and culturally appropriate food. More than ever, residents need reliable access to grocery stores, farmers markets, and other sources of nutritious food in their neighborhoods. Existing barriers to food access before the pandemic have been exacerbated, particularly for Wards 7 and 8, where there are just three full-service grocery stores serving over 150,000 residents.

“Food insecurity” is a term defined by the U.S. Department of Agriculture that refers to a lack of consistent access to enough food for an active, healthy life.¹

Before the onset of the public health emergency, 10.6% of District residents were food insecure. Now, it is projected that the District’s food insecurity rate in 2020 will be at least 16%, with even higher rates among vulnerable populations, including the elderly, children, undocumented individuals, and individuals experiencing homelessness.

The public health emergency has increased unemployment rates, concerns for seniors leaving their homes, and limitations on congregate meals (meals distributed and consumed in group settings), which in turn have posed new challenges to food access. Further, the coronavirus carries more serious risk for individuals with diet-related chronic diseases like Type 2 diabetes and heart disease, which are related to a lack of access to healthy food.

The District government has responded to the public health emergency with robust emergency food programs, including grab-and-go meals and free grocery distribution at DCPS school sites, prepared meal delivery for low-income seniors, grocery delivery to quarantined residents, and the expansion of many existing food assistance programs in operation before the public health emergency. The District is also grateful for the many non-profit and local business partners crucial to this relief effort.



The demand for these programs, along with national and District data, demonstrate that food insecurity in the District has dramatically increased and will likely remain elevated throughout the public health emergency.

In accordance with the Coronavirus Support Emergency Amendment Act of 2020, signed into law by Mayor Bowser on May 27, 2020, this report evaluates and makes recommendations regarding food access needs during and following the public health emergency. This includes (1) an analysis of current and projected food insecurity rates, based on national and District data; (2) an overview of the District’s emergency food response to date; and (3) a plan for how to address food needs during and following the public health emergency. The DC Office of Planning (OP) plans to collaborate with the District Economic Recovery Team to continue to track food insecurity rates and develop strategies to increase food security and access to healthy food during the District’s recovery.

Following Mayor Bowser’s call to seize this “once-in-a-generation opportunity to not just reopen our city, but to build a more equitable DC,”² this report centers equity in its analysis and recommendations, exploring how the District can rebuild into a more resilient, healthy, and equitable food system.

FOOD INSECURITY BEFORE COVID-19

In the last decade, food insecurity in the District had declined in the general population. From 2008-2018, the District’s overall food insecurity rate fell from 13.0% to 10.6% as the economy recovered from the Great Recession.³ Food insecurity rates among vulnerable populations also declined but remain significantly higher than those of the general population. For example, in 2018, 19.1% of children⁴ and 14.3% of seniors⁵ in the District were food insecure. Notably, DC had the highest senior food insecurity rate in the country in 2018. Food insecurity contributes to poor diet quality, chronic health conditions, and mental health issues, as well as prolonged periods of high stress, which negatively impacts long-term health and development.⁶

Mayor Bowser has made it a priority of her administration to ensure that all District residents have access to healthy food, including:

- Supporting the development of three new grocery stores in Wards 7 and 8, the Wards with the fewest grocery stores per capita;

- Modernizing the enrollment process for federal food assistance programs, such as the Supplemental Nutrition Assistance Program (SNAP) and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC);
- Expanding free breakfast and lunch programs in DC public schools and childcare centers, as well as afterschool and summer meals for low-income children;
- Providing DC Health’s Community Health Grants for nutrition assistance programs such as Produce Plus, Joyful Food Markets, and Produce Rx;
- Providing free meals for low-income seniors and individuals experiencing homelessness through the Department of Aging and Community Living and the Department of Human Services; and
- Supporting the DC Food Policy Council, including appointing 13 leaders in the DC food system and representatives from 10 government agencies to recommend policies to make the District’s food system more equitable, healthy, and sustainable.

More information on the District’s food policies can be found in the 2018 DC Food System Assessment.⁷



CURRENT & FORECASTED FOOD INSECURITY

General Population Food Insecurity

National and District data show sustained increased

food insecurity in the District and forecast continuing need through the end of the calendar year and beyond.

National Trends

Nationally, food insecurity rates have increased during the public health emergency. Approximately 21.9% of adults in the U.S. are food insecure, nearly double the pre COVID-19 rate of 11.1%.^{8,9} Among those who have lost jobs, work hours, or work-related income, 29.6% are food insecure.¹⁰ Further national research finds that more than one in three (37%) of adults report skipping meals or cutting back their portions to allow more food for their children during the public health emergency.¹¹ As illustrated in **Figure 1**, Feeding America, a national anti-hunger organization, estimates the national annual food security rate for 2020 will be 16.7%, a 5.2 percentage point increase from pre-COVID-19 levels. An additional 17.1 million people across the U.S. will be newly food insecure as a result of the pandemic with an overall food insecure population of 54.3 million people.¹² In addition, research from Northwestern University estimates that nationally, food insecurity

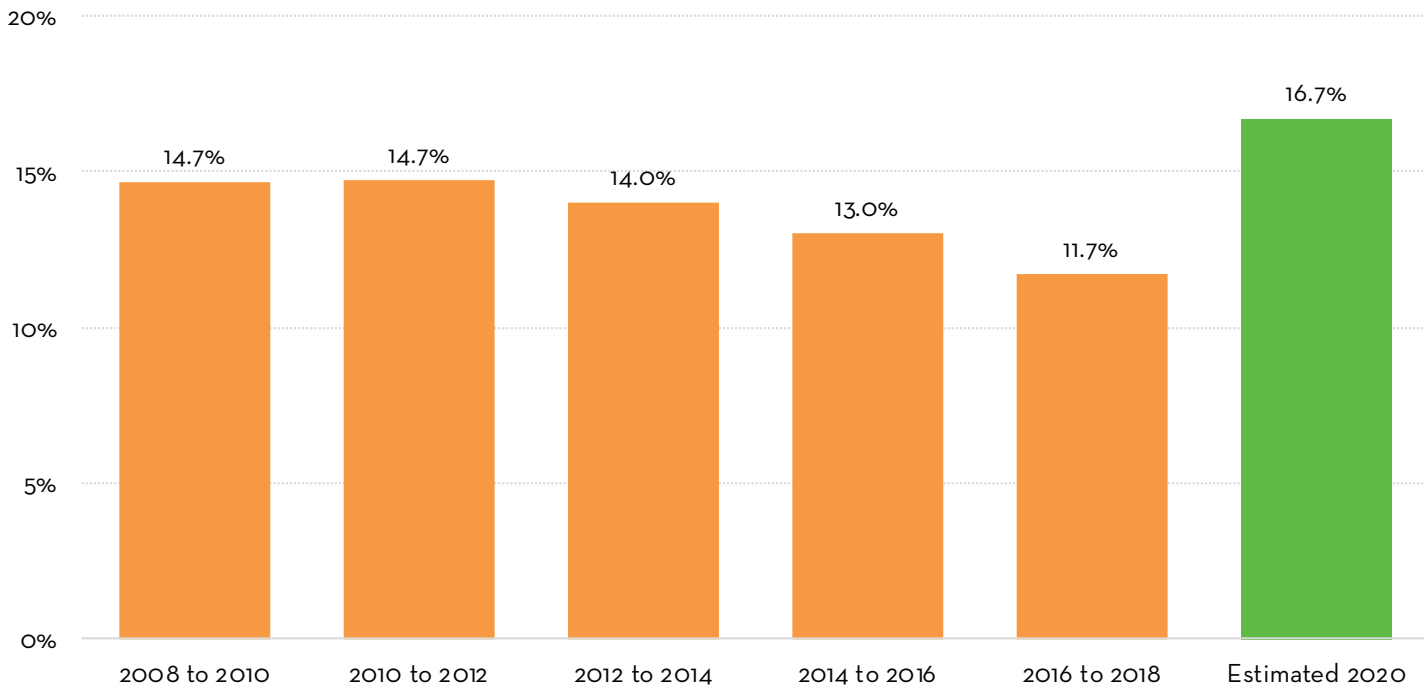
has doubled overall and tripled among households with children.¹³

The University of Southern California has tracked food insecurity among a group of 8,500 individuals across the country engaged in a longitudinal cohort study during the pandemic, finding that the peak of reported food insecurity among participants was in mid-April, when most of the country’s economy was shut down.¹⁴ Those trends are also present among the Black population nationally, although the rates of food insecurity among Black individuals were higher and experienced continued spikes through June. This mirrors trends the District saw, with the most new demand for public programs and food assistance occurring between mid-April and mid-May.

District Trends

The District’s food insecurity trends reflect the national trends referenced above. Researchers at Northwestern University estimate that food insecurity rates in the District almost doubled between February and May 2020 from 10.6% to approximately 21.1%.¹⁵ The District’s increase in food insecurity was higher than the increase in food insecurity in 40 other states and slightly higher than the average increase of food insecurity in the US.

