



## Supporting families struggling with food insecurity during the COVID-19 pandemic: An innovative cross-sector collaboration

Ashley Ann Fuss, Heath I. Bloch, Kara Dean-Assael, Marc Kutner, Meaghan E. Baier, Tara Ready, Boris Vilgorin, Lori Hannibal, Joanne Fortune, Connie Cerrato & James Nyreen

To cite this article: Ashley Ann Fuss, Heath I. Bloch, Kara Dean-Assael, Marc Kutner, Meaghan E. Baier, Tara Ready, Boris Vilgorin, Lori Hannibal, Joanne Fortune, Connie Cerrato & James Nyreen (2021): Supporting families struggling with food insecurity during the COVID-19 pandemic: An innovative cross-sector collaboration, *Social Work in Health Care*, DOI: [10.1080/00981389.2021.1904318](https://doi.org/10.1080/00981389.2021.1904318)

To link to this article: <https://doi.org/10.1080/00981389.2021.1904318>



Published online: 23 Mar 2021.



Submit your article to this journal [↗](#)



View related articles [↗](#)



View Crossmark data [↗](#)



## Supporting families struggling with food insecurity during the COVID-19 pandemic: An innovative cross-sector collaboration

Ashley Ann Fuss PhD<sup>a</sup>, Heath I. Bloch LCSW<sup>b</sup>, Kara Dean-Assael DSW<sup>a</sup>, Marc Kutner MSW, MPA<sup>c</sup>, Meaghan E. Baier LMSW<sup>a</sup>, Tara Ready LMSW<sup>a</sup>, Boris Vilgorin MPA<sup>a</sup>, Lori Hannibal LCSW<sup>b</sup>, Joanne Fortune PhD, LMHC<sup>b</sup>, Connie Cerrato LCSW<sup>b</sup>, and James Nyreen MSW<sup>b</sup>

<sup>a</sup>The McSilver Institute for Poverty Policy and Research, New York University Silver School of Social Work, New York, New York, USA; <sup>b</sup>SCO Family of Services, Glen Cove, New York, USA; <sup>c</sup>Akuity Social Enterprises, Inc., New York, New York, USA

### ABSTRACT

Food insecurity is an ongoing and persistent problem for many individuals and families in the United States and in New York City. The COVID-19 pandemic has exacerbated the scope of the problem and data show that food insecurity rates have increased almost three times over pre-COVID rates. In addition, with unemployment increasing daily and the closure of safety net programs and services, there became a need for creatively attending to the basic needs of individuals and families. SCO Family of Services (SCO), a large human service provider in New York City and Long Island, launched an innovative project with DoorDash during the early days of the COVID-19 pandemic and successfully got food into the homes of more than 1,900 families. This article discusses the practice innovation, project impact, lessons learned, and social work implications.

### ARTICLE HISTORY

Received 15 October 2020  
Revised 4 January 2021  
Accepted 12 March 2021

### KEYWORDS

Food Insecurity; COVID-19;  
Cross-sector collaboration

## Introduction and background

The U.S. Department of Agriculture (USDA) defines Food Insecurity (FI) as a lack of consistent access to sufficient food for an active, healthy life (Coleman-Jensen et al., 2020). FI also includes uncertainty about when and how one will get their next meal, often leading to difficult choices regarding how one spends their money (e.g., on food, rent, or medicine) (Johnson et al., 2011; Wolfe et al., 1996).

Food insecurity is prevalent in the United States and as a result of the Coronavirus disease 2019 (COVID-19) it is estimated that millions more of Americans will experience food insecurity over the next year (Feeding America, 2020; Leddy et al., 2020). Before COVID-19, one in nine households were food insecure in the United States and it is estimated that one in six children have experienced food insecurity (Coleman-Jensen et al., 2019;

**CONTACT** Ashley Ann Fuss  [Ashley.fuss@nyu.edu](mailto:Ashley.fuss@nyu.edu)  The McSilver Institute for Poverty Policy and Research, New York University Silver School of Social Work, 41 East 11th Street, 7th Floor, New York, NY 10003.

