



Bridging Services: Food & Nutrition Support

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1.0 Overview: Supporting Family Access to Nutritious Food

This guide serves as a roadmap for improving food security among Medicaid-insured children enrolled in the NC Integrated Care for Kids (NC InCK) Model. The guide begins with an introduction to food insecurity in the US., highlights your role as a Family Navigator, and outlines existing support resources in each of the five NC InCK counties (Alamance, Durham, Granville, Orange, Vance).

1.1 What is Food Insecurity?

Food insecurity is a critical threat to the health of American children. It is a problem shared by rural, suburban, and urban communities. While phrases like “the fight against hunger” may be familiar, food insecurity in the US is more varied and nuanced than missing meals or experiencing hunger. Food insecurity in the US is an economic problem with underlying causes larger than the challenges faced by any one family. Food insecurity is a shared societal problem that requires strategic intervention, continued education, and advocacy. American families who are food insecure live with the challenges of low household income and low cumulative wealth. These two factors are symptoms of the root causes of food insecurity in the U.S. — racism, low wages, and high housing costs.¹

Did you know?

In 2019, North Carolina had the 9th highest statewide level of child food insecurity in the United States.²

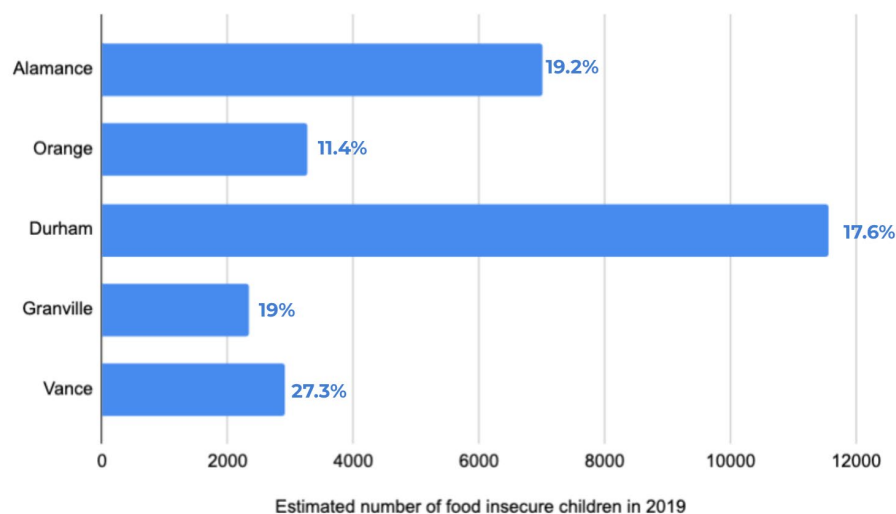
Across the five NC InCK service counties, we expect that about 20% of households with children experience some level of food insecurity (see Figure 1).

A family is considered “food secure” if their food supply is reliably and consistently:

- Nutritious
- Affordable
- Physically accessible
- Culturally appropriate.¹

When one or more of these factors affect either the quantity or quality of food that a family consumes, the family is considered to be “food insecure”.

Figure 1. Estimated levels of child food insecurity across the five NC InCK service counties



Data source: Feeding America, Mind the Meal Gap, map.feedingamerica.org 2

Note: Data reflect 2019 estimates and do not include increased food insecurity rates experienced during the COVID-19 pandemic.

Childhood food insecurity affects several domains of health, including developmental trajectories, cognitive performance, social-emotional health, and physical health. Children who experience food insecurity at any age are at risk for poor health outcomes that can continue into adulthood. The prenatal period through a child's second birthday, or the "first 1,000 days", is a critical window of growth and brain development that has life-long implications for health and well-being; food insecurity experienced during this time can be particularly harmful.³

Childhood food insecurity is associated with:

- higher risk for developmental delays⁴
- poorer academic outcomes, including lower reading and cognitive performance⁵
- increased long-term psychological distress and poorer social-emotional health⁶
- increased risk for chronic health conditions such as asthma⁷

In America, households with children experience food insecurity at higher rates than the national average⁸. Other factors associated with increased rates of child food insecurity are households with children under the age of 6, single caregiver households, Black and Hispanic/Latino households, immigrant households, Native American households, and households with a child who has special health care needs.⁹ Many of these trends reflect the impact of decades of discrimination and structural racism in the United States.¹⁰ Despite these trends, health practitioners should not assume which families

might be at risk for food insecurity. All pediatric patients/families should be screened for potential food insecurity.

“Unless you ask, you won’t be able to tell which child is going to bed hungry, and you won’t be able to connect their families to resources, like SNAP, WIC, or food pantries, that will help them get the nutrition they need.”

LEE BEERS, MD, FAAP
President, American Academy of Pediatrics (2021)

Source: SCREEN AND INTERVENE: A Toolkit for Pediatricians to Address Food Insecurity

Children who are food insecure won’t necessarily experience the need to skip meals or limit the amount they eat. Parents and caregivers in food insecure households typically shelter children from missing meals when possible, limiting their own food intake instead.⁸ More often, food insecurity changes the quality and variety of food available at home and limits the amount of fresh fruits and vegetables in a child’s diet. Children, particularly older children, may also experience stress and emotional costs of food insecurity as they witness adults in the household skipping meals or struggling to afford groceries.¹¹ Normalizing conversations about household food needs, demystifying and removing stigma around available benefit programs, and attending to the mental and emotional needs of both parents and children are important components of supporting families facing food insecurity.

Food insecurity may present in a family as:

- Food Anxiety
- Diet Monotony
- Decreased Nutrition Quality
- Inadequate Food Intake

1.2 What Works: The Role of Federal Benefit Programs

Charitable organizations, food pantries, and mutual aid play important roles in local communities. These entities served a critical role in the immediate, emergency response to the COVID-19 economic crisis, particularly while families waited to receive other forms of financial assistance. Community and faith-based support resources can also provide social networks, cultural support, and emotional support. Charitable support can be an important resource for families who face food insecurity but exceed the income limits to be eligible for federal benefit programs. However, charitable giving is not a solution to food insecurity in America.

“No charity in the history of the planet could come up with the \$80 billion for SNAP. It doesn’t make sense to talk about charity alone helping the hungry. It’d be like saying, why not let the military rely on charitable contributions.”

ROSS FRASER

Director of Media Relations, Feeding America

Source: The Seattle Times <https://www.seattletimes.com/nation-world/private-charity-no-match-for-federal-poverty-aid-experts-say/>

In the U.S. federal benefit programs such as SNAP, WIC, and free school meals have the greatest impact on reducing poverty and food insecurity rates. Our modern federal nutrition programs, funded through the US Department of Agriculture, expanded in 1969 as a response to the anti-hunger and anti-poverty advocacy of the Poor People’s Campaign, led by Dr. Martin Luther King, Jr. and the Southern Christian Leadership Conference.¹² While vulnerable to funding cuts associated with political changes, these federal programs have enormous power to reduce food insecurity in America.

Did you know?

SNAP is a federal program, sometimes referred to as “food stamps”. In North Carolina, the program is administered under the name Food and Nutrition Services (FNS). In this guide, we use the term “SNAP” to identify the broader federal program, and “FNS” to refer to the benefit program in North Carolina.

Don’t confuse the federal program SNAP with the North Carolina program Simplified Nutritional Assistance Program. The NC SNAP program is specifically tailored to provide food assistance to older individuals.

Families may also be confused by the two uses of the term SNAP. When using FNS funds to shop for groceries online, families won’t see the term FNS, but will see tags such as “SNAP EBT eligible item”.

In response to the COVID-19 economic pandemic, the American Rescue Plan Act of 2021 increased benefit levels for families receiving SNAP and WIC and funded the Pandemic EBT program, which provides food dollars for families to buy groceries to make up for meals missed when schools are closed.¹³ The impact of the American Rescue Plan Act has been immediate and substantial. The emergency expansion of SNAP and WIC alone is projected to have lifted 2.9 million American children out of poverty in 2021.¹⁴ Although it is not certain whether this increased investment of federal dollars in nutrition programs will continue, the message is clear—federal benefit programs reduce poverty, reduce food insecurity, and increase the health of American families.⁹

1.3 Your Role as Family Navigator

Throughout this guide, we will discuss barriers that families face when considering federal benefit programs, your role as Family Navigator in addressing those barriers, and the studied impacts of federal benefit programs.

Did you know?

Referring patients to federal nutrition programs is the primary intervention recommended by the American Academy of Pediatrics for addressing food insecurity in children.⁹

An estimated 71% of food insecure children in North Carolina live in households that are eligible for federal benefit programs.²

North Carolina has one of the largest federal benefit enrollment gaps in the US.

In 2018, less than 35% of eligible North Carolinians were successfully enrolled in and receiving SNAP benefits.¹⁵

WIC participation rates are substantially lower than Medicaid participation rates, even though Medicaid-insured children (up to age 5) are automatically eligible for co-enrollment in WIC.¹⁶

Federal programs including SNAP, WIC, and school meals currently serve only a fraction of the food-insecure children and families who are eligible to receive benefits. To maximize the impact of federal programs, families need support to learn about, apply for, and utilize nutrition benefits. The [Resource Highlights](#) at the end of this guide provide specific details about federal benefit programs, and suggestions for how to promote those programs within clinic workflows.

2.0 NC InCK Model Goals for Reducing Food Insecurity

2.1 Build Communities of Practice Focused on Food and Nutrition Support

By normalizing conversations around food insecurity, sharing practices, and discussing challenges, NC InCK aims to build a community of health practitioners who support each other with the knowledge and skills needed to meet families' nutrition goals.

2.2 Increase Enrollment in Federal Benefit Programs

Recognizing the impact of federal benefit programs, NC InCK aims to improve patient health outcomes by increasing enrollment in SNAP, WIC, and school meal services.

2.3 Develop Workflows That Support Empowered Families

NC InCK training materials and resources are designed to support Family Navigators as they connect families with locally and culturally relevant programs, resources, and information. Together, we aim to support families who are empowered to set and meet their own nutrition goals and destigmatize conversations around food insecurity and access to benefit programs.

3.0 Creating Safe Spaces for Conversations About Food Insecurity

A family's journey to food and nutrition support is a very personal experience. Each family's perception of support networks is influenced by a number of factors, including their own life experiences, culture, family dynamics, where they live, what languages they speak, and their prior experiences with the medical system and government programs. As you build relationships with families, consider how conversations about food support may be affected by how you approach the conversation and the significance of factors such as fear and shame.

3.1 How Do We Ask Families About Food Insecurity?

Identifying families who face food insecurity is a critical first step in bridging support to food and nutrition services. This identification step, or "screening", is highlighted as a first-order priority by both the American Academy of Pediatrics and the Centers for Medicare and Medicaid Services.

Backed by a large body of research, standardized screening tools have been developed to help identify food insecure families. These screening tools are short sets of questions that are intended to be used with each patient and family. Across the NC InCK network, primary health providers may screen for food insecurity within broader screening questionnaires designed to identify social needs including food, housing, transportation, utilities, and interpersonal safety. However, these varied screening tools all use a standardized 2-question approach to screening for food insecurity, sometimes with slight modifications to the wording. These paired questions (from the Hunger Vital Sign™) listed below¹⁷ were initially developed in 2010 by Children's HealthWatch, and have been extensively researched and promoted across the US in partnership with the American Academy of Pediatrics.¹⁸ In 2017, the Centers for Medicare & Medicaid Services developed the Accountable Health Communities Screening Tool, including the Hunger Vital Sign™ questions to screen for food insecurity.¹⁹ The North Carolina Department of Health and Human Services has an adapted version titled the Social Determinants of Health Screening Questions.²⁰

Primary health providers and health plans within NC InCK are expected to screen participating children/families for food insecurity. Data on the number of children (birth to age 20) screened will be included in the performance data reports submitted to NC InCK each quarter.

Food insecurity screening questions from the Hunger Vital Sign™ screening tool:

- Within the past 12 months we worried whether our food would run out before we got money to buy more. (Often true/ Sometimes true/ Never true)

- Within the past 12 months the food we bought just didn't last and we didn't have money to get more. (Often true/ Sometimes true/ Never true)

Did you know?

Patients who completed the NC DHHS Social Determinants of Health Screening Questions reported that they felt comfortable with the questions asked (94% of surveyed English-speaking patients, 95% of surveyed Spanish-speaking patients).²⁰

Printable copies of the [NC DHHS Social Determinants of Health Screening Questions](#) are available in 8 languages: English, Spanish, Arabic, Chinese (simplified), French, German, Swahili, Vietnamese

A 2018 field study of the DHHS screening tool showed that food support was the most common resource needed. 42% of patients screened positive for food insecurity, and 14% of patients requested resources to address their need.²⁰

How, where, and when standardized screening tools are administered can vary widely among clinics and medical practice groups. The families you support may have been asked these screening questions before you began working with them, and their responses to the screening questions may be indicated in their medical records. The screening questions may have been administered as a paper form or verbally during the clinic visit. Expect that families may be sensitive to how and when standardized screening tools are administered.

TIP: Some social health screening tools include questions about interpersonal safety. It is NOT recommended to administer a tool containing questions about personal safety in a waiting room or in an environment where privacy is a concern. Patients will not be able to honestly answer questions if their abuser is attending the appointment with them.²⁰

Identifying need is a critical first step in supporting families facing food insecurity. A large number of studies have demonstrated the power of standardized screening tools, based on the Hunger Vital Sign™, to identify families' unmet needs. However, factors including misunderstanding, fear, and shame may influence an individual's responses to standardized screening questions. As a Family Navigator, consider additional opportunities to create a safe space for conversations about food insecurity during your time with a family. Families who are already connected to federal benefit programs like SNAP or WIC may additionally benefit from information on online shopping options or partner programs that provide supplemental funds for purchasing fruits and vegetables. In addition, many NC Medicaid Managed Care Health Plans offer network benefits that include food and nutrition support. See the [Resource Highlights](#) section of this guide for more information.

Each family's journey to food and nutrition support will be different and will change over time. Some families facing food insecurity may need to connect with support for housing, child care, or personal

safety before they can shape and prioritize their food and nutrition goals. In addition, the federal benefit programs that provide food and nutrition support (including SNAP, WIC, school meals and summer meals) have experienced temporary policy changes during the COVID-19 pandemic. Among other changes, temporary policy changes have increased the amount of financial benefits that families receive, made allowances for telehealth visits instead of in-person appointments, and expanded free school meals to all children in NC. These temporary policy changes may end before 2023, and families enrolled in benefit programs may need support adjusting as policies change. By creating multiple opportunities and safe spaces for conversations about food and nutrition, you will be able to support families as their goals and needs for food and nutrition support evolve.

4.0 Fear and Shame as Barriers to Access

Cultural and political trends in the U.S. can sometimes create an environment where families are fearful or feel shame when discussing food insecurity or seeking support resources. As a Family Navigator, you can work to reduce these barriers to access by being prepared to address concerns if they arise. Even without prior negative experiences, misconceptions, confusion, and intimidation can be powerful enough to prevent a family from accessing support resources. Here we highlight two persistent issues that may influence a family's perception of available support resources.