Figure 1: U.S. Food Insecurity Rates, 2008 to 2020

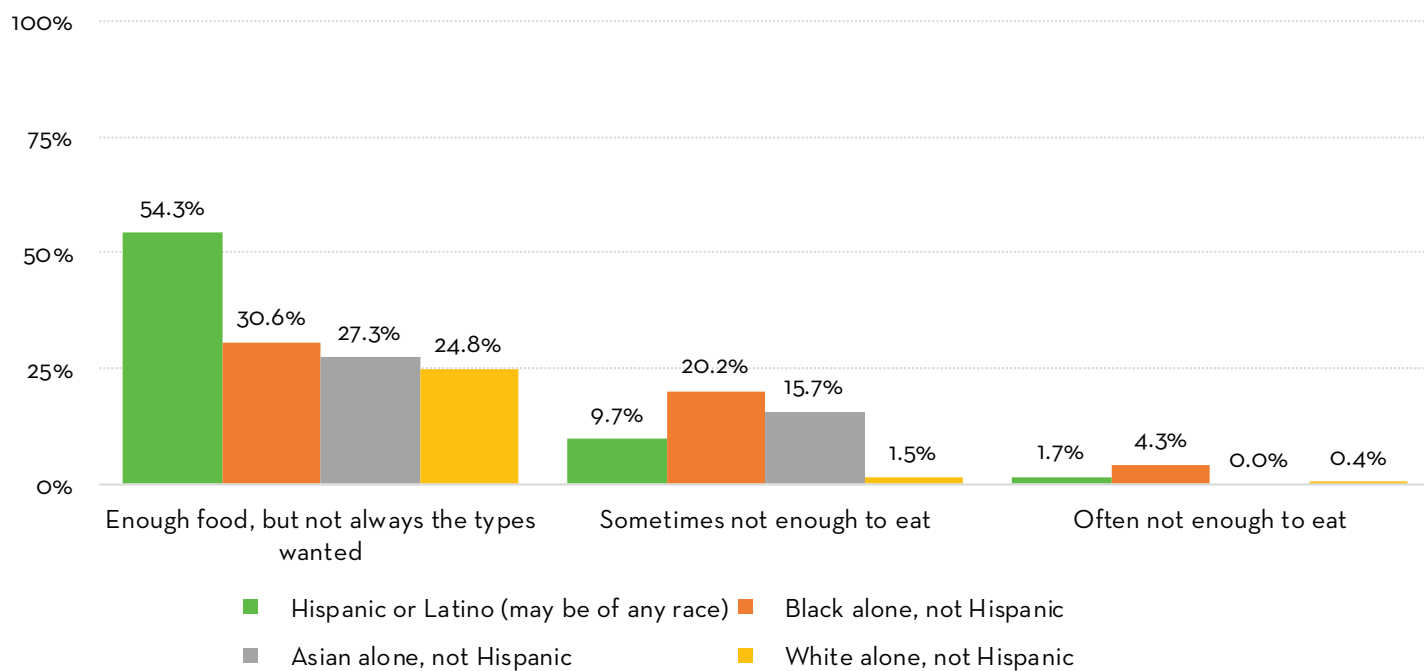


Source: US Department of Agriculture (2008-2018) & Feeding America (2020)

Data from the U.S. Census Bureau’s Household Pulse Survey (“Household Pulse Survey”) provides further evidence of heightened food insecurity in the District. Designed to capture the ongoing changes of households throughout the public health emergency, the Household Pulse Survey was conducted across the country on a weekly basis through both online and texting instruments and included questions on the difficulty in accessing and affording food.¹⁶ In the first two weeks of collected data from April 23 to May 5, nearly half (43.7%) of District respondents reported that they were not able to access or afford enough food that they wanted. Within this group, 30.9% reported that they have enough food, but not always the types they wanted; 10.7% reported that they sometimes did not have enough food to eat; and 2.1% reported that they often did not have enough food to eat.

Further, the Household Pulse Survey shows that Black households and other households of color are disproportionately affected by food insecurity. Among District households that reported some level of food insufficiency from April 23 to May 5, Black households were 13.5 times more likely to report that they sometimes did not have enough food to eat and nearly 11 times more likely to report that they often did not have enough food to eat compared to White households. Latinx households were 6.5 times more likely than White households to report that they sometimes did not have enough food to eat and more than 4 times more likely to report that they often did not have enough food to eat compared to White households. Asian households were 10.5 times more likely to report that they sometimes did not have enough food to eat compared to White households, although there were no differences for reporting that they often did not have enough food to eat. **Figure 2** shows the racial disparities in food insecurity for the week of April 23 to May 5.

Figure 2: Food Insecurity Among District of Columbia Households by Race, April 23 to May 5, 2020



Source: U.S. Census Household Pulse Survey 2020

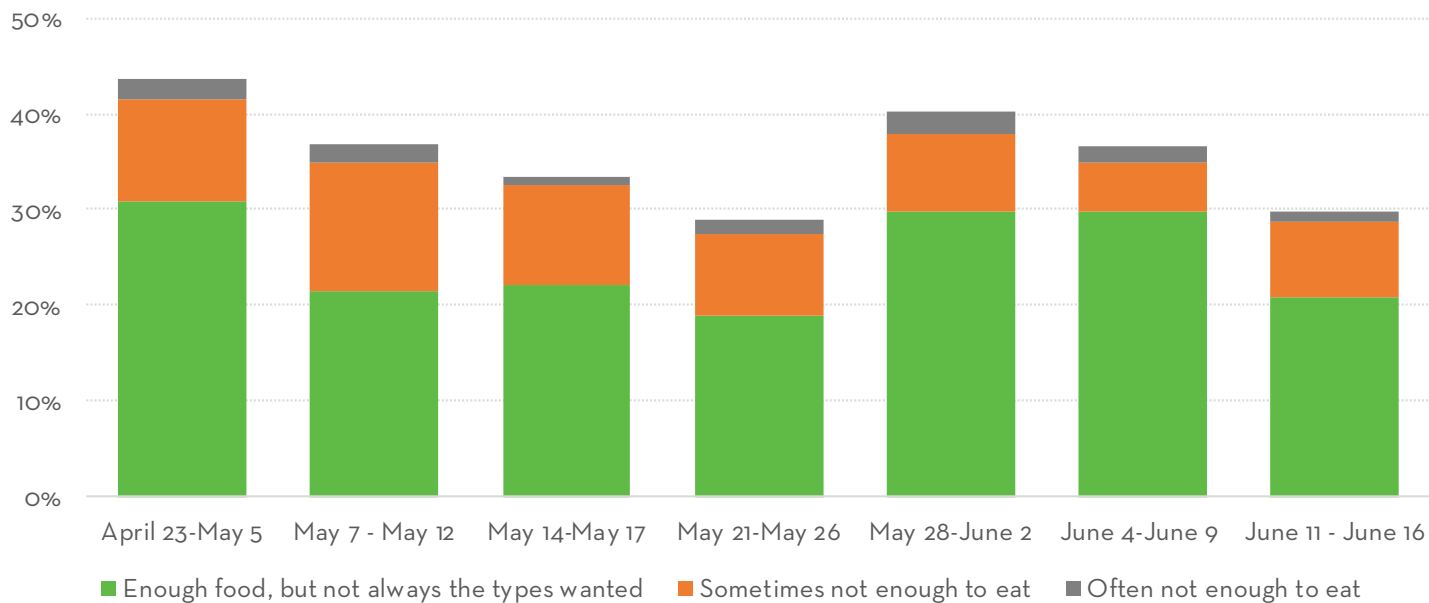
Figure 3 shows the fluctuations of reported food insecurity from the Household Pulse Survey across seven weeks. The total number of surveyed District households that reported experiencing some food insufficiency has remained higher than average throughout the public health emergency between the range of 43.7% of households (from April 23 to May 5) to 29.0% of households (from May 21 to May 26). Most of the District’s households reporting food insecurity reported that they had enough food, but not always the types they wanted, reflecting shortages in grocery stores and families not being able to afford more expensive foods such as fruits, vegetables, and meat. The lack of a defined trend may be the result of the survey’s sampling methods and the distribution of unemployment and food

assistance benefits, which is not clearly captured in the survey instrument.

