Food insecurity is defined as a lack of consistent access to enough food for an active and healthy life.¹

Background:

- Food insecurity among adults and children has increased during the COVID-19 pandemic due to rising levels of unemployment, poverty, and limited access to school nutrition programs because of school closures.²⁻⁶
- Current models predict that 54 million Americans (16%) will experience food insecurity in 2020 compared to 37 million Americans (11.5%) in 2018, an increase of 17 million food insecure Americans due to COVID-19. ²⁻³, ⁷
- Similarly, models predict 29 million children (25%) will experience food insecurity in 2020 due to COVID 19, compared to 11 million (15.2%) in 2018.⁷
- This increase is a public health concern because food insecure households are more likely to have unhealthy dietary behaviors, putting them at greater risk for other health issues.⁸
- Food insecurity disproportionately affects:⁵⁻⁶, ⁹⁻¹³
  - Households with children
  - Low-income households
  - Black and Hispanic households

• Food insecurity is associated with serious health conditions, such as:¹⁴⁻¹⁹
  - Anemia
  - Diabetes
  - Hypertension
  - Obesity
  - Mental Health Issues
  - Developmental delays among children

Key Texas Findings:

- Food insecurity among Texans has doubled from December 2018 (about 13%) to April-June 2020 (about 28%).⁶ Some studies have shown:
  - Food insecurity in Texas remains high, and is still increasing as the pandemic continues, and as stimulus checks and other major relief legislation expires. ⁶, ²⁰⁻²², ³⁴⁻³⁵
  - Low-income Texans, in particular, have experienced dramatic increases in food insecurity due to the COVID-19 pandemic.²³⁻²⁵
  - When COVID-19 cases are high, unemployment rates increase, and the prevalence of food insecurity also increases.²⁴
- At the current projected levels of 28% food insecurity in Texas, the annual estimated healthcare costs associated with lack of access to food in Texas will be over $11.1 billion.²⁶
• From January to October 2020, almost 600,000 more Texans have become eligible for SNAP,\textsuperscript{27} and over 1.5 million Texas children were approved for Pandemic EBT (P-EBT).\textsuperscript{28}

• The average prevalence of food insecurity during COVID-19 is higher among Black (35.9%) and Hispanic (33.5%) Texans compared to non-Hispanic white (22.1%) Texans and higher among Texan households with children (32.8%) compared to all Texas households (28.8%).\textsuperscript{6}

• Approximately 30.9% of Texas children are projected to be food insecure in 2020, compared to 21.6% of children in 2018.\textsuperscript{2}

• Several Texas counties are projected to have some of the largest food insecure populations (Dallas and Harris Counties) and among the highest prevalence of child food insecurity (Sabine, Zavala, and Hidalgo Counties) in the U.S. due to COVID-19.\textsuperscript{2}

• Nearly half (48%) of U.S. college students reported experiencing food insecurity in past 30 days in 2016, with 22% experiencing very low levels of food insecurity.\textsuperscript{29}

**Recommendations:**

1. Support policies that facilitate increased enrollment and expansion of the Supplemental Nutritional Assistance Program (SNAP)\textsuperscript{5}:
   a. There have historically been issues with SNAP enrollment for those who are eligible,\textsuperscript{30} therefore, policies and funding are needed to increase enrollment in SNAP as more Texans become eligible.\textsuperscript{27,31}
   b. Expand SNAP: A key recommendation is to increase the monthly SNAP benefit by 15% or approximately $100 per month for a family of 4.\textsuperscript{36}
   c. Continue to decrease food insecurity across the nation, while improving nutritional quality of food, which includes continuing COVID-19 waivers.\textsuperscript{36}

2. Support and expand the Pandemic Electronic Benefits Transfer (P-EBT) program (P-EBT provides benefits to replace school meals when schools are closed or operating virtually):
   a. Expanding the P-EBT program, which was set up as a one-time benefit payment,\textsuperscript{18,24} would allow for additional payments to eligible families as the pandemic continues.
   b. Recommendations for expanding school meal plans include temporary universal school meals permanent.\textsuperscript{36}

3. Provide additional resources to:
   a. **Food banks and food pantries:** Food banks need additional funding because of increased need due to the recession and job loss, as well as enhanced delivery methods to reduce the risk of coronavirus transmission.\textsuperscript{3,4}
   b. **School nutrition programs:** School nutrition needs additional funding as these programs are critical resources that have continued to provide meals during the pandemic\textsuperscript{19,32,33} and will need further funds to address changes due to delivery methods, increased use of personal protective equipment, and loss of revenue because of the delay of in-person school openings.
Summary:
Food insecurity, a significant public health issue that is affecting 28.8% of Texans due to the COVID-19 pandemic, is estimated to result in $11.1 billion in associated health care costs in Texas.\textsuperscript{2-6,26} Texas policymakers can reduce food insecurity in Texas by supporting: SNAP expansion and enrollment, expansion of P-EBT, increased funding for food access programs (food banks, food pantries, school meal programs, etc.), and funding for coordinated food assistance efforts across the state.

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References:


