

State of Food Insecurity in Connecticut 2025



**Commission on Women, Children, Seniors,
Equity, and Opportunity**



Letter from the CWCSEO

Dear Members of the Aging, Environment, Human Services, Planning and Development, and Public Health Committees,

The Commission on Women, Children, Seniors, Equity and Opportunity (CWCSEO) is pleased to present our 2025 Report on the State of Food Insecurity in Connecticut, reflecting our commitment as mandated by Public Act 23-204. This is the 2nd iteration of this report, and builds on the findings and recommendations from the previous year.

As food insecurity and nutrition-related diseases continue to affect large numbers of Americans, an increasing number of states are placing a priority on food and nutrition policy. The CWCSEO has actively engaged with other states: meeting individually or in small groups with food insecurity staffers, participating in a larger group meeting with 8 other states, and hosting the New Jersey Office of the Food Security Advocate to give a presentation at the Legislative Office Building in Hartford in September of 2025. In this report, the CWCSEO uses this engagement to both draw on the best practices from other states and offer innovative solutions based on the local context of Connecticut.

This engagement together with community feedback, the collection of publicly available data, and peer reviewed research created this report and recommendations. We hope this combination will allow for the creation of community-led, evidence-based policies that can help to fight both food and nutrition insecurity.

We are grateful to the Connecticut General Assembly, community members, agencies, and other partners for their support, and look forward to continuing the work to ensure food security for all residents of our state.

Sincerely,



Melvette Hill

Executive Director, CWCSEO

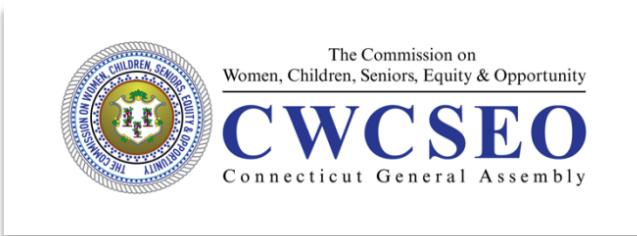


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CWCSEO Mission and Statutory Requirement

To inform and engage all policy makers about constituent needs for women, children and their families, seniors, and the African American, Asian Pacific-American, Latino and Puerto Rican populations in Connecticut. We are a nonpartisan agency with a data- driven, cross-cultural approach to policy innovation. We work to eliminate disparities by identifying opportunities, building connections and promoting change.



Statutory Requirement

Subdivision (4) of subsection (b) of section 155 of Public Act 23-204 requires the Food & Nutrition Policy Analyst to produce and submit an annual report on the state of food insecurity in Connecticut. Subsection (c) requires the report to be submitted along with recommendations to reduce food insecurity.

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Executive Summary

In reviewing the changes to food security and the food system from 2024 to 2025, this report concludes that the overall state of food security in Connecticut has significantly worsened and will likely continue to do so in the coming years without significant intervention. Feeding America's estimated food insecurity rate for Connecticut in 2023 increased to 14.3% (identical to the national average), meaning food insecurity has increased by a total of 40% since 2020 and Connecticut has passed Maine for the highest food insecurity rate in New England by this metric. While DataHaven's estimate for statewide food insecurity rate did decrease to 16%, that remains the highest estimate of food insecurity in the state, and represents a convergence with the other estimates. Meanwhile, the USDA has announced it will stop measuring food insecurity entirely, though it may release a final estimate for 2024 in the days or weeks after the submission of this report.

Two of the key drivers of this continued growth in food insecurity are rising prices and falling federal support. 2025 continued the trend that started in 2022 of net federal support for food security programs decreasing from its COVID-era high point. Funding for a number of important federal programs, such as SNAP Education (SNAP-Ed), the Local Food Purchase Assistance Cooperative Agreement Program (LFPA), and the Local Food for Schools Cooperative Agreement Program (LFS) was eliminated entirely, while cost-sharing changes to the Supplemental Nutrition Assistance Program (SNAP) are projected to reduce federal funding to Connecticut by between \$40 million and \$173 million per year once they take effect partially in FY27 and fully in FY28. Furthermore, DataHaven estimates Connecticut families will see between \$132 million and \$180 million in reduced SNAP benefits per year due to a number of new restrictions, with the Department of Social Services estimating restrictions to the SNAP-LIHEAP "Heat and Eat" connection alone will reduce statewide SNAP benefits by approximately \$62.5 million per year. Similarly, access to free school meals in Connecticut decreased in the 2025-26 school year for the third consecutive year due to the end of ARPA-funded free meals for reduced-price eligible students, bringing access back to pre-COVID levels.

However, food prices are significantly higher than they were during pre-COVID years, with the US Department of Agriculture (USDA) finding that prices rose by 3% in 2025 (after increasing 2.3% in 2024, 5.5% in 2023, and 9.9% in 2022). It is important to emphasize that total Connecticut state funding on food security increased from FY25 to FY26, driven by large increases for certain programs such as the Connecticut Nutrition Assistance Program (CT-NAP) and Local Food for Schools Incentive Program (LFSIP), and some new federal resources may come from Section 32 of the Agriculture Act of 1935. However, these amounts are likely not sufficient to make up for federal reductions phasing in between now and FY28. **Reversing these increasing price and decreasing support trends is critical, as increased supports are needed to prevent rising prices from translating into rising food insecurity.**

The main new analysis of this report on the underlying causes of food and nutrition insecurity focuses on barriers to information access around food and nutrition. Specifically, it details limited nationwide access to skills and knowledge around **nutrition, food contents, cooking, growing food, food safety, how to identify and apply for federal benefits, and how to**

identify local resources. Some information, such as nutrition and food contents, appears to not reach the majority of the population, while other information, such as cooking skills, reaches most people but not everyone. For the latter category, some residents may be disproportionately likely to not have access to information or education on specific topics, such as young adults or individuals with limited internet access. Finally, on some topics such as nutrition, misleading or inaccurate information is widespread on popular sources such as the internet and social media.

Within the topic of “food contents,” this report offers definitions and in-depth analysis about **ultra-processed foods**. It notes that ultra-processed foods are estimated to represent up to 73% of the US food supply, and are increasingly being linked to a number of negative health outcomes and even increased risk of premature death. It also notes research has offered nuance that some ultra-processed foods can be less harmful than others, with one study singling out sugar-sweetened beverages and processed meats as the most detrimental to heart health. The report also notes that available evidence suggests many adults are not able to determine what foods are ultra-processed, meaning many may struggle to avoid them. Finally, some foods, including many ultra-processed ones, also fall into the category of **hyper-palatable**, or foods designed to make people want to keep eating and are associated with increased risk of obesity.

In line with these challenges, the report makes three new recommendations designed to increase access to information and education around food and nutrition:

- 1. Develop Definitions and Data Metrics for Key Concepts in Statute and Set Targets as Part of an Official State Plan to Eliminate Food Insecurity**
- 2. Develop Labeling Requirements Regarding Food Content and Nutrition Rankings**
 - a. Implement a modified version of the Supporting Wellness at Pantries (SWAP) System on food store shelves
 - b. Require Front of Package food content and processing level labels
- 3. Establish a Holistic Food Education State Roadmap and Develop Model Curricula**
 - a. Convene a Holistic Food Education Work Group with statutory authority to create a State Food Education Roadmap and develop model school policies and curricula for K-12 schools
 - b. Revive SNAP-Ed at the state level
 - c. Require formal nutrition education in Medical School and Residency Programs

However, it is important to emphasize that education and awareness are necessary but not sufficient to ensure food and nutrition security. The impact of educating consumers to choose nutrient-dense foods is limited if those foods are unaffordable or inaccessible. As such, the education and information policies must be paired with investments into food benefits and food system infrastructure to ensure all residents can have enough nutritious food to meet their needs.

Given the worsening state of food insecurity and the primacy of access and affordability issues, this report concludes that without significant new state-level funding, it will be extremely difficult to fully combat food insecurity. This report renews the 2024 report’s recommendation to create a **Food & Nutrition Special Fund** with dedicated revenue sources within the state budget, and **elevates it to the primary recommendation of this report**. There are also at least five reasons that a special fund is determined to be necessary for food and nutrition security:

1. The rapid increase in food insecurity in Connecticut
2. The decreases in federal support since 2022 and uncertainty around key federal legislation like the Farm Bills since 2000
3. The fact that at least four northeastern states (MA, VT, NY, and NJ) spend more per capita on just 3 food insecurity programs than Connecticut does on all 51 food-related items in the FY26-27 budget combined (21 items excluding grants and earmarks).
4. The potential for long-term savings in healthcare and other costs linked to food insecurity if there is consistent, long-term funding for food security.
5. The fund's ability to facilitate a central plan to eliminate food insecurity via programs dispersed across multiple state agencies, local governments, and non-governmental organizations

The report concludes that this special fund is the most practical way to secure enough funding to implement sufficient structural changes to improve the accessibility and affordability of nutritious food in Connecticut. The report also renews the four possible options for filling such a fund from the previous report and offers one new one.

- **Removing sales tax exemptions from extremely unhealthy foods and beverages and dedicating revenue from items already excluded from the exemption.**
- **Dedicating the Revenue from the 1% “prepared meals” surcharge**
- **Transfers from Other Funds or Private Sources**
- **Expanding the Luxury Tax to Cover High-Value Food and Drink Items**
- **Excise tax on sugar sweetened beverage distributors**

In terms of other policies to exist within this fund to structurally improve the accessibility and affordability of nutritious food, this report renews the other ten recommendations from the 2024 report:

- **Implement Universal Free School Meals**
- **Mitigate Benefits Cliffs**
- **Establish a State Minimum SNAP Benefit Amount**
- **Apply for Section 1115 Medicaid Waiver for Food as Medicine Initiatives**
- **Create or expand regional community food hubs**
- **Establish a state food business incubator program**
- **Double SNAP benefits for Connecticut-Grown Produce**
- **Fund Local Food Purchasing Agreement (LFPA) Programs at the state level**
- **Expand Support for the Food Systems Capacity Building Grant**
- **Partner with research institutions to fill gaps in the current data and recommend state goals for food security metrics**

Timely government intervention is needed to prevent this crisis from growing beyond its current level. While the cost of several of these recommendations would be significant, the unfortunate reality is that the state is almost certain to spend substantial amounts of money due to food insecurity no matter what. If nothing is done and food insecurity continues to affect hundreds of thousands of residents, the state will be paying substantial amounts of money to deal with the negative impacts of food insecurity on housing, education, healthcare, and more. Every source of funding, including the five offered in this report, has drawbacks, but few of those drawbacks will be as severe or costly as the ones that come with allowing food insecurity to keep affecting more

Connecticut households each year. As such the CWCSEO recommends that the General Assembly invest in the people of Connecticut and our communities by allocating funding to address food insecurity so that no one has to go to bed hungry in our state.

Acknowledgements

The content of this report has been created with the input of a number of people throughout the state who shared their time, experience, and expertise. The Commission on Women, Children, Seniors, Equity, and Opportunity (CWCSEO) wishes to express its gratitude to all contributors, including CWCSEO Staff and Fellows, community members, and state agency partners, without whom this report would not have been possible. Additionally, the CWCSEO would like to extend special thanks to a number of people who provided extensive support during the drafting process:

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Introduction

Food insecurity is often discussed in terms of data and academic language, but it is important to emphasize what these numbers and research mean in terms of the negative impacts on individual lives. Behind the numbers there are students struggling to focus in school because they are worried about where their next meal will come from. There are parents skipping meals so their children don't have to and trying to get through the work day while dealing with hunger. There are individuals in the emergency room due to diet-related chronic diseases, scared for their health. And worst of all, there are lives being cut short due to all of the harms that come with food and nutrition insecurity. This is the daily reality for hundreds of thousands of Connecticut residents. This report will examine the state of food and nutrition insecurity in Connecticut and make policy recommendations to combat them.

Summary of 2024 Report

The 2024 version of this report was the first Report on the State of Food Insecurity in Connecticut produced by the CWCSEO. As such, it endeavored to provide a comprehensive overview of food insecurity in Connecticut, the key underlying challenges that contribute to its prevalence, and the impacts it has on individuals and communities. The report was divided into three sections, which analyzed different components of the broader concept of food security:

1. Access to sufficient *quantity* of food (“**traditionally defined**” **food security**),
2. Access to sufficient *quality* of food (**nutrition security**)
3. Ability of the local food system to produce, transport, store, and distribute food (**local food economies**)

Ultimately, the report concluded that “**food and nutrition insecurity in Connecticut are widespread, persistent, and having a significant negative impact** on lives and communities across the state. Furthermore, available evidence suggests that **without a significant policy intervention or a major change in circumstances the situation is more likely to get worse than it is to get better.**” As such, the report made 11 policy recommendations to reduce food insecurity, collectively attempting to form a holistic statewide strategy to make nutritious food more affordable and physically accessible. This report will re-evaluate these recommendations in Section 3, and will refer to findings from the 2024 report throughout.

Definitions:

This report will retain the definitions used in the 2024 report. The definitions are included below, though the rationale behind these definitions is omitted and can be found in the 2024 report.

Food Security: “access by all people at all times to enough food for an active, healthy life.”¹

Food Insecurity: the lack of “(1) the ready availability of nutritionally adequate and safe foods, and (2) an assured ability to acquire acceptable foods in socially acceptable ways.”²

¹ See, USDA ERS - Food Security in the US
[\(https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-u-s/\)](https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-u-s/)

² See, USDA FNS - Guide to Measuring Food Insecurity

Food insufficiency: A “more severe” form of food insecurity because that “measures whether a household generally has enough to eat.”³ Unlike food insecurity, food insufficiency is a point in time metric, and an individual’s food sufficiency status can change day-to-day.

Nutrition security: When households “have consistent access to the safe, healthy, affordable foods essential to optimal health and well-being.”⁴

Food Desert/“Low-Income, Low-Access” (LILA) Area:⁵ An area that has a poverty rate of 20% or greater or the area’s median family income is less than or equal to 80% of the median income of the state or metropolitan area it is located and “a significant number (at least 500 people) or share (at least 33 percent) of the population” lives more than a certain distance (.5 or 1 mile in urban areas and 10 or 20 miles in rural ones) away from the nearest grocery store.⁶

Food Swamp: “Areas with a higher density of fast food and junk food options rather than healthy food options.”⁷

Review of Relevant Federal Food & Nutrition Programs

There are a number of federal programs with a state-level implementing agency. All programs are federally administered by the US Department of Agriculture (USDA) except for the Elderly Nutrition Program, which is administered by the Department of Health and Human Services (HHS).^{8 9} A complete list of programs with descriptions is available in Appendix D. These programs will collectively be referred to as “federal nutrition programs.”

Outline of the Report:

The content of this report will be substantially different from the previous one, and will be subdivided into three sections. The first section will focus on updates to the state of food and nutrition insecurity in Connecticut by analyzing newly released data updates from 2025 along with changes to federal and state food policy. The second section will provide an in-depth analysis on underlying challenges contributing to food and nutrition insecurity, with a special focus on challenges not discussed in last year’s report. Specifically, this year’s underlying challenge spotlight will focus on information accessibility, and how lack of access to information and education around food and nutrition can undermine food and nutrition security. Finally, the third section will make policy recommendations to reduce food and nutrition insecurity. It will review and update the previous year’s recommendations before moving on to make new recommendations specifically designed to combat the challenges outlined in Section 2.

³ See, USDA ERS - Measurement

(<https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-u-s/measurement#:~:text=Food%20insufficiency%20is%20a%20more,than%20to%20overall%20food%20insecurity.>)

⁴ See, USDA National Agricultural Library - Nutrition Security

(<https://www.nal.usda.gov/human-nutrition-and-food-safety/nutrition-security>)

⁵ See, USDA ERS - Introduction to the Food Access Research Atlas

(<https://gisportal.ers.usda.gov/portal/apps/experiencebuilder/experience/?id=a53ebd7396cd4ac3a3ed09137676fd40>)

⁶ See, USDA ERS - Food Access Research Atlas Documentation

(<https://www.ers.usda.gov/data-products/food-access-research-atlas/documentation/>)

⁷ See, American Heart Association - Living near a “food swamp” may increase stroke risk among adults 50 and older

(<https://newsroom.heart.org/news/living-near-a-food-swamp-may-increase-stroke-risk-among-adults-50-and-older>)

⁸ See, Administration for Community Living - Evaluation of the Effect of the Older Americans Act Title III-C

Nutrition Services Program on Participants’ Food Security, Socialization, and Diet Quality

(https://acl.gov/sites/default/files/programs/2017-07/AoA_outcomesevaluation_final.pdf)

⁹ See, USDA FNS - FNS Nutrition Programs (<https://www.fns.usda.gov/programs>)

Section 1: Changes in the Food System (2024-2025)

Both the Connecticut and national food systems have seen a number of significant changes in the last year. This section will identify the major changes as well as the overall direction of food and nutrition security in Connecticut.