Trends Among Specific Demographics
Child Food Insecurity

Low-income children are especially vulnerable to food insecurity and have higher rates than the general population, a trend that has continued during the public health emergency. The District’s child food insecurity was 21.2 % in 2017, nearly twice as high as the food insecurity rate for the District’s general population.¹⁷ Nationally, researchers from Northwestern University found that during the public health emergency, food insecurity among households with children nearly tripled from 9.4% in February 2020 to 29.5 % in May 2020.¹⁸

Figure 3: Reported Food Insecurity Across District of Columbia Households, April 23 to June 16, 2020

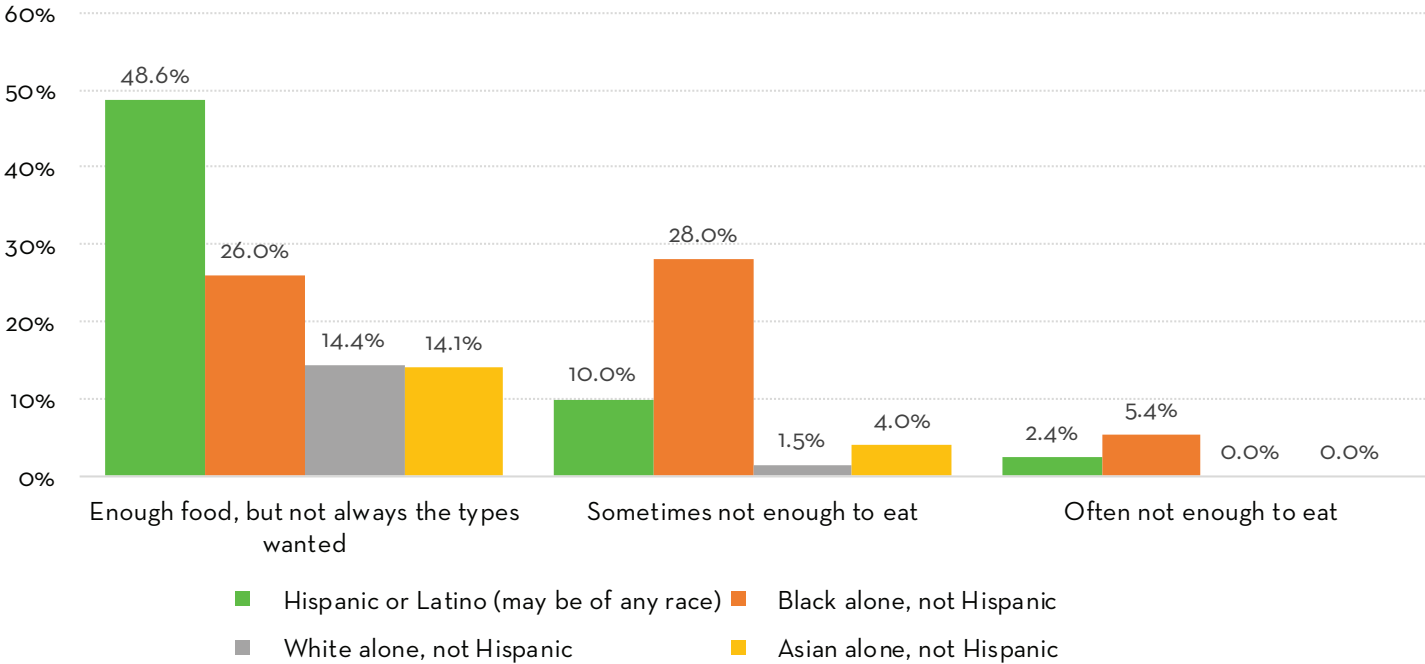


Source: U.S. Census Household Pulse Survey 2020

Figure 4 shows data from the Household Pulse Survey. It reveals that the public health emergency has disproportionately affected households with children in the District. In the first two weeks of collected data from April 23 to May 5, nearly half (44.5%) of households with children reported that they were not able to access or afford enough food that they wanted. Within this group, 24.0% reported that they had enough food, but not always the types they wanted; 17.3% reported that they sometimes did not have enough food; and 3.1% reported that they often did not have enough food. Across the seven weeks of reported survey data, households with children were more likely than households without children to report that they sometimes or often did not have enough food to eat, which is especially concerning given the importance of nutrition on child development and learning.

As with the food insecurity rates for the general population, the public health emergency disproportionately affected Black children and other children of color in the District. Household Pulse Survey data from April 23 to May 5 revealed that 28% of Black households with children and 10% of Hispanic households with children reported that they sometimes did not have enough to eat, while only 1.5% of White households with children reported that same level of food insecurity. An especially alarming disparity is among households with children who report often not getting enough to eat: 5.4% of Black households with children and 2.4% of Hispanic households with children reported that they often did not have enough to eat, while virtually zero White households with children reported that same level of food insecurity.

Figure 4: Food Insecurity Among District of Columbia Households With Children by Race, April 23 to May 5, 2020



Source: U.S. Census Household Pulse Survey 2020

Senior Food Insecurity

Low-income seniors are another vulnerable group impacted by food insecurity. Seniors often live on fixed incomes and struggle to cover increasing living expenses, such as housing, food, and healthcare costs. Even pre COVID-19, the District had the highest food insecurity rate among seniors in the country (14.3%).¹⁹ This rate has been steadily on the rise in recent years, compared to 9.6% in 2016 and 11.1% in 2017.^{20 21} Seniors who live in intergenerational households with grandchildren face even higher rates of food insecurity than those that do not live with grandchildren.²²

The public health emergency has exacerbated existing challenges for low-income seniors in accessing food. Because seniors face higher rates of complications and mortality if they contract COVID-19, many seniors fear leaving their homes for groceries and other essential services. Seniors who rely on public transportation to get to the grocery store face further barriers, as public transportation has been limited and increases risk of exposure. Although government programs provided grocery and meal delivery to some seniors, not all seniors are eligible for these benefits.

The Household Pulse Survey is likely not reliable regarding senior food insecurity. While the data seems to indicate that households with seniors in the District faced lower food insufficiency compared to households without seniors, the survey's online and texting methods likely meant that the seniors surveyed had higher rates of digital access and literacy than the general senior population in the District, likely skewing the data towards high-income seniors who face lower rates of food insecurity. In the first two weeks of collected data from April 23 to May 5, nearly one-third (32.8%) of seniors reported that they were not able to access or afford the food they needed. Within this group, 23.4% reported that they had enough food, but not always the types they wanted; 8.6% reported that they sometimes did not have enough food to eat; and 0.8% reported that they often did not have enough food to eat.

Immigrant Food Insecurity

Recent immigrants and undocumented immigrants have also faced higher rates of food insecurity before



and during the public health emergency. While food insecurity data for immigrant households and especially undocumented households is not easily captured in traditional assessments, research from the Bread for the World Institute in 2016 estimated that food insecurity in immigrant households was almost twice as high as the general population.²³ If this relationship holds for the District, the pre COVID-19 food insecurity rate in February 2020 among immigrant households would have been approximately 21.2% and the rate in May 2020 among immigrant households would be approximately 42.4%.²⁴

There are other reasons to believe the rate of food insecurity among undocumented immigrants in the District during the public health emergency is likely much higher than the general population. Undocumented immigrants often work in restaurants, the informal economy, and other service industries which were particularly hit hard by the closure of non-essential businesses and the stay-at-home

order. While it is impossible to know how many undocumented immigrants work at these District businesses because of data reporting limitations, one estimate from 2008 found that undocumented immigrants make up nearly 10% of the hospitality industry. A Washington City Paper article on March 26, 2020 reported that one District nonprofit organization serving undocumented immigrants reported that 75% of the 120 families that they were supporting during the public health emergency included at least one restaurant worker.²⁵

Unlike other District households that were able to access economic support from the federal and local governments to help access food during the public health emergency, undocumented immigrants could not receive most government benefits including unemployment benefits, the federal stimulus checks, and SNAP because of eligibility restrictions and a lack of Social Security numbers. Instead, undocumented populations who were unemployed during the public health emergency and faced economic hardship had to rely on free grocery and meal distribution from the District and local nonprofits. Fears of potential immigrant enforcement and future implications for documentation further complicated their use of these programs. As a result of all these factors, undocumented immigrants face significant unaddressed food insecurity challenges.

Food Insecurity Among Hospitality and Food Sector Workers

Workers in the District's food economy are especially vulnerable to food insecurity given the effects of the public health emergency on this sector. With the closure of restaurants, hotels and other establishments in the food, hospitality and entertainment industries at the beginning of COVID-19, the associated job losses were immediate and significant. Most unemployment claims filed between March 15 and June 15 were from employees in food and hospitality industries. Between March 2020 and April 2020, the District lost 30,100 jobs in the food services and drinking places industry.²⁶ The District's Food Economy Study (2019) highlighted that a majority of jobs in the District's food economy were already low-wage jobs, with the average annual income less than half of the District's median average household income (approximately \$30,844 compared

to \$72,935 in 2016).²⁷ Because the food services industries in particular have traditionally been low-barrier sectors providing opportunities to under-skilled workers, it will be difficult for unemployed workers from these sectors to find and secure other employment opportunities without training and support.²⁸

The public health emergency will have lasting, painful effects on the hospitality and food sectors. A study from the restaurant reservation company OpenTable finds that one in four independent restaurants across the country will close permanently because of the public health emergency,²⁹ and local media outlets have already started documenting the long list of restaurants that have announced closures.^{30,31} Other food sectors such as catering and food trucks have seen significant losses from the decrease in demand from tourists, office workers, and large gatherings such as conferences and banquets.³²



