

THE ROAD AHEAD:

2021 UPDATE ON FOOD ACCESS &
FOOD SECURITY IN THE DISTRICT OF COLUMBIA

2021



A LETTER FROM OUR MAYOR



Muriel Bowser
Mayor

Dear Washingtonians:

Over the past 18 months, our District community has come together as we faced the COVID-19 public health emergency. I am pleased to announce that as we continue our road to recovery, the District's overall food insecurity rate is decreasing and has returned to pre-pandemic levels. However, we still have work to do, as food insecurity and low food access continue to disproportionately impact residents of color in our city.

Addressing food insecurity is key to an equitable recovery and is a top priority of my administration. Throughout the public health emergency, my team has worked hard to expand the reach of food assistance programs and increase investments in healthy food access in the District. We have operated far-reaching emergency feeding programs, such as the GetHelp Hotline and Grocery/Meal Distribution at DCPS schools, and worked with federal partners to expand nutrition assistance programs like universal free school meals, the Supplemental Nutrition Assistance Program (SNAP), the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), and the Pandemic EBT (P-EBT) Program for families with children.

The Fiscal Year 2022 District budget includes significant new investments to close the grocery gap, support locally owned fresh food businesses, and strengthen grocery access programs. This includes \$58 million over three years for a new Food Access Fund to support the development of grocery stores and sit-down restaurants in Wards 7 and 8. It also includes \$4 million for the Nourish DC Fund to support community ownership of local food businesses through grants, loans, and technical assistance. The FY 2022 budget also increases our investments in crucial local programs to expand healthy food access, such as Produce Plus, Produce Prescription, Joyful Food Markets, Healthy Corner Stores, and Home-Delivered Meals. Together these investments will increase equitable access to fresh, healthy, and affordable food for every resident in the District.

I offer my great thanks to the District's essential food system workers who have continued to work tirelessly throughout the public health emergency to ensure our residents have safe access to food. Please take a moment to thank your grocery cashier, restaurant staff, school cafeteria chef, and others in our communities who have been on the front lines of food access. I know that, together, we can rebuild a more equitable food system.

Sincerely,

Muriel Bowser
Mayor, District of Columbia

INTRODUCTION

The COVID-19 public health emergency highlighted the importance of every resident having access to nutritious, affordable, and culturally appropriate food for themselves and their families. As District of Columbia residents experienced job loss, school closures, and restricted mobility, we saw neighbors, community non-profits, local businesses, and the District government step up to provide vital food assistance to residents without the resources or access to purchase food. Now, as the District recovers, we continue to closely monitor how food insecurity affects our communities, and how the District government can most effectively respond to that need. This update comes one year after the September 2020 report *Food Access and Food Security in the District of Columbia: Responding to the COVID-19 Public Health Emergency* (“2020 Report”).¹

Although the overall 2021 food insecurity rate for the District (11%) will nearly return to the pre-COVID rate of 10.6% (down from 21.1% in 2020), this generalized data hides continued elevated need in these specific subpopulations.

As of April 2021, the disparate impacts of food insecurity documented in the 2020 Report remains and in some cases is growing. Black and Latinx households, households with children, and seniors continue to be at higher risk of food insecurity than the general District population. This was true both before the public health emergency and throughout the pandemic as reported by our first report and by national data.² The District government has taken several ambitious steps since the publication of the 2020 Report to address food insecurity, including working with the federal government to expand access to nutrition assistance programs, extending emergency feeding programs, and making unprecedented investments to build grocery stores in areas where structural racism and disinvestment have led to low food access. This report documents food insecurity trends between June 2020 (the most recent data in the 2020 Report) and April 2021 and highlights District government efforts to address this continued need.



FOOD INSECURITY AMONG ALL DISTRICT RESIDENTS

There are several ways to measure the number of households in the

District that do not have enough food. This report looks at research that measures *food insecurity* and *food insufficiency*, terms defined in the callout box below. We also look at enrollment data for public benefit programs, such as the Supplemental Nutrition Assistance Program (SNAP), as an indicator of periods of higher need among households.