Food and Nutrition Insecurity Data Changes:

Overall, the post-pandemic trend of worsening food and nutrition insecurity has continued over the last year. Feeding America's Map the Meal Gap data estimates that in 2023 516,640 Connecticut residents (14.3% of the population) were food insecure, identical to the national average.¹⁰ This is a 10.9% increase from the same source's 2022 estimate, when food insecurity affected 468,150 residents (12.9% of the population).¹¹ **This most recent increase saw Connecticut overtake Maine for the highest food insecurity rate in New England by this metric, and the 3rd highest rate among all Northeast and Mid-Atlantic states (behind only West Virginia at 15.7% and New York at 14.5%).**¹² Connecticut Foodshare, the state Feeding America affiliate, also notes that since 2020 food insecurity has increased 40%, meaning 152,600 additional residents have become food insecure.¹³ Another notable change is that 57% of food insecure individuals in Connecticut are estimated to live in households living below the SNAP eligibility threshold of 200% of the Federal Poverty Level compared to 43% living in households making more than that.¹⁴ This is a shift from 2022 when a slight majority of food insecure individuals (51%) were estimated to be above the SNAP threshold, suggesting a disproportionate increase in food insecurity among low-income households. One factor that has not changed is the disproportionate impact on certain groups, with 17% of Connecticut children, 27% of residents identifying as Black or African American, and 29% of residents identifying as Hispanic or Latine experiencing food insecurity.¹⁵

¹⁰ See, Feeding America Map the Meal Gap - Food Insecurity among the Overall Population in Connecticut (<https://map.feedingamerica.org/county/2023/overall/connecticut>)

¹¹ Ibid

¹² Ibid

¹³ See, Connecticut Foodshare - Hunger in Connecticut (<https://www.ctfoodshare.org/hunger-in-ct>)

¹⁴ Ibid

¹⁵ See, Feeding America Map the Meal Gap - Food Insecurity among the Overall Population in Connecticut (<https://map.feedingamerica.org/county/2023/overall/connecticut>)

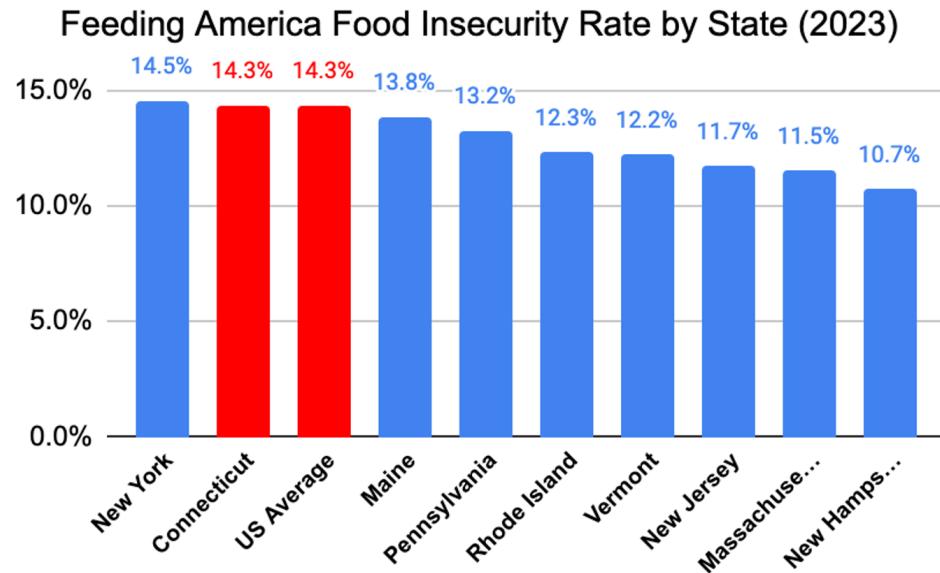


Figure 1: Feeding America Food Insecurity Rate by Northeast State 2023

Source: [Feeding America Map the Meal Gap](#)

One positive development was the slight decrease in food insecurity according to DataHaven's 2025 Community Wellbeing Survey, which estimated 16% of Connecticut residents experienced food insecurity, down from 18% in 2024.¹⁶ However, in a press release discussing the results, DataHaven notes that "food insecurity is rising" among households with children (26% of whom reported food insecurity) and that 16% still represented a 100,000 adult increase from pre-COVID levels.¹⁷ Furthermore, even the decreased 16% is the highest of the three major estimates of statewide food insecurity, higher than the USDA or Feeding America, and the decrease in this measure and the increase in Feeding America's represents a convergence in estimates of food insecurity in Connecticut in the 14%-16% range rather than 12%-18% last year.

¹⁶ See, DataHaven - 2025 Community Wellbeing Survey Crosstabs (https://www.ctdatahaven.org/sites/ctdatahaven/files/DataHaven2025_Connecticut_Crosstabs_110625b.pdf)

¹⁷ See, DataHaven - 2025 DataHaven Community Wellbeing Survey Highlights Trust, Resilience, and Economic Challenges Across Connecticut (<https://www.ctdatahaven.org/sites/ctdatahaven/files/DataHaven%20Press%20Release%20110725.pdf>)

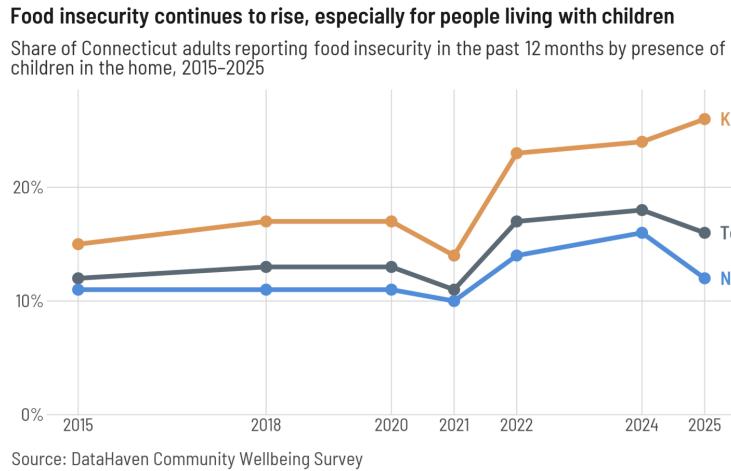


Figure 2: Food Insecurity Rates in CT Over Time
 Source: [DataHaven Community Wellbeing Survey](#)

The final major food insecurity metric for Connecticut is the USDA's. As of December 1, 2025, an update for this metric has not yet been released in 2025, with one likely expected before the end of the year. It is however worth noting that in September of 2025, the USDA announced the "termination" of household food insecurity surveys and reports starting in 2026, referring to such reports as "redundant, costly, politicized, and extraneous."¹⁸ As such, even if there is a data update this year, there will likely be no other future updates to USDA food insecurity estimates afterwards.

Another major datapoint to measure need is the change in use of food banks and pantries. Statewide, Connecticut Foodshare reported a 23% increase in families served since July 1, 2025 compared to the same timeframe in 2024. Additionally, some parts of the state reported even higher upticks in need. For example, the 2025 Valley Health Index Report found that food pantry increased 36.7% in the Naugatuck Valley, although the data reported is from 2023 to 2024.¹⁹ These numbers do not take into account the massive spike in need that food pantries experienced when SNAP benefits were briefly interrupted in November due to the Federal Government Shutdown. By November 4th, just four days into the interruption of SNAP benefits, Connecticut Foodshare reported partner pantries were seeing 30% to 50% increases in visits across the state, while the United Way of Connecticut's 211 line reported "ten times the number of inquiries about food assistance compared to the same time a year ago."²⁰ Overall, available data suggests that increases in food insecurity have also translated to increased strain on the emergency food system.

¹⁸ See, USDA - USDA Terminates Redundant Food Insecurity Survey (<https://www.usda.gov/about-usda/news/press-releases/2025/09/20/usda-terminates-redundant-food-insecurity-survey>)

¹⁹ See, Valley Council for Health and Human Services - 2025 Valley Community Index (https://www.valleycouncil.org/_files/ugd/a43e59_9de8f699571246f69b5d70be7bb5d624.pdf)

²⁰ See, CT Mirror - With SNAP suspended, food pantries struggle to keep up (<https://ctmirror.org/2025/11/06/ct-snap-suspended-food-pantries/>)

There is mixed data on the trend with regards to food prices. Feeding America estimates that in 2023 the average meal cost in Connecticut was \$3.67, a 14.1% decrease from the \$4.27 average meal cost in 2022.²¹ On the other hand, as of December 1, 2025, the USDA's Food Price Outlook predicts overall nationwide food prices will rise a total of 3% across 2025, which is "faster than the historical average rate of growth."²² This is a faster rate of increase than the 2.3% observed in 2024 but still significantly below the 5.5% increase in 2023 and 9.9% increase in 2022, the latter of which is the highest one-year increase in food prices on record since 1979.²³ Overall, food prices increased a total of 23.6% from 2020 to 2024, and this 3% increase in 2025 suggests that those increases are being exacerbated rather than reversed.²⁴

Another area with new data is participation rates in certain federal nutrition programs. In February of 2025, the USDA released its participation report for FY22, which showed that SNAP participation in Connecticut was at 98% of eligible residents, significantly above the national average of 88% and also above Connecticut's 2020 estimate of 93%.²⁵ Total food spending in Connecticut was also updated. The USDA found that in 2024, Connecticut collectively spent (without taxes or tips) approximated \$9.79 billion on "food at home" and \$13.28 billion on "food away from home," for a total of approximately \$23.07 billion, which is an increase of slightly more than \$500 million from 2023.²⁶

Finally, there are a number of metrics relevant to food and nutrition security that have not been updated since the end of 2024. Examples of these include USDA Food Access Research Atlas (FARA) which measures Low-Income, Low-Access (LILA) areas, commonly referred to as "food deserts." The most recent data available in the Atlas is currently from 2019.²⁷ Similarly, there are other datasets that are not intended to be annually updated, such as the USDA Census of Agriculture which is updated every 5 years and not expected to see another update until 2027.²⁸

Overall, new data released in 2025 broadly suggests that food insecurity and the state of the wider food system in Connecticut has worsened in the last year.

Federal Policy Changes:

A number of significant changes have occurred in federal government food policy since the end of 2024. One such change is the cancellation of future rounds of funding for the Local Food

²¹ See, Feeding America Map the Meal Gap - Food Insecurity among the Overall Population in Connecticut (<https://map.feedingamerica.org/county/2023/overall/connecticut>)

²² See, USDA ERS - Food Price Outlook, 2025 (<https://www.ers.usda.gov/data-products/food-price-outlook/summary-findings>)

²³ Ibid

²⁴ See, USDA ERS - Food Prices and Spending (https://www.ers.usda.gov/data-products/ag-and-food-statistics-charting-the-essentials/food-prices-and-spending?top_icId=1afac93a-444e-4e05-99f3-53217721a8be)

²⁵ See, USDA - Reaching Those in Need: Estimates of State Supplemental Nutrition Assistance Program Participation Rates in 2022 (<https://fns-prod.azureedge.us/sites/default/files/resource-files/ear-snap-Reaching-Those-in-Need-2022.pdf>)

²⁶ See, USDA ERS - Food Expenditure Series (<https://www.ers.usda.gov/data-products/food-expenditure-series>)

²⁷ See, USDA ERS - Food Access Research Atlas - Go to the Atlas (<https://www.ers.usda.gov/data-products/food-access-research-atlas/go-to-the-atlas>)

²⁸ See, USDA NASS - Census of Agriculture (<https://www.nass.usda.gov/AgCensus/>)

Purchase Assistance Cooperative Agreement Program (LFPA) and the Local Food for Schools Cooperative Agreement Program (LFS) in March of 2025.²⁹ The LFPA is a program that provided states with funding to purchase food from local producers and provide it to food security organizations such as food banks, while the LFS did the same for food to be distributed to schools.³⁰ ³¹ In total, the cancellations resulted in the elimination of \$3.7 million for the LFPA and \$5.6 million for the LFS in Connecticut, resulting in a total of \$9.3 million in funding cuts through 2027, though leftover funding from previous rounds can still be spent.³² Another change that impacts food banks and pantries is the reduction of support through the Emergency Food Assistance Program (TEFAP), which purchases “100% American-grown USDA foods” to provide to households at no cost via food banks.³³ Connecticut Foodshare announced in March of 2025 that a total of 34 “bonus loads” of TEFAP food they were expecting to receive had been canceled.³⁴ One article later noted the cancellation of a 35th load, and estimated that the cancellation of these loads resulted in a total of \$1.7 million worth of food not being delivered to local food pantries.³⁵ It is important to note that some of these cuts could be offset by increases elsewhere, with the USDA announcing in May 2025 that under Section 32 of the Agriculture Act of 1935, it intended “to purchase up to \$67 million in fresh seafood, fruits, and vegetables from domestic producers to distribute to food banks and nutrition assistance programs across the country.”³⁶ However, unless Connecticut’s share of this program exceeds the estimated \$5.4 million in cuts to LFPA and TEFAP, Connecticut will have received less food support for food banks, food pantries, and local farmers from the federal government in 2025 than in 2024, in addition to \$5.6 million less in funds for local farmers and local food for schools.

Another change is the elimination of food education programming in Connecticut that had previously been provided via federal resources. Perhaps the largest change is the de-funding of SNAP Education, commonly referred to as SNAP-Ed. The USDA describes SNAP-Ed, which is funded through the Nutrition Education and Obesity Prevention Grant Program, as an “evidence-based” education program which “helps people make their SNAP dollars stretch,

²⁹ See, Politico - USDA cancels \$1B in local food purchasing for schools, food banks (<https://www.politico.com/news/2025/03/10/usda-cancels-local-food-purchasing-for-schools-food-banks-00222796>)

³⁰ See, USDA AMS - Local Food Purchase Assistance Cooperative Agreement Program (<https://www.ams.usda.gov/selling-food-to-usda/lfpacap>)

³¹ See, USDA AMS - Local Food for Schools Cooperative Agreement Program (<https://www.ams.usda.gov/selling-food-to-usda/lfs>)

³² See, CT Public - CT loses millions intended for local food purchasing, as federal funding cuts continue (<https://www.ctpublic.org/news/2025-03-14/ct-loses-millions-intended-for-local-food-purchasing-as-federal-funding-cuts-continue>)

³³ See, USDA FNS - The Emergency Food Assistance Program (<https://www.fns.usda.gov/tefap/emergency-food-assistance-program>)

³⁴ See, Connecticut Foodshare - USDA Makes Additional Cuts to Emergency Food Program, Ripping Resources from Nonprofit Providers Statewide (https://irp.cdn-website.com/49f36671/files/uploaded/March_24_2025_-_Statement_on_cuts_to_TEFAP_UPDATE_D_3.25.25.pdf)

³⁵ See, CT Public - CT Foodshare fears new challenges feeding families, amid new federal funding threats (<https://www.ctpublic.org/news/2025-06-27/ct-foodshare-fears-new-challenges-feeding-families-amid-new-federal-funding-threats>)

³⁶ See, USDA - Secretary Rollins Announces Food Purchases for Communities in Need (<https://www.usda.gov/about-usda/news/press-releases/2025/05/23/secretary-rollins-announces-food-purchases-communities-need>)

teaches them how to cook healthy meals, and lead physically active lifestyles.”³⁷ However, Section 10107 of the “One Big Beautiful Bill Act” that was signed into law on July 4th, 2025, amended the statute authorizing the Nutrition Education and Obesity Prevention Grant Program (Section 28(d)(1)(F) of the Food and Nutrition Act of 2008) to remove funding authorization from “each subsequent fiscal year” instead authorizing funding “for each of fiscal years 2016 through 2025.”³⁸ **This means that the federal funding for SNAP-Ed has been eliminated entirely starting in federal FY26 (which began on October 1st, 2025).** The Connecticut 2025 SNAP-Ed Plan states that the federal “funds requested from current FY allocation” for all SNAP-Ed programs was \$4,662,362.³⁹ Since the program’s budget is being reduced to \$0 as of October 1, 2025, this means **cuts to Connecticut for SNAP-Ed alone amount to just over \$4.66 million annually**, though carryover funding from last year could be used for a limited continuation in FY26. For context, a 2019 report from the U.S. Government Accountability Office (GAO) noted that nationally SNAP-Ed is the 2nd largest federal nutrition education program (\$404 million in FY17) behind only WIC’s education program (\$422 million), with the three other programs receiving just \$80 million combined in the same time period.⁴⁰ Additionally, given that WIC eligibility is limited to pregnant and breastfeeding mothers and children up to the age of 5, many SNAP-Ed participants are likely ineligible to receive that education through WIC.⁴¹ Within Connecticut, SNAP-Ed is coordinated by the Department of Social Services, with education offered through five implementing agencies (The Department of Public Health, Hispanic Health Council, UConn Husky Nutrition and Sport, UConn Department of Allied Health Sciences, and UConn Department of Nutritional Sciences).⁴² UConn Extension’s impact report for just the latter two implementing agencies stated that they reached a combined 3,083 individuals in 2024.⁴³ Additionally, a randomized control trial study in Indiana found that SNAP-Ed participation reduced household food insecurity.⁴⁴ As such, the end of this program will reduce access to a nutrition education program that has the potential to fight food insecurity.