4.1 Public Charge

In US immigration law, the term “public charge” has been used to describe an individual who the government has decided “has become [for deportation purposes] or who is likely to become [for admission/adjustment purposes] ‘primarily dependent on the government for subsistence’”.²¹ Public charge tests or lists of criteria are used to evaluate an individual who is applying for a visa to enter the U.S. or for lawful permanent resident status (through a “green card”). The criteria used to determine aspects of public charge have changed numerous times in recent years. In 2019, the policies around public charge were broadened such that participation in federal benefit programs, including SNAP and Medicaid, could be evaluated as part of an individual's visa or green card application. With a transition in presidential administrations, those policies were relaxed as of March 2021.²¹ However, fear and confusion related to the changes in policy were documented as early as 2018, when proposed changes to the public charge policy began to be discussed in public and covered by the media. A study conducted by the Urban Institute documented that one in seven surveyed immigrant families reported that a member of their family had avoided government benefit programs such as SNAP, Medicaid, and housing subsidies for fear of risking future green card status. This effect was magnified for low-income immigrant families, where one in four families reported avoiding services.²² This type of avoidance of federal benefit programs has unfortunately persisted through the COVID-19 economic crisis, even after the 2021 change in federal policy. As a Family Navigator, you can reduce fear and confusion as a potential barrier by helping to clarify policies around public charge and connecting families to professional advocacy groups.

Did you know?

Participation in the following programs will NOT affect an individual's immigration status or immigration application: Medicaid, SNAP, WIC, free or reduced-price school lunches, P-EBT, food banks or shelters, Earned Income Tax Credit (EITC) and child tax credits, stimulus checks from the IRS.

Flyers on the updated March 2021 [public charge policies](#) are available in English, Spanish, French, Vietnamese, and Chinese from the North Carolina Justice Center.

4.2 Shaming Associated with School Meals

"School lunch shaming" refers to practices used by schools or districts in an attempt to collect payment for unpaid school meal charges. These tactics may be directed at parents or at students themselves, and can range from threatening letters to having children with unpaid accounts sit at a different lunch table, stamping their hands, or giving them a different "alternative" meal.²² These practices are common enough nationally that they have garnered media attention, prompted research and policy briefs, and led to the creation of school meal anti-shaming legislation in a number of states. North Carolina does not currently have specific anti-shaming legislation guiding school meal practices.²³ Families do not have to experience shaming tactics directly to be impacted by intimidation or confusion around school meal payments. As a Family Navigator, you can reduce fear and shame as a potential barrier by helping to clarify policies around free and reduced-price school meals.

Did you know?

You can find additional information on school meals in the [School Meals and Summer Meals Resource Highlight](#) at the end of this guide.

Due to the COVID-19 pandemic, the USDA established a waiver allowing schools nationwide to provide free meals to all students. This waiver was extended through the 2021-2022 school year. It may not be extended to the 2022-2023 school year.

Some individual schools within the Alamance, Durham, and Vance County public school districts are able to provide free school meals to all enrolled students through the Community Eligibility Provision²⁴.

Beginning with the 2022-2023 school year, families covered by Medicaid in North Carolina will automatically be eligible for free or reduced-price school lunches. No enrollment or additional paperwork will be required. Announcements on how the program will be administered will be provided by state agencies as the upcoming school year approaches.

5.0 Listening and Learning from Families

Though effective in improving health outcomes and reducing food insecurity, food and nutrition support programs are not perfect. Known shortcomings in these programs become real barriers that prevent

families from accessing and/or fully utilizing the available benefits. Helping families through these barriers to access begins with awareness of common pain points. By creating a space to listen to and learn from families, you will better understand these challenges and the steps that Family Navigators can take to reduce barriers to access.

Table 1. Challenges that families might face while navigating the food resource and food assistance landscape

Challenge	Quote
Lack of information about available programs	"A lot of times we hear 'Yeah, I knew that they were serving free meals at school, but that's not for my family.', when really - it is."
Confusing application process or program details	"It's normally just so many restrictions. If they would relax some of those things and not tie our hands so much, I think it could be a more successful program, as far as feeding kids."
Transportation	"Transportation immediately carries over into the other federal nutrition programs ... it's either how you get the food to the child or the child to the food and transportation is the key to that and if your family is so poor, that they don't even have a working vehicle, they're never going to get a child to a site...If they now have to choose between medicine or fixing that carburetor... they're going to try to get medicine, they're trying to get food to their kids first. Transportation is a really big issue."
Food Choice	"A lot of the folks we serve ... do not [often] find what they would like to get for themselves at a food pantry. It's all this very standard processed stuff and not always culturally appropriate for the families we serve."
<i>Quotes taken from community interviews conducted by the Duke University Early Childhood Action Plan Bass Connections Team.²⁵</i>	

6.0 Develop Workflows That Support Empowered Families

6.1 Review Your Clinic's Approach to Screening for Food Insecurity

Do you know how standardized food insecurity screening questions are administered to families? Where and when during the visit does the screening occur? How are the results documented or charted? Document your own observations and experiences administering screening questions and initiating conversations about food insecurity. What is working well, and what needs to be changed? Are there established avenues to document and discuss observations among clinic staff?

6.2 Familiarize Yourself with Federal Nutrition Support Programs

Review [What Works: The Role of Federal Benefit Programs](#) and the [Resource Highlights](#) sections of this guide. Can you guide families through the main government benefit programs that provide food and nutrition support (SNAP/FNS, WIC, school meals, etc.)?

Review cross-eligibility opportunities. Medicaid-insured children ages 0-5 are automatically eligible for WIC. Beginning with the 2022-2023 school year, Medicaid-insured children will be automatically eligible for and enrolled in free or reduced-price school meals. Pregnant and breastfeeding parents are eligible for insurance-covered electric breast pumps through WIC or directly through certain insurance providers. Many Medicaid-insured families are eligible for NC FNS monthly benefits. See the [Resource Highlights](#) section of this guide for more information.

6.3 Review Food and Nutrition Benefits Available Through NC Medicaid Managed Care Health Plans

Is your clinic part of a NC Medicaid Managed Care Health Plan? Review any insurer-sponsored extra benefits available to families that may support food needs. Many insurers offer cash rewards for attending well-child visits and using health services. Review the details of your health plan's benefit programs. Do you know how families apply for, receive, and shop with these benefits?

6.4 Evaluate the Available Language Support Options

Are paper copies of standardized screening tools, in multiple languages, readily available within the clinic? Are flyers, pamphlets, handouts, and application forms for FNS, WIC, school meals, and community nutrition support programs available in the waiting room and in exam rooms? Are print materials in multiple languages readily available within the clinic? Are you familiar with local community organizations that provide additional language and cultural support for families interested in nutrition services?

6.5 Be Prepared to Support Common Concerns

Review the [Fear and Shame as Barriers to Access](#) section of this guide. Are you prepared to answer initial questions about public charge or immigration concerns? Who would you refer families to for more information?

How might you support a family that expresses hesitation or embarrassment about participating in school meals or grocery shopping using WIC benefits? Can you share program details or relate experiences from other families to help address concerns?

6.6 Track Progress Toward Each Family's Goals

Help families identify short-term goals along the path to accessing and utilizing available benefit programs. Applying for benefits might be an initial goal. Mid-term goals might include becoming comfortable using benefits to buy groceries, or exploring new recipes. Families already enrolled in benefit programs might be interested in maximizing benefits through farmer's market matching programs or free cooking classes. Remind families of new developments, such as the option to shop for groceries online using FNS benefits. Review the [Online Shopping with SNAP/FNS](#) Resource Highlight at the end of this guide.

7.0 Resource Highlight: Breastfeeding Support

Breastfeeding is not always part of our conversations on child nutrition. However, breast milk is the recommended primary source of nutrition for infants. The American Academy of Pediatrics recommends exclusive breastfeeding for about 6 months, followed by continued breastfeeding for 1 year or longer, through the introduction of solid foods. The prenatal period through a child's second birthday is known as the "first 1,000 days". This critical window of growth and brain development has life-long implications for a child's health and well-being.

Like all aspects of a family's food journey, the choice of whether and how long to breastfeed is intensely personal and influenced by a wide number of factors. Breastfeeding may not be a viable option for parents who have undergone mastectomies, are on certain medications, or have histories of sexual trauma. Other families choose not to breastfeed, or encounter significant difficulties when attempting breastfeeding. Many parents lack adequate support to continue breastfeeding as they return to work.

