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Thank you very much for the opportunity to testify. I am Rich Huddleston with Arkansas Advocates for Children and Families. We are a non-profit, non-partisan, child advocacy organization founded in 1977. Our mission is to ensure that all children and families have the resources and opportunities they need to live healthy and productive lives and realize their full potential. We work to promote good public policy through research, communications, and advocacy. In addition to my role at Arkansas Advocates for Children and Families, I am the co-chair of our State Legislative Task Force for Reducing Poverty and Promoting Economic Opportunity. In that role, I am working with advocates, policy makers and community leaders from across the state to devise solutions to the very serious problems of poverty in our state.

Before I begin my discussion of issues pertaining to the reauthorization of the child nutrition programs, let me begin with a personal note of home-state pride. It is a pleasure to be a part of an all-Arkansas panel before the Committee's new Chairwoman and Senator from our beloved home state. We congratulate you on your new role and look forward to working with you on the very important issues of hunger and nutrition. Your long standing dedication and leadership on these issues, as well as your knowledge of the struggles of so many of our state's citizens, will be of great service as you lead this Committee.

The child nutrition programs provide healthy meals to millions of children in a wide variety of settings, including schools, child care, after-school programs, and summer activities. I'm pleased to be able to offer our perspective on how the meal programs offered in schools can better serve

low-income families. I will also touch briefly on the child care meals program. But I will leave it to other experts to cover the other important programs and issues to be considered in reauthorization.

Let me start by painting a picture of poverty in Arkansas. One in four children in Arkansas is poor. That means living on less than \$21,200 for a family of four. Another quarter are in low-income families (below 200 percent of the federal poverty line). Arkansas ranks among the top four states nationally in overall poverty, with 17.3 percent of its residents living in poverty (tied with Louisiana and Kentucky at 17.3 percent) and trailing only Mississippi at 21.2 percent. No matter how hard they work, fully half of all Arkansans do not make enough money to support themselves, and the current economic crisis is not making it any easier.

Poverty has far-reaching consequences. Many poor families struggle to afford enough food. Nationally, approximately 6 million households with children — nearly 16 percent of such households — struggle against hunger. Research shows that children in these households tend to face a range of other challenges as well: they have poorer health, higher rates of chronic illness and hospitalization, more behavioral problems, and higher rates of anxiety and depression. Children's Health Watch has found that even children who are not considered food insecure but who have inadequate access to nutritious foods tend to be in poorer health and at higher risk for developmental delays. Also, it is critically important that children have enough to eat, particularly in the early years of rapid brain development. Programs like the school meals programs, which provide nutritious meals to children and make it easier for low-income families to make ends meet, play an important role in reducing poverty and food insecurity, as well as in closing the achievement gap.

These struggles make it hard for children to learn, succeed in school, and become productive workers as adults. A new national study by David Berliner (2009) shows that out-of-school factors

related to poverty are the major cause of the achievement gap between poor and minority students and the rest of the student population — a conclusion supported by over 50 years of research.

Helping Poor Children Achieve and Thrive

There is much that we can do to support struggling children and Congress is leading the way on several of these fronts. Of course, with the leadership of several members from this Committee, Congress has renewed and expanded the children's health insurance program. Even as we meet today, Congress is tackling health care reform. And, Congress is working to renew the "No Child Left Behind" legislation to improve educational outcomes for children.

One of the most important next steps Congress can take is the reauthorization of the Child Nutrition Programs. The school meals programs have extraordinary reach: nationwide, more than 31 million children eat a meal provided through the school lunch program on a typical day, and more than 19 million of them get free or reduced-price meals because their family is low-income.

Unsurprisingly, as a result of the recession, the number of children who qualify for a free or reduced-price meal is growing. During the 2009-2010 school year, 276,206 Arkansas children were approved for free or reduced-price meals an increase of 6.5 percent over the prior year total of 259,453. Eating school meals has been shown to increase children's intake of key nutrients and there is some evidence that school lunch participation reduces girls' risk of becoming overweight.

Given the many benefits of the school meals programs, our goal should be to automatically enroll every single child who is eligible for free meals in a timely manner. Working toward this goal will bring three important benefits.

- Needy children in families struggling against hunger will be fed and their parents will not have to complete duplicative paperwork.

- Schools, especially those that serve high concentrations of poor children, will see a reduction in their administrative burden, which frees up resources to focus on providing healthier meals or richer academic opportunities.
- Program integrity will be strengthened by relying on the rigorously scrubbed data gathered by other means-tested programs instead of on paper applications that are prone to clerical errors.

I'm very pleased to have the opportunity to share with you some of the specific ways in which Congress can improve access to free school meals and alleviate the day-to-day hardship of struggling families. I am going to focus on two complementary approaches. One would allow schools with large concentrations of poor students to serve free meals to *all* of their students. The other would allow schools to automatically enroll for free meals any student who is receiving Medicaid, thereby helping ensure that the poorest children receive free meals regardless of where they attend school.

Creating “Hunger Free Schools” in High-Need Areas

Schools that serve predominantly poor students should not have to spend time identifying the very small numbers of children who do not qualify for free or reduced-price meals. That is like looking for a needle in a haystack. A school that serves, for example, 80 or 90 percent of its students free or reduced-price meals should have the option of moving away from individual applications and systems for tracking eligibility in the cafeteria.

Instead, the school should be allowed to serve all meals free and receive federal reimbursements based on the results of the direct certification process, an annual process that every district is required to undertake to automatically enroll children in households receiving food stamps.

In schools that directly certify more than 40 percent of their students, generally more than 80 percent of the students qualify for free or reduced price meals anyway. So if a school or district directly certified more 40 percent of its students and agreed to serve all meals free, it should not have to process applications or check eligibility in the cafeteria.