Another federal change that has impacted access to food and nutrition education is the one made to the Americorps program. In April of 2025, the federal government announced the cancellation of a number of grants, early discharge of service members, and administrative leave pending a reduction in force for Americorps staff, though a court placed a temporary pause on the first two

³⁷ See, USDA SNAP-Ed Connection - About (<https://snaped.fns.usda.gov/about>)

³⁸ See, [Congress.gov](https://www.congress.gov/bill/119th-congress/house-bill/1/text) - H.R. 1 One Big Beautiful Bill Act (<https://www.congress.gov/bill/119th-congress/house-bill/1/text>)

³⁹ See, CT Department of Social Services - 2025 Annual Plan (https://portal.ct.gov/dss/-/media/departments-and-agencies/dss/snap/snap-nutrition-ed/ct-dss-annual-plan_fy2025_website.pdf?rev=f38988c3e09142e187b291166dab5a5d&hash=5521D2C6E624A09B34E439E619B15242)

⁴⁰ See, United States Government Accountability Office - Nutrition Education: USDA Actions Needed to Assess Effectiveness, Coordinate Programs, and Leverage Expertise (<https://www.gao.gov/assets/gao-19-572.pdf>)

⁴¹ See, 2-1-1 Connecticut - WIC Women, Infants, and Children Program (<https://uwc.211ct.org/wic-women-infants-and-children-program/>)

⁴² See, CT Department of Social Services - Connecticut Supplemental Nutrition Assistance Program Education (SNAP-Ed) (https://portal.ct.gov/dss/snap/snap-nutrition-ed?language=en_US)

⁴³ See, Appendix C

⁴⁴ See, Rivera, R. L., Maulding, M. K., Abbott, A. R., Craig, B. A., & Eicher-Miller, H. A. (2016). SNAP-Ed (Supplemental Nutrition Assistance Program-Education) Increases Long-Term Food Security among Indiana Households with Children in a Randomized Controlled Study. *The Journal of nutrition*, 146(11), 2375–2382. <https://doi.org/10.3945/jn.116.231373>

changes in June.⁴⁵ The relevance to food and nutrition education is through the impact on the Americorps program FoodCorps. FoodCorps is an Americorps program with the stated goal of “advancing child well-being through food in school,” which includes corps members working with schools “in providing nutritious meals, locally-informed food education, and welcoming school environments that set kids up for positive, vibrant relationships with food.”⁴⁶ For the last 12 years, FoodCorps has done this work in Connecticut, with FoodCorps members being directly placed in numerous public schools throughout the state to directly provide food and nutrition education. However, in July of 2025, FoodCorps released a statement that due to the federal changes, Americorps “has not renewed its partnership with FoodCorps” necessitating a 40% reduction in the organization’s budget that will see it reduce its operations to just eight states.⁴⁷ Connecticut is not one of the eight states who will see continued operations, meaning that the program ended entirely in the 2025-26 school year.⁴⁸

An even larger federal change has been made to SNAP itself. The Connecticut Department of Social Services published a document on July 3rd, 2025, in which they summarize the impacts of the One Big Beautiful Bill Act on SNAP benefits. The first impact is changes to work requirements, with the age limit for “Able-Bodied Adults Without Dependents” to be subject to work requirements raised from 54 to 64 and the exemptions for adults with children over the age of 14, veterans, individuals experiencing homelessness, and those under 24 who aged out of the foster care system being eliminated entirely.⁴⁹ Geographic exemptions for work requirements were also restricted to just areas with a local unemployment rate of 10% or higher, with DataHaven noting this will reduce the number of towns in Connecticut with exemptions from 68 to 0.⁵⁰ The law also limits SNAP eligibility for non-citizens, restricting it to only those who are legal permanent residents, Cuban or Haitian entrants, and Compacts of Free Association (COFA) citizens (COFA applies to the Marshall Islands, Palau, and Micronesia).⁵¹ The last recipient-facing change listed is the limitation of the connection between SNAP and the Low Income Home Energy Assistance Program (LIHEAP), informally called “Heat & Eat,” to only households with an elderly or disabled member.⁵² This change is expected to reduce SNAP benefits by approximately \$100 per household per month for approximately 50,000 households in Connecticut, leading to a total statewide loss of approximately \$62.5 million per year.⁵³

Another significant change to SNAP is restrictions on future updates to the Thrifty Food Plan (TFP). The TFP is calculated by the USDA based “on the cost of groceries needed to provide a

⁴⁵ See, Associated Press - AmeriCorps must restore grant funding and members to states that sued over cuts, federal judge rules (<https://apnews.com/article/america-corps-trump-doge-lawsuit-f88fb92ff93db5a942f8570412ba3f>)

⁴⁶ See, FoodCorps - What We Do (<https://foodcorps.org/what-we-do/>)

⁴⁷ See, FoodCorps - a Note from FoodCorps Leadership (<https://foodcorps.org/blog-america-corps-changes/>)

⁴⁸ See, FoodCorps - Where We Work (<https://foodcorps.org/where-we-work>)

⁴⁹ See, CT Department of Social Services - What will change with DSS benefits following the passing of federal H.R.1? (https://portal.ct.gov/dss/knowledge-base/articles/general-information/federal-updates-hr1?language=en_US)

⁵⁰ See, DataHaven - Food Assistance and Local Economies at Risk: Projected Federal SNAP Cuts by Connecticut Town and District

(<https://ctdatahaven.org/reports/food-assistance-and-local-economies-risk-projected-federal-snap-cuts-connecticut-to-wn-and>)

⁵¹ Ibid

⁵² Ibid

⁵³ See, CTN - Appropriations Committee Informational Forum on Supplemental Nutrition Assistance Program (SNAP) [Timestamp 55:00] (<http://ct-n.com/ctnplayer.asp?odID=25435&jump=0:55:00>)

healthy, budget-conscious diet for a family of four,” and is used to calculate monthly SNAP benefit amounts.⁵⁴ The most recent re-evaluation of the TFP was in 2021, when the “market basket” baseline cost increased by 21% due to a new methodology which “based its reevaluation entirely on data and evidence on the cost for which resource-constrained households can purchase a healthy, practical diet.”⁵⁵ This marked a significant change, as 45 years of previous TFP updates were required to be “cost neutral,” which the 2021 TFP Report deemed to be “irreconcilable” with the 2018 Farm Bill’s directive to update the plan based on “current dietary guidance, consumption patterns, food composition data, and current food prices.”⁵⁶ Ultimately, the updated TFP increased SNAP benefits by an average of \$36 per person per month nationally, and was estimated to increase total SNAP benefits awarded in Connecticut by \$181 million per year.⁵⁷ The TFP increase also increased funding for The Emergency Food Assistance Program (TEFAP) that provides funding for food at food banks, with the 2021 update increasing TEFAP funding by \$57.75 million nationwide.⁵⁸ Finally, Summer EBT (or SUN Bucks) benefit amounts are also tied to the TFP.⁵⁹

However, Section 10101 of the One Big Beautiful Bill Act amends the statute regarding TFP updates to legally require all future re-evaluations and market basket changes to abide by “cost neutrality.”⁶⁰ **This change essentially bans any Secretary of Agriculture from repeating the 2021 re-evaluation, restricting any future increases in SNAP, TEFAP, and Summer EBT benefit amounts via the TFP.** The same section also reduces future flexibility by requiring the Secretary of Agriculture to update TFP costs only based on inflation as measured by “the Consumer Price Index [CPI] for All Urban Consumers” and sets specific ratios for adjusting the TFP by household size.⁶¹

Another change to SNAP was the introduction of a federal waiver program allowing states to “restrict the purchase of non-nutritious items like soda and candy.”⁶² As of December 1st, a total of 12 states had submitted and been approved for such waivers, though notably no state in New England is included in that list.⁶³ Some of these waivers included requests to add certain prepared foods to the list of SNAP-eligible items, such as Arkansas requesting the addition of rotisserie chicken, though these requests have not yet been approved.⁶⁴

⁵⁴ See, USDA FNS - SNAP and the Thrifty Food Plan (<https://www.fns.usda.gov/snap/thriftyfoodplan>)

⁵⁵ See, USDA FNS - Thrifty Food Plan, 2021

(<https://fns-prod.azureedge.us/sites/default/files/resource-files/TFP2021.pdf>)

⁵⁶ Ibid

⁵⁷ See, USDA FNS - Estimated Increase in SNAP Benefits - FY 2022 (https://www.fns.usda.gov/TFP/state_table)

⁵⁸ See, USDA FNS - TEFAP - Thrifty Food Plan Adjustment of TEFAP Funding

(<https://www.fns.usda.gov/tefap/ftp-adjustment-funding>)

⁵⁹ See, USDA FNS - Summer EBT for Children Program - 2025 Benefit Levels

(<https://www.fns.usda.gov/summer/sunbucks/fr-031025>)

⁶⁰ See, [Congress.gov](https://www.congress.gov/bill/119th-congress/house-bill/1/text) - H.R. 1 One Big Beautiful Bill Act

(<https://www.congress.gov/bill/119th-congress/house-bill/1/text>)

⁶¹ Ibid

⁶² See, USDA FNS - SNAP Food Restriction Waivers (<https://www.fns.usda.gov/snap/waivers/foodrestriction>)

⁶³ Ibid

⁶⁴ See, KNWA - Hot rotisserie chicken not yet approved in Arkansas SNAP waiver

(<https://www.nwahomepage.com/news/hot-rotisserie-chicken-not-yet-approved-in-arkansas-snap-waiver/>)

Finally, the most financially significant change to SNAP may be the increased cost-sharing requirements placed on states. Section 10106 of the One Big Beautiful Bill Act raises the share of SNAP administrative costs states are responsible for from 50% to 75% starting in FY27.⁶⁵ Similarly, Section 10105 requires that starting in FY28, states pay for a portion of SNAP benefit costs for the first time. The amount will be based on the state's SNAP payment error rate, with the state share of costs ranging from 0% for states with error rates below 6%, 5% for ones with error rates between 6% and 8%, 10% for ones with error rates between 8% and 10%, and 15% for ones with error rates above 10%.⁶⁶ The law states that for FY28 can use their payment error rate for FY25 or FY26, though implementation is delayed if the error rate exceeds 13.5% in either year.⁶⁷ The most recent USDA data is from FY24, and puts Connecticut's SNAP error rate at 10.25%.⁶⁸ **As such, unless the state's error rate drops in FY25 or FY26, Connecticut would be required to pay 15% of the cost of SNAP benefits, and the state would not be eligible for a delayed implementation unless the error rate rises above 13.5%.**

The costs of these changes to SNAP could be significant. The Connecticut Department of Social Services estimates that the administrative cost share increase will cost Connecticut approximately \$40 million per year starting in FY27, with the benefit cost sharing ranging from \$44 million to \$133 million per year depending on the state's SNAP error rate.⁶⁹ If Connecticut's FY24 error rate remains unchanged in FYs 25 and 26, the state would owe the highest number (\$133 million), **meaning that combined with the administrative costs, Connecticut would need to pay \$173 million in new SNAP cost-sharing alone in FY28.** Additionally, researchers at the Urban Institute noted that their preliminary findings suggested that the various changes to SNAP listed above (including cost-sharing requirements) would result in 237,000 Connecticut residents in 58,000 households "losing some or all SNAP benefits," with an average monthly benefit reduction of \$193 per affected household.⁷⁰ The CT Mirror notes that this is the largest projected monthly benefit reduction of any state in the country.⁷¹ **DataHaven's analysis of this data concludes that Connecticut households will lose between \$11 million and \$15 million per month in SNAP benefits, totaling \$132 million to \$180 million per year and at least \$10.8 million per year each in Hartford, Bridgeport, New Haven, and Waterbury.**⁷² Furthermore, a CBO letter to members of Congress noted that while the TFP changes listed

⁶⁵ Ibid

⁶⁶ Ibid

⁶⁷ Ibid

⁶⁸ See, USDA FNS - Supplemental Nutrition Assistance Program Payment Error Rates for Fiscal Year 24 (<https://fns-prod.azureedge.us/sites/default/files/resource-files/snap-fy24OC-PER.pdf>)

⁶⁹ See, CT Department of Social Services - What will change with DSS benefits following the passing of federal H.R.1? (https://portal.ct.gov/dss/knowledge-base/articles/general-information/federal-updates-hr1?language=en_US)

⁷⁰ See, Urban Institute - How the Senate Budget Reconciliation SNAP Proposals Will Affect Families in Every US State (<https://www.urban.org/sites/default/files/2025-07/How-the-Senate-Budget-Reconciliation-SNAP-Proposals-Will-Affect-Families-in-Every-US-State.pdf>)

⁷¹ See, CT Mirror - SNAP cuts to families in CT will hit harder than any other state (https://ctmirror.org/2025/10/24/ct-snap-benefit-cuts/?utm_source=ActiveCampaign&utm_medium=email&utm_content=CT%20needs%20to%20plan%20for%20its%20energy%20future%2C%20but%20the%20view%20is%20cloudy&utm_campaign=Sunday%20Reading)

⁷² See, DataHaven - Food Assistance and Local Economies at Risk: Projected Federal SNAP Cuts by Connecticut Town and District (<https://ctdatahaven.org/reports/food-assistance-and-local-economies-risk-projected-federal-snap-cuts-connecticut-to-wn-and>)

above would not cut benefits, they would prohibit future benefit increases that they estimate would have happened under the previous requirements, **preventing about \$15 per month in benefit increases by 2034 and about \$37 billion in nationwide SNAP, TEFAP, and Summer EBT benefits between 2027 and 2034.**⁷³

Given the various changes discussed above, it seems likely that net federal funding to combat food insecurity decreased in 2025 and will continue to do so in the coming years as more of these reductions take effect. As the 2024 version of this report noted, funding for federal programs combating food insecurity has been gradually rolled back since 2022, as COVID-era programs such as the school meals for all waiver and the SNAP Emergency Allotment payments ended.⁷⁴ These cuts continue the trend of falling federal support that has coincided with a significant increase in food prices during the same period. **This combination of falling federal support and rising food prices is likely to continue driving increases in food insecurity in the coming years absent increased support from other sources.**

State Policy Changes:

Perhaps the largest state policy that impacts food insecurity is the biennial budget, which made a number of significant investments relevant to food and nutrition security. In the FY 26-27 budget, the CWCSEO identified ten “core food security programs” split across four agencies that have line items in the budget.⁷⁵ “Core food security programs” were defined as programs who provide food directly to individuals or households. These programs have a total appropriation of \$20,102,128 in FY26 and just over \$25,032,128 in FY27, representing a 12.66% increase in funding from FY25 to FY26 and a further 24.52% increase from FY26 to FY27. Furthermore, the budget included 11 line items and policy revisions that the CWCSEO identified as “food systems” items.⁷⁶ These are items that do not directly provide food or facilitate its provision but do invest in the food system in some form, such as support to farmers or grants for infrastructure. These items total to an additional \$31,919,022 in FYs 26 and 27, an increase of 27.34% from FY25. It is worth noting, however, that nearly all of that money is under one line item, namely “Vocational Agriculture” within the Department of Education (\$26.29 million in each year). Finally, the CWCSEO also identified 30 “food security organization earmarks,” which are grants to a specific town or non-government organization that works to promote food security, which total to \$2,418,500 in FY26 and \$2,076,000 in FY27.⁷⁷ In total, this amounts to \$54,439,650 in identified food security and food systems spending in FY26 and \$59,027,150 in FY27.

Within the larger number, several programs received substantial increases in funding. The largest increase in the “core food security programs” came from the “Nutrition Assistance” line item that funds CT-NAP, which allows CT Foodshare to buy food for distribution throughout the

⁷³ See, Congressional Budget Office - Potential Effects on the Supplemental Nutrition Assistance Program of Reconciliation Recommendations Pursuant to H. Con. Res. 14, as Ordered Reported by the House Committee on Agriculture on May 12, 2025Potential Effects on the Supplemental Nutrition Assistance Program of Reconciliation Recommendations Pursuant to H. Con. Res. 14, as Ordered Reported by the House Committee on Agriculture on May 12, 2025 (https://www.cbo.gov/system/files/2025-05/Klobuchar-Craig-Letter-SNAP_5-22-25.pdf)

⁷⁴ See, CWCSEO - 2024 Food Security Annual Report (pgs. 23-24)

(<https://wp.cga.ct.gov/cwcseo/wp-content/uploads/2025/01/Food-Insecurity-in-Connecticut-Report-2024.pdf>)

⁷⁵ See, Appendix B

⁷⁶ Ibid

⁷⁷ Ibid

emergency food system, from \$1 million in FY25 to just over \$3 million in FY26 and just over \$6 million in FY27. This represents a 202.1% increase in FY26 and an additional 99.31% increase in FY27, which can help significantly reduce the operating challenges of food pantries and other emergency food nonprofits that were discussed in last year's report and earlier in this section. Another program that will see an increase in funding is the Local Food for Schools Incentive Program (LFSIP), which provides schools with a 50% reimbursement for any funds spent purchasing locally sourced food and 33% reimbursement for funds spent purchasing regionally sourced food.⁷⁸ This program will receive \$1.5 million in funding in FY26, the same as FY25, but that will increase to \$3.43 million in FY27, a 128.67% growth.⁷⁹ No other “core food and nutrition program” receives an increase of more than 5% in either year, though no program receives a decrease either, with the majority seeing flat funding across the biennium.⁸⁰

Within the “food system items,” the largest change was to Vocational Agriculture, growing from \$18.82 million in FY25 to \$26.30 million in FY26 and FY27, a 39.69% increase in funding.⁸¹ Additionally, seven grant programs designed to support Connecticut food producers administered by the Department of Agriculture within the “Donald E. Williams, Jr. community investment account” received 25% funding increases, with a combined increase of \$323,750 bringing the total funding to \$1,618,750 per year.⁸² Two other programs did see funding decreases, with the “Fish Hatcheries” Line Item under the Department of Energy and Environmental Protection (DEEP) receiving a 12.83% decrease to \$3,004,540 per year and the “Food Desert Tax Abatement” program under the Department of Economic and Community Development (DECD) being eliminated entirely, cutting all \$500,000 per year of funding.⁸³ However, as noted above, these decreases are more than offset by the increases for other programs.