As a Family Navigator, you can support families by sharing information on breastfeeding support resources. Try asking yourself the following questions so that you can better support families that need breastfeeding support.

- How would you answer a family's questions about the nutritional role of breastfeeding during infancy?
- Does your clinic have flyers, handouts, or other materials on breastfeeding to share with families?
- Does your clinic offer a pumping-friendly breastfeeding room for parents?
- Does your clinic have flyers and signage that welcome families to breastfeed wherever they choose while in the clinic?

TIP: Help breastfeeding parents understand their rights. North Carolina state law specifies that a woman is allowed to breastfeed, including exposing nipples, in any public or private location, and that breastfeeding does not violate indecent exposure laws. Federal law requires employers to provide accommodations for breastfeeding mothers. For more information, as well as posters in English and Spanish, visit the [Department of Labor's Break Time for Nursing Mothers](#) page.

TIP: NC DHHS has developed a [website](#) for breastfeeding parents who work outside of the home. Materials available from Work Well NC include templates for letters of support that pediatricians can complete to inform a parent's employer of their need to breastfeed and their workplace rights. Find those templates within the toolkit [Making It Work: Advocating for Breastfeeding Accommodations](#).

Table 2. Local Breastfeeding support

State Breastfeeding Support	
WIC provides breastfeeding support, peer counseling, and breast pump supplies. See the Resource Highlight on WIC for clinic information in each county.	
The North Carolina Breastfeeding Coalition maintains an expanded directory of resources .	
Alamance	
La Leche League of Alamance County	
Twitter: @AlamanceLLI	
Peer support, breastfeeding meetups, and lactation guidance	
Orange	
La Leche League of Chapel Hill	Women's Birth and Wellness Center
Facebook: LLLoFCH	Breastfeeding Basics parent education classes offered. Classes are free for families on Medicaid. Registration is required. During COVID, virtual classes have been held on Zoom.
Peer support, breastfeeding meetups, and lactation guidance.	
DURHAM	
Breastfeed Durham	La Leche League of Durham (3 chapters)
Local lactation support directory	1st Wednesday Morning Group
Black Breastfeeding	2nd Monday Evening Group
LGBTQ+ Human Milk Feeding	3rd Thursday Morning Group
A Healthier, More Welcoming Durham, Fostering First Food Equity	3 rd Saturday Morning Group https://llldurham.org/meetings/durham-saturday/

Table 3. Access to breast pumps through NC Medicaid Managed Care Health Plans

Health Plan	Contact information	Additional information
Blue Cross Blue Shield - Healthy Blue	Member Services Phone: (844) 594-5070	Blue Cross Blue Shield partners with MedLine@Home to process breast pump requests. MedLine@Home Phone: (833) 718-2229 Hours: Monday - Friday, 8:00 AM - 5:00 PM
United Healthcare - Community Plan of North Carolina Medicaid	Member Services Phone: 1-800-349-1855	United Healthcare partners with MedLine@Home and Aeroflow to process breast pump requests. MedLine@Home Phone: (833) 718-2229 Hours: Monday - Friday 8:00 AM - 5:00 PM Aeroflow Phone: 1-844-867-9890 Hours: Monday – Friday, 8:00 AM - 5:30 PM
AmeriHealth Caritas	Member Services Phone: 1-855-375-8811	AmeriHealth Caritas North Carolina has a special program for pregnant members called Bright Start . To enroll, call 1-833-475-2262. Hours: Monday – Friday, 8:00 AM - 5:00 PM Parents who join the Bright Start program are eligible for cash incentives: <ul style="list-style-type: none"> • \$10 for joining the Bright Start maternity program while pregnant • \$10 for every other prenatal visit (up to seven per pregnancy) • \$15 for completing a postpartum visit within 21 – 56 days of delivery (one per pregnancy)
Carolina Complete Health	Member Services Phone: 1-833-552-3876	Start Smart for Your Baby® is a program for pregnant and new moms. Carolina Complete Health members get up to \$100 value for an infant car seat, diaper bag, or breast pump. To receive one of these items, complete the form here .

Well Care	<p>Member Services</p> <p>Phone: 1-866-799-5318, Hours: Monday - Saturday, 7:00 AM - 6:00 PM</p>	Benefits include coverage for an electric breast pump.
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8.0 Resource Highlight: School Meals and Summer Meals

8.1 What are School Meals?

Free breakfast, lunch, afterschool snacks, and summer meals are available to children ages 0-18 through a set of USDA federally-funded programs. In North Carolina, these programs are administered by the Department of Public Instruction.

Most schools in North Carolina that participate in the National School Lunch program also offer free and reduced priced breakfast for students. However, school breakfast programs tend to be substantially under-enrolled, and serve far fewer children than school lunch programs do.

During summer months when schools are closed, free summer meals for children are offered by a variety of sponsors including public schools, camps, and community organizations through the Summer Meal Service Program.

8.2 Why Emphasize School Meals?

For families, participation in school meals can reduce both the cost of food and time spent on food labor. For children, participation in school meals has been shown to reduce food insecurity, improve dietary intake, reduce obesity rates, and improve both health and learning outcomes.

TIP: For more information about the benefits of school lunch, review this [guide](#) from the [Food Research & Action Center](#).

8.3 Eligibility for School Meals

Children who live in households that are currently enrolled in SNAP, Temporary Assistance for Needy Families (TANF), or Food Distribution Program on Indian Reservations (FDPIR) are automatically eligible for free school meals.

Beginning with the 2022-2023 school year, families covered by Medicaid in North Carolina will automatically be eligible for free or reduced-price school lunches. No enrollment or additional paperwork will be required. Announcements on how the program will be administered will be provided by state agencies as the upcoming school year approaches.

Special Considerations during COVID-19

During the pandemic, summer meals have been offered as prepackaged grab-and-go lunches that families could pick up at designated locations. Children did not have to be present for family members to collect meals. The option to pick up meals was granted through a special waiver of program requirements. This waiver is set to expire on June 30, 2022, and it is not yet known how summer meal service will be affected. If the waiver is not extended, children would be required to eat meals on site at the location where meals are served. This on-site requirement can be a barrier to participation for some families.

8.4 Help Families Connect with School Meals

Families should connect with the nutrition team at their local public school for more information about school meals. Menu information can be found on each school district's website.

Families can also contact district nutrition teams with questions about summer meals, even if their child is not enrolled in the public school district.

Did you know?

The national nonprofit initiative [No Kid Hungry](#) operates a texting hotline to help families locate free summer meals for children. This is a free service.

Families can receive information about meal locations near them by texting "FOOD" or "COMIDA" to 304-304.

Given the likelihood of program changes for summer meal programs in 2022, families should call ahead to confirm the location, hours, and eligibility requirements of local summer meal options.

Table 4. School Nutrition Contacts

County	School District	Contact information
Alamance	Alamance-Burlington School System	Pamela Bailey, Executive Director of School Nutrition Program Phone: 336-438-4000 ext. 20061 Email: Pamela_bailey@abss.k12.nc.us Nutrition Department Phone: 336-570-6080
Orange	Orange County Schools	Sara Pitts, Child Nutrition Services Director Phone: 919-732-8126 x 16501 Email: sara.pitts@orange.k12.nc.us
Orange	Chapel Hill-Carrboro City Schools	Director of Dining 919-967-8211 ext. 28219
Durham	Durham Public Schools	James Keaton, Director, School Nutrition Services Phone: 919-560-3657 Email: James_Keaton@dpsnc.net
Granville	Granville County Public Schools	Patricia Crute, Director, Child Nutrition Phone: 919-693-9349 Email: crutep@gcs.k12.nc.us
Vance	Vance County Schools	Phyllis W. Newcomb, Director, School Nutrition Email: pnewcomb@vcs.k12.nc.us Main District Line 252-492-2127

9.0 Resource Highlight: North Carolina Food and Nutrition Services (FNS) Monthly Benefits

9.1 What is FNS?

The USDA federally-funded Supplemental Nutrition Assistance Program (SNAP, but also referred to as “food stamps”) is administered in North Carolina under the program name Food and Nutrition Services (FNS). The FNS program provides cash benefits to income-eligible households. The cash benefits can be used to purchase approved SNAP-eligible food items.

