

Tampa Bay Network to End Hunger
March 10, 2016
United Way Suncoast
Minutes

Agenda

- **Introductions – Deborah Lekenta**
 - **Updates to TBNEH Website – Caitlyn Peacock**
 - **Guest Speakers: Changes to ABAWD – Ellen Vollinger of FRAC and Cindy Huddleston from Florida Legal Services**
 - **FRAC National Anti-Hunger Policy Conference Report – Caitlyn Peacock**
 - **Any additional info to share**
 - **Adjournment**
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The meeting was called to order at 9:30am by Caitlyn Peacock.

- **Introductions – Caitlyn Peacock**
 - Everyone went around the room and introduced themselves and their organization.
- **Updates to TBNEH Website – Caitlyn Peacock**
 - Caitlyn demonstrated recent changes to the TBNEH website, including improved functionality and more detailed information about work teams, as well as the updated Hunger Gap Map.
- **Changes to ABAWD – Ellen Vollinger and Cindy Huddleston**
 - Intro to Guest Speakers: Ellen Vollinger of FRAC and Cindy Huddleston from Florida Legal Services are going to talk today about ABAWD – able bodied adults without dependence. Waiver expired Dec. 31 that allowed welfare and SNAP beneficiaries to participate in the program without having to be enrolled in a work force program. Now people have three months to get enrolled in a work force program for 35 hours a week in order to continue receiving benefits.
 - Introduction to the Waiver Problem: Ellen: ABAWD is a category of people that SNAP rules are going to restrict benefits for to a 3-month out of 36-month category. Single adults between the ages of 18-49 who are not in work or training the requisite number of hours a week. They may have jobs, but not 20 hours of work a week. Otherwise, they will be limited to 3 months of SNAP benefits and the clock started ticking in Florida on January 1 this year. So a large number of people will lose benefits April 1. Even though it has some harsh provisions, there are some exemptions, such as pregnant people, that

we need to track. Also, there are tests for whether people are in fact able-bodied. That will be a case-by-case determination whether people have impediments to working. Also some areas are exempted if there is high unemployment or insufficient jobs. But that waiver is something a state requests, and unfortunately Florida is not requesting that exemption because the state requires the agency to go through the state legislature to do that. They've really hamstrung Florida and added procedural steps to get a waiver, so the time waiver provision is enforced throughout Florida even though there are many people facing food insecurity in areas with not sufficient jobs. Many areas in Florida would have qualified under a very simple labor surplus definition from the USDA. Who are ABAWD? About 40% female, 32% over age 40, 40% in the suburbs, but while they're on SNAP, they're among the poorest people in the country and their average income is only 19% of the poverty line. A very vulnerable population, often not qualifying for many other benefits. For our groups, we need to get very accurate information about the rules and categories to clients and service providers. USDA requires providers to train each client to categorize them as ABAWD. Many people may have emotional problems, veterans with PTSD – identifying them and making it clear that makes them unfit for work will be a case by case determination. Counseling them about these requirements is very important. Another safety valve in the law is helping people find job training slots and volunteer opportunities that can get them the 20 hours of qualified work that would keep the time limit from applying. And your group can also document the impact of the time limit – what has it meant for clients, service providers, and lost benefits in the local economy. We expect that when ABAWDs lose their SNAP benefits, the increased demand at food pantries is pretty immediate. In Florida, to show physical or mental unfitness for work, there has to be a medical certification, although there is a broad definition of what kind of certification works – can be from a physician, a nurse, a nurse practitioner, a social worker, a psychologist, or other medical personnel. So working with those kind of personnel to be aware of the rule and be willing to give a determination of fitness is really important. And finally, one of our major roles is calling for change in the federal law. This is really an unfair rule because it punishes people for not working enough whether or not there are enough jobs or whether they're working to find a job. So there are two bills pending right now to require a work slot to be offered to a person before the time limit can be implemented. Cindy: At FLS, we have a list by county of the number of estimated ABAWDs if you don't already have that. And we're very interested in keeping on top of the emerging issues from clients affected by this, we'd love to hear about it. You are the first line of defense to hear what's happening.

- Rough estimate of how many ABAWDs will be affected by this waiver in FL: Cindy: Over half a million folks are estimated to be ABAWDs in Florida; not all will lose their benefits. If they don't get an extension, you will automatically be subject to a mandatory employment training program – if you don't comply almost immediately, your benefits may be terminated. So people are really being sanctioned and affected now if they can't meet the training requirement even outside of the time limit.
- More about HR 1025 and S 2420: 10 sponsors of HR; 6 of S; none are from Florida. The point is to make clear that the current law is a time limit based on status and not on willingness to work. The time limit takes effect whether or not the applicant is doing an active job search and whether they have been offered a job that they've turned down.

So it would require a SNAP employment and training position offered before the time limit applies. It would be an improvement in the law and speaks to the press coverage you'll see about this as more and more people run into the time limit in Florida. It's not a work requirement because it doesn't depend on whether someone is accepting or turning down an available job opportunity. This will improve the law because it will educate the public about the time limit being a limit on status, not on willingness to take a job. Watch www.frac.org for updates – legislative action section, "Bills we are watching," which links to the bill text and co-sponsors. Also, we can add you to our weekly legislative update that keeps track of what's going on. A contact with the Florida delegation could be helpful as well, and educating your delegation as these cuts hit.