Another change in state policy with regards to food access is the continuing rollback of the number of students able to receive free school meals. During the 2024-25 school year, the state used funds from the American Rescue Plan Act (ARPA) to make school breakfast and lunch free for students eligible for reduced-price meals, but that funding has expired and was not replaced from a new source.⁸⁴ ⁸⁵ As a result, approximately 32,000 Connecticut students will now need to pay for school meals in the 2025-26 school year, albeit at a reduced price.⁸⁶ This continues the phasing out of access to free school meals in Connecticut in recent years. In the 2022-23 school year, the state used ARPA funds to continue universal free school meals that had been provided

⁷⁸ See, CT Department of Agriculture - Connecticut Local Food for Schools Incentive Program (<https://portal.ct.gov/doag/adarc/programs/farm-to-school-overview/connecticut-local-food-for-schools-incentive-program>)

⁷⁹ See, Appendix B

⁸⁰ Ibid

⁸¹ Ibid

⁸² See, Connecticut General Assembly - Public Act No. 25-168, Sec. 411 (<https://cga.ct.gov/2025/ACT/PA/PDF/2025PA-00168-R00HB-07287-PA.PDF>)

⁸³ See, Appendix B

⁸⁴ See, NBC Connecticut - Free school lunch ends for some low-income students (<https://www.nbcconnecticut.com/news/local/free-school-lunch-ends-some-low-income-students/3599250>)

⁸⁵ See, CT Office of Fiscal Analysis - FY26-27 Agency Budget Sheets (pg. 224) (https://www.cga.ct.gov/ofa/Documents/year/BB/2025BB-20250709_FY%202026%20and%20FY%202027%20Budget%20Sheets%20DRAFT.pdf)

⁸⁶ Ibid

by the federal government during the COVID Public Health Emergency.⁸⁷ In the 2023-24 school year, this was reduced to universal free breakfast and free school lunch for reduced-price eligible students, before further shrinking to free breakfast and lunch for reduced-price eligible students in 2024-25.⁸⁸ **As such, the 2025-26 school year is the 3rd consecutive one in which access to free school meals has been reduced, largely returning to pre-pandemic levels.**⁸⁹ Given that a publication from the USDA concluded that states with universal free school meals in 2022-23 saw reduced child food insufficiency compared to those without, these reductions could risk increased child food insecurity in the coming years.⁹⁰

One part of the food system that is seeing particularly significant changes at the state level is agriculture. Specifically, two new laws, Public Act 25-141 and Public Act 25-152 created a number of new supports for Connecticut farmers, with the latter being comprehensive enough to be termed the “CT Farm Bill.”⁹¹ This Farm Bill includes provisions designed to reduce barriers to farming in Connecticut such as “exempting hoop houses and high tunnels from permitting and construction standards” and providing agritourism providers with civil liability immunity.⁹² Additionally, the law provides a number of new supports to farmers, such as expanding the municipal farm machinery property tax exemption from \$100,000 to \$250,000 and permitting municipalities to provide their own exemptions up to another \$250,000, creating a refundable farm investment tax credit, creating a grant program “to reimburse farmers for crop loss from major weather events,” creating “a grant program to support farmers in adopting best practices for maintaining management systems,” and creating a grant program for shipping container farms.⁹³ Public Act 25-141 focuses on facilitating land access for farmers, with the law allowing the Department of Agriculture to “within available appropriations” create a grant program to allow for the purchasing and holding of land “for agricultural preservation purposes.”⁹⁴ **Overall, the Connecticut state government has significantly stepped up support for farmers in the state.**

⁸⁷ See, CT Public - CT governor signs legislation extending state's free school lunch program (<https://www.ctpublic.org/news/2023-02-14/ct-governor-signs-legislation-extending-states-free-school-lunch-program>)

⁸⁸ See, CT Mirror - CT extends free school meals through 2023-24 academic year (<https://ctmirror.org/2023/08/07/ct-extends-free-school-meals-through-2023-24-academic-year/>)

⁸⁹ See, CT Office of Fiscal Analysis - FY26-27 Agency Budget Sheets (pg. 224) (https://www.cga.ct.gov/ofa/Documents/year/BB/2025BB-20250709_FY%202026%20and%20FY%202027%20Budget%20Sheets%20DRAFT.pdf)

⁹⁰ See, USDA ERS - State Universal Free School Meal Policies Reduced Food Insufficiency Among Children in the 2022–2023 School Year (<https://www.ers.usda.gov/amber-waves/2024/june/state-universal-free-school-meal-policies-reduced-food-insufficiency-among-children-in-the-2022-2023-school-year/>)

⁹¹ See, CT.gov - Governor Lamont Signs Legislation Supporting Growth in Connecticut’s Agriculture Industry (https://portal.ct.gov/governor/news/press-releases/2025/07-2025/governor-lamont-signs-legislation-supporting-growth-in-connecticuts-agriculture-industry?language=en_US)

⁹² Ibid

⁹³ See, Connecticut General Assembly - OLR Bill Analysis, AN ACT CONCERNING PROGRAMMING AT THE DEPARTMENT OF AGRICULTURE (<https://www.cga.ct.gov/2025/BA/PDF/2025SB-01497-R01-BA.PDF>)

⁹⁴ See, Connecticut General Assembly - Public Act No. 25-141 AN ACT ESTABLISHING A GRANT PROGRAM FOR AGRICULTURAL PRESERVATION AND FARMLAND ACCESS PURPOSES. (<https://www.cga.ct.gov/2025/ACT/PA/PDF/2025PA-00141-R00HB-05064-PA.PDF>)

Projected Changes in Food Spending Over the Biennium

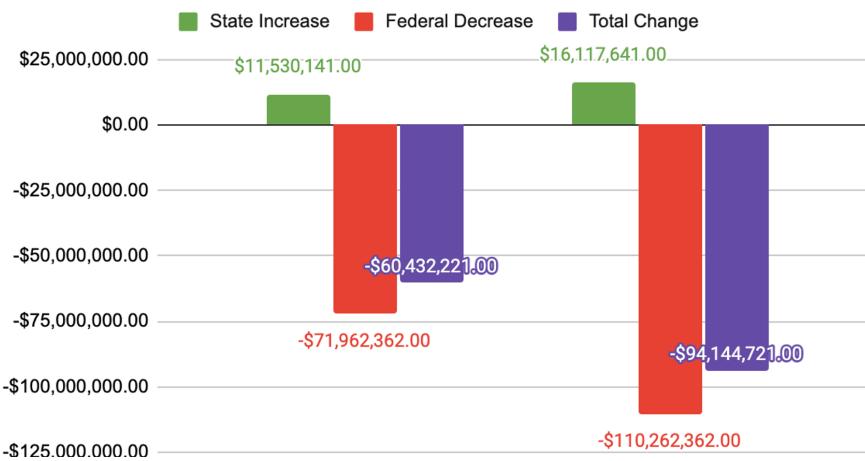


Figure 3: Projected Net Food Security and Food System Funding Changes to Connecticut in FYs 26 and 27

While many of these changes saw state-level support for food security increase in FY25, the larger federal decreases resulted in a net decrease to food insecurity support for Connecticut residents in FY26 and most likely FYs 27 and 28 as well.

Section 2: Underlying Challenges Spotlight: Information Barriers

The 2024 version of this report focused on two broad categories of barriers to food and nutrition security: access and affordability. Affordability focused on the price of food compared to the resources households have to spend. Accessibility focused on households' ability to physically reach food sources and bring that food home. However, physical challenges such as transportation and food systems infrastructure are not the only barriers to making food accessible. Resources that provide access to food cannot be used if households aren't aware of them, and as such access to information around food and nutrition is critical to ensuring access to food itself. This section will focus on barriers to information and education accessibility and how those barriers contribute to food and nutrition insecurity.

Areas with Information Barriers:

Nutrition and Health

There is evidence that a substantial share of US adults self-report not knowing sufficient nutrition information. A 2025 report from the Pew Research Center found that only 12% of US adults were “extremely confident” that they know which foods are healthy for them, with another 37% “very confident.”⁹⁵ This means that a slight majority of respondents were either “somewhat confident,” “not too confident,” or “not at all confident” that they knew which foods were healthy.⁹⁶

For children, limited nutrition education in school may prove to be a barrier to awareness of key nutrition facts and the connection between nutrition and health. The National Center for Education Statistics published a report in 1996, which found that 99% of public schools “offer nutrition education somewhere within the curriculum,” though they also note that 61% of schools had no coordination, meaning that teachers were responsible for creating their own lessons and content was often limited to “increasing students’ knowledge about what is meant by good nutrition.”⁹⁷ However, in 2000 the CDC stated that 84.6% of schools were “providing required instruction on nutrition and dietary behaviors,” with that number decreasing to 74.1% by 2014, **suggesting a nationwide decline in the focus on nutrition education in schools.** Additionally, CDC states that, for students who are still receiving nutrition education, 40 to 50 hours is needed per year to affect behavior change, but the average American student receives just eight.⁹⁸

⁹⁵ See, Pew Research Center - Americans on Healthy Food and Eating (<https://www.pewresearch.org/science/2025/05/07/americans-on-healthy-food-and-eating/>)

⁹⁶ Ibid

⁹⁷ See, National Center for Education Statistics - Nutrition Education in Public Elementary and Secondary Schools (<https://nces.ed.gov/pubs/96852.pdf>)

⁹⁸ See, CDC - Nutrition Education (https://www.cdc.gov/school-nutrition/education/?CDC_Aref_Val=https://www.cdc.gov/healthyschools/nutrition/school_nutrition_education.htm)

Connecticut General Statutes Section 10-16b does require public schools to offer classes in “health and safety, including, but not limited to...nutrition.”⁹⁹ Additionally, the Connecticut Department of Education’s Healthy and Balanced Living Curriculum Framework includes nutrition content in the standards and grade-level outcomes for health and physical education classes.¹⁰⁰ Given that Section 10-221a requires that high school students receive at least one credit in health and safety education and one credit in physical education to be able to graduate, it appears reasonable to conclude that all Connecticut students are receiving some nutrition education.¹⁰¹ However, these requirements would likely leave students below the 40-50 hour recommended minimum. One credit in Connecticut is estimated to represent approximately 135 hours of instruction per year.¹⁰² However, one credit suggests these classes only need to be taken once over four years of high school. Additionally, nutrition is far from the only topic covered in either of these classes. In health and safety, “healthy eating and physical activity” is listed as one of “nine essential content areas that are the focus in school health education.”¹⁰³ If these nine topics were divided equally across 135 hours, that would leave 15 hours for each, with nutrition education sharing that time with the “physical activity” portion of the content area “healthy eating and physical activity.” Furthermore, a Health Education Evaluation Review tool developed by the Connecticut Department of Education lists nutrition as one of approximately 17 topics to be included in a district’s health curriculum, although the sheet suggests that not every topic is necessarily covered in every grade level.¹⁰⁴ Similarly, for physical education the state lists nutrition as one “grade-level outcome” out of 29 total at the elementary level, one out of 44 at the middle school level, and one out of 31 at the high school level.¹⁰⁵ Even if nutrition content was offered via these classes at every K-12 grade level, it would be difficult to provide sufficient instruction in nutrition and every other required topic. Additionally, it is not guaranteed that each district is requiring these classes be taken every year or that nutrition be included in these classes at every grade level. **As such, it is likely that most Connecticut students are receiving insufficient nutrition education to provide meaningful awareness and understanding.**

There are also a number of programs that offer nutrition education to adults, though their reach is limited by a lack of prioritization federally. A 2019 report from the federal Government Accountability Office (GAO) found that while the USDA operates five nutrition education

⁹⁹ See, Connecticut General Assembly - Chapter 164 Educational Opportunities (https://www.cga.ct.gov/current/pub/chap_164.htm#sec_10-16b)

¹⁰⁰ See, Connecticut Department of Education - Healthy and Balanced Living Curriculum Framework (https://portal.ct.gov/-/media/sde/health-education/publications/healthy_and_balanced_living_curriculum_framework_may_2022.pdf)

¹⁰¹ See, Connecticut General Assembly - Chapter 170 Boards of Education (https://www.cga.ct.gov/2022/sup/chap_170.htm#sec_10-221a)

¹⁰² See, Office of Legislative Research - Required School Subjects (https://www.cga.ct.gov/PS98/rpt%5C0lr%5Chtm/98-R-0768.htm#~:text=But%2C%20in%20order%20to%20graduate_hours%20or%20instruction%20per%20year.)

¹⁰³ See, Connecticut Department of Education - Healthy and Balanced Living Curriculum Framework (https://portal.ct.gov/-/media/sde/health-education/publications/healthy_and_balanced_living_curriculum_framework_may_2022.pdf)

¹⁰⁴ See, Connecticut Department of Education - Healthy and Balanced Living Curriculum Framework (https://portal.ct.gov/-/media/sde/health-education/publications/healthy_and_balanced_living_curriculum_framework_may_2022.pdf)

¹⁰⁵ See, Connecticut Department of Education - Healthy and Balanced Living Curriculum Framework (https://portal.ct.gov/-/media/sde/health-education/publications/healthy_and_balanced_living_curriculum_framework_may_2022.pdf)

programs (WIC, SNAP Education/SNAP-Ed, Expanded Food and Nutrition Education Program/EFNEP, Team Nutrition, and Food Insecurity Nutrition Incentive Grant Program), the Department has not made nutrition education a priority, resulting in limited coordination and a failure to “fully leverage the Department’s nutrition expertise.”¹⁰⁶ As such, these programs can be quite effective, but limited in the number of people they reach. For example, the 2024 Report for EFNEP, administered by the University of Connecticut (UConn) saw graduates report significant improvements in diet quality, food safety, food security, and food resource management at a cost of just \$553.73 per participant.¹⁰⁷ However, the report also shows that only 243 adults graduated from the program in 2024, a small fraction of Connecticut adults.¹⁰⁸ Additionally, as noted in the previous section, SNAP-Ed was eliminated in October of 2025, further restricting access.

Overall, while many adults are receiving important and effective nutrition education, many others are not.

While many individuals may rely on the advice of a doctor when it comes to their health, there is evidence to suggest many doctors today may also lack expertise in the role of nutrition in health. In 1985, the National Academy of Sciences recommended that “a minimum of 25 hours of nutrition education be required of all medical students during their preclinical years.”¹⁰⁹ However, as of 2021, the national average number of hours of nutrition education for medical students was just 11, and only 26% of residency programs provided any formal curriculum in nutrition at all.¹¹⁰ Furthermore, the American Heart Association notes that as of 2013, the year the most recent survey was conducted, 71% of all medical schools did not meet the 25 hour minimum for nutrition education in their curricula.¹¹¹

As a result of this gap in medical education, many patients are not receiving access to information or guidance on the best nutrition choices for their individual health. One study found that despite dietary factors being “a leading contributor to cardiovascular disease” and 59% of cardiologists believing that “dietary interventions can improve outcomes to an equal or greater degree than pharmacologic therapy,” 71% of those same cardiologists referred 10% or fewer of their patients to dietitians or nutritionists.¹¹² Another study found that while 77% of physicians agreed that nutrition assessments should be included in routine primary care visits and 94% agreed “that it was their obligation to discuss nutrition with patients,” only 14% “felt physicians were adequately trained to provide nutrition counseling.”¹¹³ Within Connecticut, an assessment of needs for Yale Primary Care residents found that only 17% of residents felt their nutrition

¹⁰⁶ See, United States Government Accountability Office - Nutrition Education: USDA Actions Needed to Assess Effectiveness, Coordinate Programs, and Leverage Expertise (<https://www.gao.gov/assets/gao-19-572.pdf>)

¹⁰⁷ See, Appendix A

¹⁰⁸ Ibid

¹⁰⁹ See, Yale School of Medicine - Culinary Medicine and the Future of Nutrition Education for Patients and Clinicians (<https://drive.google.com/file/d/1mla8oQuSyXXQHGL9ExhbafyWRJA5ouPV/view>)

¹¹⁰ See, Yale School of Medicine - Culinary Medicine and the Future of Nutrition Education for Patients and Clinicians (<https://drive.google.com/file/d/1mla8oQuSyXXQHGL9ExhbafyWRJA5ouPV/view>)

¹¹¹ See, American Heart Association - How much does your doctor actually know about nutrition? (<https://www.heart.org/en/news/2018/05/03/how-much-does-your-doctor-actually-know-about-nutrition>)

¹¹² See, Devries S, Aggarwal M, Allen K, Kris-Etherton P, Theriot P, Freeman AM. Assessment of the Low Referral Rate of Cardiologists to Dietitians/Nutritionists. IJDRP. 2021;4(1):8 pp. [doi:10.22230/ijdrp.2021v3n2a303](https://doi.org/10.22230/ijdrp.2021v3n2a303)

¹¹³ See, Vetter, M. L., Herring, S. J., Sood, M., Shah, N. R., & Kalet, A. L. (2008). What Do Resident Physicians Know about Nutrition? An Evaluation of Attitudes, Self-Perceived Proficiency and Knowledge. Journal of the American College of Nutrition, 27(2), 287–298. <https://doi.org/10.1080/07315724.2008.10719702>

training had been sufficient, with just 36% believing they had the nutrition knowledge to provide dietary counseling to patients.¹¹⁴ On the other hand, 94% of those same residents agreed “that obtaining additional training in nutrition would allow them to provide better clinical care for patients.”¹¹⁵

Finally, other common sources of nutrition and health information can be misleading or wholly inaccurate. A meta-analysis of 64 research studies concluded that “poor-quality and inaccurate nutrition-related information is prevalent on websites and social media.”¹¹⁶ Additionally, a number of diet trends on social media are not only inaccurate, but can promote unhealthy or dangerous dietary habits.¹¹⁷ This is especially concerning because another study found that out of 22 sources of nutrition information, the most commonly used among adults in the US, UK, and Australia were “nutrition or health websites” and “Google or Internet searches.”¹¹⁸ Similarly, a study of college students in the southwestern United States found that the three most common sources of nutrition information were word of mouth (57%), social media (45%), and health websites (42%).¹¹⁹

Overall, nutrition and health information access is limited for both children and adults by the prevalence of unreliable sources and a relative lack of access to more reliable ones.