The annual 2021 food insecurity rate in the District will be 11% and the food insecurity rate among children will be 17%, according to forecasts by Feeding America, a national anti-hunger organization.³ These figures reflect a decline from 2020 and nearly a return to the District’s pre-COVID food insecurity rate in 2019 of 10.2% and 16.5% for children.^{4,5}

Food insufficiency data collected over the past year follow similar trends. On average, District households reported the highest rates of food insufficiency in June 2020 at 13.7%. Since then, food insufficiency has improved; in April 2021, 6.7% of the District's households reported experiencing food insufficiency.

Enrollment in the federal Supplemental Nutrition Assistance Program (SNAP) demonstrates continued high need. SNAP provides funds to households with low-income to supplement their food budgets. The Department of Human Services (DHS) administers the program in the District and has worked tirelessly during the public health emergency to enroll new participants. The total number of District households enrolled in SNAP has increased from 74,750 in June 2020 to 88,380 in March 2021. During the same period, total issued benefits in the District has increased over 40% from \$16.6 million to \$23.3 million.

HIGHER RISK OF FOOD INSECURITY

The overall District food security rate returning to pre-pandemic or “normal” levels masks ongoing inequities, including continued higher rates of food insecurity among Black and Latinx households, households with children, and seniors. An increased focus on these populations is needed to combat persistent food insecurity that stems from systemic

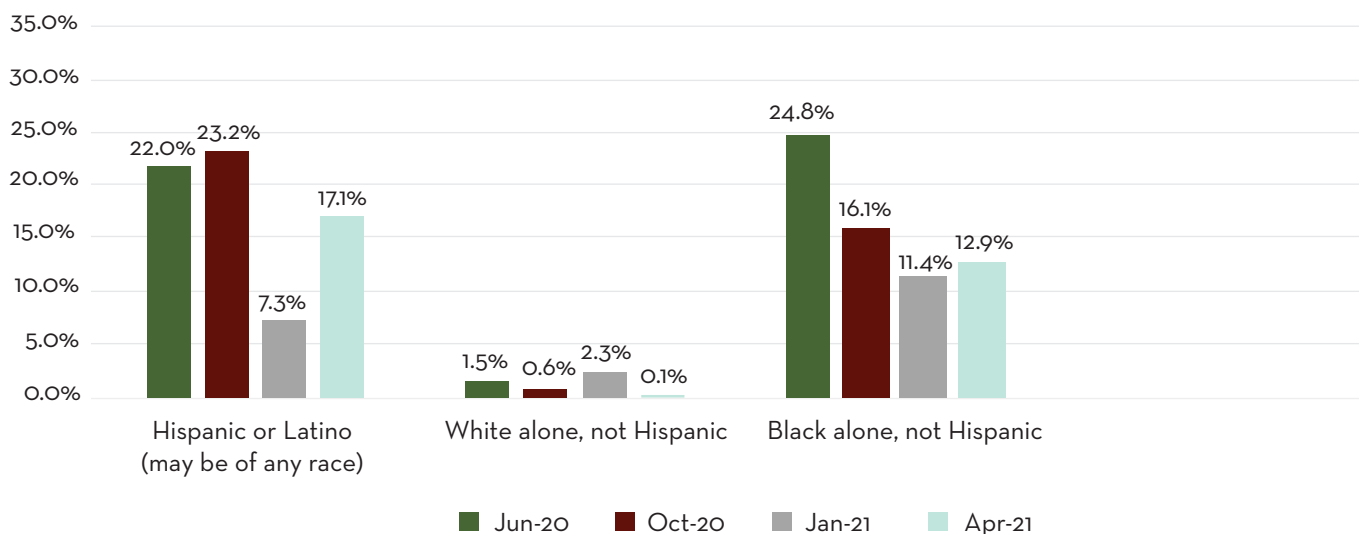
DEFINITIONS:

FOOD INSECURITY means a lack of consistent access to enough food for an active, healthy life. This data comes from the U.S. Department of Agriculture.⁶

FOOD INSUFFICIENCY means when a household reports that they did not have enough to eat sometimes or often in the last 7 days. This data comes from the U.S. Census Bureau Household Pulse Survey. Food sufficiency is likely a more conservative measurement than food insecurity since it does not include households who indicate that, although they had enough to eat, it may not have always been the types of food that they wanted to eat.⁷

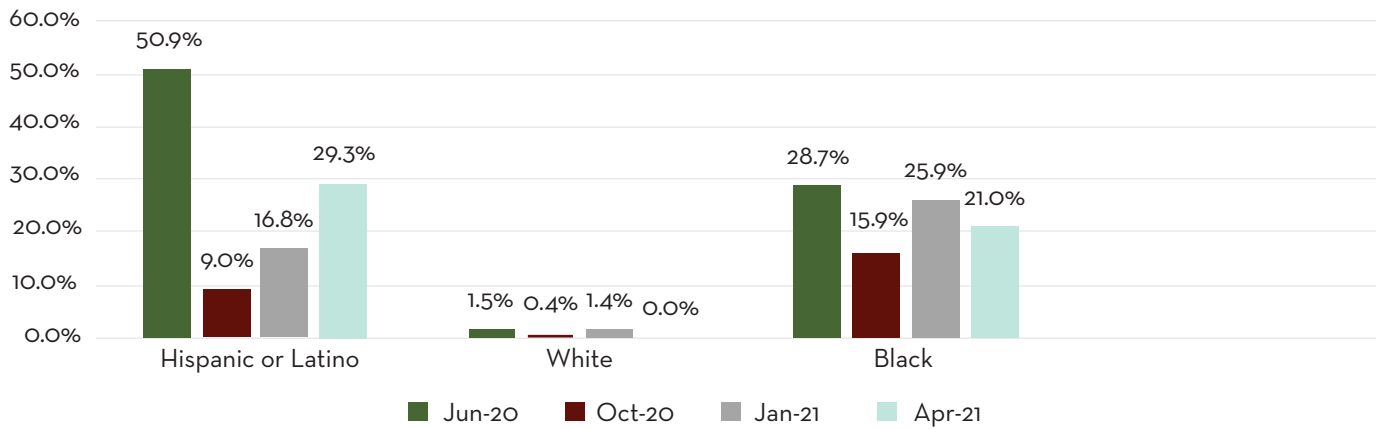
challenges such as the racial wealth gap, high costs of living, and a history of disinvestments in communities of color.

Figure 1: Food Insufficiency for Households Without Children By Race



Source: U.S. Census Bureau Household Pulse Survey. Accessed July 14, 2021.

Figure 2: Food Insufficiency for Households With Children By Race



Source: U.S. Census Bureau Household Pulse Survey. Accessed July 14, 2021.

Households of Color

During the public health emergency, households of color in the District were more likely to report food insufficiency compared to white households. These inequities persist across both households with children and households without children, but households of color with children faced the highest rates of food insufficiency across all populations.⁸

Food insufficiency among Black households with children declined over the public health emergency but remains high. In June 2020, 28.7% of Black households with children reported that they experienced food insufficiency. The percentage dropped to 15.9% in October 2020, increased to 25.9% in January 2021, and then slightly decreased to 21% in April 2021.

Black households without children also reported high but decreasing rates of food insufficiency throughout the pandemic. In June 2020, nearly one in four (24.8%) Black households without children reported experiencing food insufficiency. The percentage decreased to 12.9% by April 2021.

Latinx households with children reported high but varying rates of food insufficiency over the public health emergency. In June 2020, more than half (50.9%) of Latinx households with children reported experiencing food insufficiency. This percentage

DATA LIMITATIONS

The survey tool used to measure food insufficiency was likely not able to reliably measure food insufficiency among Asian households or mixed race households. The sample size for Asian households was likely too small, and the survey tool did not disaggregate data for mixed race households. More in-depth research on food insecurity among Asian and mixed race households in the District is needed.