TIP: Program names can be confusing for both families and for professional advocates. North Carolina administers a state program called SNAP, which stands for Simplified Nutritional Assistance Program. This NC SNAP is different from the federal program SNAP. In North Carolina, the SNAP program provides food assistance to elderly individuals receiving Supplemental Security Income (SSI). To learn more about SNAP in NC, visit the [NCDHHS website](#).

SNAP/FNS cash benefits are distributed to participants using Electronic Benefit Transfer (EBT) debit cards. Monthly cash benefits can be used to purchase a wide variety of foods from participating grocery stores and retailers, including seeds and food plants for home gardens. One notable exception is that families cannot purchase hot food items with SNAP/FNS benefits. This hot food exclusion is confusing and frustrating to many families that participate in the program. A classic example of this policy is the roast chicken scenario. A family could not use SNAP/FNS benefits to buy a roast chicken sold as hot food at a grocery store. The family could, however, purchase the same roast chicken if it was sold the next day as a refrigerated item. This barrier to accessing hot foods could change. In December 2021, a bipartisan bill titled the SNAP PLUS Act of 2021 (H.R. 6338) was introduced in the US House of Representatives. The bill is currently being reviewed and has not yet been voted on.

9.2 Why Emphasize SNAP/FNS?

The federal SNAP program is effective at lifting families out of poverty, improving child nutrition and health outcomes, and stimulating local economies. Living in a household that receives SNAP benefits can yield positive health outcomes that span a lifetime, from improved infant birth weight to lower likelihood of developmental delays and reduced adulthood incidence of obesity, high blood pressure, heart disease, and diabetes.

“SNAP lifted 3.2 million Americans out of poverty in 2018, according to the Census Bureau’s Supplemental Poverty Measure. SNAP is nearly as effective as the Earned Income Tax Credit in lifting families above the poverty line, and far more effective than any other program in lifting families out of deep poverty.”

-FOOD RESEARCH & ACTION CENTER (FRAC)

Source: Food Research & Action Center, SNAP Strengths guide

TIP: Want to learn more about the studied impacts of the federal SNAP program? Explore [this guide](#) from the Food Research & Action Center.

9.3 SNAP/FNS Eligibility

SNAP/FNS eligibility and benefit amounts are based on income and household size. While Medicaid-insured individuals are not automatically eligible for SNAP, many Medicaid-enrolled families will meet the income requirements for participation. Determining whether a family meets the income requirements for SNAP/FNS can be complex. For official eligibility determinations, families should always contact their county Department of Social Services office directly. The section below describes the general eligibility requirements and calculations.

Check immigration requirements:

- Individuals receiving Food and Nutrition benefits must be US citizens or immigrants admitted to the United States under a specific immigration status.
- In general, lawfully present immigrants, refugees, and asylees who have been in the U.S. for at least five years are eligible for FNS benefits.
- There is no waiting period requirement for children under 18 years old.
- For detailed information visit the [USDA Food and Nutrition Services website](#).

Find your total household income:

- Add up all sources of income earned by adults in the household.
 - Earned wages, Social Security benefits, unemployment insurance, and child support all count as income.
- Compare your total household income to the 200% Maximum Gross Income Limit from the FNS eligibility table below.
- If your combined household income falls below the 200% limit, then your family may qualify for FNS benefits, depending on your total household expenses and assets.
- If your household income is greater than the 200% limit, your family is not eligible for FNS benefits.

Add up your eligible household expenses:

- Households with 1-3 people can take a standard deduction of \$177.
- Larger households have higher standard deductions:
 - \$184 (4 members)
 - \$215 (5 members)
 - \$246 (six members)
- Add up monthly expenses such as child care and recurring medical expenses.
- Add in 20% of any earned income or wages (Example: If you earn \$1000 a month in wages, you can add 20% of that amount, \$200).
- Find the total amount of your standard deduction, expenses, and earned wages deduction. Subtract this total from your total household income. Compare the result to the 130% Maximum Gross Income Limit from the FNS eligibility table.
- If your combined household income falls below the 130% limit, then your family will likely qualify for FNS benefits, depending on your total household assets.

- If your household income is greater than the 130% limit, your family may be eligible for FNS benefits if other deductions apply.

Identify your household assets.

- Does your household include someone who is age 60 or older or someone who has a disability?
- If yes, your household can have up to \$3,750 in assets and still qualify for FNS benefits.
- If not, your household can have up to \$2,500 and still qualify for FNS benefits.
- Assets include cash in checking or savings accounts.
- The value of your home, personal property, and your retirement savings are not counted as assets for this purpose.

TIP: To learn more about North Carolina FNS eligibility and program information, visit the [NCDHHS website](https://www.ncdhhs.gov).

Figure 2. Income eligibility limits and benefits amounts for the North Carolina Food and Nutrition Services program

HOUSEHOLD SIZE	130% MAXIMUM GROSS INCOME LIMIT	200% MAXIMUM GROSS INCOME LIMIT	MAXIMUM BENEFIT ALLOTMENT
1	\$1,396	\$2,148	\$250
2	\$1,888	\$2,904	\$459
3	\$2,379	\$3,660	\$658
4	\$2,871	\$4,418	\$835
5	\$3,363	\$5,174	\$992
6	\$3,855	\$5,930	\$1,190
7	\$4,347	\$6,688	\$1,316
8	\$4,839	\$7,444	\$1,504
Each Additional Member	(+492)	(+758)	(+188)

NOTE: The income limits and benefit amounts shown are effective through September 30, 2022.

Source: www.ncdhhs.gov/FNS

Did you know?
Families can expect to receive FNS benefits within 30 days of their application date.
Families with urgent circumstances may qualify for food assistance starting no later than seven days from their application date.
FNS benefits can be used to shop online with Aldi, Amazon, BJ's Wholesale Club, Carlie Cs, Earth Fare, Food Lion, Publix, Walmart, and other retailers. See the Online Shopping with SNAP/FNS Benefits Resource Highlight for more information.

9.4 Help Families Apply for FNS

There are three ways that families can apply for FNS benefits:

Table 5. Ways families can apply for FNS benefits

Method	Additional information
Applying in person at the Department of Social Services (DSS) office in your county	Call your county office before you visit to confirm hours of operation during the COVID pandemic.
Completing a paper application and delivering it to your county DSS office by mail or in person	Find the application form online. The form is only available in English on the NCDHHS website. The paper application is 8 pages long.
Use an electronic application through the NC ePass website .	This website is available in English and Spanish, and it works on computers and mobile phones. Check out the video overviews of the ePass application on the NCDHHS website . Having trouble applying online through the ePass website? Call the FNS Customer Service Center at 1-866-719-0141 or 1-877-452-2514 (TTY Dedicated) Hours: 7 days a week from 7:00 AM - 10:30 PM, including state holidays.

Special Considerations during COVID-19

FNS offices may have limited open hours during the COVID-19 pandemic. Some services may be available by phone as an alternative to in-person visits. Families should call their [county Department of Social Services](#) for current hours of operation.

The maximum benefit amount for households receiving Food and Nutrition Services increased during the pandemic from October 1, 2021 through September 30, 2022. If federal policy reverts to a lower benefit amount as of October 2022, families will need additional support as they transition to lower benefit levels.

Documents needed to apply for FNS Benefits:

The information below is from the NC DHHS form DSS-8650A: Notice of Information Needed to Complete your Food and Nutrition Services (FNS). [FNS forms](#) are available online in Arabic, French, German, Hmong, Korean, Spanish, Vietnamese, and Mandarin Chinese. On the DSS site, search for forms DSS-8650A and/or DSS-8650. For some languages, only form DSS-8650 is available.