Food Contents and Processing Level

Even if someone does have knowledge of certain nutrition facts such as the unhealthiness of excessive sodium and the healthiness of fiber, that person still needs to know how much sodium and fiber various foods contain. However, there is evidence to suggest that this is not currently the case. A study commissioned by the CDC asked a representative sample of US adults four questions based on a provided nutrition label, finding that between 21% and 42% of respondents failed to correctly answer each question.¹²⁰ While a higher level of education was associated with more accurate responses, with participants with less than a high school diploma averaging 1.37 correct answers out of 4 questions, only 54% of respondents with a college degree answered all 4 questions correctly.¹²¹

¹¹⁴ See, Yale School of Medicine - Culinary Medicine and the Future of Nutrition Education for Patients and Clinicians (<https://drive.google.com/file/d/1mla8oQuSyXXQHGL9ExhbafayWRJA5ouPV/view>)

¹¹⁵ Ibid

¹¹⁶ See, Denniss, E., Lindberg, R., & McNaughton, S. A. (2023). Quality and accuracy of online nutrition-related information: a systematic review of content analysis studies. *Public health nutrition*, 26(7), 1345–1357.

<https://doi.org/10.1017/S1368980023000873>

¹¹⁷ See, US News and World Report - Popular Social Media Diet Trends – From the Benign to the Barbaric (<https://health.usnews.com/health-news/blogs/eat-run/articles/popular-and-dangerous-social-media-diet-trends>)

¹¹⁸ See, Ruani, M. A., Reiss, M. J., & Kalea, A. Z. (2023). Diet-Nutrition Information Seeking, Source Trustworthiness, and Eating Behavior Changes: An International Web-Based Survey. *Nutrients*, 15(21), 4515. <https://doi.org/10.3390/nu15214515>

¹¹⁹ See, Geist, C. H., Hildebrand, D., Keirns, B. H., & Emerson, S. R. (2024). Survey of Nutrition Knowledge, Attitudes, and Preferred Informational Sources among Students at a Southwestern University in the United States: A Brief Report. *Dietetics*, 3(2), 170-178. <https://doi.org/10.3390/dietetics3020014>

¹²⁰ See, Persoskie, A., Hennessy, E., & Nelson, W. L. (2017). US Consumers’ Understanding of Nutrition Labels in 2013: The Importance of Health Literacy. *Preventing Chronic Disease*, 14. <https://doi.org/10.5888/pcd14.170066>

¹²¹ See, Persoskie, A., Hennessy, E., & Nelson, W. L. (2017). US Consumers’ Understanding of Nutrition Labels in 2013: The Importance of Health Literacy. *Preventing Chronic Disease*, 14. <https://doi.org/10.5888/pcd14.170066>

Additionally, consumers can be actively misled on the contents of a food or beverage item (and by extension its healthiness or unhealthiness) by food advertising. One specific way this happens is through the “**Health Halo Effect**,” which is when a consumer incorrectly concludes that something is “healthy” based on one or more misleading pieces of information.¹²² For example, the use of terms like “natural” when describing a food item can often create the assumption that the food is healthy, even if that is not the case because one of the “natural” ingredients is an excessive amount of sugar.¹²³

This Healthy Halo Effect can occur due to misconceptions on the part of the consumer, but it can also be the result of misleading advertisements. A study by researchers from the UConn Rudd Center for Food Policy and Health found that children who watched commercials for non-nutritious food items that included messages about nutrition and physical activity were more likely to inaccurately rate the advertised product as nutritious compared to children who watched commercials with non-health related messages.¹²⁴ Put another way, companies are able to create a Healthy Halo Effect by including messages about the importance of nutrition and physical activity in ads for non-nutritious products, misleading consumers about the contents of the item.

Additionally, some of these foods’ contents may contain ingredients that make them quasi-addictive, further raising the risk of over-consumption and long-term negative health impacts. The Yale Food Addiction Scale (YFAS) was developed to measure food addiction in individuals, and the most recent version of the scale has been strongly associated with obesity, elevated body mass index, binge eating, and weight cycling.¹²⁵ An article synthesizing the findings of numerous studies on food addiction noted that in 36 countries the pooled prevalence of food addiction as indicated by YFAS was 14% in adults and 12% in children, compared to 14% of adults for alcohol addiction and 18% for tobacco addiction.¹²⁶ The article notes that “Not all foods have addictive potential” and singles out **ultra-processed foods** as particularly high risk for addiction, as they are the primary sources of high levels of refined carbohydrates and added fats which “evoke similar levels of extracellular dopamine in the brain striatum to those seen with addictive substances such as nicotine and alcohol.”¹²⁷ Additionally, ultra-processed foods “are most strongly implicated in the behavioural indicators of addiction, such as excessive intake, loss of control over consumption, intense cravings, and continued use despite negative

¹²² See, The Guardian - The health halo: how good PR is misleading shoppers (<https://www.theguardian.com/sustainable-business/2015/mar/11/know-what-you-eat-health-halo>)

¹²³ See, Gundersen Health System - Health halos: What they are and why you need to avoid them (<https://www.gundersenhealth.org/health-wellness/eat-move/health-halos-what-they-are-and-why-you-need-to-avoid-them>)

¹²⁴ See, Harris, J. L., et al. “Teaching Children about Good Health? Halo Effects in Child-Directed Advertisements for Unhealthy Food.” *Pediatric Obesity*, vol. 13, no. 4, 27 Oct. 2017, pp. 256–264, <https://doi.org/10.1111/jopo.12257>.

¹²⁵ See, Food and Addiction Science & Treatment Lab - Yale Food Addiction Scale (<https://sites.lsa.umich.edu/fastlab/yale-food-addiction-scale/>)

¹²⁶ See, Gearhardt, A. N., Bueno, N. B., DiFeliceantonio, A. G., Roberto, C. A., Jiménez-Murcia, S., & Fernandez-Aranda, F. (2023). Social, clinical, and policy implications of ultra-processed food addiction. *BMJ*, 383, e075354. <https://doi.org/10.1136/bmj-2023-075354>

¹²⁷ See, Gearhardt, A. N., Bueno, N. B., DiFeliceantonio, A. G., Roberto, C. A., Jiménez-Murcia, S., & Fernandez-Aranda, F. (2023). Social, clinical, and policy implications of ultra-processed food addiction. *BMJ*, 383, e075354. <https://doi.org/10.1136/bmj-2023-075354>

consequences.”¹²⁸ These findings are consistent with research that “has found that UPF consumption is positively associated with bulimia nervosa and binge eating disorder.”¹²⁹ One study further suggests that ultra-processed foods may interfere with “gut-brain signaling” to encourage overconsumption.¹³⁰ That being said, the evidence does not appear to be conclusive on the addictive nature of these foods, with another study measuring brain dopamine responses after consuming a milkshake found that they were “likely substantially smaller than for many addictive drugs and below the limits of detection using standard PET methods.”¹³¹

Regardless of their addictive potential or lack thereof, there are a number of other health risks posed by ultra-processed foods. A meta-analysis of studies from 8 countries concluded that **increased consumption of ultra-processed foods increased the risk of premature death, suggesting these foods and beverages constitute a significant health risk.**¹³² A similar study in Brazil further estimated that approximately 10.5% of all premature deaths from adults ages 30-69 were attributable to ultra-processed food consumption.¹³³ Additionally, a meta-analysis found that ultra-processed food consumption was associated with 32 negative “health parameters,” including but not limited to mortality.¹³⁴ Part of this risk may be tied to excessive levels of ingredients such as sodium in ultra-processed foods. The US Food and Drug Administration (FDA) states that “the majority of sodium people in the U.S. consume, more than 70 percent, comes from processed, packaged and prepared foods, not from table salt added to food when cooking or eating at home.”¹³⁵ Not only is this a key reason why the average American exceeds the recommended dietary limit of daily sodium by 1,100 milligrams, the draft sodium regulations released in August of 2024 also state that “without an overall reduction of the level of sodium in the food supply, consumers will not be able to reach intakes recommended by

¹²⁸ See, Gearhardt, A. N., Bueno, N. B., DiFeliceantonio, A. G., Roberto, C. A., Jiménez-Murcia, S., & Fernandez-Aranda, F. (2023). Social, clinical, and policy implications of ultra-processed food addiction. *BMJ*, 383, e075354. <https://doi.org/10.1136/bmj-2023-075354>

¹²⁹ See, Wiss, D. A., & LaFata, E. M. (2024). Ultra-Processed Foods and Mental Health: Where Do Eating Disorders Fit into the Puzzle?. *Nutrients*, 16(12), 1955. <https://doi.org/10.3390/nu16121955>

¹³⁰ See, Small, D. M., & DiFeliceantonio, A. G. (2019). Processed foods and food reward. *Science* (New York, N.Y.), 363(6425), 346–347. <https://doi.org/10.1126/science.aav0556>

¹³¹ See, Darcey, V. L., Guo, J., Chi, M., Chung, S. T., Courville, A. B., Gallagher, I., Herscovitch, P., Joseph, P. V., Howard, R., La Noire, M., Milley, L., Schick, A., Stagliano, M., Turner, S., Urbanski, N., Yang, S., Zhai, N., Zhou, M. S., & Hall, K. D. (2025). Brain dopamine responses to ultra-processed milkshakes are highly variable and not significantly related to adiposity in humans. *Cell metabolism*, 37(3), 616–628.e5. <https://doi.org/10.1016/j.cmet.2025.02.002>

¹³² See, Nilson, E. A. F., Delpino, F. M., Batis, C., Machado, P. P., Moubarac, J.-C., Cediel, G., Corvalan, C., Ferrari, G., Rauber, F., Martinez-Steele, E., da Costa Louzada, M. L., Levy, R. B., Monteiro, C. A., & Rezende, L. F. M. (2025). Premature Mortality Attributable to Ultraprocessed Food Consumption in 8 Countries. *American Journal of Preventative Medicine*. <https://doi.org/10.1016/j.amepre.2025.02.018>

¹³³ See, Nilson, E. A. F., Ferrari, G., Louzada, M. L. C., Levy, R. B., Monteiro, C. A., & Rezende, L. F. M. (2022). Premature Deaths Attributable to the Consumption of Ultraprocessed Foods in Brazil. *American Journal of Preventive Medicine*, 0(0). <https://doi.org/10.1016/j.amepre.2022.08.013>

¹³⁴ Lane, M. M., Gamage, E., Du, S., Ashtree, D. N., McGuinness, A. J., Gauci, S., Baker, P., Lawrence, M., Rehbolz, C. M., Srour, B., Touvier, M., Jacka, F. N., O’Neil, A., Segasby, T., & Marx, W. (2024). Ultra-processed food exposure and adverse health outcomes: umbrella review of epidemiological meta-analyses. *BMJ*, 384(8419), e077310. <https://doi.org/10.1136/bmj-2023-077310>

¹³⁵ See, US Food and Drug Administration - Sodium Reduction in the Food Supply (<https://www.fda.gov/food/nutrition-food-labeling-and-critical-foods/sodium-reduction-food-supply>)

the Dietary Guidelines.”¹³⁶ Additionally, in 2019 the first randomized control trial to examine the impact of ultra-processed foods on weight gain was conducted by researchers at the National Institute of Health (NIH), finding that the ultra-processed diet caused an extra 500 calories of intake per day and increased weight gain compared to the control diet.¹³⁷ These risks may help explain why one study of 106 national or international dietary guidelines around the world found that 45% of such guidelines include a high level of processing as a reason to “eat less” of certain foods, including national guidelines from countries on every continent (though notably not the United States).¹³⁸

These risks also appear to be disproportionately high among food insecure households, as one study analyzing the CDC’s 2007-2008 National Health and Nutrition Examination Survey (NHANES) found that food insecurity and SNAP participation were both associated with increased ultra-processed food consumption.¹³⁹ One possible reason for this association may be the relative affordability of ultra-processed foods, as one 2019 study found that ultra-processed foods were significantly cheaper per 100 calories (\$0.55) than unprocessed foods (\$1.45), while also having lower nutrient density and higher energy density.¹⁴⁰ A Greenwich resident echoed this concern, stating that “there are healthy food choices around me, but they are not cheap.”

It is worth noting that not every single food labeled as ultra-processed is equally unhealthy, and in fact some can provide nutritional benefits. However, ultra-processed foods are disproportionately likely to be non-nutritious, as shown by a study that cross-referenced the Nova scale and the Nutri-Score nutritional ranking system used in many European countries. The study found that the share of ultra-processed foods in a nutritional category increased as the Nutri-Score decreased, ranging from 26.08% of foods in Category A (the healthiest category) being ultra-processed to 83.69% in Category E (the least healthy category).¹⁴¹ Additionally, another study found that while increased ultra-processed food consumption was associated with increased risk of cardiovascular disease, coronary heart disease, and stroke, the risk varied greatly based on the type of ultra-processed food.¹⁴² Specifically, the study found that

¹³⁶ See, US Food and Drug Administration - Voluntary Sodium Reduction Goals: Target Mean and Upper Bound Concentrations for Sodium in Commercially Processed, Packaged, and Prepared Foods (Edition 2): Guidance for Industry (<https://www.fda.gov/media/180784/download>)

¹³⁷ See, Hall, K. D., Ayuketah, A., Brychta, R., Cai, H., Cassimatis, T., Chen, K. Y., Chung, S. T., Costa, E., Courville, A., Darcey, V., Fletcher, L. A., Forde, C. G., Gharib, A. M., Guo, J., Howard, R., Joseph, P. V., McGehee, S., Ouwerkerk, R., Raisinger, K., & Rozga, I. (2019). Ultra-Processed Diets Cause Excess Calorie Intake and Weight Gain: An Inpatient Randomized Controlled Trial of Ad Libitum Food Intake. *Cell Metabolism*, 30(1), 226. <https://doi.org/10.1016/j.cmet.2019.05.020>

¹³⁸ See, Kois, D., Machado, P., & Lacy-Nichols, J. (2022). Representations of Ultra-Processed Foods: A Global Analysis of How Dietary Guidelines Refer to Levels of Food Processing. *International journal of health policy and management*, 11(11), 2588–2599. <https://doi.org/10.34172/ijhpm.2022.6443>

¹³⁹ See, Leung, C. W., Fulay, A. P., Parnarouskis, L., Martinez-Steele, E., Gearhardt, A. N., & Wolfson, J. A. (2022). Food insecurity and ultra-processed food consumption: the modifying role of participation in the Supplemental Nutrition Assistance Program (SNAP). *The American Journal of Clinical Nutrition*, 116(1). <https://doi.org/10.1093/ajcn/nqac049>

¹⁴⁰ See, Gupta, S., Hawk, T., Aggarwal, A., & Drewnowski, A. (2019). Characterizing Ultra-Processed Foods by Energy Density, Nutrient Density, and Cost. *Frontiers in nutrition*, 6, 70. <https://doi.org/10.3389/fnut.2019.00070>

¹⁴¹ See, Romero Ferreiro, C., Lora Pablos, D., & Gómez de la Cámara, A. (2021). Two Dimensions of Nutritional Value: Nutri-Score and NOVA. *Nutrients*, 13(8), 2783. <https://doi.org/10.3390/nu13082783>

¹⁴² See, Mendoza, K., Smith-Warner, S. A., Rossato, S. L., Khandpur, N., Manson, J. E., Qi, L., Rimm, E. B., Mukamal, K. J., Willett, W. C., Wang, M., Hu, F. B., Mattei, J., & Sun, Q. (2024). Ultra-processed foods and

sugar-sweetened beverages (or other artificially sweetened drinks) and processed meats had particularly high risks while cold cereals, yoghurt/dairy desserts, and savory snacks were actually associated with a decreased risk of at least some of these diseases.¹⁴³ These findings are in line with the previously cited studies suggesting a connection between ultra-processed food consumption and worse health outcomes, but adds the nuance that there are individual items that may not follow this rule. As such, the level of processing and the nutritional content would likely need to be considered together to determine the healthy or unhealthy nature of an item.