In the District, almost one in three (29.3%) Latinx households with children and more than one in five (21%) Black households with children reported food insufficiency in April 2021. In contrast, white households with children reported statistically no food insufficiency in April 2021.

decreased to 9.0% in October 2020, increased to 16.8% in January 2021, and then nearly doubled to 29.3% in April 2021.

White households in the District reported the lowest rates of food insufficiency among all racial and ethnic groups throughout the public health emergency. Food insufficiency was extremely low in white households with children with a high of 1.5% in June 2020 and statistically zero in later periods. White households without children also had extremely low rates of food insufficiency throughout the pandemic with a high of 2.3% in January 2021.

SNAP enrollment data also shows disparate need among residents of color. Among those individuals who receive SNAP and self-report their race (19% of all clients), an overwhelming majority (94.4%) identify as Black/African-American, compared with just 2.8% identifying as White/Caucasian, 1.0% as Asian, and 0.9% as Multiracial/Not Otherwise Defined.

Households with Children

Households with children in the District were more likely to report food insufficiency throughout the public health emergency compared to households without children. For example, in June 2020, 23.4% of households with children reported food insufficiency compared with 13.7% of households without children. This pattern has held steady, with 13.6% of households with children reported food

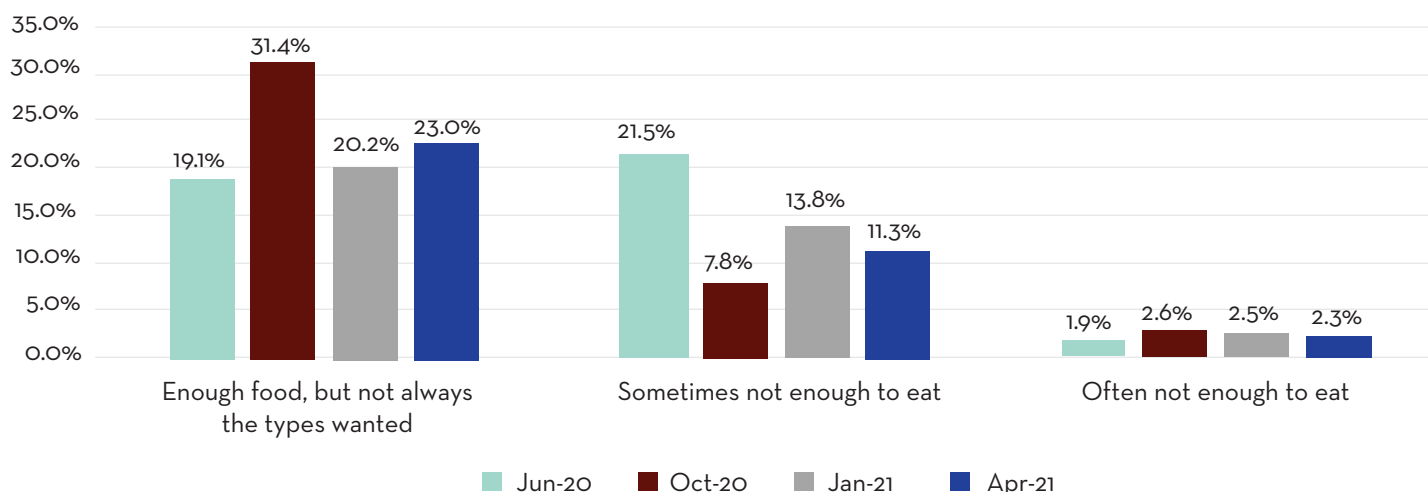
insufficiency in April 2021, compared with 6.7% of households without children.

As highlighted above, these trends were not equally felt by all households with children. Rather, Black and Latinx households reported the highest rates of food insufficiency while white households with children reported very low rates of food insufficiency. Data on Asian households was not reliable.