- How to help people meet the work requirement: The requirement is far below minimum wage. Is there anything we can do around that? How many service providers could absorb people who might need to meet these requirements as volunteers? Answer: Unless it's questionable, they're not requiring a lot of verification from the employer, although there'll be some follow-up. The number of hours they have to average a week if working is 20 hours a week. If you are hearing about 30 hours a week, that has to do with who would be exempt completely from ABAWD requirements.
- Relationship to ABAWD benefit reductions that have already happened: This isn't a reduction; this is a total cut-off, an all-or-nothing rule. It doesn't matter if you're searching full time for a job if you don't have the requisite hours, then all benefits are cut off to that case after three months. Reductions that started in Nov 2013 affected the entire case load. If they're on SSI, they're disabled, so they are not ABAWD. You also don't have to be disabled if you're unfit for employment as long as you have verification of that, then again you're not ABAWD subject to the time limit. Someone who's chronically homeless could be unfit for work, and that could be very helpful in Florida. They're not automatically exempt, but staff should check for a physical or mental impairment based on their homelessness.
- Who determines if they are disabled or not? Can a case manager determine that, or do they have to have a medical background? Answer: If it's obvious to the case worker, that's fine, and it can be based on a conversation with the client or even through a third party. But it has to be made by DCF, even if it's a receptionist at DCF. Community partners cannot make the determination; they have to refer and get the determination from DCF.
- Lobbying: Want to get mayors and county commissioners to lobby the state. What specifically should they be lobbying for? Answer: To allow DCF to ask for a waiver of the ABAWD time limit because right now the legislature is not allowing DCF to do that without permission. They need that permission. They're not in session right now. Which committee should we concentrate on? Hard to say – any representative or senator in the area for the state would make sense, doing advocacy with them. It doesn't have to be an actual law that's passed. There is no champion in the legislature for this. Although there are two bills pending on Congress, there hasn't been a real push until recently to get sponsors. Senator Nelson has often stepped up on hunger agendas, so there's no reason not to contact him, but no specific information on where he is on this.
- Next Steps: (1) Jennifer Webb with Caitlyn P will contact them to set up an action campaign for working on this lobbying effort. (2) Food pantries and hot meal providers

in attendance should let Jennifer know the impact they're seeing from the time limit and job training requirement. (3) Caitlyn H-J and Jane, maybe with help from Andrew, will put together an informational form to give to clients who are losing benefits in the short-term.

- **FRAC National Anti-Hunger Policy Conference Report (Caitlyn Peacock):**

- Lived Experiences: middle-aged woman with three sons named April Bridges, worked whole life, not eligible for SNAP so had to get food from pantry; went to college; talked about real life of hunger. Not a drug addict, doesn't drink. Something we might want to bring to TBNEH annual conference this fall. Do these individuals get reimbursed or paid for their advocacy? It could affect their benefits. Has to be a gift card. Jane: Need to hear their story, but also what could we as providers have done differently to help them more. Beth Houghton: If some of these can be videotaped, many of us could put it on our websites to spread the word easily and cheaply. Caitlyn P: May follow someone around and do a mini-documentary for each county; we have 5 videos with VPN for this year. Could air it ahead of the panel.
- Food Insecurity and Health: Where do we stand in 2016? The richest people live to 88.8 years, while poorest live to 76.1. What makes us healthy is 50% healthy behaviors; 20% environment; 20% genetics; access to care 10%. But we spend 88% on medical services and only 4% on healthy behaviors, so we are spending money on things that aren't preventative. Food insecurity is entering mainstream of healthcare – American Association of Pediatrics is recommending universal screening of FI during scheduled maintenance visits. A two-item screening tool asking if people were ever food insecure or ever ran out of food. Working on the treatment if people answer yes, they are FI. Accountable Health Communities working on link from medical office during the screening – three options: to give information about resources, a little more navigation help, and/or screening for alignment of healthcare system and community organizations. People may not go to a medical appointment, but they will definitely go to a food pantry. FI is also associated with greater healthcare costs per person per year (an additional \$500-\$1500 per year according to a study done in Canada). But could not determine whether FI or poor health came first.
- Kathryn Edin - \$2 a day: The “\$2 a day poor” had gainful employment during the year – almost 70%. May be fired for very small indiscretions. TANEF Welfare block grants since 1998: \$16.5 billion given to states in federal grants. But all but \$5 billion went to other programs because it's a block grant – the other money was used to plug the budget for different programs. And once block grant money runs out, it's done. If states decide childhood nutrition is not as important as transportation or road quality improvement, they can move the money over.
- Teens and Food Insecurity: Main take away is that teens have high FI because they don't want to self-identify and don't participate in childhood hunger initiatives. Research aims to find out why and how to solve it. Main theme is leadership opportunities: if they are the leader at the food site or get volunteer hours, they will come. Do not advertise “free food.” Should we consider a teen work team?
- Food Waste: Decreasing waste can decrease food insecurity. Clip from John Oliver showing increased awareness of the issue. USDA is going to create a Food Waste

Pyramid – prevent it, recover it, recycle it. Too focused on fresh food – should can and freeze to reduce waste. Promote the power of positivity – progress is achievable.

- **Adjournment at 11:00am**