Table 6. Applying for FNS benefits

Families who need an interpreter: Call (866) 719-0141. Interpreter services are free.		
County	Address and contact information	Hours
Alamance County DSS	Phone: (336) 229-2910 Address: North Graham Hopedale Rd Suite C Burlington, NC 27217	8:00 AM -5:00 PM, Monday - Friday
Durham County DSS	Phone: (919) 560-8000 Address: 414 East Main Street Durham, NC 27702-0810	7:30 AM to 5:30 PM, Monday - Friday Main lobby: 8:00 AM to 5:00 PM, Monday-Friday
Granville County DSS	Phone: (919) 693-1511 Address: 410 West Spring Street Oxford, NC 27565	8:30 AM-5:00 PM, Monday- Friday
Orange County DSS	Phone: (919) 245-2800	8:00 AM -5:00 PM, Monday - Friday

Address:
113 Mayo St.
Hillsborough, NC 27278

[Vance County DSS](#)

Phone: (252) 492-5001

8:30 AM-5:00 PM, Monday-Friday

Address:
500 North Beckford Dr
Suite C
Henderson, NC 27536

10.0 Resource Highlight: Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)

10.1 What is WIC?

WIC is a supplemental nutrition program for women, infants, and children (up to 5 years old) funded by the United States Department of Agriculture. In North Carolina, the program is administered by the Department of Health and Human Services and managed by local agencies. Families should contact their [county-specific agency](#) for application and program questions.

WIC is different from other cash benefit programs. WIC food benefits are intended to supplement a family's diet with nutritious food, and are not designed to support all of a family's monthly food needs. Families may be required to attend WIC appointments and occasional nutrition classes to receive benefits. Learning which foods are WIC eligible and how to shop using WIC benefits can be intimidating and frustrating. This is an area where families can benefit from support and guidance from a Family Navigator.

Food support through WIC occurs primarily as monthly allowances of a limited number of food groups (examples: milk, eggs, bread, cheese, juice, peanut butter, baby food). Rather than a cash benefit, the allowance for most food items is structured as a specific monthly quantity (example: one dozen eggs). Monthly cash benefits are provided for purchasing fruits and vegetables. Additional cash vouchers (\$30 per eligible family member per year) are available for buying produce from participating farmers markets. For more information, visit the [NCDHHS WIC Program webpage](#).

TIP: WIC benefits are accepted at approved independent grocery stores as well as certain large grocer locations (examples include: Food Lion, Harris Teeter, Publix, Target, and Walmart). Use this [online tool](#) to find nearby grocery stores and pharmacies that accept WIC benefits.

TIP: Prepare to support families shopping with WIC by exploring the [WIC Healthy Food Shopping Guide](#).

Did you know?

Breastfeeding mothers receive additional food allowances, peer support for breastfeeding, and can request breast pumping equipment through WIC.

North Carolina offers electronic WIC benefits managed through a debit card and mobile app.

WIC North Carolina does not have an online application. Families will need to meet with WIC staff in person or by phone during business hours to complete the application.

Online shopping is not currently available for WIC benefits.

WIC benefits cannot be used to purchase diapers.

10.2 Why Emphasize WIC?

Participation in WIC improves health and wellness outcomes for mothers and children. The health impacts of the WIC program have been extensively researched. WIC participation has been shown to improve the immediate health of mothers, babies, and children. Children who participate in WIC have diets with a greater variety of foods, more fruits and vegetables, increased iron-rich foods, and reduced intake of added sugar. These dietary improvements are associated with positive health outcomes such as lower rates of anemia and nutritional deficiency in children participating in WIC.

WIC participation also supports positive long-term outcomes for families. Maternal participation in WIC improves early childhood language development and is associated with stronger cognitive development in toddlers. WIC participation has also been shown to reduce rates of childhood obesity.

TIP: Explore this [summary report](#) from the Food Action & Research Center (FRAC) to learn more about the studied impacts of WIC.

10.3 WIC Eligibility

WIC provides food benefits to mothers and to children. Women can receive food benefits during pregnancy, and following birth for the first year (if breastfeeding) or six months (if not breastfeeding). Children can receive benefits from ages 0-5.

Family members insured through Medicaid automatically meet the income requirements to receive WIC benefits, and can use their Medicaid card as the primary document supporting their WIC application.

Did you know?

Fathers, step-parents, foster parents, grandparents, and other caregivers can apply for WIC benefits to support children in their care.

Anyone living in North Carolina can apply for WIC, and there are no citizenship requirements.

Medicaid-insured individuals automatically meet the nutritional need criteria required to be eligible for WIC.

10.4 Help Families Apply for WIC

Currently, WIC clinics in North Carolina are, generally, not set up for electronic referrals through NC CARE 360. Instead, WIC recommends that PHPs and family advocates use the [online referral form](#) to connect families with WIC. As a Family Navigator, you can complete this online referral on behalf of families with their verbal permission. The online referrals are received immediately by WIC staff. Families will receive a follow-up phone call to complete the application process.

TIP: Access the online WIC referral form [here](#).

WIC collects basic health information for each enrolled child. You can help a family save time by sharing available health information with the relevant WIC clinic. The [WIC Exchange of Information form](#) can be faxed directly to the relevant [WIC clinic location](#).

TIP: The fillable [WIC Exchange of Information](#) is available online.

Family Navigators can also assist when children need access to specialized nutrition support through WIC. Requests for medical prescriptions for a particular brand/type of infant formula or whole milk instead of skim milk for a child can be prepared using the [WIC Medical Documentation forms](#) and faxed to the relevant [WIC clinic](#).

TIP A fillable [WIC Medical Documentation form](#) is available online.

TIP: To see a list of WIC-approved infant formula options, visit the [NCDHHS website](#).

Special Considerations during COVID-19

WIC offices may have limited open hours during the pandemic. Families should call the [local WIC office](#) in their county for current hours and program information.

During the COVID-19 pandemic, families can apply for WIC by phone with their [local WIC clinic](#). Children do not have to be present during the application call.

Food supply chain shortages have made shopping difficult for WIC families during the pandemic. For food item allowances, substitutions are typically not offered when approved brands or food items are out of stock. In this case, a family may be unable to use some of their monthly WIC food benefits. The USDA has approved some substitutions during the pandemic. Families should call their [local WIC office](#) for more information.

Documents needed to apply for WIC benefits:

Other types of documents can be used to apply for benefits. For more information, visit the [NCDHHS WIC webpage](#).

- Proof of identification (for all individuals applying for WIC): current Medicaid card
- Proof of residence (where you live; for all individuals applying for WIC): current Medicaid card
- Proof of income (for all household members with income): current Medicaid card

Table 7. Local WIC Contacts

To apply for benefits, call your local WIC agency or submit a request online .			
County	Health Department	Contact information	Hours
Alamance	Alamance County Health Department	Phone: (336) 570-6745 Fax: (336) 570-6535 Address: 319 N. Graham-Hopedale Rd Burlington, NC 27217	8:00 AM-5:00 PM, Monday-Friday
Durham	Durham County Public Health Department	Phone: (919) 956-4042 Address: Lincoln Community Health Center 1301 Fayetteville St. Durham, NC 27717-2119	8:00 AM-5:00 PM, Monday-Friday

