

IMPROVING ACCESS TO CRITICAL NUTRITION ASSISTANCE PROGRAMS

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Executive Summary

Access to safety net programs such as Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)¹ and Supplemental Nutrition Assistance Program (SNAP)² in North Carolina could be greatly enhanced by following the recommendations of those who administer and receive benefits: improving customer service, enhancing appointment reminders, giving greater flexibility in appointments, increasing benefits, and loosening eligibility guidelines. WIC participants recommend reducing appointment wait times and the frequency of appointments. WIC participants also describe difficulty redeeming benefits at the grocery store, highlighting the need for interventions to improve the shopping experience.

COVID-related changes in program administration, such as telephone appointments and extended certification periods, food flexibilities, and increased SNAP benefits have helped reduce barriers to WIC and SNAP. However, because many WIC and SNAP participants were unaware of the changes, the changes had less impact than they could have.

To investigate the barriers and facilitators of applying for, receiving, and redeeming program benefits before and during COVID-19, we conducted 299 interviews from 2015-2021 with program participants and staff members in eight counties across North Carolina. This brief summarizes the key findings of studies from this data collection. The tangible barriers and actionable solutions detailed by those who interact with these programs daily can serve as a springboard for increasing program participation and enhancing program experiences in the future.

RECOMMENDATIONS

Participants of the study pointed to a number of actionable recommendations to increase program participation and enhance the participant experience in the nutrition assistance programs SNAP and WIC:

- Federal and state WIC programs should strengthen vendor management to improve the shopping experience.
- State and local agencies should develop peer programs to educate WIC participants on the shopping experience.
- Local agencies should collaborate with community-based organizations, food pantries, and churches to disseminate information about how to apply for SNAP and WIC benefits and the COVID-19 policy changes that increased benefits and flexibility.
- State and local agencies, along with community organizations, should advocate for more federal and state funding to support SNAP and WIC workforce expansion amidst the pandemic.

¹ SNAP is the largest nutrition assistance program in the United States, serving over 35 million households in 2019. It is a federal entitlement program that is delivered at the state and local level. The federal government funds the benefits recipients receive but shares half of the administrative costs of the program with states.

² WIC is the third largest food assistance program in the U.S., serving 7.8 million families in 2018. The program serves more than half (53 percent) of all infants born in the United States and offers nutrition assistance to support low-income women with children under the age of five who are at risk for malnutrition. Eligible populations include children from infancy to their fifth birthday, women who are pregnant, women who are non-breastfeeding up to six months postpartum, and women who are breastfeeding up to a year postpartum. WIC is funded at the federal level by grants but is administered at the state and local levels.

Background

In the best of times, access and retention in the WIC and SNAP programs is a challenge across the nation and in North Carolina. In 2019, North Carolina only reached 54 percent of the WIC-eligible population. While SNAP coverage rates are much higher in North Carolina at 85 percent, mirroring the national average, many counties struggle to meet federal and state benchmarks for timeliness and error rates.³ As a result, many eligible families are denied access to SNAP or experience delays in receiving crucial benefits. This tenuous access to WIC and SNAP contributes to food insecurity among the state's most vulnerable families.

In response to the economic crisis caused by COVID-19, policymakers have made important policy changes to enhance access to SNAP and WIC, yet these changes were made at a time when the programs have been strained by the pandemic. Federal policy waivers have loosened application guidelines, extended eligibility periods, and made it easier for beneficiaries to use benefits. These changes have enhanced access to these public assistance programs. However, the economic fallout of the pandemic has increased demand for public assistance programs by 30 to 40 percent across states—a demand that has severely challenged the capacity of many resource-constrained social service agencies.

The study examined how families have experienced these new policy changes, given the sweeping policy changes and growing demand. In addition, we investigated how county agencies have adapted to unprecedented demand and new ways of engaging clients (e.g. remote telework, new application guidelines, and extended eligibility deadlines).

Key Findings

WIC and SNAP Shopping Experiences. The study found that identifying WIC-allowable items in the store was challenging for WIC participants.⁴ Results show that perceived stigma during the checkout process diminished the quality of the retail experience. To improve the retail experience for WIC customers, state and local WIC agencies could encourage retailers to create a section for WIC items in the store or offer in-store education on how to use WIC benefits.

Additional research shows that WIC participants experience a learning curve when using benefits in stores. The study shows that WIC participants must learn how to identify WIC-approved foods and which stores are WIC friendly. In contrast, results show that WIC participants face fewer challenges using SNAP in grocery stores because SNAP does not restrict use to specific foods. The challenges of learning how to use WIC benefits may contribute to discontinuity in WIC participation or early exits from the program.