Both the harms of ultra-processed foods in general and the nuances with regards to specific items are summed up in a science advisory published in August of 2025 in the American Heart Association's journal *Circulation*, which states that "although ultraprocessing or extensive processing can lower cost and improve shelf life, convenience, and taste of certain products, high UPF intake is consistently linked to negative health outcomes. Although mechanisms remain unclear, evidence supports food policies that limit UPF intake while avoiding unintended consequences."¹⁴⁴ **As such, while more aggressive approaches such as outright bans could lead to "unintended consequences", it is important that consumers be able to identify ultra-processed food and be aware of potential health risks so they can make informed choices when selecting what to purchase.**

However, many consumers do not have access to the information necessary to identify ultra-processed foods and make those informed choices. Ultra-processed food is often identified based on the NOVA food classification system, a 1-4 scale that classifies food based on the addition of ingredients such as added sugars, fats, and preservatives.¹⁴⁵ A 4 on this scale is an ultra-processed food or beverage, which is defined as "formulations made mostly or entirely from substances derived from foods and additives, with little if any intact [unprocessed] food....ultra-processed products also include other sources of energy and nutrients not normally used in culinary preparations."¹⁴⁶ It is important to distinguish "processed" (a 3 on the NOVA scale) and "ultra-processed," as the former does include adding ingredients such as sugar, salt, or "culinary ingredients," but not ingredients "not normally used in culinary preparations" such as chemical additives.¹⁴⁷ This analysis refers exclusively to ultra-processed foods, as that is the focus of much of the academic literature while processed foods includes many standard food items such as cheese, canned fruits and vegetables, and baked bread.

cardiovascular disease: analysis of three large US prospective cohorts and a systematic review and meta-analysis of prospective cohort studies. *The Lancet Regional Health - Americas*, 37, 100859–100859.

<https://doi.org/10.1016/j.lana.2024.100859>

¹⁴³ See, Mendoza, K., Smith-Warner, S. A., Rossato, S. L., Khandpur, N., Manson, J. E., Qi, L., Rimm, E. B., Mukamal, K. J., Willett, W. C., Wang, M., Hu, F. B., Mattei, J., & Sun, Q. (2024). Ultra-processed foods and cardiovascular disease: analysis of three large US prospective cohorts and a systematic review and meta-analysis of prospective cohort studies. *The Lancet Regional Health - Americas*, 37, 100859–100859.

<https://doi.org/10.1016/j.lana.2024.100859>

¹⁴⁴ See, Vadiveloo, Maya K., et al. "Ultraprocessed Foods and Their Association with Cardiometabolic Health: Evidence, Gaps, and Opportunities: A Science Advisory from the American Heart Association." *Circulation*, 8 Aug. 2025, <https://doi.org/10.1161/CIR.0000000000001365>.

¹⁴⁵ See, Open Food Facts - NOVA Groups for Food Processing (<https://world.openfoodfacts.org/nova>)

¹⁴⁶ *Ibid*

¹⁴⁷ *Ibid*

It is currently difficult to avoid ultra-processed foods without intentionality, as one study found that “over 73% of the US food supply is ultra-processed.”¹⁴⁸ Even if they know what to look for, consumers often have incomplete information, as one study notes that “the food manufacturing industry is not obliged to state on food labels the processes used in its products and even less the purposes of these processes. In some cases, this can make confident identification of ultra-processed foods difficult for consumers, health professionals, policy makers and even for researchers.”¹⁴⁹ **As a result, consumers may not know which foods are ultra-processed, putting them at risk for overconsumption and negative health impacts even if they know to avoid ultra-processed items.**

A term that is related to “ultra-processed,” especially with regards to the poor nutritional contents of many ultra-processed foods, is **“hyper-palatable foods” (HPF)**. HPFs are foods with a combination of artificial ingredients that “makes [food] tastier than it would otherwise be” and thereby encourages overconsumption.¹⁵⁰ A 2019 study offered a quantitative definition of hyper-palatable foods, suggesting that they were foods with excessive amounts of certain combinations of ingredients, specifically a combination of either fat and sodium (FSOD), fat and simple sugars (FS), or carbohydrates and sodium (CSOD).¹⁵¹ The study then applied these definitions to the USDA’s Food and Nutrient Database for Dietary Studies (FNDDS), which is “representative of the US food system,” and found that 4,795 foods could be defined as “hyper-palatable,” representing 62% of all food items in the database.¹⁵² Furthermore, the study notes that 5% of items identified as “hyper-palatable” were “labeled as reduced or no fat, sugar, salt, or calories.”¹⁵³ The study also links the terms hyper-processed and hyper-palatable to each other, concluding that “method of preparation, as opposed to food item, determined whether a food met HPF criteria.”¹⁵⁴

Researchers in the obesity field directly connect the condition to the availability of hyper-palatable foods, with the Associate Editor-in-Chief of the academic journal *Obesity* and Professor Emerita at Louisiana State University, Dr. Donna H. Ryan, stating that “we believe that one of the drivers of the obesity epidemic is ready access to energy-dense, hyperpalatable foods.”¹⁵⁵ A 2021 study similarly concluded that consumption of carbohydrate and sodium

¹⁴⁸ See, Menichetti, G., Ravandi, B., Mozaffarian, D., & Barabási, A. L. (2023). Machine learning prediction of the degree of food processing. *Nature communications*, 14(1), 2312. <https://doi.org/10.1038/s41467-023-37457-1>

¹⁴⁹ See, Monteiro, C. A., Cannon, G., Levy, R. B., Moubarac, J. C., Louzada, M. L., Rauber, F., Khandpur, N., Cediel, G., Neri, D., Martinez-Steele, E., Baraldi, L. G., & Jaime, P. C. (2019). Ultra-processed foods: what they are and how to identify them. *Public health nutrition*, 22(5), 936–941. <https://doi.org/10.1017/S1368980018003762>

¹⁵⁰ See, MedScape - 'Hyperpalatable' Defined as Foods Driving the Obesity Epidemic (<https://www.medscape.com/viewarticle/921472>)

¹⁵¹ See, University of Kansas Cofrin Logan Center for Addiction Research and Treatment - New Study Offers Data-Driven Definition of Unhealthy Yet Pervasive "Hyper-Palatable Foods" (<https://addiction.ku.edu/news/article/2019/11/05/new-study-offers-data-driven-definition-unhealthy-yet-pervasive-hyper-palatable-foods>)

¹⁵² See, Fazzino, T. L., Rohde, K., & Sullivan, D. K. (2019). Hyper-Palatable Foods: Development of a Quantitative Definition and Application to the US Food System Database. *Obesity*, 27(11), 1761–1768. <https://doi.org/10.1002/oby.22639>

¹⁵³ Ibid

¹⁵⁴ Ibid

¹⁵⁵ See, MedScape - 'Hyperpalatable' Defined as Foods Driving the Obesity Epidemic (<https://www.medscape.com/viewarticle/921472>)

(CSOD) hyper-palatable foods was associated with increased weight gain and increased body fat percentage, though it did not find a similar association for the other two types of HPF.¹⁵⁶

In November of 2024, the Commissioner of US Food and Drug Administration (FDA) wrote an op-ed, in which he states that there is a need for more high-quality research on the negative health impacts of ultra-processed foods, but there is already sufficient evidence to merit action such as front of package labeling requirements and restrictions on “healthy” claims on packaging for ultra-processed foods with excessive combinations of sodium, added sugars, and saturated fat.¹⁵⁷ It is worth noting that these are three of the four ingredients used to define foods as hyper-palatable.

On the other hand, there are also foods that are far more nutrient-dense and healthy than many in the general public may realize. In fact, the Cleveland Clinic notes that there are several nutrient-dense food items, such as beans, lentils, and oatmeal, that are also extremely affordable, leading them to conclude “it’s a myth that only people with a big bank account can afford to eat healthy.”¹⁵⁸ **However, there is some evidence that this myth may persist because many consumers struggle to identify these foods that are both affordable and nutritious.** A 2019 survey of US adults found that although 64% of respondents had heard of nutrient dense foods, only 43% were very or somewhat confident they could identify ones compared to 42% who were not very or not at all confident.¹⁵⁹ Additionally, when asked what would help them increase consumption of nutrient dense foods, the two most common responses were if they were more affordable (33%) and easier to identify (29%).¹⁶⁰

Improving education and awareness around how to identify ultra-processed, hyper-palatable, and nutrient-dense foods could significantly improve diets and allow consumers to maximize their nutrition security without additional benefits by identifying affordable healthy foods.

Cooking

There is evidence that most Americans predominantly eat home cooked meals, with 88% of US adults in 2025 reporting they do so at least a few times a week, compared to 17% who do the same for takeout meals and 12% for meals at a restaurant.¹⁶¹ A 2020 survey from the US Energy Information Administration offers a more detailed examination, finding that just under 20% of households cook three or more times per day, with about 35% cooking twice a day, about 25%

¹⁵⁶ See, Fazzino, T. L., Dorling, J. L., Apolzan, J. W., & Martin, C. K. (2021). Meal composition during an ad libitum buffet meal and longitudinal predictions of weight and percent body fat change: The role of hyper-palatable, energy dense, and ultra-processed foods. *Appetite*, 167, 105592. <https://doi.org/10.1016/j.appet.2021.105592>

¹⁵⁷ See, STAT Opinion - FDA commissioner: We need action and higher-quality research on ultra-processed foods (<https://www.statnews.com/2024/11/15/ultra-processed-foods-fda-calif-research-diet-related-disease/>)

¹⁵⁸ See, the Cleveland Clinic - 12 Inexpensive Healthy Food Choices (<https://health.clevelandclinic.org/cheap-healthy-food>)

¹⁵⁹ See, International Food Information Council - Nutrient Density: Consumer Understanding, Perceptions and Behaviors (<https://foodinsight.org/consumer-research-nutrient-density/>)

¹⁶⁰ Ibid

¹⁶¹ See, Pew Research Center - Americans on Healthy Food and Eating (<https://www.pewresearch.org/science/2025/05/07/americans-on-healthy-food-and-eating/>)

once per day, 15% a few times each week, and the remaining 5% once a week or less.¹⁶² An analysis of the CDC's 2007-2008 National Health and Nutrition Examination Survey (NHANES) showed similar variation, with just 8% of households never cooking at home, 43% sometimes cooking at home, and 49% always cooking at home.¹⁶³

However, the frequency of cooking in US households has been declining over time, with one study comparing results from USDA and CDC surveys concluding that the proportion of people in low and middle income US households that cooked declined between 1965 and 2007 from 67.6% to 55.6% and from 62.7% to 53.6%, respectively.¹⁶⁴ Additionally, the study found that between 1965 and 2007, average time spent cooking declined by at least 30 minutes for low, middle, and high income households, though these declines disproportionately occurred between 1965 and 1992.¹⁶⁵ Additionally, a USDA report notes that by 2014, just 60% of meals served at home were actually cooked at home, compared to 75% in 1984.¹⁶⁶

This decline is relevant to food and nutrition security due to its impacts on food budgets and the nutritional quality of meals. Harvard Medical School not only states that cooking at home leads to healthier diets and fewer calories consumed, but also reduces the risk of obesity and type 2 diabetes, leading them to conclude that teaching cooking skills should be considered "an effective medical intervention."¹⁶⁷ Additionally, the finance company SoFi concluded that "eating at home can cost around \$4-\$6 per person, while dining out can be \$15 or significantly more per person."¹⁶⁸ **As such, a household's ability to cook can significantly improve their food's affordability and nutritional quality, making cooking an important tool to overcoming the biggest barriers to food and nutrition security.**

However, the importance of cooking to making food healthier and more affordable also means that the trend of declining cooking is a significant barrier to food and nutrition security. There are a number of factors that can serve as barriers to cooking, and the previous iteration of this report analyzed time limitations due to work and other obligations as one such barrier, especially for low-income households.¹⁶⁹ One North Haven resident summarized the time barrier by stating "as a mother to two young kids, finding the time to cook healthy meals is my biggest challenge." **However, another major barrier not yet discussed is information inaccessibility, specifically**

¹⁶² See, US Energy Information Administration - In 2020, most U.S. households prepared at least one hot meal a day at home (<https://www.eia.gov/todayinenergy/detail.php?id=53439>)

¹⁶³ See, Virudachalam, S., Long, J. A., Harhay, M. O., Polsky, D. E., & Feudtner, C. (2014). Prevalence and patterns of cooking dinner at home in the USA: National Health and Nutrition Examination Survey (NHANES) 2007-2008. *Public health nutrition*, 17(5), 1022-1030. <https://doi.org/10.1017/S1368980013002589>

¹⁶⁴ See, Smith, L.P., Ng, S.W. & Popkin, B.M. Trends in US home food preparation and consumption: analysis of national nutrition surveys and time use studies from 1965-1966 to 2007-2008. *Nutr J* 12, 45 (2013). <https://doi.org/10.1186/1475-2891-12-45>

¹⁶⁵ Ibid

¹⁶⁶ See, USDA ERS - America's Eating Habits: Food Away From Home (<https://ers.usda.gov/sites/default/files/laserfiche/publications/90228/EIB-196.pdf>)

¹⁶⁷ See, Harvard Health Publishing at Harvard Medical School - Home cooking: Good for your health (<https://www.health.harvard.edu/blog/home-cooking-good-for-your-health-2018081514449>)

¹⁶⁸ See, SoFi - Examining the Price of Eating at Home vs. Eating Out (<https://www.sofi.com/learn/content/price-of-eating-at-home-vs-eating-out/>)

¹⁶⁹ See, CWCSEO - 2024 Food Security Annual Report (pgs. 44-45) (<https://wp.cga.ct.gov/cwcseo/wp-content/uploads/2025/01/Food-Insecurity-in-Connecticut-Report-2024.pdf>)

a lack of cooking knowledge and skills among some youth and adults. A longitudinal study of adults in Minnesota found that 19.1% of 18-23 year olds self-rated their cooking skills as “inadequate” or “very inadequate,” compared to 56% as “adequate,” and 24.9% as “very adequate,” with the latter group reporting higher vegetable consumption and lower fast food consumption ten years later.¹⁷⁰ A 2024 report created by a private food vendor conducted a survey of over 2,000 US adults, with 17% of respondents rating themselves as “beginner” cooks, compared to 36% rating themselves as “intermediate,” 33% “proficient,” 12% “advanced,” and 2% “expert.”¹⁷¹ Furthermore, when asked what barriers to being a more proficient cook, 44% cited “lack of skills/experience,” making it the 3rd most commonly cited barrier behind “lack of time” (54%) and “lack of motivation” (49%).¹⁷² Furthermore, a 2024 study noted significant discrepancies between self-assessed cooking skills and expert perceptions. Specifically, 81.7% of US Food and Nutrition Educators (FNEs) agreed or strongly agreed that the average young adult does not have “foundational food skills” (compared to 61.3% for all adults), while 69.3% of young adults reported “high confidence” in their ability to cook.¹⁷³

Providing additional opportunities for cooking education could remove barriers to cooking for more Connecticut residents, in turn promoting food and nutrition security.

Food Freshness and Safety

One of the primary information barriers to understanding food freshness and safety is food date labels. The USDA notes that, aside from baby formula, there are no federal requirements around expiration dates or other date labeling, and as such a number of different terms with different meanings are widely used.¹⁷⁴

¹⁷⁰ See, Utter, J., Larson, N., Laska, M. N., Winkler, M., & Neumark-Sztainer, D. (2018). Self-Perceived Cooking Skills in Emerging Adulthood Predict Better Dietary Behaviors and Intake 10 Years Later: A Longitudinal Study. *Journal of nutrition education and behavior*, 50(5), 494–500. <https://doi.org/10.1016/j.jneb.2018.01.021>

¹⁷¹ See, The Linz Shop - Clueless Cooks: The 2024 Report (<https://shop.linzheritageangus.com/clueless-cooks-report?srsltid=AfmBOopNfV2beAVeoGEhSnThd3FKb97UqwstiVm0EFF6INPRwtERBDSE>)

¹⁷² Ibid

¹⁷³ See, Gaston, M. E., Vaterlaus, J. M., & Wanago, N. C. (2024). Young adults’ essential food skills and cooking perceptions: A mixed method study. *Journal of Social, Behavioral, and Health Sciences*, 18(1), 169–186.

<https://doi.org/10.5590/JSBHS.2024.18.1.11>

¹⁷⁴ See, USDA Food Safety Inspection Service - Food Product Dating (<https://www.fsis.usda.gov/food-safety/safe-food-handling-and-preparation/food-safety-basics/food-product-dating#:~:text=How%20Does%20Date%20Labeling%20Impact,product%20prior%20to%20its%20consumption.>)

Examples of commonly used phrases:

- A **"Best if Used By/Before"** date indicates when a product will be of best flavor or quality. It is not a purchase or safety date.
- A **"Sell-By"** date tells the store how long to display the product for sale for inventory management. It is not a safety date.
- A **"Use-By"** date is the last date recommended for the use of the product while at peak quality. It is not a safety date except when used on infant formula as described below.
- A **"Freeze-By"** date indicates when a product should be frozen to maintain peak quality. It is not a purchase or safety date.