Granville	Granville-Vance District Health Department	Phone: (919) 693-1333 Fax: (919) 693-8517 Address: 1036 College St. Oxford, NC 27565	8:30 AM- 5:00 PM (closed 12:00 PM-1:00 PM during lunch hours), Monday-Friday
Orange	Orange County Health Department	Piedmont Health Services (located within the Orange County Health Department) Phone: (919) 245-2422 eFax: (919) 951-7517 Address: 300 W. Tryon St. Hillsborough, NC 27278	8:00 AM-5:00 PM Monday, Wednesday, Thursday 8:00 AM -6:30 PM Tuesday 8:00 AM-1:00 PM Friday
Orange	Orange County Health Department	Carrboro Community Health Center (Piedmont Health Services) Phone: (919) 913-1698 eFax: (919) 951-7516 Address: 299 Lloyd St. Carrboro, NC 27510	8:00 AM-8:00 PM Monday 8:00 AM-5:00 PM Tuesday and Wednesday 8:00 AM-6:30 PM Thursday 8:00 AM-1:00 PM Friday
Orange	Orange County Health Department	WIC @ UNC Family Medicine Center Phone: (919) 695-6517 eFax: (984) 215-4731 Address: 590 Manning Drive Chapel Hill, NC 27599	7:00 AM-7:00 PM, Monday, Tuesday, Thursday 9:30 AM-7:00 PM, Wednesday 7:00 AM-5:00 PM, Friday 8:00 AM-12:00 PM, Saturday
Vance	Granville-Vance District Health Department	Phone: (252) 492-3147 Fax: (252) 492-4219 Address:	8:30 AM- 5:00 PM

		115 Charles Rollins Rd. Henderson, NC 27536	(closed 12:00 PM-1:00 PM during lunch hours), Monday-Friday
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11.0 Resource Highlight: Selected Local Support Resources

Table 8. Local Support Resources

Organization	Contact information	Hours	Additional Information
Alamance County			
Southern Alamance Family Empowerment Food Pantry (SAFE)	Lynne Pierce, Executive Director Phone: (336) 525-2120 Address: 5950 HWY 87 S. Graham, NC 27253	Food distributed Tuesday and Saturdays at 9:00 AM <i>NOTE: SAFE is closed the first & fifth Saturday of every month.</i>	You receive: Non-perishable items, perishable items, fruits, vegetables, and breads. Pet food, paper products, and/or cleaning supplies are sometimes available. Kids bags are offered for remote learners every Thursday from 9 AM-11 AM. How often can I visit?: Once a month; arrive at 9 AM to receive food
Salvation Army	Phone: (336) 227-5529 Address: 812 N Anthony St Burlington, NC 27217	Food distributed Monday-Friday, 1:00 PM-3:00 PM	What to bring: Proof of ID You receive: Fresh items available Monday, Wednesday, and Friday How often can I visit?: Once a week; You can receive an emergency box every 90 days
Al Aqsa Food Pantry	Phone: (336) 350-1642 Address: 1908 S Mebane St. Burlington, NC 27215	Second Saturdays of every month 3:00 PM-5:00 PM	What to bring: Call 2-3 days beforehand to reserve a spot. On the phone you will be asked how many individuals are in the household and about your unemployment or low income status. Bring an ID when picking up food. You receive: Fresh foods (produce, chicken, meat), some canned goods

			How often can I visit?: By appointment only
Durham County			
Durham Community Food Pantry	<p>Phone: (919) 286-1964</p> <p>Address: 2020 Chapel Hill Rd. Suite 30 Durham, NC 27707</p>	<p>Wednesday 10:00 AM-1:00 PM and 5:00PM-7:00 PM</p> <p>Thursday 10:00AM to 1:00 PM</p>	<p>What to bring: For your first visit, bring a form of ID (a utility bill with your name on it will do)</p> <p>You receive: Three boxes of food: Box 1 will contain dry/ canned goods Box 2 will contain produce Box 3 will contain perishables (meat & bread). The pantry occasionally serves hot meals and sometimes has baby food and toothbrushes available. This location has diapers available.</p> <p>Who is eligible for services? Residents of Durham, Orange, Alamance, Granville, and Vance Counties</p> <p>How often can I visit? One visit per month</p>
Duke Memorial United Methodist West End Mobile Market	<p>Phone: (919) 683-3467</p> <p>Email: mobilemarket-leaders@dukememorial.org</p> <p>Karalyn Colopy, Email: karalyncolopy@gmail.com</p> <p>Cullen McKenney, Email: cullenmckenney@dukememorial.org</p> <p>Address: Duke Memorial United Methodist</p>	<p>Every third Saturday of the month, 10:30 AM-12:30PM</p>	<p>What to bring: No documentation is required.</p> <p>You receive: The available food is pre-sorted into household boxes by volunteers. Typically bags include a mix of fresh produce and dry goods. Occasionally, there is meat available.</p> <p>Who is eligible for services? Anyone can receive food and all are welcome</p> <p>How often can I visit? One visit per month</p> <p>Notes: Due to the COVID-19 pandemic, boxes are distributed by drive-up. People typically start arriving to sit in their cars, in line, before 10:00 AM. Boxes are distributed first come first served. You may be asked to complete</p>

	Church 504 W Chapel Hill St Durham, NC 27701		a survey as you receive food.
Granville County			
Boys and Girls Club in Granville (3 Locations)	Phone: (919) 482-0851 and (919) 960-0036 ext. 107 Address: Oxford Club Address: 105 West Street Oxford, NC, 27565 West Oxford Elementary School Address: 412 Ivey Day Rd Oxford, NC 27565 Creedmoor Elementary School Address: 305 E Wilton Ave Creedmoor, NC 27522	Monday-Friday, 2:30PM-6:30PM *The West Oxford and Creedmoor locations are currently CLOSED *	What to bring: Membership Application You receive: Participating students receive a daily hot meal Who is eligible for services? In order to become an enrolled student at the club, families first need to fill out a Membership Application . How often can I visit? Students may attend the club Monday-Friday.
Orange County			
Table	Phone: (919) 636-4860 Email: info@tablenc.org Address: 209 E Main St, Carrboro, NC 27510	TABLE@Home Program: Delivers food Tuesday-Thursday every week (families must live in Orange County to receive deliveries). Shopping the Shelves Program: Tuesday-Thursday, 10:00 AM-12:00 PM and 2:30	What to bring: An application is required, and you will be asked to complete a permission form (TABLE keeps this form on file after your first visit). You receive: About 10 meals and snacks in one bag; Healthy non-perishables (examples: oatmeal, individual cereal, peanut butter, pasta, tomato sauce, canned tuna/chicken, granola bars, and milk or juice) and

		<p>PM-5:00 PM; Families may shop the shelves on Friday by appointment only. Families may shop the shelves on Mondays as well, though less fresh food is available that day.</p>	<p>fresh produce (examples: baby carrots, apples, oranges, blueberries, sweet potatoes, lettuce, zucchini, and bell peppers)</p> <p>Who is eligible for services? Families with children</p> <p>How often can I visit? The Shopping the Shelves Program allows families to come once a week.</p> <p>Notes: The food delivery program is restricted to families that live in Orange County. Children who attend Chapel Hill-Carrboro and Orange County schools are additionally eligible for summer meals programs.</p>
Inter-Faith Council for Social Service	<p>Phone: (919) 929-6380</p> <p>Email: info@ifcmailbox.org</p> <p>Address: 10 W. Main Street Carrboro, NC 27510</p>	<p>By appointment only</p>	<p>You receive: Groceries (fresh and canned food), including produce, pantry staples, and personal hygiene items from the Community Market are available Monday-Friday by appointment. Diapers are distributed on the second Friday of the month. Please call 919-929-6380 and press "0" to schedule a pick-up time.</p> <p>Who is eligible for services? Families must be a member of the Market.</p> <p>How often can I visit? Members of the Market are welcome to receive groceries once a month.</p> <p>Notes: Check for updates on Facebook.</p>
RENA Community Center Food Pantry	<p>Phone: (919) 918-2822</p> <p>Address: 101 Edgar St, Chapel Hill, NC 27516</p>	<p>Every third Saturday of each month from 10:00 AM-3:00 PM</p>	<p>What to bring: No ID required. You will be asked to fill out a form when you receive food.</p> <p>You receive: Bags of canned goods (examples: greens, corn, beans, soup) and perishable items (examples: lettuce, milk, ground beef, bacon, and chicken)</p>

			<p>Who is eligible for services? The RENA Center primarily serves neighbors in the Rogers Rd. and Eubanks neighborhoods in Chapel Hill.</p> <p>How often can I visit? Once a month.</p> <p>Notes: Bags of food are distributed on a first-come first-served basis.</p>
Vance County			
Salvation Army	<p>Phone: (252) 438-7107</p> <p>Shadiyah Solomon Email: Shadiyah.solomon@uss.salvationarmy.org</p> <p>2292 Ross Mill Rd Henderson, NC 27537</p>	<p>Monday-Thursday, 9:00AM-12:00 PM and 1:00 PM-4:00 PM</p> <p>Friday, 9:00 AM-12:00 PM and 1:00 PM-2:00 PM</p>	<p>What to bring: To apply in person, bring a picture ID and social security card or birth certificate for each person in the household. Bring proof of income if your household is not on SNAP/FNS benefits.</p> <p>How often can I visit? Once every three months</p>

12.0 Resource Highlight: Online Shopping with SNAP/FNS Benefits

Certain grocery stores in North Carolina now offer online shopping for customers using FNS monthly benefits and an EBT card to purchase food. This online purchasing program will continue to expand in 2022 and 2023 to include additional grocery retailers.