³ States and counties must report the average time it takes to process their caseload and the percentage of their caseload that is processed within state and federal deadlines, which varies from seven to 30 days. States and counties must also report accuracy in the form of error rates that have led to an underpayment or overpayment of benefits.

⁴ WIC and SNAP have state-authorized food options that include container size for things like bread, cereal, juice, peanut butter, and meat, as well as other rules that make shopping challenging. For example, participants can only purchase 16oz loaves of bread, although most grocery stores carry a variety of sizes of packaged bread.

WIC and SNAP Program Experiences. While WIC participants report challenging retail experiences, this is not the case for their in-clinic experiences. In a study comparing program experiences across WIC and SNAP, we found that WIC participants regard their interactions with WIC staff as positive and distinct from their encounters with SNAP staff. WIC participants rarely reported stigmatizing interactions with WIC staff—instead describing positive, personal, tailored experiences. Participants also viewed WIC staff members as offering emotional support, advice, and access to resources. In contrast, WIC participants reported negative experiences with SNAP staff and difficulty contacting workers.

Through interviews with supervisor and front-line staff members, the study also found that the quality of WIC program experiences relative to SNAP can be attributed to how WIC policy incentivizes caseload retention and encourages long-term personal interactions between administrators and program participants. WIC’s policy design fosters supportive social ties between WIC staff and WIC participants by requiring long-term interpersonal interactions through quarterly appointments and nutritional education. Moreover, WIC incentivizes participant retention through discretionary funding mechanisms that reward retention and expanding caseloads and promote customer service. In contrast, SNAP policy, which pressures staff to process cases quickly and accurately, undermines the quality of interactions with clients. Workers repeatedly mentioned the threat of state-enforced penalties if their units failed to meet deadlines or processed cases with high error rates. As a result, SNAP workers interacted with clients to gather information about eligibility and often viewed clients as hurdles to fulfilling their professional responsibilities.

WIC and SNAP COVID-19 Policy Waivers

Under the Families First Coronavirus Response Act, North Carolina has adopted various changes to WIC and SNAP. North Carolina extended recertification deadlines for WIC and waived the requirement that participants be physically present in a local office to receive benefits in order to reduce the risk of exposure to COVID-19. WIC also waived physical presence requirements to allow remote appointments, defer bloodwork, and continue benefits for WIC participants (United States Department of Agriculture, 2020b). Along with changes to intake processes and eligibility periods, COVID-19 policy waivers also permitted states to introduce new food package flexibilities that allowed participants to substitute milk, bread, and juice products when WIC-approved products were unavailable.

The state increased benefits to households in need by providing emergency supplemental SNAP benefits. The state also made changes to provide pandemic SNAP benefits for children who would otherwise receive free or reduced-price lunch if their schools were not closed (United States Department of Agriculture, 2020c). North Carolina also extended recertification periods for SNAP recipients by waiving typical requirements for recertification and the interview requirement at both the recertification and application stages. Finally, independent from the Families First Act, the SNAP Online Purchasing Pilot allows participants in some states, including North Carolina, to use SNAP to purchase food through online retailers (Center on Budget and Policy Priorities, 2020).⁵

⁵ This program was created through the 2014 Farm Bill, which mandated a pilot to examine the online transactions for SNAP benefits using food retail stores. Amidst the pandemic, the USDA expanded the SNAP online purchasing program to 36 states and Washington, D.C. (United States Department of Agriculture, 2020c). North Carolina now participates in the online purchasing program, allowing SNAP recipients to purchase food online through Amazon and Walmart.

Impact of COVID-19 Policy Changes

Easier WIC Access. WIC participants overwhelmingly report satisfaction with remote appointments that reduce barriers to accessing and maintaining benefits. For example, this suburban WIC participant contrasts her in-person office experience with remote appointments. Going to the office involves waiting, but appointments over the phone are much easier and safer.

Well, when you go to the office, sometimes you have to wait. Well, by doing it over the phone while they just let you know...it's much easier because then you don't have to run to the office, you don't have.... It's much easier for everyone and safer.

A suburban WIC participant remarked that she was “100%” satisfied with remote appointments because they are faster and more convenient than in-person office visits. She explained,

Very quick. That's the main idea. Very quick call, set everything up. And that's it for the next three months...I don't have to really travel far to go to appointment. I can sit and wait at home for them to call me or for me to call and set up an appointment...I think overall I'm 100 percent satisfied.