Enrollment data for the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) reflects the heightened need throughout the public health emergency. The WIC program provides food benefits, nutrition education, breastfeeding support, and health care referrals for pregnant and postpartum women, and to infants and children up to age five with low-incomes who are found to be at nutritional risk. Participation in the District’s WIC program has remained steady with 14,391 participants in June 2020 and 14,320 participants in April 2021. However, this number continues to remain almost 16% above the pre-pandemic level of 12,355 participants in February 2020.

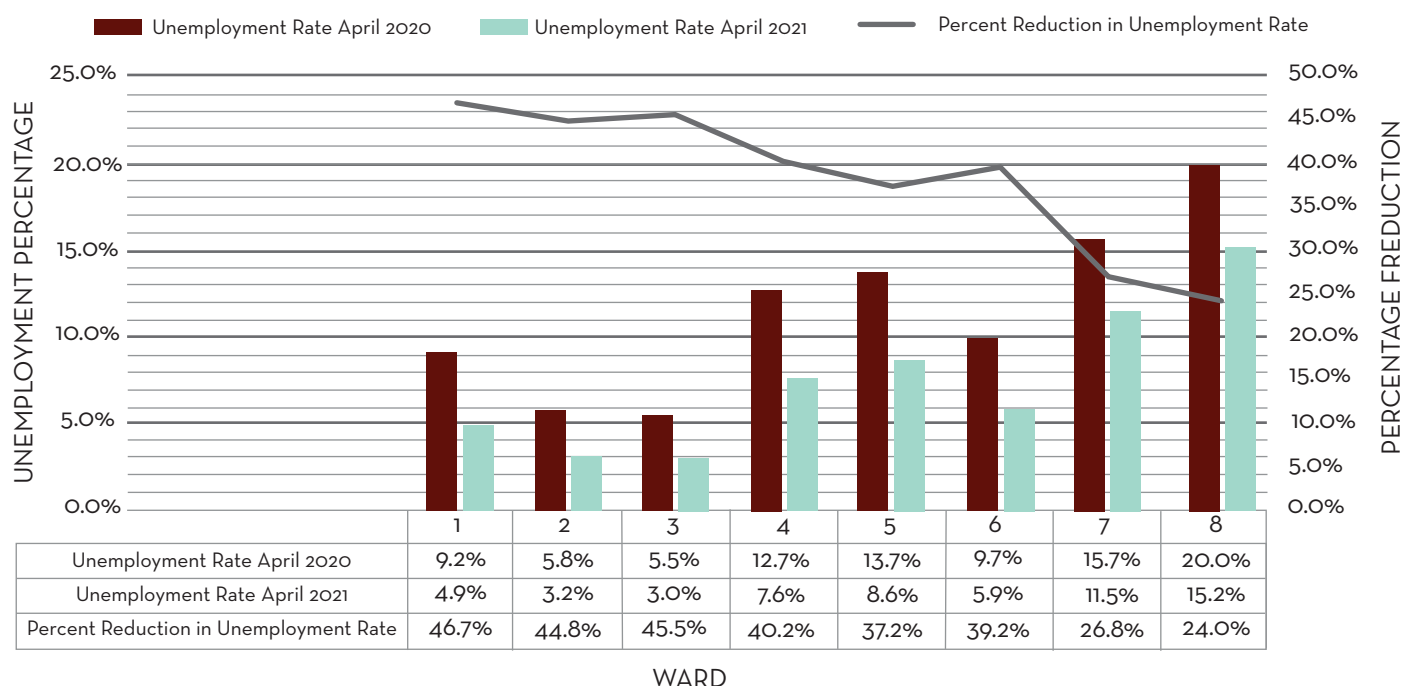
Unemployment data reflected decreased need over the public health emergency, but with higher rates in certain Wards. Table 1 shows that unemployment across all Wards decreased from April 2020 to April 2021. However, the persistent lack of earnings has continued to leave many District residents at higher risk for food insecurity.⁹