© 2021 Taylor & Francis Group, LLC

National Research Council, 2006). About 14 million U.S. households were food insecure at some time during 2019, and these households disproportionately included homes with children under six, female-headed households, people of color, and households with incomes near or below the poverty level (Coleman-Jensen et al., 2020). However, the reported prevalence of FI may underestimate its scope and severity because food insecurity is highly dynamic and point-in-time estimates do not accurately reflect FI over a period of time (Heflin et al., 2019).

While FI was already a persistent problem for many individuals and families in the United States and in NYC in particular, the COVID-19 pandemic has exacerbated the scope of the problem. In a matter of weeks, the economic crisis precipitated by COVID-19 escalated dramatically the ongoing FI crisis. Most notably, the widespread lockdowns initiated as a means to curtail the spread of the virus led to devastating impacts on employment and income as well as dramatically reduced access to childcare, education, and community resources. Furthermore, and perhaps most significantly, was the increased risk for FI as a result of increased financial vulnerability due to job loss. In addition to job and income loss, food prices at grocery stores increased, further preventing families from accessing food (USDA, 2020). Between March 2020 and August 2020, unemployment drastically rose with over 17 million Americans filing for unemployment benefits (Baek et al., 2020). Specifically, in New York, unprecedented jumps in unemployment claims of 1,840%, 1,260%, 2,100%, and 6,900% occurred among White, Black, Latinx, and Asian workers respectively in the wake of COVID-19 (Liao, 2020) highlighting the fragility of people's access to essential goods and services, inclusive of healthy food, when there simply isn't any money coming into the household. While food quality and access to healthy food is an important part of food insecurity it is beyond the scope of this article. However, food quality and access to healthy food is briefly addressed in the implications section.

Not surprisingly, data show that food insecurity rates have increased almost three times over pre-COVID rates and food pantry use has also spiked (Bitler et al., 2020). Reiley (2020) reported that approximately 40% of people served by food banks in March and April were first-time clients. They also highlighted the massive disconnect between food banks, farms and food producers, and poverty-impacted neighborhoods that needed it (Reiley, 2020).

As many families struggle with hunger, it is estimated that more than 54 million people may experience FI in 2020, an increase of 40 million people from 2018 and 2019 (Coleman-Jensen et al., 2020). A poll in the Spring of 2020, reported that almost 50% of New York City residents were concerned about their ability to afford food (Kulish, 2020). It is well-documented that access to food of adequate quality and quantity across all stages of the lifespan is required for optimal emotional, cognitive, and physiological functioning and development. Addressing FI with policies and practices across sectors,

including public sector, nonprofit organizations, and private sector, for-profit businesses, is an important way to create change and attend to hunger on an individual level.

### **Practice innovation**

SCO Family of Services (SCO) is one of the largest community-based providers in New York State and has provided vital human services throughout New York City and Long Island for 125 years. SCO's services benefit more than 40,000 children and families each year via 85 programs across New York City and Long Island spanning six core areas: Early Childhood, Education and Youth, Family Support, Foster Care, Shelters and Homeless Services, and Special Needs. Within these six major areas, SCO operates an integrated continuum of care where individualized services are made accessible to clients based upon short and long-term needs identified by comprehensive assessment and a strengths discovery process. Some types of discrete services include NYS OMH licensed Article 31 clinics; NYS OMH and OASAS licensed Residential Treatment beds and Permanent Supportive Housing; Early Childhood and Nurse/Family Partnership programs; High Schools for students at-risk of dropping out and After School Services for children and adolescents; Health Home Care Management, Children and Family Treatment Support Services; Preventive Services; Early Childhood Programs; Juvenile Justice Initiatives; Transitional Housing programs for homeless and runaway youth and shelters for families and single adults; and Crisis Respite Services.