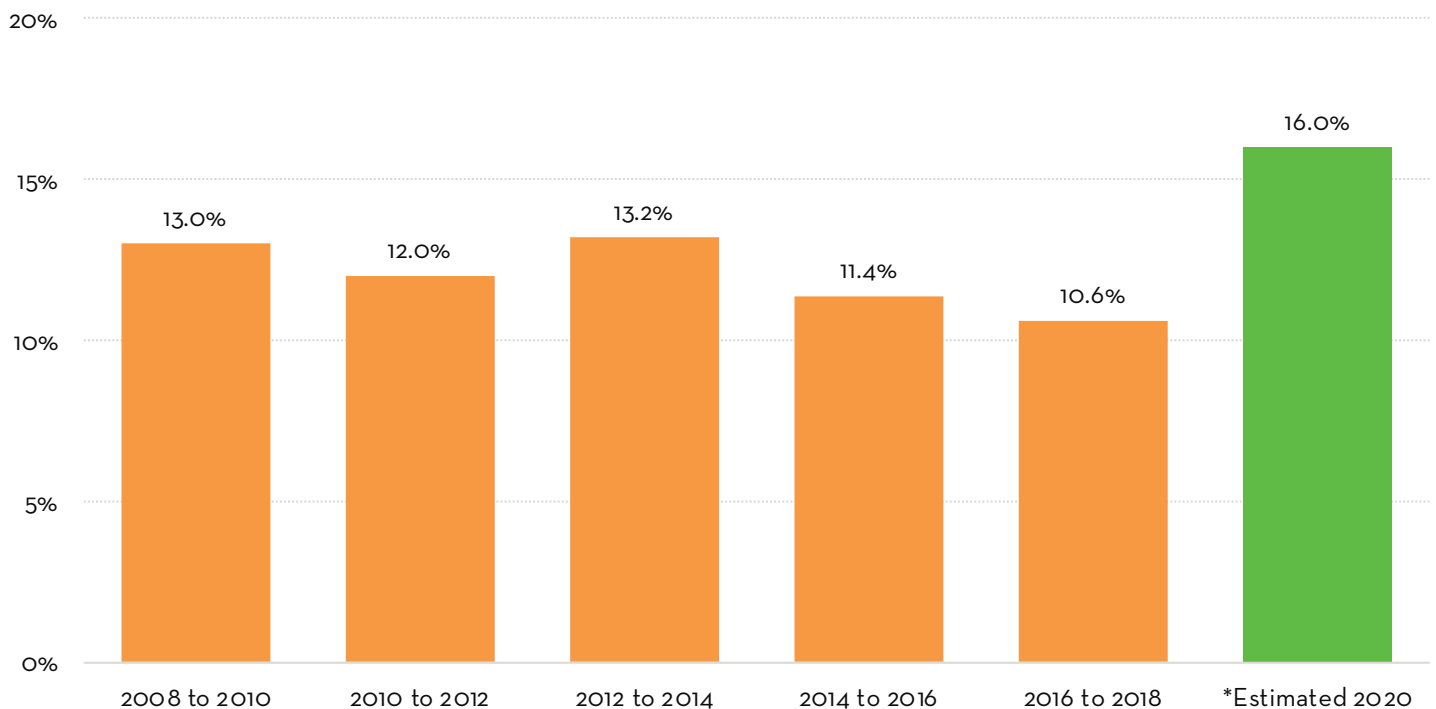
Forecasted Food Insecurity

While the pace of the country's and the District's public health and economic recoveries remains uncertain, estimates from national researchers show a continued increased rate of food insecurity in the District. In a June 2020 report, Feeding America predicts that the District's overall food insecurity rate in 2020 will be approximately 16% or nearly 113,000 food insecure residents, a 5.4 percentage point increase from 10.6% in 2018.³³ Feeding America also predicts that the District's child food insecurity rate in 2020 will be approximately 28.6% or nearly 37,000 food insecure children, a 9.3 percentage point increase from 19.3% in 2018.^{34 35} If these projections come true, nearly 38,200 residents and nearly 12,000 children in the District will be newly food insecure.

Put simply, nearly one out of every three children and almost one in five residents in the District will be food insecure in 2020.

Figure 5 shows the changes in the District's food insecurity over the past decade and shows that the predicted food insecurity rate of 16% is at least three percentage points higher than the food insecurity rate during the height of the Great Recession. Projected food insecurity rates will depend in part on unemployment rates. The DC Department of Employment Services (DOES) projected a 2020 unemployment rate of 16.7%, compared to an annual average rate of 5.5% in 2019.³⁶

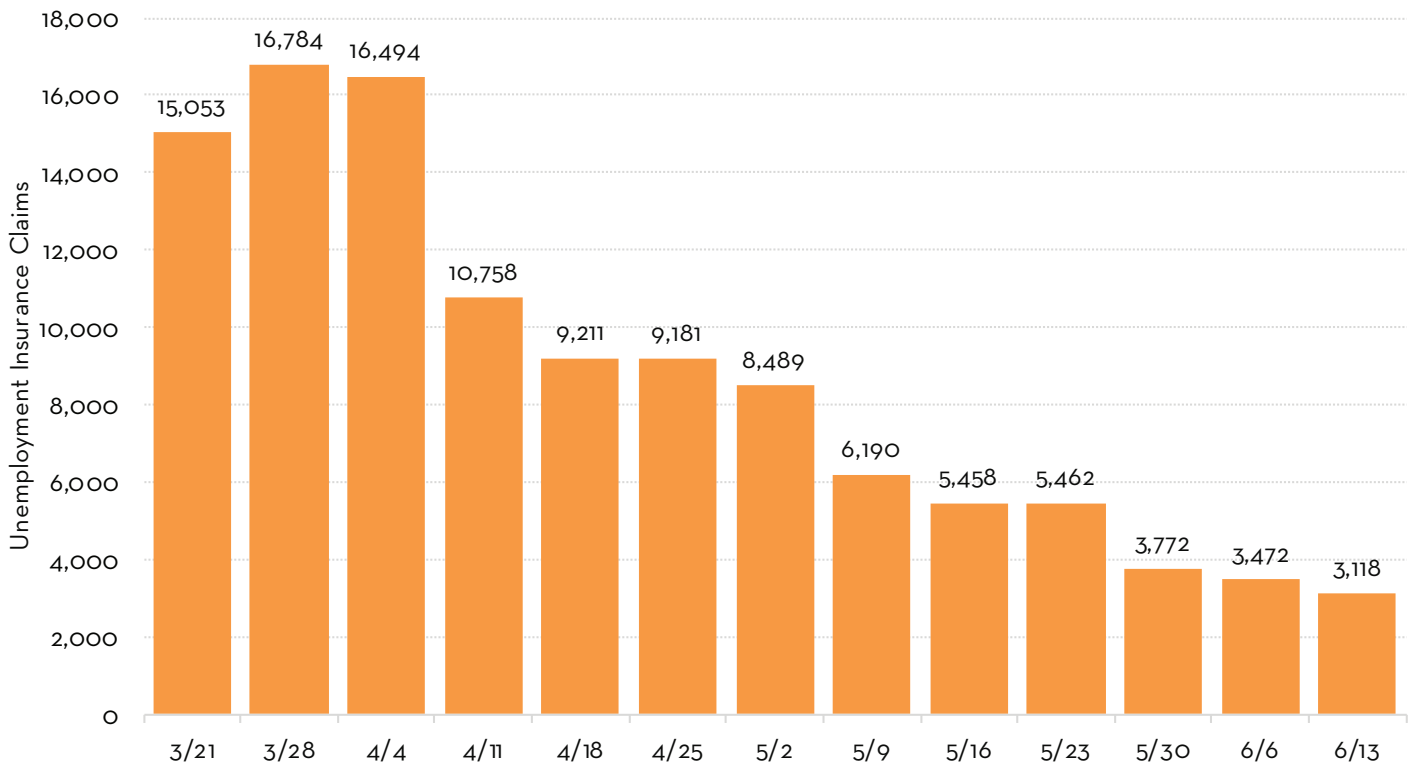
Figure 5: Food Insecurity Rates in the District of Columbia, 2008 to 2020



Source: US Department of Agriculture (2008-2018) & Feeding America (2020)

Figure 6 shows the trend in new weekly unemployment claims filed in the District between the weeks of March 21 and June 13, 2020. Although the number of new claims declined through April and May 2020, and is expected to continue as the District reopens, the decrease in tourism and permanent closure of many businesses, particularly restaurants, will mean prolonged, heightened unemployment rates for the foreseeable future.

Figure 6: New Weekly Unemployment Insurance Claims in the District of Columbia, March 21 - June 13, 2020



Source: DOES June 2020

EMERGENCY FOOD RESPONSE

The public health emergency and resulting economic recession have presented unprecedented

challenges to food security in the District. Many residents who are quarantined need assistance purchasing food safely. The necessary closing of schools and daycares cut off a crucial nutrition source for children, many of whom relied on the District’s free school meal programs. The closing of food pantries restricted access to food resources for low-income adults. Further, rising unemployment rates have led to many residents seeking out food assistance for the first time.

The increased demand coupled with logistical challenges at grocery stores (such as stocking) has also disproportionately affected some residents. Residents with convenient access to full-service grocery stores and economic resources were able to stock up on food before the stay-at-home order. They could also choose to have groceries delivered for additional convenience. In contrast, individuals without access to grocery stores or the means to make large purchases could not take these precautions. Grocery stores began to run out of staple food products, especially low-cost shelf-stable products such as beans, rice, canned goods, and other items that can be purchased with WIC benefits.

Mayor Bowser’s administration and community partners quickly mobilized to address increased food insecurity among District residents. When Mayor Bowser declared a public health emergency on March 11, 2020, the District quickly adapted its congregate meal programs, including school meals, senior meals, and shelter meals, to ensure public health safety and access to nutritious food for vulnerable District residents. The District also worked closely with community partners to offer additional emergency food assistance to populations deemed at highest risk of food insecurity. This response was far-reaching, and while this section covers several examples of this response, it is not intended to be comprehensive.