Figure 3: Food Sufficiency Among Households With Children



Source: U.S. Census Household Pulse Survey

Table 1: Unemployment Data by Ward April 2020 - April 2021



Source: DC Department of Employment Services - Office of Labor Market Research and Information (OLMRI)

Seniors

Prior to the public health emergency, senior food insecurity in the District was the highest of any state in the country, according to Feeding America (14.3% in 2018), and had increased since 2016 (9.6%).¹⁰ During the public health emergency, seniors faced concerns of increased risk of serious illness from COVID-19, and many feared leaving their homes for groceries, healthcare, and other essential services. The added limitations of public transportation, congregate meal programs, and home visits further heightened the risk of food insecurity and social isolation. Participation rates for several District government programs indicated continued high food insecurity among seniors during the public health emergency.

The survey tool used to measure food insufficiency was likely not able to reliably measure food insufficiency among senior households, perhaps due to the survey’s online and texting methodology. Instead, senior participation data in federal and local nutrition programs can provide a more accurate picture of the prevalence of food insecurity among seniors.

Prior to the public health emergency, the home-delivered meals program serviced over 3,500 monthly clients. Demand increased to 6,172 clients in April 2020, when all meal operations were shifted to home-delivered meals. The program reached a peak in August 2020 with 6,678 clients and has since stabilized with a monthly caseload of over 6,000 clients receiving meals in April 2021.

Beginning in early April 2020, the Department of Aging and Community Living (DACL), which administers meal programs for seniors, shifted all meal operations to home delivery. To be eligible for this program, seniors must be at risk of nutrition insecurity, isolation, and have difficulty accessing food.

Nonprofit and government emergency food providers in the District have reported high demand for their programs from seniors across the city. As an example, DC Health, in partnership with the Capital Area Food Bank, administers the federal Commodity Supplemental Food Program, known locally as Grocery Plus. This program provides monthly groceries to over 5,400 seniors with low income and currently has a waitlist of 260 seniors. Additionally,

all those enrolled in Grocery Plus are eligible to participate in the Senior Farmers' Market Nutrition Program, which provides \$50 annually for fresh produce at farmers markets. In the 2020 season, 100% of benefits were redeemed.

PROGRESS & HIGHLIGHTS

Since the release of the 2020 Report, the District has taken ambitious steps to address food insecurity in the District and act on the Report's recommendations. Solving food insecurity is complex and necessitates ongoing commitment and investment and centering the voices of those experiencing food insecurity. This section highlights several of the major District investments and actions aimed at addressing food insecurity initiated over the past year.

Federal and local nutrition assistance programs are effective tools to address food insecurity, improve health, and bolster the local economy. Research shows that SNAP helped lift more than 3.6 million people across the country out of poverty in 2016 and reduced food insecurity.¹¹ WIC reduces the risk of premature births, and reduces the likelihood of low-weight infants. SNAP reduces hospitalization and healthcare costs, and improves adult mental and physical health.^{12 13 14}

These programs also have an economic multiplier effect: at the local level, for every dollar invested in SNAP, between \$1.54 and \$1.79 is generated in the local economy.^{15 16}

Extending and Expanding Emergency Feeding Programs

The 2020 Report recommended that the District and its partners continue emergency food assistance, particularly for high-risk populations, throughout the District's public health emergency (Recommendation #3, Continued Emergency Response). In fall 2020, the District extended its operation of the Get Help Hotline, which provided food boxes to residents in need, through June 2021. Over that time, the program delivered nearly 12,000 boxes with seven days' worth of shelf stable food items to residents that were advised to quarantine by a healthcare provider. From April 2020 to October 2020, the District distributed nearly 90,000 bags of fresh groceries to residents at 13 DC public schools as part of its Grocery Distribution Program in partnership with several local nonprofits. DC Public Schools (DCPS) continued to innovate throughout the public health emergency to increase participation in its meal programs for children, including by providing fresh groceries and offering weekly family style meal pickups. DACL has also continued home-delivered meals and piloted fresh produce pickup and nutrition services through a partnership with Mary's Center. The District continues to work with community partners to fill food resource gaps and values the partnership of local emergency food organizations and their dedication to District residents.