Figure 4: Common Date Label Terms and their Meaning

Source: [USDA Food Safety Inspection Service](#)

The USDA further estimates that 30% of food is wasted or lost at the retail and consumer levels, which it attributes in part to “consumers or retailers throwing away wholesome food because of confusion about the meaning of dates displayed on the label.”¹⁷⁵ A 2019 study found evidence of such confusion among adults, with 36% of respondents unable to correctly determine the meaning of “best if used by” and 55.2% unable to do the same for “Use by,” though the incorrect answer rates fell to 18% and 17.6% respectively once respondents had been given educational materials explaining the terms.¹⁷⁶ There is also evidence of similar knowledge gaps around some best practices with regards to food safety. A study of low income US households found that just 26.9% were able to correctly identify best practices for sanitizing their kitchen sink, 33.8% had at least some knowledge of which practices cause food poisoning, and 12.8% knew which foods were high risk for listeria.¹⁷⁷ **Overall, limited information and confusing labeling practices can increase the risks of households both wasting food that is still safe and eating food that is not.**

Growing/Producing Food

Knowing how to grow food is another food-related skill that brings a number of benefits with regards to food and nutrition security. A 2020 study that surveyed nearly 4000 US adults found that home gardening is associated with an increased likelihood of meeting dietary guidelines for fruit and vegetable consumption and decreased body mass index (BMI).¹⁷⁸ Similarly, a University of California pilot study found that home gardening significantly increased fruit and

¹⁷⁵ Ibid

¹⁷⁶ See, Turvey, C., Moran, M., Sacheck, J., Arashiro, A., Huang, Q., Heley, K., Johnston, E., & Neff, R. (2021). Impact of Messaging Strategy on Consumer Understanding of Food Date Labels. *Journal of Nutrition Education and Behavior*, 53(5), 389–400. <https://doi.org/10.1016/j.jneb.2021.03.007>

¹⁷⁷ See, Liu, P. (2020). Food Safety Knowledge and Practice in Low-income Families in the United States: An Exploratory Study. *Food Protection Trends*, 40(2), 80–94.

<https://www.foodprotection.org/members/fpt-archive-articles/2020-03-food-safety-knowledge-and-practice-in-low-income-families-in-the-united-states-an-explorator/>

¹⁷⁸ See, Kegler, M. C., Prakash, R., Hermstad, A., Williamson, D., Anderson, K., & Haardörfer, R. (2020). Home gardening and associations with fruit and vegetable intake and BMI. *Public health nutrition*, 23(18), 3417–3422. <https://doi.org/10.1017/S1368980020001329>

vegetable consumption while also being associated with saving an average of \$92 per month.¹⁷⁹ In line with these effects, a 2023 report from New York State's Gardens Task Force stated that "community gardens offer increased nutrition security and food security" while also noting that they may increase "access to culturally relevant foods that are not widely available through traditional food access points in the community."¹⁸⁰ Whether at home or in a community garden, a household growing their own food can provide a number of significant benefits.

However, there is evidence that many who may benefit from growing food for themselves and their household are not doing so, with lack of training, education, and information being significant barriers. A 2025 study of 205 food pantry clients in Minnesota found that 91% of respondents wanted to garden, but only 31% were active gardeners.¹⁸¹ Furthermore, the 3rd and 5th most commonly cited barriers to gardening were that respondents "need to learn more" and "do not know how" to garden, with the 2nd most commonly proposed solution to overcoming all barriers was "education."¹⁸² That being said, it is important not to overstate the prevalence of this challenge, as this study notes that "many customers ... have motivation for and knowledge of gardening, but do not have a place to put the garden and/or gardening tools."¹⁸³ Additionally, a 2020 study in rural Pennsylvania found "a lack of information or knowledge about gardening was rarely cited as a barrier to gardening," though they do note that the area of the study has a "rich agricultural history" and most respondents learned from parents or other friends and family.¹⁸⁴ **However, for those who do not currently receive such information, increasing access to education on how to grow your own food can greatly support food and nutrition security.** One Danbury resident emphasized this, stating that "involving young students to learn about how food is grown, growing their own food and involving science STEAM etc would be extremely beneficial and is so important at this critical time."

Availability of Government Benefits (and How to Apply)

While the largest federal programs that provide food benefits are widely utilized by eligible households, this is not necessarily the case for all programs. For example, the largest federal food support program, SNAP, was utilized by 98% of eligible Connecticut residents in 2022, well above the national average of 88%.¹⁸⁵ By contrast, the USDA estimates that 47.2% of Connecticut individuals eligible for WIC were enrolled in 2022, though it is worth noting that

¹⁷⁹ See, University of California - Urban Gardens Improve Food Security (<https://www.universityofcalifornia.edu/news/urban-gardens-improve-food-security>)

¹⁸⁰ See, New York Department of Agriculture and Markets - Community Gardens Task Force 2023 Report (<https://agriculture.ny.gov/system/files/documents/2023/02/communitygardenstaskforcereport.pdf>)

¹⁸¹ See, Duerst, C. K., Williams, R., Lopez, J., & LaVergne, D. (2025). Garden access and barriers for low-income community members. *Journal of Agriculture, Food Systems, and Community Development*, 14(1), 271–284. <https://doi.org/10.5304/jafscd.2024.141.008>

¹⁸² Ibid

¹⁸³ Ibid

¹⁸⁴ See, Darby, K. J., Hinton, T., & Torre, J. (2020). The motivations and needs of rural, low-income household food gardeners. *Journal of Agriculture, Food Systems, and Community Development*, 9(2), 55–69. <https://doi.org/10.5304/jafscd.2020.092.002>

¹⁸⁵ See, USDA - Reaching Those in Need: Estimates of State Supplemental Nutrition Assistance Program Participation Rates in 2022

(<https://fns-prod.azureedge.us/sites/default/files/resource-files/ear-snap-Reaching-Those-in-Need-2022.pdf>)

WIC participation in Connecticut has increased 20% from 2020 to 2025.¹⁸⁶ ¹⁸⁷ Furthermore, the USDA's 2021 estimates for the Summer Food Service Program (SFSP or "Summer Meals") put Connecticut's participation rate at 6.49%, the second lowest rate in New England.¹⁸⁸

One barrier to participation in smaller programs is limited knowledge about their existence, eligibility requirements, and how to apply. A USDA study of the Summer Meals Program (SFSP) found that the most commonly cited reason for non-participation among eligible teens (73%) and caregivers (46%) is that "they did not know about the program at the site closest to their home."¹⁸⁹ The Child and Adult Care Food Program (CACFP) is slightly different because facilities apply rather than households, but a study conducted on Connecticut-based child care facilities found similar issues. Specifically, the study found that 24% of eligible non-participating centers had never heard about CACFP, 59% of all non-participating centers were not sure if they were eligible to participate or not, and 36% of non-participating centers cited "not knowing enough about the program" as a reason for not participating, making it second only to "lack of eligible children/children from low-income households" (37%).¹⁹⁰

There are 16 federal nutrition programs that apply to Connecticut.¹⁹¹ While not all of those programs require household-level applications, **the large number of programs can make it difficult for an individual to know about them all, let alone the eligibility requirements or how to apply for each relevant one.** Furthermore, the presence of other support programs not directly related to food, such as Temporary Assistance for Needy Families (TANF) and Medicaid, further heightens this challenge.

The state has created a resource to address this challenge. Health.ct.gov is a "health and human services portal" which offers a screener to determine eligibility for multiple benefits at once.¹⁹² Additionally, a concerted outreach and advertising campaign by the Department of Public Health for WIC has likely contributed to the 20% rise in WIC participation over the last five years.¹⁹³ **Tools and programs like these are critical, as without them it can be difficult for families and/or providers to identify and enroll in all of the programs that may support them.**

¹⁸⁶ See, USDA FNS - National- and State-Level Estimates of WIC Eligibility and WIC Program Reach in 2022 (<https://fns-prod.azureedge.us/sites/default/files/resource-files/wic-ear-2022-report.pdf>)

¹⁸⁷ See, CTN - Appropriations Committee Informational Forum on Federal Nutrition Program Changes [Timestamp: 2:51:17] (<http://ct-n.com/ctnplayer.asp?odID=25513&jump=2:51:17>)

¹⁸⁸ See, USDA ERS - Food Environment Atlas

(<https://gisportal.ers.usda.gov/portal/apps/experiencebuilder/experience/?id=2cbe6dd56a144568ad667128b7c388b0>)

¹⁸⁹ See, USDA FNS - USDA Summer Meals Study Summary

(<https://fns-prod.azureedge.us/sites/default/files/resource-files/SummerMealsStudy-2018-SummaryofFindings.pdf>)

¹⁹⁰ See, Andreyeva, T., Sun, X., Cannon, M., & Kenney, E. L. (2022). The Child and Adult Care Food Program: Barriers to Participation and Financial Implications of Underuse. *Journal of Nutrition Education and Behavior*, 54(4), 327–334. <https://doi.org/10.1016/j.jneb.2021.10.001>

¹⁹¹ See, Appendix D

¹⁹² See, CT.gov - Governor Lamont Announces Launch of [health.ct.gov](https://Health.ct.gov)

(https://portal.ct.gov/governor/news/press-releases/2023/10-2023/governor-lamont-announces-launch-of-health-ct-gov?language=en_US)

¹⁹³ See, CTN - Appropriations Committee Informational Forum on Federal Nutrition Program Changes [Timestamp: 2:51:17] (<http://ct-n.com/ctnplayer.asp?odID=25513&jump=2:51:17>)

Local Food Systems and Availability of Local Food Resources

In addition to government support, there are a number of local food resources that are critical to food and nutrition security. For example, a 2023 study of Connecticut and Rhode Island residents found that the variable most strongly associated with nutrition insecurity “was having few or no full-service grocery stores nearby,” a variable also associated with food insecurity along with “no affordable food stores.”¹⁹⁴ Additionally, emergency food nonprofits such as food pantries and soup kitchens play a critical role for food insecure households, helping to prevent hunger and the acute negative impacts that come with it. **As such it is critically important for individuals to know what resources are available to them and where in their community they can access them. However, there is evidence that this information is often not widely known, meaning many people don't access resources that they could have.**

This challenge also compounds the previously discussed challenge around knowledge of government support programs and how to apply. **Even households who benefit from automatic eligibility or otherwise do receive benefits may struggle to find places to redeem those benefits.** For example, a 2025 report by the National WIC Association noted that one of the key challenges to the effectiveness of the WIC Farmers Market Nutrition Program (FMNP) was that “many participants [were] unsure about market locations, available produce, and how to effectively use their FMNP benefits.”¹⁹⁵ As such, one of the report’s four key recommendations is to “enhance participant awareness & access.”¹⁹⁶

A similar barrier also applies to the emergency food system. A report from the Greater Boston Food Bank on the gaps in food access during COVID identified lack of awareness as one of the main barriers to accessing food pantries, with residents citing not knowing where food pantries were located (45%) and when they were open (62%) as two of the ten most common reasons for not accessing these resources.¹⁹⁷

It is important to note that there are resources to provide information on the location of these local food supports, some of which are widely used. For example, 2-1-1, which connects residents to free resources including housing, food, and more, received more than 1.7 million requests in Connecticut in 2024.¹⁹⁸ While not all of these calls would have been for food, the large number of calls suggest that there is a high level of awareness that the 2-1-1 resource exists. On the other hand, other resources may be less well known. For example, the City of Milford maintains a local food guide which lists all of the food support options in town as well as

¹⁹⁴ See, Oddo, V. M., Leider, J., Tovar, A., Powell, L. M., Elenio, E., & Vadiveloo, M. K. (2025). Food insecurity and risk of nutrition insecurity among Supplemental Nutrition Assistance Program participants in Rhode Island and Connecticut, USA. *Preventive Medicine Reports*, 51, 103002. <https://doi.org/10.1016/j.pmedr.2025.103002>

¹⁹⁵ See, National WIC Association - Farmers’ Market Nutrition Program Landscape Scan Report (<https://media.nwica.org/elevance%20fmnp%20report%20final.pdf>)

¹⁹⁶ Ibid

¹⁹⁷ See, The Greater Boston Food Bank - Gaps in Food Access During the COVID-19 Pandemic in Massachusetts (https://www.gbfb.org/wp-content/uploads/2021/04/GBFB_Gaps_in_Food_Access_Report_Final_May_2021.pdf)

¹⁹⁸ See, NBC Connecticut - 211 center received more than 1.7 million requests for help in 2024 (<https://www.nbcconnecticut.com/news/local/211-center-received-more-than-1-7-million-requests-for-help-in-2024/3498156/#:~:text=211%20center%20received%20more%20than,help%20in%202024%20E2%80%93%20NBC%20Connecticut>)

when and how to access them.¹⁹⁹ However, the city found that 71.7% of surveyed Milford residents were unaware of the food guide, and of those who were aware 47.2% hadn't used it. Many other towns also maintain local food guides, but lack of knowledge about their existence may be a barrier to their use. **Ultimately, maximizing awareness of where various food resources are located is critically important to maximizing their effect on food insecurity.**

Nothing in this section should be interpreted as suggesting that individuals are responsible for their own food or nutrition insecurity or that education alone can ensure food security. As the 2024 report extensively discussed and several examples in this report illustrate, there are numerous structural barriers that make good food inaccessible and unaffordable that must be resolved. One resident of Hamden summed up the importance of these structural factors, stating "I think awareness of healthier alternatives and how to eat healthy has been super helpful and encouraged many of my family members to eat healthier. [The problem is] just having more accessibility and affordability to further improve their [ability] to eat healthier."

However, this section has illustrated that important information that could be part of the solution to food and nutrition insecurity is not reaching many Americans. Additionally, as noted by a 2009 USDA report, "almost all American diets are in need of improvement," showing that in many cases these information barriers exist regardless of income level.²⁰⁰ However, the presence of these barriers can have a particularly acute impact on food and nutrition insecure households, as financial constraints prevent the most expensive alternatives to ultra-processed, non-nutritious food from being an option. **Education and awareness are not sufficient to ensure food and nutrition security by themselves, but they are necessary to maximize both the effectiveness of currently available resources and the impact of any future structural changes like the ones recommended in the following section.**

¹⁹⁹ See, City of Milford - Milford Food Guide Spring 2024

(https://www.ci.milford.ct.us/sites/g/files/vyhlif9226/f/uploads/final_milford_food_guide_spring_2024.pdf)

²⁰⁰ Ibid

Section 3: Recommendations

As this report has noted, most available evidence suggests that food and nutrition insecurity in Connecticut have worsened in the last year. As such, the need for comprehensive policy solutions has grown as well. This section will review the CWCSEO's proposed strategy to combat food and nutrition insecurity, review recommendations from the previous report, and make new ones.

Review of Proposed Food Insecurity Strategy and Recommendation Criteria:

This report will recommend the same overall strategy and use the same criteria for specific policy recommendations as the previous report. As such, the underlying principle is to make food more affordable, accessible, and local by providing resources directly to food insecure households and building the infrastructure to make it easier to produce, prepare, transport, and distribute affordable, nutritious, and local food.

The five criteria for policy recommendations are:

1. **Addresses both Causes and Effects:** The policy should be able to both provide food for today and make individuals less likely to be food insecure in the future by addressing one or more of the underlying challenges discussed in this and/or previous reports.
2. **Is Requested by Impacted Communities:** The policy should be requested by communities experiencing food insecurity and organizations working in the food system to ensure that any resources provided will actually be usable on the ground.
3. **Has an Evidence-Based Theory of Change:** The policy should have research showing either that it has had the desired impact when implemented elsewhere or that its underlying assumptions are valid (ex. Higher vegetable consumption leads to reduced risk of disease).
4. **Invests in Connecticut Communities:** The policy should ensure that, to the maximum extent possible, any government funds that are spent go into the Connecticut food economy, particularly businesses owned by residents of the communities the businesses are located in, and contribute to more financial security for food workers and businesses.
5. **Is Fully Funded and Fiscally Sustainable:** The implementing agency must be provided with the resources needed to implement the policy with fidelity. Furthermore, the policy should offer benefits proportional to the fiscal cost and ideally have a decreasing net cost to the state over time, achieved by diminishing annual costs, adding new federal investments, or generating significant savings in other parts of the state budget (including reducing government expenditures on nutrition-related health services).