In 2017, SCO initiated a strategic planning process designed to better position the agency's services as an integrated continuum responsive to the social determinants of health (SDOH), which are defined by the World Health Organization (2017) as the conditions in which people are born, grow, live, work and age. The social determinants of health consist of five key areas that include economic stability, education, social and community context, health and health care, and neighborhood and built environment.

In line with this strategic priority, and in direct response to COVID-19's effect on food insecurity among families, SCO designed and developed a new cross-sector collaboration demonstrating how a nonprofit organization and for-profit business can come together to address food insecurity among New York's most vulnerable families and communities directly affected by the COVID-19 pandemic.

On March 20, 2020, less than three weeks into the COVID-19 public health crisis in New York, SCO launched an innovative partnership with DoorDash, a leading online meal delivery service that connects local consumers and local restaurants with on-demand delivery services made possible by independent contractors.

This collaboration was initiated by a substantial gift made by a corporate donor that wishes to remain anonymous the Robin Hood Foundation, and a 15% philanthropic match from DoorDash. The primary goal of this partnership was to ensure children and families most vulnerable to the economic devastation unleashed by the pandemic do not go hungry. With food purchased by SCO clients from local food providers via the DoorDash platform, this program yielded a secondary benefit by providing desperately needed revenue for NYC's food services industry, a cornerstone of our regional economy. SCO selected the DoorDash solution because the platform was proven, readily accessible to families, and it allowed families to make their own food selections. Additionally, it also put cash into the hands of local food industry businesses quickly and directly without significant bureaucracy or hidden expense. For this collaboration, DoorDash agreed to waive its usual service fees. When approached by SCO, DoorDash was quick to commit and saw how the value the project brought in both direct support to families and businesses aligned with its own corporate social responsibility mission.

The program utilized a simple yet highly successful operational model to ensure food-insecure families get access to the program quickly. Collaboration between SCO direct service staff and SCO development staff was critical to ensuring that families were able to obtain and access the DoorDash vouchers. Families only had to provide their name, e-mail, and household size to direct service staff in order to receive the voucher and development staff were able to assist families with any technological difficulties. Program activities included: (1) SCO direct service staff on the ground identifying food-insecure families in need from among current SCO clients; (2) assisting identified families in establishing a DoorDash account and troubleshooting technical challenges; (3) issuing pre-paid DoorDash vouchers to recipients ranging in value from 500 USD to 1,000 USD (contingent upon assessed need and household size, with an average value 670 USD); and (4) weekly follow-up with the family via telephone or videoconferencing/tele-health to continuously assess for ongoing food insecurity and other service needs.

Toward identifying at-risk families in greatest need efficiently, SCO case workers identified food-insecure households from among SCO's ACS-funded Early Childhood and Preventive Services and Health Home Care Management programs. These particular programs tend to enroll some of SCO's most vulnerable families, thus achieving the biggest impact by targeting these client sub-populations. It is estimated that more than 90% of the people that received this service were of color; more than 65% were minor children; at least 50% were challenged by unemployment; 75% had physical, intellectual, and or behavioral health related challenges; and at least 85% received or were eligible for Medicaid coverage, ensuring that this service supported lowest-income families.

SCO distributed the vouchers to more than 1,900 families across New York City and Long Island, which benefited more than 7,500 individuals, including clients' spouses, children, and extended family members. As of August 2020, 2,730 out of 2,766 (99%) of the vouchers had been redeemed. In addition, many local restaurant owners and their staff benefited from the food delivery orders placed by individuals and families who received the vouchers, helping to bolster the local economy during this challenging time. While DoorDash's confidentiality policies make it impossible to provide a precise number of restaurants supported by the project, based upon the number of SCO families served we can estimate that hundreds, if not thousands, of restaurants have benefited from this partnership.