New Barriers to SNAP Access—Difficulties Reaching SNAP workers. From March through December of 2020, 60 percent of study participants reported negative interactions with SNAP workers. The chief complaint among program participants was the challenge of reaching workers. While remote access is reported as beneficial when agency workers are able to connect with recipients, the switch to remote access created challenges accessing agency workers. Contacting workers was most difficult in urban counties—where 75 percent of study participants reported difficulties. For example, this WIC and SNAP recipient from an urban county reflected on the challenges of reaching a worker to inquire about the status of her application,

We always get an automated service. That one was so frustrating. Oh my goodness. Because every time you call somebody, you're talking to a machine. You're not talking to an actual agent, none of the workers or anything. You're talking to this machine. And then, maybe if you had nothing but time on your hands, which you do because you're sitting in the house; but a person like me, I always got something going on in my house because I got kids here. So, it's hard to be sitting on the phone, waiting 45 minutes for a live person.

A SNAP recipient from a suburban county similarly commented on the challenge of reaching workers,

I can say that I've had a lot of issues with the workers because they don't call you back. Like I was trying to add my niece at one point, I couldn't get anyone to call me back or you want to let somebody know that your benefits aren't working or something happens, like my benefits stopped working with no notice; it took me over a month to get somebody to call me back.

Limited Awareness of COVID-19 Policy Changes. In contrast to high awareness of process changes, we found significant variation across SNAP and WIC recipients on their knowledge and understanding of recent policy changes—changes that would increase their access and use of benefits. Most participants were unaware of these changes and did not take advantage of or inquire about these changes.

With regard to SNAP COVID-19 policy waivers,

- Twenty-five percent of our sample were aware of the extended recertification deadlines.
- Twenty percent were aware of emergency allotments for SNAP.
- A third of our sample were aware of online shopping options.

For WIC policy waivers, only 27 percent of WIC participants interviewed were aware of new food flexibilities that were designed to ease shopping experiences amidst pandemic-related food shortages. Recipients who were aware of policy changes seldom learned of these changes through social service agencies. Instead, they became aware of policy changes through the news, social media, retailers, family, and friends.

Conclusion

WIC and SNAP are vital sources of nutrition and economic support for vulnerable families in North Carolina. As a result of the ongoing economic and health crisis posed by COVID-19, the need to strengthen and improve these programs is more pressing than ever. Swift action to address barriers to participation identified by those closest to the programs—local staff and program participants—may lead to increased program participation and retention. For WIC, federal and state agencies should strengthen vendor management and offer peer education opportunities for new WIC participants who are learning how to use benefits. To ensure vulnerable families are accessing WIC and SNAP, local agencies should collaborate with community-based organizations, food pantries, and churches to disseminate information about COVID-19 SNAP and WIC policy changes and how to apply for these programs. Finally, to address customer service concerns, long wait times, and inaccessible workers, state and local agencies, along with community organizations, should advocate for additional federal and state funding to support WIC and SNAP workforce expansion amidst the pandemic and beyond.

Research Methodology

Research Questions

What are the barriers to accessing, maintaining, and using public assistance programs like SNAP and WIC? How has COVID-19 influenced access to these assistance programs?

We conducted 282 interviews from October 2015 until January 2021. Study participants were recruited through flyers distributed at social service agencies, through the mail, and via recruitment emails. The research team obtained consent to conduct the interviews. Study participants who were program beneficiaries received a \$30 cash incentive for participating in the study.⁶ We interviewed 57 staff members across SNAP and WIC and 225 program participants. Table 1 details select characteristics of study participants.

Table 1. Staff Member and Program Participant Characteristics

	Staff Members (n=57)	Program Participants (n=225)
Age*		
Years	43	34
Gender**		
Female	51 (89.5%)	212 (94.2%)
Male	6 (10.5%)	13 (5.8%)
Race and Ethnicity² **		
Black	31 (54.4%)	155 (68.9%)
White	24 (42.1%)	65 (28.9%)
Hispanic	5 (8.8%)	28 (12.4%)
Asian	1 (1.8%)	0 (0.0%)
Education**		
High School	2 (3.5%)	-
Some College	11 (19.3%)	-
Associate's	20 (35.1%)	-
Bachelor's	16 (28.1%)	-
Master's	8 (14.0%)	-
Employment**		
Employed	57 (100%)	96 (42.7%)
Tenure*		
Years	6.6	-
Programs**		
WIC	23	-
SNAP/Medicaid/	34	-
Work First		
Number of Children*		
Total	-	2.4

* [mean] ** [n (percentage)]

⁶ Given COVID-19 restrictions, we began to conduct interviews over the phone in March 2020. Study participants received a \$30 e-gift card for participating in an interview.