Expanding Federal Nutrition Programs

The 2020 Report recommended that the District and its partners advocate for extending/expanding federal nutrition programs and waivers, for programs like P-EBT, SNAP, WIC, and other federal nutrition programs (Recommendation #1, Continued Emergency Response). Over the past year, the federal government has expanded and extended flexibilities for several key programs, and the District has been able to help residents access these resources. These include:

The Pandemic-EBT Program (P-EBT) for Families with Children

The District was approved by the U.S. Department

of Agriculture (USDA) to extend P-EBT for the 2020-2021 school year. Through P-EBT, families with children who receive free or reduced-price school meals in the District can receive up to \$122.76 per month to purchase groceries. The American Rescue Plan provided additional funding to extend P-EBT through the summer of 2021. DHS continues to work tirelessly to implement these benefits to families. For the 2019-2020 school year, 76,849 children received \$40 million in benefits. For the 2020-2021 school year, DHS is working to ensure all 85,000 eligible children receive benefits, totaling \$93.9 million. When this report was written, DHS was awaiting guidance from the USDA on how to implement P-EBT benefits for the 2021-2022 school year.

Emergency Allotments for SNAP Clients

Over the course of the past year, the federal government has passed a series of economic stimulus packages that have included emergency benefit allotments to ensure that SNAP households receive the maximum monthly food benefit. In the District, these emergency allotments have increased from just over \$6 million in September 2020 to over \$13 million in April 2021 resulting in increased benefits for households. As participation in SNAP has increased, the federal changes to emergency allotments have allowed all households to receive a minimum of \$95 as of April 2021. Prior to this change, households with no income - meaning they were receiving the maximum SNAP benefits - were not eligible for the additional \$95 benefit. These changes have expanded this crucial benefit for individuals in the lowest income bracket.

Enhancing Benefits and Access to WIC

As part of the American Recovery Plan Act of 2021, District's WIC participants received an increase to the monthly Cash Value Voucher for fruits and vegetables from \$9 to \$35 from July to September 2021. These vouchers can be spent at DC WIC authorized grocery stores, corners stores, and farmers markets for fresh, frozen, and canned fruits and vegetables. In addition, current federal waivers continue to increase access to WIC by allowing clients to carry out appointments by videoconferencing and telephone, instead of in-



person.

DC Health is modernizing the DC WIC program by transitioning from paper checks to Electronic Benefits Transfer (EBT), allowing participants to redeem benefits over multiple visits rather than in a single transaction. In accordance with the local WIC Expansion Act of 2018, DC Health is also expanding the number of stores eligible to accept DC WIC benefits and making the program more accessible. In spring 2021, DC Health authorized three healthy corner stores. In summer 2021, DC WIC aims to authorize 6 additional corner stores.

New Budget Investments: Food Access Fund and Nourish DC Fund

The 2020 Report recommended that the District and its partners increase healthy food options in Wards 7 and 8 (Recommendation #1, Food Systems Change and Planning). The Fiscal Year 2022 District budget includes significant new investments to close

the grocery gap, support locally owned fresh food businesses, and strengthen existing grocery access programs. This includes \$58.67 million over three years for a new Food Access Fund to provide capital investments to increase equitable access to fresh, healthy, and affordable food by supporting grocery stores and restaurants, fast casual restaurants and other food access points in areas with low food access, with a focus on Wards 7 and 8. It also includes \$4 million for the recently launched Nourish DC Fund, which will support small food businesses, including small fresh food retailers, through grants, loans, and technical assistance.¹⁷

Developing the DC Federal Nutrition Program Toolkit

The 2020 Report recommended that the District and its partners ensure that every District resident is connected with federal nutrition programs for which they qualify (Recommendation #2, Continued Emergency Response). In July 2021, Mayor Bowser released the DC Federal Nutrition Program Toolkit¹⁸ to make it easier for residents to understand and enroll in federal nutrition programs like SNAP, WIC, the National School Lunch Program, senior meals, and more. The digital toolkit is designed to help community-based organizations, social service and healthcare providers, District agencies, and community members connect income-eligible residents with federal nutrition programs. The toolkit was made in partnership with local nonprofit DC Hunger Solutions.