### **Project impact and lessons learned**

The partnership has been instrumental in enabling SCO to help some of New York's most underserved families buy food and necessities during the coronavirus shutdown. Many families were especially in need of food, and may not have been able to leave their homes, which made food delivery an essential service during this crisis. Most importantly, the partnership allowed vouchers to quickly be distributed to more than 1,900 families who were disproportionately impacted by a loss of income resulting from the pandemic. This lessened the strain for families during these trying times and helped strengthen the communities where they live.

This partnership project is a natural extension of the programs and services SCO has provided year-round, and its strategic focus on responding to the social determinants of health, specifically food insecurity, among the most vulnerable families and communities across New York City and Long Island. It is an extraordinary example of how, in a time of need and communal uncertainty, individuals and organizations were able to come together quickly and effectively to support families in need. While this project was not a long-term solution to addressing hunger and food insecurity, this collaboration provided families with short-term relief and was able to alleviate stress associated with food insecurity dramatically heightened by the pandemic.

This project resulted in several key takeaways and lessons learned for the SCO team related to trust, autonomy, infrastructure, and bureaucracy. SCO staff reported that as a result of this project an increased level of trust and credibility was established between workers and families. Staff was able to offer low threshold access to DoorDash vouchers, thus ensuring rapid assistance which in turn promoted trust between families and SCO. This project also allowed families to have a sense of autonomy over their family decisions. For example, families were able to define for themselves who was part of the family and how they could spend the vouchers without restrictions. In order to implement this project, SCO was able to set up an infrastructure that allowed

them to effectively and seamlessly manage the project. This proved to SCO that if future projects or donations are given they can reliably manage and achieve desired outcomes. Lastly, as the project was designed with a low access threshold in mind, bureaucratic barriers were almost entirely absent and families did not have to show any proof or documentation, have to meet any steadfast requirements in order to receive support, or complete any assessments or paperwork. This enabled critical resources to reach families in or approaching crisis quickly, in turn contributing directly to the project's success and likelihood for future replication.

### **Social work implications and future work**

The SCO and DoorDash partnership is an example of an effective cross-sector collaboration to address access to food during the COVID-19 pandemic. This partnership allowed for vouchers to be distributed to more than 1,900 families in an easy, quick, and timely manner. This project demonstrates the need for more cross-disciplinary fertilization and private-public partnerships to address social issues, and therefore encourages leadership and program-level social workers to be open and creative when cultivating new partnerships.

During the early months of the pandemic, government programs such as unemployment assistance and Supplementary Nutritional Assistance Program (SNAP) were overwhelmed and there were delays and long wait times for applications to be accepted, reviewed, and acted upon. At the system level, local, state, and federal government needs to be better prepared for crisis situations so support for those who need it could be provided quickly as situations arise in the future.

Additionally, this project has important implications for the social work field. Research has shown that many health and behavioral health problems are linked to social inequalities such as food insecurity and unstable housing, which are common themes for social workers (Craig et al., 2013; Rosenberg, 2008). The SDOH framework is built upon the values of social justice, human rights, and equality which are also fundamental values of the social work profession (Bywaters et al., 2010). This project highlighted how many families have food related needs and can benefit from financial support in order to access food. One of the foundational concepts taught within social work education is the person-in-environment framework, which calls upon social workers to consider an individual in the context of their environment. When working with individuals and families, assessing SDOH needs is critical and can impact outcomes as SDOH are known influencers of behavioral health outcomes (Deferio et al., 2019). By assessing SDOH need, social workers can better understand and address risk factors related to poor outcomes.