Here are some common terms used in these online shopping platforms:

- **SNAP:** When shopping online using your monthly FNS benefits, look for the term “SNAP”. Food and Nutrition Services (FNS) is the program in North Carolina that distributes monthly benefit funds for groceries. At the national level, this program is referred to as SNAP.
- **EBT card:** The term EBT refers to the electronic benefits debit card that your monthly FNS benefit funds are loaded on to. To shop online using an EBT card, you will need both the card number and your pin number.

- **EBT SNAP-eligible items:** When shopping online, food items eligible for purchase with NC FNS funds will be identified with tags like “EBT SNAP eligible”.

TIP: When you finish shopping and go to check out, the online store will show you the total cost of EBT SNAP-eligible items in your cart, and may show you the available balance on your EBT card. Your EBT card balance must be greater than the amount of an individual item for EBT to be used for payment.

Table 9. Online grocery stores that accept SNAP/FNS benefits

ALDI
<p>HOW TO:</p> <ol style="list-style-type: none"> 1. Visit www.shop.aldi.us and create a free account, or use the Instacart app to shop with ALDI. 2. Enter your EBT card information into your ALDI account or on the Instacart app. 3. Add EBT SNAP-eligible items to your cart. 4. During checkout, select how much of your benefits you would like to spend on the order.
<p>Delivery fee: Extra fees (taxes, tips, etc.) may apply when purchasing items that are not EBT SNAP-eligible items.</p>
<p>Notes: You can have your online ALDI order delivered or you can select Curbside Pickup. Enter your zip code while shopping to check the options offered by your local store. The ALDI site does not let shoppers filter for EBT SNAP-eligible items. You won’t see information on which items are SNAP EBT-eligible until you check out.</p>
AMAZON
<p>HOW TO:</p> <ol style="list-style-type: none"> 1. Visit www.amazon.com/snap. 2. Create a free Amazon account. 3. Add an EBT card during checkout or to your virtual wallet on Amazon. 4. Add EBT SNAP-Eligible Items to your cart. 5. During checkout, select how much of your benefits you would like to spend on the order.
<p>Delivery fee: Amazon Fresh offers free delivery on orders \$35 or more (\$50 in select regions). Amazon Prime members have access to free delivery, no minimum order. Shoppers with a free Amazon account (not Prime) are offered free delivery on orders \$25 or more.</p>
<p>Tags used: SNAP EBT Eligible Item</p>
<p>Notes: There is an option to pay in cash if you are picking up an online order in-person. There is an option to schedule a preferred delivery time. SNAP benefits cannot be used to pay for delivery or shipping fees. If you do not meet the minimum amount for your order (listed above), you have to pay out of pocket for delivery fees.</p>

BJS WHOLESALE

HOW TO:

1. Visit www.bjs.com/products/online-grocery-shopping.jsp and create a free BJs account.
2. Add EBT SNAP-eligible items to your cart.
3. Enter your EBT card information at checkout.
4. During checkout, select how much of your benefits you would like to spend on the order.

Delivery fee: \$8.99 flat rate shipping when you purchase 3 or more eligible items. Online orders can be picked up in-person at the store for free. The BJs site does not let shoppers filter for EBT SNAP-eligible items. You won't see information on which items are SNAP EBT-eligible until you check out.

CARLIE C'S

HOW TO:

1. Visit www.carliecs.com/shop and create a free Carlie C's IGA account.
2. Choose a store near you.
3. Add EBT SNAP-eligible items to your cart.
4. Enter your EBT card information at checkout.
5. During checkout, select how much of your benefits you would like to spend on the order.

Delivery fee: There is a Carlie C's 2 Go \$25 minimum delivery fee.

Tags used: EBT Cash Eligible and EBT SNAP Eligible

Online orders can be picked up in-person at the store for free.

FOOD LION

HOW TO:

1. Visit <https://shop.foodlion.com/> or download the Food Lion To Go app and create a free account.
2. Enter your zip code and select the closest participating store.
3. Filter for eligible items by tapping Explore, then EBT Eligibility and selecting EBT eligible.
4. Add EBT SNAP-eligible items to your cart.
5. During checkout, select how much of your benefits you would like to spend on the order.

Delivery fee: For orders over \$35, the delivery fee is \$3.99. For orders less than \$35, the delivery fee is \$7.99.

Tags used: EBT eligible

Curbside pickup is available, but this option is not free. A \$1.99 fee is charged for orders over \$35. Orders less than \$35 are charged a \$3.99 fee. SNAP benefits cannot be used to pay these fees.

PUBLIX

HOW TO:

1. Visit www.publix.com/shop-online and create a free Publix account.
2. Choose between delivery, curbside pickup, or in-store pick-up.
3. For delivery or curbside pickup, you will be redirected to the Instacart website:
<https://delivery.publix.com/>
4. Add EBT SNAP-eligible items to your cart.
5. During checkout, select how much of your benefits you would like to spend on the order.

Delivery fee: All orders must be at least \$10 before being eligible for delivery. For same-day orders \$35 or more, the delivery fee starts at \$3.99. Fees vary for one-hour deliveries, club store deliveries, and deliveries under \$35. Instacart Express members get free delivery on orders \$35 or more per retailer.

Notes: Online orders for delivery or curbside pickup must be placed through Instacart. Shoppers using Instacart will see eligible items tagged with the label “EBT”. You can order online for free in-store pickup. With the in-store pickup option, you can choose to pay online or pay in person at the store.

WALMART**HOW TO:**

1. Visit www.walmart.com or download the Walmart app and create a free Walmart account.
2. Select Payment Methods. If your local store accepts EBT Online, you'll see an option to add your EBT card to your account.
3. Add EBT SNAP-eligible items to your cart.
4. At checkout, select the checkbox to pay with EBT.
5. Place your order by selecting “Continue”
6. You will be directed to an external page to enter your PIN.
7. Once you’ve entered your PIN, you’ll be linked back to Walmart to complete your order.
8. During checkout, select how much of your benefits you would like to spend on the order.

Delivery fee: Delivery fees for a free Walmart account range from \$7.95 to \$9.95 per order. Walmart+ members (\$12.95 monthly fee) qualify for free delivery on orders over \$35, or pay a \$5.99 delivery fee on orders under \$35.

Notes: Upon viewing your cart, you’ll see the total cost of your SNAP EBT-eligible items shown just above the blue button that says “Check out”. Online orders qualify for free curbside pickup.

INSTACART**HOW TO:**

1. Visit www.instacart.com or download the Instacart app and create a free account.
2. Go to your Account Settings to add your EBT SNAP card as a payment method.
3. Shop for EBT SNAP-eligible items.

4. At checkout, make sure “EBT SNAP” is selected as a payment method.

Tags used: An ‘EBT’ label when browsing at participating stores.

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