Providing Urban Agriculture Infrastructure Grants

The 2020 Report recommended that the District and its partners expand investment and infrastructure for urban agriculture (Recommendation #8, Food Systems Change and Planning). In spring 2021, the District Department of Energy and the Environment (DOEE) released its first Urban Agriculture Infrastructure Grant awards. Eight awardees received a combined \$93,000 to install infrastructure and increase capacity at urban agricultural projects around the District. The funding

prioritized socially disadvantaged farmers, a U.S. Department of Agriculture designation for farmers from racial groups who have experienced prejudice, and projects focused on serving communities experiencing high rates of food insecurity. The Fiscal Year 2022 District Budget includes \$90,000 for another round of urban agriculture infrastructure grants.

Releasing the Centralized Kitchen Study

The 2020 Report recommends that the District and its partners consider the DC Office of Planning's recent report recommendations on how a centralized kitchen could improve institutional food and the local economy (Recommendation #9, Food Systems Change and Planning). In June 2021, the Office of Planning and the Food Policy Council published a report entitled an *Assessment of a Central Food Processing Facility for Washington, DC*.¹⁹ This report considers how the District could best use a centralized kitchen facility to improve the nutritional



quality of meals served in public institutions (such as schools, senior centers, and correctional facilities), support local food businesses, create career pathways in the food sector, and strengthen the District's food resiliency in case of future emergencies. Required under the Healthy Students Amendment Act of 2018, the report provides valuable insights into how the District could design and manage such a facility to maximize its benefits to District residents.

CONCLUSION

As the District recovers from the COVID-19 public health emergency, the

Bowser administration has made significant new investments and expanded programs that provide critical assistance for residents experiencing food insecurity. We recognize that there is still more to do, particularly for Black and Latinx residents, households with children, and seniors, who continue to be at higher risk of food insecurity than the general population. We encourage the District and its partners to continue to:

- Expand participation in federal nutrition programs,
- Build relationships with community partners trusted by residents, and
- Expand fresh food access options and choice for residents across the District.

Specifically, several recommended actions in the 2020 Report and the DC Food Policy Council's 2021 Food Policy Priorities have yet to be fully implemented. Please refer to the 2020 Report *Food Access and Food Security in the District of Columbia: Responding to the COVID-19 Public Health Emergency*²⁰ and the DC Food Policy Council's 2021 Food Policy Priorities²¹ for more details.



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- ⁶ U.S. Department of Agriculture. Food Security in the U.S. Overview. Accessed July 13, 2021. <https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us/>
- ⁷ The authors note that food insufficiency is not a perfect measurement of food insecurity. While food insecurity is measured by an 18-question survey and is highly reliable, food insufficiency is measured by one question with four possible responses. One of those responses is that the household was able to get enough food but not always the kinds of food they wanted to eat. While this response may reflect the household is experiencing challenges of accessing and affording healthy foods which correlates with food insecurity, it could also reflect disruptions in the supply chain due to the pandemic which do not correlate with food insecurity. We do not report on the percentages of households that report having enough to eat but not always the kinds of food they wanted to eat because of the uncertainty in the household's response.
- ⁸ The U.S. Census Bureau's Household Pulse Survey allows households to self-identify their race and ethnicity. Households identify if they are of Hispanic, Latino, or Spanish origin. Households also identify their race from Black or African American, American Indian or Alaska Native, Asian, White, or two or more races. The data reported here is for Latinx households (which may be of any race), non-Hispanic Black households, non-Hispanic Asian households, and non-Hispanic White households.
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