Meals for Children Under 18 Years Old

School meals are a crucial source of nutrition for many children, particularly those from households experiencing food security. Before the public health emergency, the District was a national leader in child nutrition programs. In 2018, approximately 52,700 students in the District received free and reduced-priced breakfast and lunch, and the District ranked 1st in summer meal participation; 1st in after-school meal participation; and 3rd in school breakfast participation among U.S. states. The Healthy Schools Act of 2010 and the subsequent Healthy Students Amendment Act of 2018 have also made the District a national leader in school nutrition standards and wellness programs.

Emergency Food Distributed by the Government of the District of Columbia	
Grab-and-Go School Meals at DCPS Schools	624,367
Grocery Bags at DCPS Schools	24,645
Senior Meals Delivered	451,586
Get Help Hotline Grocery Deliveries	964
Pandemic-EBT Benefits Distributed (Number of Children/Households Served)	46,029/ 26,742
Meals for Unsheltered Individuals	32,679
Note: Data on emergency food distributed comes from District agencies and reflects data captured from the March to early June. Sources: DCPS; DACL; EOC; DHS. June-July 2020.	

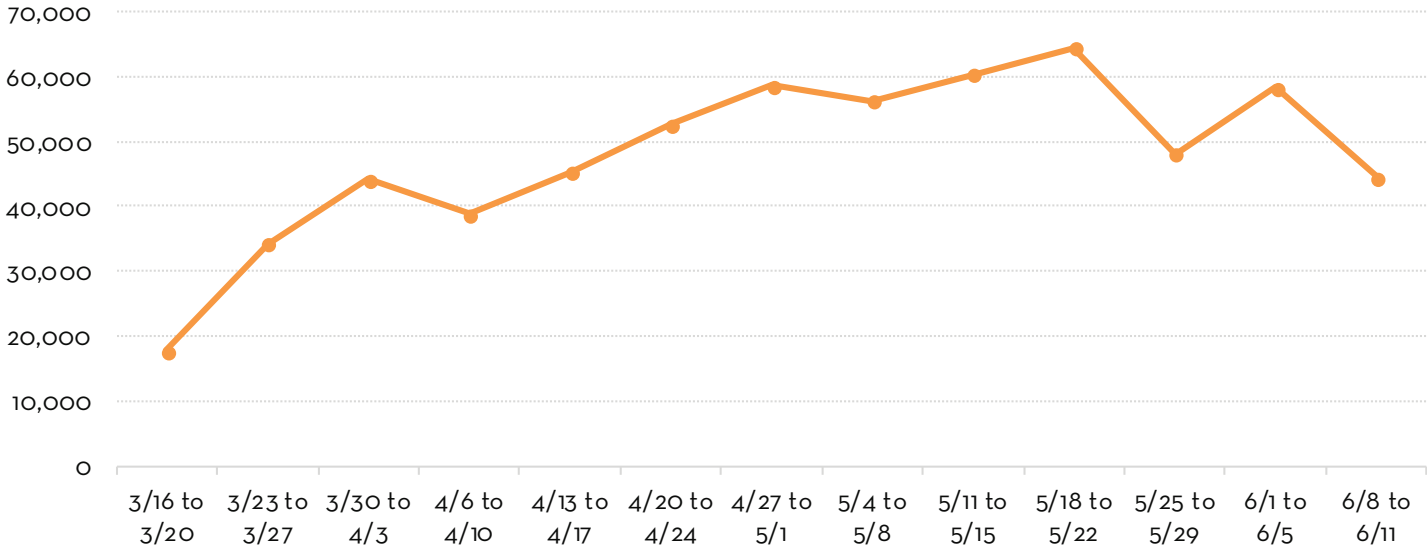
When schools closed in March 2020 to prevent the spread of COVID-19, DC Public Schools (DCPS) acted quickly to ensure all children 18 years and under could access free meals during distance learning. Since March, DCPS has offered grab-and-go breakfasts and lunches at 29 schools across the District, focused in areas with the highest need. Children do not have to be DCPS students or prove their age or residency to receive meals. In accordance with federal guidelines, adults can claim meals for their children even without a child present.

DCPS saw a steady increase in meal demand from March through mid-May and a plateau from mid-May through mid-June. As of June 11, 2020 (the cut off for reporting for this report), DCPS had served over 624,000 meals.



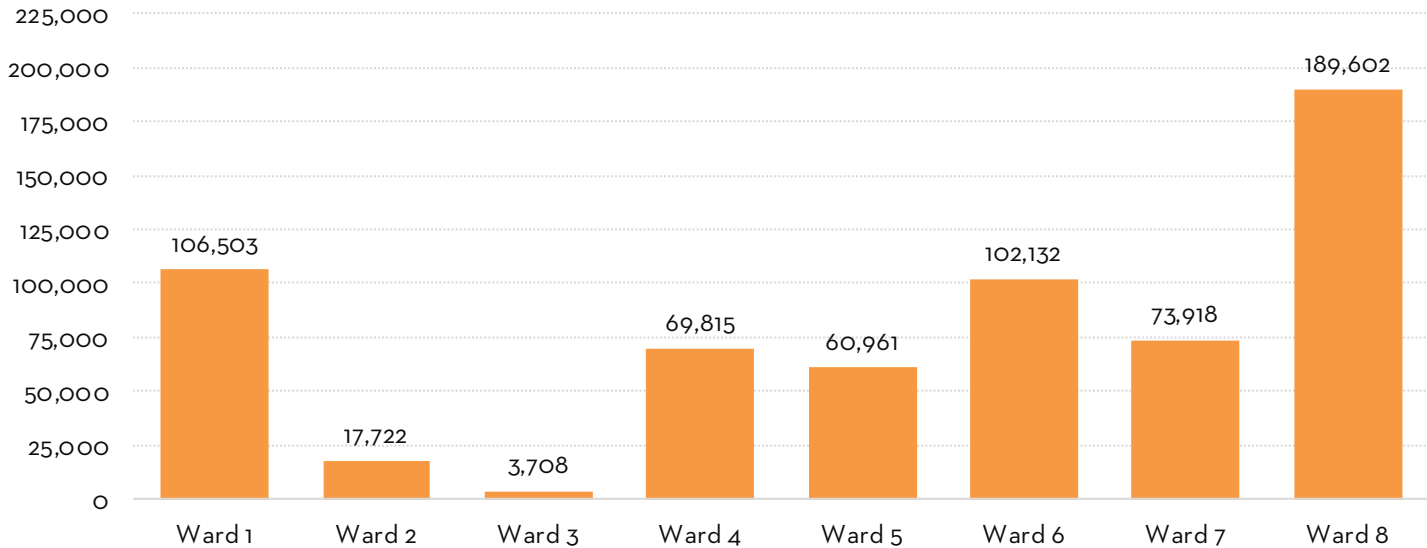
Figure 7 indicates that the peak week of distribution occurred week ending May 22 with 64,496 meals distributed. **Figure 8** shows Wards 1 and 8 saw the highest demand for meals (over 106,000 and 180,000, respectively), which is reflected in the two schools with highest demand, Columbia Heights Education Campus (81,000 meals) in Ward 1 and Ballou High School (111,000 meals) in Ward 8.

Figure 7: Number of Meals Distributed at District of Columbia Public Schools between weeks ending March 20 to June 5, 2020



Source: DCPS Emergency School Meal Data June 2020

Figure 8: Total Meals Distributed at District of Columbia Public Schools by Ward, March 16 to June 11, 2020



Source: DCPS Emergency School Meal Data June 2020

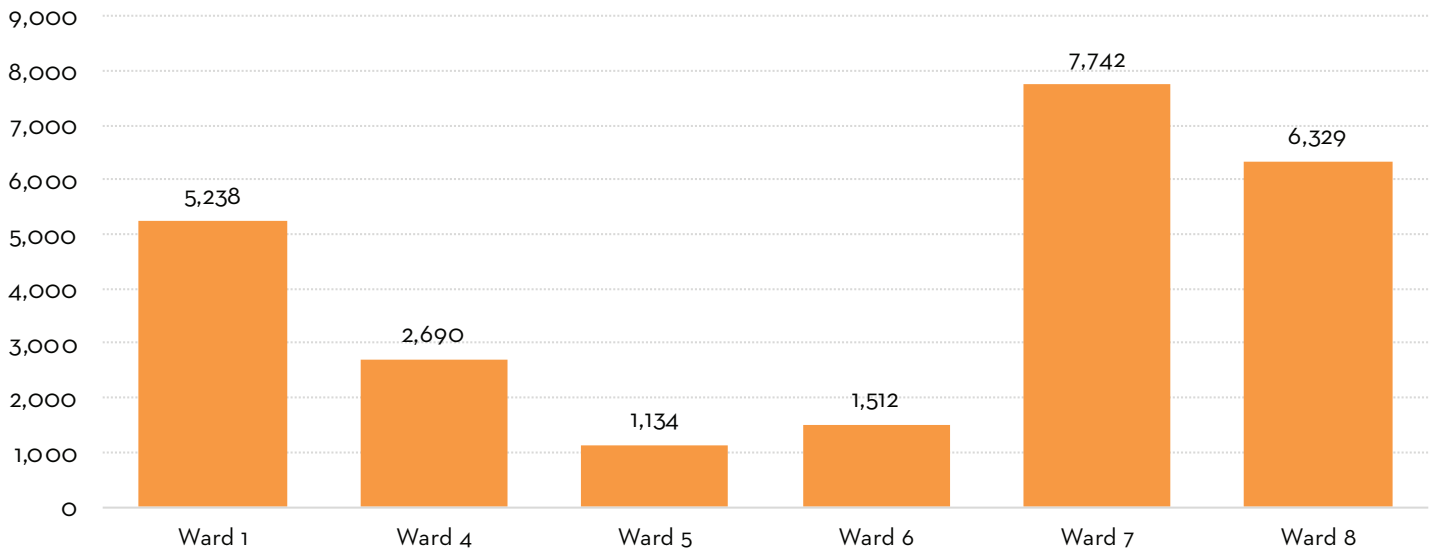
Grocery Distribution at School Meal Sites