This project also showed the importance of attending to individual's basic needs in addition to offering care and services. When working with individuals

and families, social work practitioners should take into account how SDOH factors may be impacting their clients. Furthermore, supporting families to have more autonomy and choice in services that they participate in may help ensure that they are more effective. This is important for practitioners to keep in mind when working with families

Another food related need not addressed by this project is the high number of families who are in need of fresh fruits, vegetables, and other groceries especially during the time of social distancing and a global pandemic. SCO has identified food companies that could address this need and is currently exploring opportunities to provide families with fresh and healthy groceries. SCO is also exploring future partnerships with other food delivery platforms to be able to continue this work. The broad implications of these current and future initiatives embody the core social work values of service, social justice, respecting the dignity and worth of the person, and recognizing the central importance of human relationships. SCO's quick response to the COVID-19 pandemic not only prevented worsened outcomes related to FI among their families, they were able to empower families by allowing them autonomy and choice, which is often not prioritized in the middle of a crisis.

While this project was designed to address FI as a result of the COVID-19 pandemic, the project also brought additional attention to the range of vulnerabilities associated with the social determinants of health among high risk families beyond FI such as housing instability, employment, and child care concerns. Additionally, this project highlighted the need to have reliable and valid tools to measure said SDOH vulnerabilities in order to develop micro and macro-level interventions. SCO is working to further develop and pilot a screening tool in collaboration with New York University's McSilver Institute for Poverty Policy and Research to evaluate areas of need across the five SDOH domains and develop strategies to address these challenges for families. Specifically, the SCO SDOH tool screens for need across the SDOH domains and assesses areas such as housing, employment, food, income, child care, education, safety, and behavioral health needs. Additionally, the reliability and usefulness of the SCO SDOH screening tool will be compared to existing SDOH screening tools. For example, and within the context of FI, prior research has found that two items of the Household Food Security Scale (HFSS) were answered affirmatively 90% of the time by families experiencing FI, indicating the sensitivity of this two-item screen to detect FI (Hager et al., 2010).

In sum, this project demonstrated the feasibility of a cross-sector collaboration as an approach to attend to hunger and provide families with short-term relief to alleviate stress associated with food insecurity during the pandemic. Beyond its significance and increased prevalence during the COVID-19 pandemic, FI remains an important issue that needs to be addressed. In addition to typical solutions such as SNAP registration support and access to food



pantries, organizations serving FI vulnerable populations should be encouraged to think of innovative solutions to attend to hunger risks. For example, on a micro level, organizations can consider how they are currently assessing FI and strategize how to incorporate autonomy and choice in terms of services and benefits when possible. On a macro level, organizations should be encouraged to leverage its knowledge of FI to advocate for resources for the individuals they serve by being creative and collaborating with non-traditional partners such as private sector companies to address hunger. Such initiatives have the potential to help families struggling with food insecurity, which will only be exacerbated as the pandemic and social distancing practices continue.