The Senate bill (S. 1343) that includes this proposal is entitled “The Hunger Free Schools Act.” The title does not oversell its potential. These schools, which serve high-poverty areas, would literally be hunger-free spaces. All children would be eligible to eat breakfast and lunch free of charge. There would be other benefits as well: these schools could spend less time on paperwork and more time preparing and serving healthy meals, while parents who have already proven that they have low incomes would not be required to fill out duplicative paperwork. Congress, in short, would eliminate administrative hurdles that get in the way of effectively feeding poor children.

There are more than 12,000 schools nationwide in which more than 80 percent of the students qualify for free or reduced-price meals. Six million children attend these schools and would benefit from a more welcoming cafeteria. In Arkansas, about 250 schools fit this description; they serve about 18 percent of all students in Arkansas.

Giving schools that serve high-poverty neighborhoods a simple universal feeding option would help the neediest children and free up school resources for educational or nutrition improvements.

Automatically Enrolling Poor Medicaid Recipients for Free Meals

The proposal I just described is designed to help schools in high-poverty areas. But we also need to do more to ensure that individual poor children, regardless of where they live, are enrolled for free school meals. Children in households receiving food stamps have long been eligible for free

school meals. This is a sensible policy. These families have already proven, through the rigorous food stamp enrollment process, that they have low incomes and need help obtaining a nutritious diet. For nearly 20 years, children in food stamp households have been enrolled for free school meals if they fill out a paper application or if the school district identifies them through direct certification.

As a result of bipartisan efforts in the 2004 child nutrition reauthorization legislation, sponsored by former Committee Chairman Thad Cochran of Mississippi, school districts are now required to use direct certification to automatically enroll school-age children in households receiving food stamp benefits. Last year, the first year in which the requirement applied to every single school district, 96 percent of school children attended school in a district that conducted direct certification.

Unfortunately, not all districts conduct direct certification equally effectively. USDA has estimated that 10 million children were eligible for direct certification at the start of the 2008-2009 school year, but only 6.5 million were directly certified. That means that 3.5 million children are missing out, and as many as 1.5 million of them may not be receiving free school meals. Approximately 2 million children are being enrolled with a duplicative paper application but are missing out on the important simplification of direct certification. In ten states, at least two in five children who could have benefited from direct certification missed out.

So we want to ensure that USDA works with states to do better. The grants to improve direct certification that Chairman Lincoln and Ranking Member Chambliss worked to include in the fiscal year 2010 agriculture appropriations legislation are a great start. At a time when states are making severe budget cuts and can have difficulty obtaining funds for investments in technology or training, these funds will enable states to improve their direct certification systems.

But we can do more. The second key step that Congress could take to improve access to free school meals for poor children would be to allow poor children enrolled in Medicaid to be automatically enrolled for free school meals. Parents already provide detailed income information when they enroll their children in Medicaid, just as when they sign up for food stamps. These parents should not have to complete a duplicative application, and schools should not have to process unnecessary paperwork.

Congress should permit school systems and states to work directly with Medicaid agencies to use income data from Medicaid as the basis for automatically enrolling children for free school meals. An estimated 2 million poor children participate in Medicaid but not food stamps; Arkansas is home to more than 30,000 of them. Even though these children are living in poverty and are nutritionally needy, they do not necessarily receive the free school meals Congress intended. Using Medicaid data to automatically enroll children for free school meals would free up school resources and help needy families.

Improving Nutrition for Children in Child Care Programs

While the focus of my testimony has been on improving the school meals programs, one other area that holds promise for improving outcomes for young children would be the Child and Adult Care Food Program (CACFP), which uses federal dollars to provide nutritious meals and snacks to low-income children in child care centers and family child care homes.

Child care, of course, is critical to the economic well being of low-income families, many of whom would be unable to work without it. Healthy food is paramount to meeting the good nutrition needs of low-income children in child care. Research shows that children enrolled in CACFP have higher intakes of many key nutrients and food including vegetables and milk and fewer servings of fats and sweets. By paying for nutritious meals and snacks for eligible children enrolled

at participating child care centers and family child care homes, CACFP plays a critical role in improving the quality of these programs and making them more affordable for low-income parents struggling to make ends meet.

Each year more than \$33 million in federal CACFP reimbursements are distributed to child care centers and child care homes in Arkansas to serve healthy meals to over 41,752 children every day. Unfortunately in Arkansas and across the country, healthy CACFP meals and snacks are out of reach for many young children in child care, especially in family child care homes. Across Arkansas, for example, family child care homes participation in CACFP has dropped 30 percent since 1997.

While a detailed discussion of steps that could be taken strengthen CACFP is beyond the scope of my testimony today, I would suggest two changes that Congress could take in this regard. One would be to increase CACFP reimbursement rates for child care centers and family child care homes to help offset the higher cost of nutritious foods. The other would be to add a third meal or snack option for children in child care, helping to meet the nutrition needs of children who are in care for long hours while their parents work. Both of these changes are part of S. 2749, “The Access to Nutritious Means for Young Children Act,” introduced by Senator Gillibrand.

Conclusion

In conclusion, the school meals programs are stable, widely available programs that millions of low-income children rely upon daily. Congress has an opportunity to streamline them and improve access for the neediest children. The two proposals I have described — creating a universal paperless feeding option for schools serving high-poverty neighborhoods and allowing automatic enrollment of poor children for free school meals based on Medicaid data — would go a long way toward achieving those goals.

Similarly, Congress has an opportunity to strengthen The Child and Adult Care Food Program by increasing reimbursement rates and adding a third meal or snack option to improve nutrition for young children in child care.