Since April 13, 2020, Mayor Bowser’s administration has distributed free groceries at school meal sites across the District. This program has provided free groceries, mostly fresh produce, directly to residents at 13 school sites. To implement this program, the District partnered with several local non-profit organizations and businesses, including Martha’s Table, DC Central Kitchen, the Capital Area Food Bank, and Good Food Markets. The groceries are distributed on a first come, first served basis, with a minimum of 300 bags available per site.

The demand for these groceries has steadily increased since March. **Figure 9** indicates the total number of groceries distributed by Ward. As of June 8, over 24,645 grocery bags had been distributed. The highest demand for free groceries has been in Ward 7, with over 7,742 bags distributed to date. The second highest demand has been in Ward 8, with 6,329 bags distributed to date. There is no data for Wards 2 and 3 because there were no grocery sites in these Wards.

A survey of 450 participants in the program conducted in July found that 94% of participants “Loved” or “Liked” the quantity and quality of the food.

Figure 9: Number of Grocery Bags Distributed in the District of Columbia by Ward, April 12 to June 8, 2020



Source: DC Emergency Operations Center Data June 2020

Senior Meals

During normal operations, the Department of Aging and Community Living (DACL) operates congregate and home-delivered meal programs for low-income seniors. Immediately following the declaration of the public health emergency, DACL closed the congregate meals sites and shifted all meal operations to no-contact home deliveries. Through DACL's existing contract with Dutch Mill Catering and Mom's Meals, seniors receive up to a week's worth of frozen meals in each delivery.

The program has experienced significant new demand during the public health emergency. Previously, DACL was serving approximately 3,500

seniors. The program has steadily increased at a rate of 100-150 participants per week to a total of 6,400 as of June 16, 2020. To be eligible for the program, seniors must be at risk of nutrition insecurity, isolation, and have difficulty accessing food. Seniors that do not meet these eligibility criteria are referred to other food resources including community food resources, federal food assistance programs, and the District helpline. DACL, partner agencies, and community-based organizations conduct on-going outreach to seniors to connect them with these critical resources.





Meals for Individuals Experiencing Homelessness

During normal operations, the Department of Human Services (DHS) provides free breakfast and dinner at shelters for individuals experiencing homelessness. As part of the response to the public health emergency, the District's shelters implemented grab-and-go meals for breakfast, lunch, and dinner, as well as staggered pick-up times to protect individuals from exposure risks.

Additionally, the District established temporary sites for individuals experiencing homelessness who could not safely stay in shelters. These Isolation and Quarantine and Pandemic Emergency Program for Medically Vulnerable Individuals sites contain more than 600 rooms which provide individuals with necessary resources, including meals and medical treatment related to COVID-19. Finally, the District has partnered with World Central Kitchen and Hook Hall, a local business, to provide daily grab-and-go meals at distribution sites across the District since mid-March and as of July 7th, the District has provided 32,679 meals to unsheltered individuals. DHS continues to provide 1,500 meals a week to

unsheltered individuals in addition to their existing shelter contracts.

Food for Residents Quarantined at Home

Residents who are advised to quarantine by a healthcare provider, but do not have the means to access food or other important supplies, have required additional support. In response, the District created a COVID-19 Get Help hotline (**1-888-349-8323**) and web portal (**gethelp.dc.gov**) where individuals can self-identify as in need of food or other resources. Eligible residents can receive home-delivered grocery boxes or prepared meals and other household necessities for the duration of their quarantine. The grocery boxes include seven days' worth of shelf stable food items, such as pasta, canned vegetables, and shelf stable milk through a partnership with local food businesses, Good Food Markets and 4P Foods. If the individual is not able to prepare their own meals, they receive prepared meals through a partnership with Hook Hall.

As of June 5, 964 residents have received deliveries of food and other supplies through the hotline.

Residents who call the hotline but are not eligible are referred to other food resources.

Maximizing Federal Food Assistance Programs

The District has worked diligently to ensure that during the public health emergency residents have access to federal food assistance programs, including p-EBT, SNAP, and WIC, while minimizing in-person contact and interactions.

Pandemic EBT (p-EBT)

DHS and the Office of the State Superintendent for Education (OSSE) have done extensive outreach to families with school-aged children to ensure they receive the federal Pandemic Electronic Benefits Transfer (p-EBT), which provides food benefits on an EBT card to families with children eligible to receive free or reduced-price school meals. For each child, a family receives \$5.70 per child per school day or \$28.50 per week to purchase food at stores that accept SNAP benefits. As of July 1, 2020, the District has distributed p-EBT to 46,029 children in 26,742 households. This is 67% of the children eligible for this program, and DHS continues to work diligently to reach its goal of 100% of eligible households receiving the benefit.

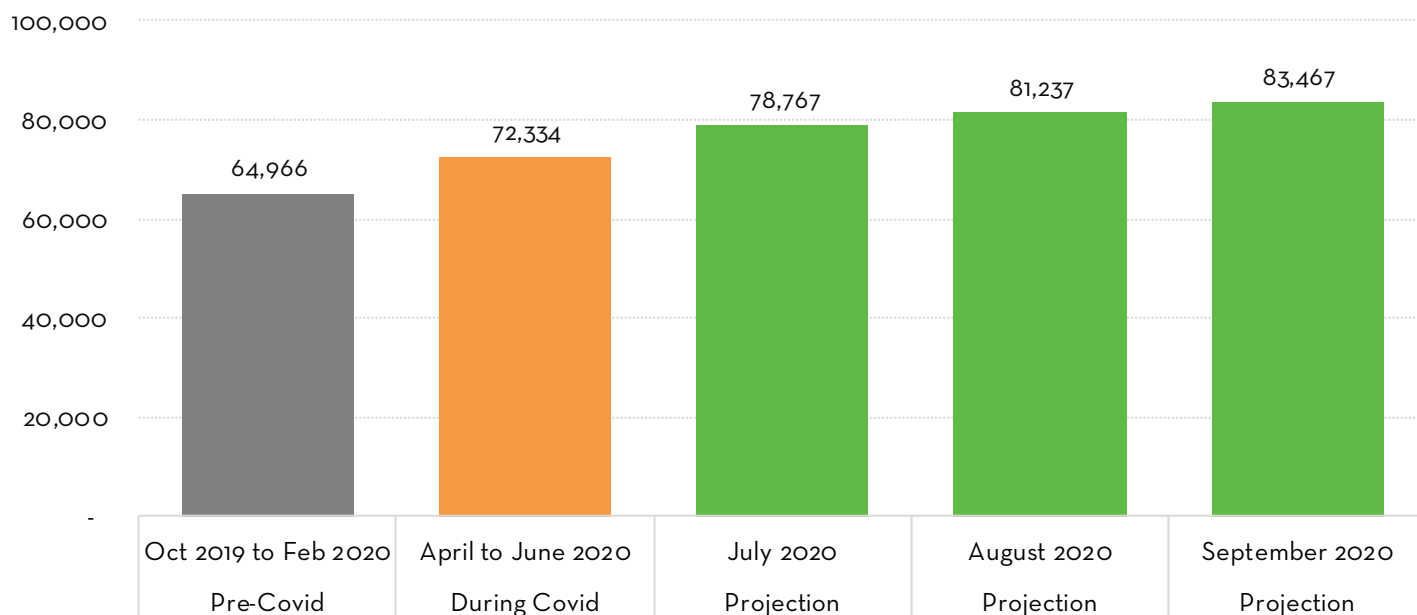
SNAP

DHS also successfully applied for several waivers to expand access to the federal Supplemental Nutrition Assistance Program (SNAP) during the public health emergency through September. These waivers have allowed DHS to automatically renew benefits, create an online application process, and allow participants to use SNAP to order groceries online. With this last change, SNAP and p-EBT recipients are now able to use their benefits to purchase food through Amazon, the only retailer authorized to accept benefits online in the District. DHS and DC Office of Planning (OP) are working to help more local retailers become authorized to accept these benefits online.

In August, the U.S. Department of Agriculture denied requests to extend SNAP waivers across the country for automatic recertification. However, the USDA reversed course at the end of the month extended the waivers through September. DHS is working with residents to apply for recertification over the phone to ensure continuity of benefits in October. DHS foresees a large influx in wait times for the SNAP enrollment hotline.



