HISPANIC EDUCATION COALITION PRIORITIES FOR CHILD NUTRITION REAUTHORIZATION

BACKGROUND: The child nutrition programs (National School Lunch, School Breakfast, Child and Adult Food Care, Summer Food Service and the Special Supplemental Nutrition Program for Women, Infants, and Children) play an important role in meeting the nutritional needs of Latino children. Approximately 28% of Hispanic households with children suffer from food insecurity – defined as lacking access to enough food to fully meet their basic needs at all times due to low incomes. Moreover, farmworker families experience high rates of hunger. A recent Wake Forest University study found that nearly half (47%) of farmworkers in North Carolina cannot afford enough food for their families, and 15% have to resort to measures such as cutting the size of their children's meals or not eating for an entire day.

RECOMMENDATIONS: The Hispanic Education Coalition (HEC) believes that child nutrition reauthorization proposals should seek to increase access to and improve the quality of child nutrition programs for Latino children. To this end, the HEC recommends the following:

PRIORITY ISSUES TO ASSURE AND INCREASE ACCESS FOR LATINO CHILDREN:

- No Increase in Verification Sample Size: Presently, a sample size of 3% of school meal applications is verified for eligibility. Research conducted by the Department of Agriculture shows that increasing verification requirements in the school lunch program causes many eligible children, particularly families that face language and literacy barriers, to be needlessly dropped from the program. Simply put, increasing eligibility verification requirements carries too great a risk for eligible Latino children, especially those from limited-English-proficient or low-literacy homes, who depend on the child nutrition programs for access to school meals. The HEC recommends maintaining the current sample size for eligibility verification.
- Expansion of Direct Certification to Include Migrant Children: Children receiving TANF or food stamps are currently automatically eligible for free meals without having to document their income. A similar automatic eligibility should be extended to homeless children, runaway youth and for children who qualify for migrant educational services under Title I, Part C of the No Child Left Behind Act. In the case of migrant children, school lunch programs should allow for the direct certification of such children if they are identified by the district's migrant education coordinator. The HEC recommends allowing for migrant children to be categorically eligible for school meals so they can be directly certified.
- Expansion of Direct Certification. Requiring all states or districts to directly certify children households receiving food stamps is an important first step, but can only reach a limited universe of children. Recent research indicates that since 1996 food stamp participation by citizen children with immigrant parents has declined while participation by such children in Medicaid and the State Children's Health Insurance Program (SCHIP) has increased. Thus, expanding direct certification to Medicaid and SCHIP could make it easier for Latino children to receive free school meals. The HEC recommends expanding direct certification to all children receiving Food Stamps and funding a pilot project to test direct certification through Medicaid.
- > Meals for high school age children enrolled in schools operating during non-traditional hours. A significant number of youth attends alternative schools during nontraditional hours and programs preparing students to obtain a General Educational Development credential (GED). According to the Urban Institute, the number of GED credentials issued each year is growing and GED recipients are increasingly of a younger age. For example, between 1967 and 1998 the number of GED's issued grew by 200%. Moreover, in 1999 of the 500,000 people receiving GED's, 200,000 were under the age of 20, and 50,000 were 16-17 years old. Many schools have made efforts to accommodate the nutritional needs of these students, including students who work. However, the option to extend free and reduced meals to this pool of "nontraditional" students is not always conveyed to those serving meals. The HEC recommends encouraging states to provide school meals to children of high school age, as determined by the state, enrolled in schools that operated during nontraditional hours.

- Direct Verification: Currently, school districts have authority to use data maintained by other public agencies to verify eligibility for the school meals program in lieu of contacting the household ("direct verification"). Although some districts are using this authority to verify the eligibility of households that listed a food stamp of TANF case number on the application, they are not expanding it to applications that do not list a case number. School districts should be positioned to verify the eligibility of many more students, which would reach more Latino students who participate at higher rates in the Medicaid or SCHIP programs than in TANF or the Food Stamp Program. The HEC recommends clarifying that direct verification may be conducted for any application selected for verification and expanding the sources of data that may be relied upon to include Medicaid or SCHIP.
- Substitution: School districts are currently allowed to complete a school meals application on behalf of a child if the parents do not submit one and a school official has independent knowledge that the child is eligible. School districts should be granted similar discretion to remove a limited number of individual applications from the sample selected for verification based on criteria established by USDA. The HEC recommends that districts have greater discretion to decline to verify a selected application and replace it with another when they have independent knowledge that the household selected for verification is eligible.
- Language barriers for Limited English Proficiency (LEP) households: The USDA has long documented a disparate impact over the last decade on less literate and LEP households in staying enrolled in and maintaining eligibility for federal meal programs. In addition, schools are an important source of information about healthful diets and lifestyles for Latino parents. The HEC recommends that literacy and language barriers be addressed by ensuring that all communication with households is provided in an understandable and uniform format, and to the extent practicable, in a language that parents can understand.

QUALITY FOR LATINO CHILDREN:

- Enhancement of nutrition education for Latino children. Recent reports have indicated that the prevalence of type 2 diabetes is much higher among children and adolescents than originally suspected, particularly among Latino children. Moreover, although heredity appears to play a role in determining the likelihood that a Latino child will get type 2 diabetes, studies indicate that Hispanic children, especially those who are low-income, also experience an excess of modifiable diabetes risk factors (low physical activity, high dietary fat intake, low fiber intake, and being overweight). Current nutrition education activities in the Child and Adult Food Care program (CACFP) provide an important opportunity to reach Latino children and families with important messages about healthy diet and lifestyle. In addition, a significant number of Latino children are in non-center based childcare. These children would greatly benefit from nutrition education activities in CACFP that are linguistically and culturally appropriate to their unique needs. The HEC recommends a pilot project aimed at developing appropriate nutrition education activities for Latino, limited-English-proficient children enrolled in family daycare homes that participate in CACFP.
- Parental choice in selecting reimbursable foods for child nutrition programs: Many common foods are not easily digestible by significant populations of students of color. For example, the National Institute of Health & the American Gastroenterological Association estimates that lactose intolerance is widespread with as many as 50 % of Latinos affected. Currently, schools and other entities participating in the child nutrition program are not reimbursed for providing alternatives to milk (such as fortified soymilk) and unable to accommodate the meals served absent a doctor's note. This is problematic for Latino children given that Latino children are three times more likely than their White counterparts to lack health insurance. It should follow that common concerns of low-income parents are respected and approved as reimbursable commodities in child nutrition program purchasing and ordering decisions. In an effort to introduce parental choice into child nutrition decisions, the HEC recommends that the child nutrition programs allow for soy products, at the very least, to be a reimbursable commodity, at schools that enroll a critical mass of children of color. Moreover, parental choice and not a doctor's note should drive the decision to provide food alternatives on the trays of all students.