## References

- Baek, C., McCrory, P. B., Messer, T., & Mui, P. (2020). Unemployment effects of stay-at-home orders: Evidence from high frequency claims data. Institute for Research on labor and employment working paper, 101–120.
- Bitler, M., Hoynes, H. W., & Schanzenbach, D. W. (2020). *The social safety net in the wake of COVID-19* (No. w27796). National Bureau of Economic Research.
- Bywaters, P., McLeod, E., & Napier, L. (2010). Social work and global health inequalities – Practice and policy developments. *Social Work Education*, 29(8), 928–936. <https://doi.org/10.1080/02615479.2010.517026>
- Coleman-Jensen, A., Gregory, C., & Singh, A. (2019). *Household food security in the United States in 2018*. USDA-ERS Economic Research Report, 270, United States Department of Agriculture, Washington, DC.
- Coleman-Jensen, A., Rabbitt, M., Gregory, C., & Singh, A. (2020). *Household food security in the United States in 2019*. USDA-ERS Economic Research Report, 275, United States Department of Agriculture, Washington, DC.
- Craig, S. L., Bejan, R., & Muskat, B. (2013). Making the invisible visible: Are health social workers addressing the social determinants of health? *Social Work in Health Care*, 52(4), 311–331. <https://doi.org/10.1080/00981389.2013.764379>
- Deferio, J. J., Breitinger, S., Khullar, D., Sheth, A., & Pathak, J. (2019). Social determinants of health in mental health care and research: A case for greater inclusion. *Journal of the American Medical Informatics Association*, 26(8–9), 895–899. <https://doi.org/10.1093/jamia/ocz049>
- Feeding America. (2020, December 20). *The impact of the coronavirus on food insecurity*. [https://www.feedingamerica.org/sites/default/files/2020-10/Brief\\_Local%20Impact\\_10\\_2020\\_0.pdf](https://www.feedingamerica.org/sites/default/files/2020-10/Brief_Local%20Impact_10_2020_0.pdf)
- Hager, E. R., Quigg, A. M., Black, M. M., Coleman, S. M., Heeren, T., Rose-Jacobs, R., Cutts, D. B., Casey, P. H., Chilton, M., Cutts, D. B., Meyers, A. F., Frank, D. A., & Cook, J. T. (2010). Development and validity of a 2-item screen to identify families at risk for food insecurity. *Pediatrics*, 126(1), e26–e32. <https://doi.org/10.1542/peds.2009-3146>
- Heflin, C., Kukla-Acevedo, S., & Darolia, R. (2019). Adolescent food insecurity and risky behaviors and mental health during the transition to adulthood. *Children and Youth Services Review*, 105, 104416. <https://doi.org/10.1016/j.childyouth.2019.104416>
- Johnson, C. M., Sharkey, J. R., & Dean, W. R. (2011). Indicators of material hardship and depressive symptoms among homebound older adults living in North Carolina. *Journal of*

- Nutrition in Gerontology and Geriatrics*, 30(2), 154–168. <https://doi.org/10.1080/21551197.2011.566527>
- Kulish, N. (2020, April 8). Never seen anything like it: Cars line up for miles at food banks. *The New York Times*. <https://www.nytimes.com/2020/04/08/business/economy/coronavirus-food-banks.html>.
- Leddy, A. M., Weiser, S. D., Palar, K., & Seligman, H. (2020). A conceptual model for understanding the rapid COVID-19–related increase in food insecurity and its impact on health and healthcare. *The American Journal of Clinical Nutrition*, 112(5), 1162–1169. <https://doi.org/10.1093/ajcn/nqaa226>
- Liao, S. (2020, October 9). *Unemployment claims from Asian Americans have spiked 6,900% in New York. Here's why*. CNN Business. <https://www.cnn.com/2020/05/01/economy/unemployment-benefits-new-york-asian-americans/index.html>
- National Research Council. (2006). *Food insecurity and hunger in the United States: An assessment of the measure*. Panel to review the U.S. Department of Agriculture's measurement of food insecurity and hunger. The National Academies Press.
- Reiley, L. (2020, April 23). Full fields, empty fridges. *The Washington Post*. <https://www.washingtonpost.com/business/2020/04/23/fixing-food-dumping-food-banks/>
- Rosenberg, G. (2008). Social determinants of health: Twenty-first-century social work priorities. *Comprehensive handbook of social work and social welfare*, 4. John Wiley & Sons.
- USDA. (2020, December 20). *Summary findings: Food price outlook, 2020*. USDA. <https://www.ers.usda.gov/data-products/food-price-outlook/summary-findings.aspx>.
- Wolfe, W. S., Olson, C. M., Kendall, A., & Frongillo, E. A. (1996). Understanding food insecurity in the elderly: A conceptual framework. *Journal of Nutrition Education*, 28(2), 92–100. [https://doi.org/10.1016/S0022-3182\(96\)70034-1](https://doi.org/10.1016/S0022-3182(96)70034-1)
- World Health Organization (2017, October 9). *About social determinants of health*. [https://www.who.int/social\\_determinants/sdh\\_definition/en](https://www.who.int/social_determinants/sdh_definition/en)