Figure 10: FY 2020 Supplemental Nutrition Assistance Program Caseload in the District of Columbia



Source: DC Department of Human Services SNAP Participation Data July 2020

Figure 10 indicates that the District’s SNAP enrollment has significantly increased during the public health emergency, and DHS projects a continued increase through September 2020. Before the onset of COVID-19, 64,966 residents were enrolled in SNAP. By June 2020, enrollment was at 72,334. DHS projects that by September 2020, SNAP enrollment will be at 83,467.

WIC

DC Health solicited federal waivers early in the public health emergency to make the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) more accessible for participants. The flexibilities included conducting enrollment and appointments over the phone and video calls instead of in-person, mailing benefits directly to participants so that they do not need to come into the clinic to pick up their checks, expanding the list of eligible food items that participants can choose from when spending their benefits, and automatically recertifying households during the public health emergency. DC Health worked closely with food retailers to ensure they were trained on the expanded list of eligible foods. Due to these efforts, enrollment in WIC increased from 14,898 participants in February to 15,160 participants in June.

Farmers Markets

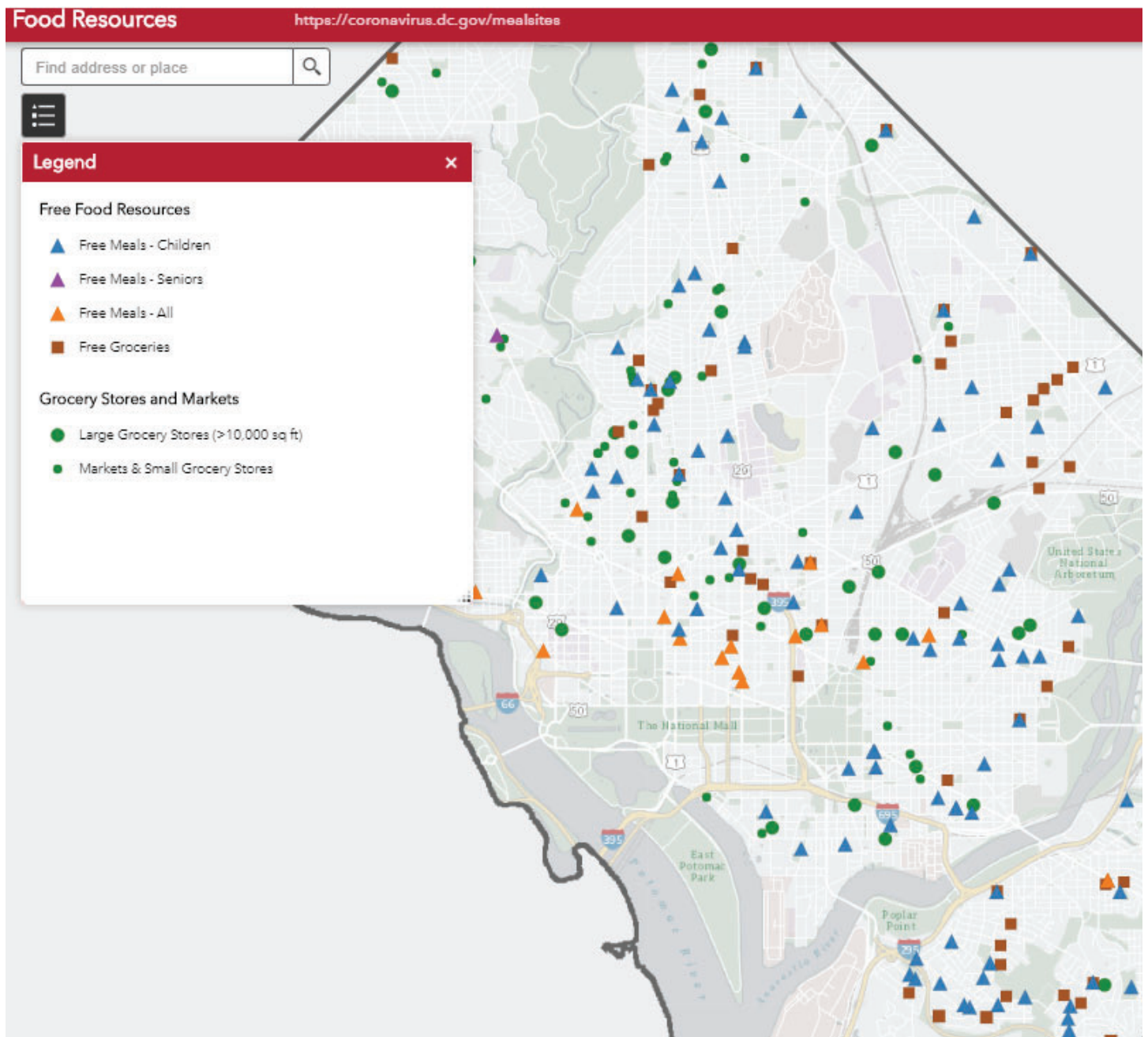
As grocery stores have struggled to keep shelves stocked, farmers markets have played an important role in food access for District residents. Farmers markets are an important source of nutritious food for all residents, including low-income residents. The federally funded WIC Farmers Market Nutrition Program and Senior Farmers Market Nutrition Program administered by DC Health provide benefits to low-income households and seniors to purchase food at farmers markets. Additionally, the DC Health-funded Produce Plus Program, administered by DC Greens, is providing 4,000 low-income residents with weekly boxes of farmers market produce. DC Greens, with the support of OP and DC Health, rapidly shifted the program to reduce points of contact and ensure customer safety this year.

In early April, Mayor Bowser issued Mayor’s Order 2020-058 that required that all farmers markets wanting to operate during the public health emergency to apply for and receive a waiver. OP developed an online application for farmers market operators to demonstrate how they planned to comply with public health requirements, formed a small farmers market review team, and created a system for reviewing and approving the waivers.

OP created a webpage with information on the farmers market requirements, the process for applying for a waiver, and the list of approved farmers markets. In addition, OP convened several calls with the farmers market operators and partner enforcement agencies to ensure everyone understood the farmers market requirements throughout the public health emergency and the reopening process. To date, all the markets that have applied (32 markets as of June 20, 2020) have been certified to open on time.³⁷

Non-Profit and Private Sector Response, Coordination, and Collaboration

At the onset of the public health emergency, the District's non-profit and business community quickly responded to the increasing food assistance needs by establishing programs to distribute groceries, prepared meals, and other support for those affected by the pandemic. The image below shows how the District elevated these programs by creating a comprehensive, regularly updated map of food resources (shown below, available at coronavirus.dc.gov/food).



The following table highlights the scale of food assistance provided by the District’s non-profit community. This table is not meant to be comprehensive, as many other organizations also contributed to this effort.

Snapshot of Non-Profit Organization Emergency Food Response in the District	
<i>Name of Organization</i>	<i>Estimated Number of Meals Distributed*</i>
Arcadia Center for Sustainable Food & Agriculture	4,800
Capital Area Food Bank**	3,554,238
DC Central Kitchen**	1,035,259
DC Food Project	320,000
DC Greens	3,120
Dreaming Out Loud	190,000
Food & Friends	204,728
Food Rescue US-DC	12,124
FRESHFARM	18,470
Martha’s Table**	417,500
Oasis Community Partners**	363,000
United Planning Organization	7,336
World Central Kitchen	1,017,297
YMCA of Metropolitan Washington	7,576

Source: Organizations, July 2020. *Many organizations distributed grocery bags, so these figures are estimates of the meals produced with those groceries. **These figures include grocery boxes/bags prepared for the DC Get Help Hotline and the Grocery Distribution Program. Note: this table does not calculate totals, because some organizations provided meals and groceries to other organizations on this list to distribute.

Mutual Aid groups have also played a crucial role in the emergency food response by leveraging the generosity of neighbors, donors, and volunteers to distribute food and other essential supplies within their communities. There are active Mutual Aid groups in every Ward of the District, some of which are operating on a hyperlocal block-by-block level. Although no centralized data exists on the scale of the Mutual Aid response, some Mutual Aid groups report serving hundreds of residents every week during the public health emergency.

In addition to these non-profits, many local businesses contributed to the emergency food response by providing free meals to certain vulnerable populations. For example, Po Boy Jim and We the Pizza offered free meals to children while schools were closed, and Medium Rare provided free meal delivery to seniors.

Although the non-profit and local business response has been robust, several challenges have hampered these groups from their full response potential. First, many of these organizations rely on food, monetary, and in-kind donations to support their efforts. As federal and philanthropic donations have started to decline, their capacity to continue to meet the continuing high demand is increasingly uncertain.

Second, small organizations and businesses are limited by the shortage of cold storage and commercial kitchen space available for emergency food response. For example, in early March, the closure of commercial and institutional food buyers, such as restaurants, universities and schools, created an excess of perishable food items, like fruits, vegetables, and proteins. Some of these items were donated to emergency food providers, but most of it was thrown away because providers had very limited cold storage and kitchen preparation space to prepare the food. These limitations on infrastructure continued to hamper small organizations and businesses from providing emergency food assistance throughout the public health emergency.



Source: Capital Area Food Bank

RECOMMENDATIONS

The food insecurity rate in the District will likely remain at emergency levels even after the public health emergency has subsided. This new reality necessitates both a continued immediate, strategic emergency response, as well as longer-term systems change and planning. The public health emergency magnifies the urgency of achieving true health equity in the District, with every resident having meaningful access to healthy, affordable, and culturally-appropriate food.

Bolstering food security and strengthening the District's food system demand action and coordination across the District government, non-profit partners, philanthropic organizations, private businesses, and individual citizens.

Continued Emergency Response Recommendations:

- 1. Advocate for extending/expanding federal nutrition programs and waivers.** P-EBT, SNAP, school meals, and other federal nutrition programs have provided a crucial safety net during uncertain times. But as emergency funds dry up and the federal government retracts waivers that have provided flexibility for participants, many residents face a cliff of economic security. In June 2020, Mayor Bowser proposed a resolution to the U.S. Conference of Mayors to increase federal food-related public benefits that received unanimous approval.³⁸ This would include extending p-EBT through at least the end of the calendar year and increasing SNAP and WIC allotments. Continued advocacy to extend waivers and fund crucial nutrition programs is needed throughout the public health emergency.
- 2. Maximize federal nutrition funding by ensuring every District resident benefits from programs for which they qualify.** Over 80% of respondents to the grocery program feedback survey who were not enrolled in public benefits were unsure if they were eligible. When residents call a District agency or a private service provider for unemployment, health, or other support, the provider should be trained to refer them to other programs they might be eligible for. Partnerships like the DC Hunger Solutions hotline to help residents enroll in SNAP should be amplified.³⁹
- 3. Continue emergency food assistance, particularly for high-risk populations, throughout the District's public health emergency.** This report forecasts that food insecurity will continue to be elevated through the end of the calendar year. Both government and private sector emergency food programs, particularly those targeting low-income seniors, undocumented immigrants, individuals experiencing homelessness, and families with children, should continue operating through the public health emergency to meet the continued needs of these populations.
- 4. Expand public/private partnerships to increase funding for food assistance over the next year, with a focus on local Black- and Latinx-led organizations.** The increased demand for food is stretching the capacity of many non-profits that have been crucial during the public health emergency. Philanthropic and government funding for non-profits and mutual aid groups has ebbed, even while food insecurity levels remain heightened. Funders and government should work closely with organizations, particularly local Black and Latinx-led organizations, to ensure they have the necessary resources to meet the needs of the communities they serve.
- 5. Leverage the purchasing power of public and private institutions to help small Black- and Latinx-owned food businesses recover.** Local restaurants, caterers, and food entrepreneurs have seen steeply decreased revenue during the public health emergency. The District has contracted with several local food businesses and non-profit organizations through emergency contracts. More public and private institutions like schools and hospitals should structure procurement contracts to enable these investments, particularly in Black and Latinx-owned businesses and non-profits.

6. **Expand transportation options for grocery shopping and delivery, such as the Department of For Hire Vehicles' Taxi-to-Rail FY 2020 pilot, which provided free taxi rides for residents in Wards 7 and 8 to grocery stores.** This program is especially important now as public transportation operates on a diminished capacity, increasing the challenges for residents to access grocery stores. Taxis and rideshare could also be used to expand delivery of groceries to vulnerable populations.
7. **Assist independent food retailers to implement curbside pickup and/or online SNAP purchasing.** OP and DHS have been helping small businesses implement curbside pickup and apply for online SNAP authorization. Given that no small business in the country has been able to become a USDA authorized online retailer, advocacy at the federal level is also needed.
8. **Expand food assistance to undocumented immigrants in partnership with trusted organizations.** Undocumented residents are not eligible for most federal safety net programs and may fear visiting government sites or talking to government representatives. The Mayor's Office on African Affairs, the Mayor's Office on Asian and Pacific Islander Affairs, and the Mayor's Office on Latino Affairs should be included in decision-making about food access programs to ensure that the needs of the residents they support are fully met.
9. **Provide resources and assistance to essential employees at restaurants, grocery stores, and other food businesses.** These workers have been at the frontlines during the public health emergency. Unions and other worker-focused organizations have reported that food sector workers fear for their safety and are not aware of all the protections available to them in the District. More outreach needed to raise awareness about District resources, including paid leave, minimum wage, wage theft protections, and free COVID testing. To this end, the FY 2021 District budget includes funding to implement the "Tipped Wage Worker Fairness Amendment Act of 2018" and "Universal Paid Leave Act of 2016."
10. **Explore continuing innovative emergency food programs that have been piloted during the public health emergency.** Government and non-profits have innovated during the public health emergency to create programs that could benefit residents long-term. Pilot programs such as fresh produce delivery for low-income seniors and restaurant partnerships to produce emergency meals for vulnerable populations could be beneficial even after the public health emergency ends.

Food Systems Change and Planning:

1. **Increase healthy food options in Wards 7 and 8, with a focus on supporting local Black-owned food businesses.** The public health emergency has disproportionately affected Black households in Wards 7 and 8 underserved by healthy food options. The District should strive to meet or exceed the Sustainable DC 2.0 goal of 75% of low-income residents living within a quarter mile of a quality full-service grocery store by 2032. Policies to increase healthy food options should prioritize investing in local Black-owned food businesses in these neighborhoods by providing targeted grants, loans, and technical assistance.
2. **Ensure that all District government food procurement contracts promote health equity, environmental sustainability, and the local food economy.** The District's institutions are key sources of nutrition for many residents, including in schools, shelters, correctional facilities, recreation centers, and others. Through these contracts, the District can use its purchasing power to promote strong standards for nutrition, environmental sustainability, and local business support. As mentioned above, these contracts can be crucial lifelines to helping small Black- and Latinx-owned businesses recover.

- 3. Convene District agencies and organizations that serve seniors to develop and deploy a strategy to address senior food insecurity in the District.** The District has the highest rate of food insecurity among seniors in the country. The public health emergency puts seniors at an even greater risk of food insecurity, and the District must prioritize addressing the unique challenges and needs of food-insecure seniors.
- 4. Connect residents at risk of diet-related chronic disease with nutritious food resources.** COVID-19 has underscored the connection between diet and health outcomes. Individuals with diet-related chronic diseases such as Type 2 diabetes and heart disease are at a significant increased risk of serious illness from COVID-19. The District should continue to prioritize innovative programs that provide nutritious food to help prevent and treat diet-related disease. Healthcare providers can also play an important role by providing food insecurity screenings and referrals to food and education resources to their patients.
- 5. Provide robust nutrition education for District residents throughout their lives.** All residents should have access to the nutrition education they need to make decisions and prepare healthy meals for themselves and their families. Schools, recreation centers, senior centers, grocery stores, and other community-facing institutions should host accessible and tailored nutrition education for children, adults, and senior residents.
- 6. Implement Mayor Bowser’s Strategy to Strengthen the DC Food Workforce to support job growth and career pathways in the food sector.** In January 2020, Mayor Bowser’s administration released *Make Food Work: A Strategy to Strengthen the DC Food Workforce* which lays out an action plan to create more career pathways within the food sector.⁴⁰ This Strategy is especially relevant now as food sector workers have been both at the greatest risk of exposure and hardest hit by layoffs.
- 7. Increase affordable commercial kitchen space, cold storage, storefronts, and retail opportunities for small food businesses.** Small food businesses struggling to stay afloat in the public health emergency were limited by lack of access to commercial kitchens, cold storage, storefronts, and retail opportunities. Expanding the availability to these assets will be key to helping small businesses recover and bring back staff.
- 8. Expand investment and infrastructure for urban agriculture.** The public health emergency has highlighted the importance of local food production. The 18 farms currently operating in the District have provided crucial food resources, particularly in communities underserved by grocery stores. District agencies and partners should support the Department of Energy and the Environment in meeting or exceeding the Sustainable DC 2.0 goal of putting 20 additional acres under cultivation for growing food by 2032.
- 9. Consider DC Office of Planning’s forthcoming report recommendations on how a centralized kitchen could improve institutional food and the local economy.** OP is currently developing a study required by the Healthy Students Amendment Act of 2018 on best practices for developing a centralized kitchen in the District. A centralized kitchen could prepare and store food for public institutions, support local farmers, and create jobs. The study will be published in early FY 2021.
- 10. Develop a comprehensive DC Food Resiliency Plan to deploy in the next emergency.** The DC Homeland Security and Emergency Management Agency (HSEMA) is beginning a multi-year process to develop a food resiliency plan for the District. District agencies and organizations should support HSEMA in the development and implementation of the plan so that the District can be as prepared as possible to ensure food security for all residents during future emergencies.

CONCLUSIONS

The COVID-19 public health emergency has underscored the imperative to ensure that every District resident has access to healthy, affordable, and culturally appropriate food. The District, along with local business and non-profit partners, have responded to increased food insecurity during the public health emergency with robust programs focused on populations most at risk of food insecurity, including seniors, families with children, and immigrant communities. Continued investment in programs and policies that have proven effective are more important than ever to create a more equitable, healthy, and sustainable food system in the District.

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