Review of Previous Policy Recommendations and Updated Analysis:

In the 2024 Food Security Report, the CWCSEO recommended 11 policies to reduce food insecurity (a list of which can be found on page 6 of this report). **This report renews all of the recommendations made by the previous report and also renews the analysis from [pages 65-86](#) of that report, which details the reasoning for why each policy can be expected to reduce food insecurity and cites supporting research and data.**

In addition, this report offers additional analysis in support of the following renewed recommendations:

Create a Food & Nutrition Special Fund with Dedicated Revenue Sources

In the previous report, the recommendations were listed in no particular order. That remains the case this year with the sole exception that **this recommendation is being elevated to become the CWCSEO's primary one. Additionally, this report specifies that the recommendation is for a special fund outside of the General Fund (similar to the Tourism Fund, Insurance Fund, Transportation Fund, and others)**. There are a few reasons for prioritizing this recommendations over all of the others made or renewed in this report:

- **Funding gap between CT and other northeast states:** While Connecticut does invest in a number of programs that combat food insecurity, the state does lag behind several nearby states. As mentioned in Section 1, Connecticut's current budget appropriates just over \$54 million in identified food security and food systems spending in FY26 (just over \$20 million in core food security programs) and just over \$59 million in FY27 (just over \$25 million in core food security programs).²⁰¹ While this is a significant amount of funding, it is significantly behind several other northeastern states. For example, the FY26 Massachusetts budget appropriates just over \$20 million for doubling SNAP at farmers markets through the "Healthy Incentives Program," just over \$50 million for "Emergency Food Assistance," and \$180 million for "School Meals," totaling to over \$250 million for just those three programs.²⁰² **As such, Massachusetts spends more than quadruple in absolute terms and more than double per capita on just three food insecurity programs than Connecticut spends on all 51 line items and policy revisions identified in this report.** Similarly, New York has appropriated \$340 million in their FY26 budget for universal free school meals, which alone is more than six times what Connecticut spends on all 50 items in absolute terms and still more per capita even after taking the large population difference into account.²⁰³ **When including other investments such as \$23 million for "the Hunger Prevention and Nutrition Assistance Program (HPNAP)" and \$5 million for the "Nourish NY Program," the funding gap between Connecticut and New York grows even wider.**²⁰⁴ To give an example of a northeast state that has not approved universal free school meals, New Jersey's FY26 budget includes \$30 million for their state minimum SNAP benefit and \$85 million for "aid to the state's food banks."²⁰⁵ **Combined with the "up to \$40 million per year" already allocated to the state's "Food Desert Relief Program," New Jersey is spending \$155 million per year on just three programs, more per capita and**

²⁰¹ See, Appendix B

²⁰² See, Commonwealth of Massachusetts - Budget Summary FY26 Enacted Line Item Summary (<https://budget.digital.mass.gov/summary/fy26/line-item/>)

²⁰³ See, New York City Hunter College Food Policy Center - New York Commits to Universal School Meals in 2025 Budget: A Transformative Step for Educational and Health Equity (<https://www.nycfoodpolicy.org/new-york-commits-to-universal-school-meals-in-2025-budget-a-transformative-step-for-educational-and-health-equity/#:~:text=The%202025%20budget%20includes%20a,to%20free%20and%20reduced%20meals.>)

²⁰⁴ See, New York State Division of the Budget - Governor Hochul Signs New Legislation to Invest in the Health and Well-Being of All New Yorkers as Part of the FY 2026 Budget (<https://www.budget.ny.gov/pubs/press/2025/fy26-enacted-budget-health-wellbeing.html#:~:text=Investing%20in%20the%20Well%20Being,the%20previous%20year's%20funding%20levels.>)

²⁰⁵ See, Governor Phil Murphy - Fiscal Year 2026 Budget Address (https://d31hzlhk6di2h5.cloudfront.net/20250630/58/49/7f/87/0e2a4d79d3e92b765cffa02e/FY2026_budget_at_a_glance_final.pdf)

nearly triple in absolute terms what Connecticut spends on all 51 items.²⁰⁶ Finally, Vermont's FY26 budget allocates \$500,000 for the Vermonters Feeding Vermonters Program, \$500,000 for Vermont Local Food for Schools and childcare grants, and \$17.5 million for universal free school meals, totaling \$18.5 million.²⁰⁷ While this is significantly less than the over \$54 million spent on all 51 Connecticut programs in absolute terms, it is more per capita given that Connecticut's population is more than five times larger than Vermont's.

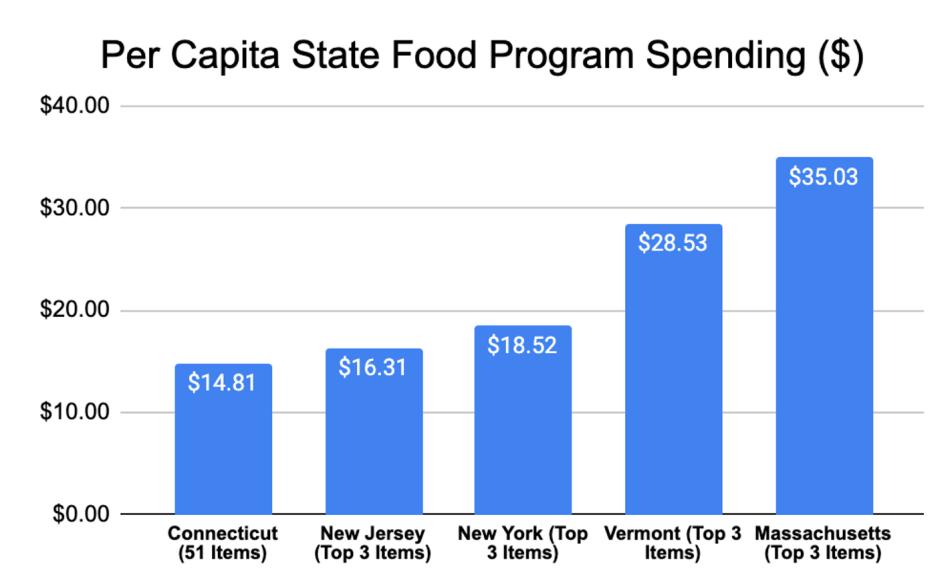


Figure 5: Total Per Capita Food Spending in Connecticut Compared to Top 3 Programs in Selected States in FY26

The 50 items identified in this report are not necessarily indicative of every dollar Connecticut spends on food security or food system related items, as some money on staffing or other items could be argued to have an impact. However, the lists from other states provided above are even less comprehensive as they are limited to just three programs and don't list all other food programs in their respective budgets. As such, this comparison does illustrate that there is likely a major funding gap between Connecticut and many of our neighbors. **Creating a Food & Nutrition Special Fund with dedicated revenue exclusively for food security programs would help the state close that gap and invest in food and nutrition security.**

- **Primacy of funding-related issues:** A 2023 study of Connecticut and Rhode Island residents found that reporting "lack of money" was associated with an 8-fold increase in reporting food insecurity, making it by far the strongest predictor of food insecurity.²⁰⁸

²⁰⁶ See, New Jersey Economic Development Authority - Food Desert Relief Program (<https://www.njeda.gov/food-desert-relief-program/>)

²⁰⁷ See, VermontBiz - VLCT: \$9.1 billion budget goes to the governor (<https://vermontbiz.com/news/2025/may/21/vlct-91-billion-budget-goes-governor>)

²⁰⁸ See, Oddo, V. M., Leider, J., Tovar, A., Powell, L. M., Elenio, E., & Vadiveloo, M. K. (2025). Food insecurity and risk of nutrition insecurity among Supplemental Nutrition Assistance Program participants in Rhode Island and Connecticut, USA. Preventive Medicine Reports, 51, 103002. <https://doi.org/10.1016/j.pmedr.2025.103002>

Given the steep rise in food prices in recent years, the CWCSEO believes there are two possible ways to make food more affordable. The first is to increase household incomes via increases to benefits such as SNAP and school meals or tax reductions to increase households' abilities to afford higher prices. The second is to develop more robust local food systems infrastructure to increase the supply of local food available with the goal of decreasing the price of food through economies of scale and reduced production costs (equipment, storage, transportation, etc). As mentioned earlier in this section, the CWCSEO's recommended strategy is to adopt a combination of policies designed to achieve both of these goals simultaneously. However, any policy that increases benefits, decreases taxes, or invests in infrastructure, would almost certainly come with a fiscal cost to the state, and as such would need to be funded. **As such, the CWCSEO believes that without significant new state-level investments, it will be extremely difficult to fully address food insecurity, and a Food & Nutrition Special Fund with dedicated revenue exclusively for food security programs is the most practical way to guarantee such investments.** This fund would also increase the viability of nearly all of the other recommendations being renewed by providing a consistent and reliable source of funding.

- **Need for SNAP Cost-Sharing Funds:** While new initiatives will be necessary to reduce food insecurity, it is also critical to avoid losing current resources. As mentioned in Section 1, the state will have increased cost-sharing requirements for SNAP starting in FY27, possibly costing as much as \$173 million per year by FY28. Absent major changes in federal policy, the state will need to pay these costs every year going forward to avoid reductions in SNAP benefits or the end of the program entirely. As such, guaranteeing new funding for food security will be critical just to avoid further reductions in support and more increases in food insecurity.

Additionally, the CWCSEO renews the four possible ways to dedicate revenue to this fund offered in the previous report, and offers analysis on one new option below:

- *Remove the sales tax exemptions from all extremely unhealthy foods and beverages (and/or dedicate the revenue from already non-exempt foods and beverages):* Currently, Connecticut exempts the majority of "food products for human consumption" from the sales and use tax, with the only foods and beverages not exempt from the tax being "meals, carbonated beverages, candy, and alcoholic beverages."²⁰⁹ **This option would dedicate the revenue from taxes on those non-exempt items while similarly removing sales tax exemption from foods that are placed in the least healthy category by the Supporting Wellness at Pantries (SWAP) system or identified as both ultra-processed and hyper-palatable.** As discussed in Section 2, ultra-processed foods and beverages are associated with significant negative health outcomes, though there is some nuance as certain ultra-processed foods may be fairly healthy. The intent of only removing the exemption from foods and beverages that are ultra-processed *and* hyper-palatable is to account for this nuance and avoid taxing those healthier items. For example, whole wheat bread may sometimes technically fall into the category of ultra-processed, but would most likely not have sufficient added sugar, sodium, or

²⁰⁹ See, CT Department of Revenue Services - Statutory Exemptions for Certain Sales (<https://portal.ct.gov/drs/sales-tax/exemptions-from-sales-and-use-taxes>)

saturated fat to be classified as hyper-palatable.²¹⁰ This would be in line with the American Heart Association's science advisory published in August 2025, which notes that "the focus should be on cutting back the most harmful UPFs that are already high in unhealthy fats, added sugars, and salt while allowing a small number of select, affordable UPFs of better diet quality to be consumed as part of a healthy dietary pattern."²¹¹ Both closing the tax exemption and creating a fund to invest in local and nutritious food would also be in line with a series of research articles published in *The Lancet* in November 2025 "carried out by 43 global experts and based on 104 long-term studies," which concluded that "relying on behaviour change by individuals is insufficient. Deteriorating diets are an urgent public health threat that requires coordinated policies and advocacy to regulate and reduce ultra-processed foods and improve access to fresh and minimally processed foods."^{212 213}

Either of these exemption removal options would likely require the implementation of new recommendation 2 in this report, and the analysis of that recommendation later in this section will provide more details on how non-exempt items would be identified.

One potential drawback of this policy is that it would impact most households and potentially drive up their costs. However, it is worth noting that all "purchases made with supplemental nutrition assistance program benefits" are already sales tax exempt.²¹⁴ **As such, this option would not negatively impact most low-income households at all.**

Furthermore, dedicating the revenue to a Food & Nutrition Special Fund could mitigate or completely resolve the issue of impacting other consumers. While the sales tax would increase the cost of these least healthy items by 6.35% (for example, it would increase the cost of a Walmart "party-size" bag of Doritos priced at \$5.94 by approximately 38 cents if that item were not tax exempt), it would increase overall grocery costs by less as many items would still be exempt.²¹⁵ Additionally, dedicating the revenue to programs that make food more affordable and accessible through policies such as those recommended above would ensure that the increased affordability of healthier items would offset the decreased affordability of unhealthy ones. This offset would be designed to cause an overall reduction in food costs, especially for low-income households. This is the exact effect found by a study on the impacts of sugar-sweetened beverage excise taxes in

²¹⁰ See, Your Local Epidemiologist - What are ultra-processed foods, really?

(https://yourlocalepidemiologist.substack.com/p/a-nuanced-look-at-ultra-processed?utm_source=post-email-title&publication_id=281219&post_id=164493689&utm_campaign=email-post-title&isFreemail=true&r=1lpn52&triedRedirect=true)

²¹¹ See, Vadiveloo, Maya K., et al. "Ultraprocessed Foods and Their Association with Cardiometabolic Health: Evidence, Gaps, and Opportunities: A Science Advisory from the American Heart Association." *Circulation*, 8 Aug. 2025, <https://doi.org/10.1161/CIR.0000000000001365>.

²¹² See, BBC News - Ultra-processed food is global health threat, experts warn (<https://www.bbc.com/news/articles/cy4pjz784o>)

²¹³ See, *The Lancet* - Ultra-Processed Foods and Human Health (<https://www.thelancet.com/series-do/ultra-processed-food>)

²¹⁴ See, CT Department of Revenue Services - Statutory Exemptions for Certain Sales (<https://portal.ct.gov/drs/sales-tax/exemptions-from-sales-and-use-taxes>)

²¹⁵ See, Walmart - Doritos Nacho Cheese Tortilla Snack Chips, Party Size, 14.5 Ounce Bag (<https://www.walmart.com/ip/Doritos-Nacho-Cheese-Tortilla-Snack-Chips-Party-Size-14-5-Ounce-Bag/433078517>)

Philadelphia, San Francisco, and Seattle. Although a larger portion of low-income households' funds were paid to the tax, those additional costs were more than offset by the reinvestment of the revenues into policies that disproportionately benefitted those same households.²¹⁶ In total, low income households in all three cities are estimated to have received more in newly funded services than they lost in increased prices due to the tax.

Additionally, removing unhealthy foods and beverages from the tax exemption would be consistent with current Connecticut policies, as certain unhealthy items such as candy, carbonated beverages, and alcohol are already excluded from the exemption.²¹⁷ In 2025, Maryland also ended a sales tax exemption for vending machine snack foods, reducing the number of unhealthy foods covered by sales tax exemptions.²¹⁸ **Similarly, this recommendation would ensure the state is not inadvertently subsidizing foods and beverages that are associated with negative health outcomes by exempting them from the sales tax. By ending this subsidy, the state could free up revenue to instead support access to healthier alternatives.**

Finally, there has been an increased federal focus on the harm of certain foods and beverages. In its Make America Healthy Again Report, the White House identified ultra-processed foods and beverages as one of the primary “potential dietary, behavioral, medical, and environmental drivers” causing chronic diseases in the United States.²¹⁹ This broadly aligns with the statements made by the Biden Administration’s FDA Commissioner, who also stated that there was a need for actions to reduce the already-established harms of ultra-processed foods and additional research to investigate further harms.²²⁰ Given the growing bipartisan concerns about the harms of these foods and beverages, Connecticut has an opportunity to act in alignment with the likely future direction of federal policy.

- *Excise tax on sugar sweetened beverage distributors:* **The primary new analysis for this option is that recent research evidence has suggested that sugar sweetened beverages may be uniquely detrimental to health even compared to other sources of added sugar.** The Make America Healthy Again Report singles out sugar-sweetened beverages as particularly harmful, citing a study that linked these beverages to 1.2 million new cases of heart disease and 340,000 deaths

²¹⁶ See, Jones-Smith, Jessica C., et al. “Sweetened Beverage Taxes: Economic Benefits and Costs according to Household Income.” Food Policy, vol. 110, July 2022, p. 102277, www.sciencedirect.com/science/article/pii/S0306919222000574, <https://doi.org/10.1016/j.foodpol.2022.102277>.

²¹⁷ See, CT Department of Revenue Services - Statutory Exemptions for Certain Sales (<https://portal.ct.gov/drs/sales-tax/exemptions-from-sales-and-use-taxes>)

²¹⁸ See, Whiteford Law - Client Alert: New Maryland Sales Tax on IT Services, Capital Gains and More (<https://www.whitefordlaw.com/news-events/client-alert-new-maryland-sales-tax-on-it-services-capital-gains-and-more>)

²¹⁹ See, The White House - The MAHA Report (<https://www.whitehouse.gov/wp-content/uploads/2025/05/WH-The-MAHA-Report-Assessment.pdf>)

²²⁰ See, STAT Opinion - FDA commissioner: We need action and higher-quality research on ultra-processed foods (<https://www.statnews.com/2024/11/15/ultra-processed-foods-fda-calif-research-diet-related-disease/>)

worldwide in 2020.²²¹ Similarly, a 2025 meta-analysis of 29 studies found that sugar consumed in beverages was associated with an increase in incidences of Type 2 Diabetes compared to sugar consumed in foods.²²² Furthermore, the study found that within the category of beverages, sugar-sweetened increased the risk of Type 2 Diabetes more than other beverages such as fruit juice.²²³ An article summarizing the study's findings notes that the reason for this added risk from sugary beverages "may come down to the differing metabolic effects" as "sugar-sweetened beverages and fruit juice supply isolated sugars, leading to a greater glycemic impact that would overwhelm and disrupt liver metabolism thereby increasing liver fat and insulin resistance."²²⁴

Similarly, another study found that along with processed meats, sugar and artificially sweetened beverages posed an exceptionally high risk of cardiovascular disease and stroke, even compared to other ultra-processed items.²²⁵ This is particularly concerning because a 2020 study found that 90% of all "carbonated soft drinks" qualified as ultra-processed beverages and that such beverages accounted for 28% of all US household ultra-processed food and beverage purchases, more than any other category.²²⁶ As such, sugar-sweetened beverages may be disproportionately associated with the negative impacts of ultra-processed food consumption outlined in Section 2 of this report.

An article in the scientific journal *Nature* goes even farther, stating that "added sweeteners pose dangers to health that justify controlling them like alcohol," a product frequently subjected to excise taxes.²²⁷ Another 2023 article published in the *British Medical Journal (BMJ)* analyzes tobacco, alcohol, and sugar-sweetened beverage taxes together and further asserts that claims of such taxes being regressive are unfounded, citing studies from Ukraine, Kazakhstan, and Brazil for sugar-sweetened beverage taxes that found a net positive impact for low-income households when taking into account the causal healthcare savings and productivity increases under the extended cost-benefit

²²¹ See, The White House - The MAHA Report

(<https://www.whitehouse.gov/wp-content/uploads/2025/05/WH-The-MAHA-Report-Assessment.pdf>)

²²² See, Della Corte, K. A., Bosler, T., McClure, C., Buyken, A. E., LeCheminant, J. D., Schwingshakl, L., & Della Corte, D. (2025). Dietary Sugar Intake and Incident Type 2 Diabetes Risk: A Systematic Review and Dose-Response Meta-Analysis of Prospective Cohort Studies. *Advances in Nutrition*, 16(5), 100413.

<https://doi.org/10.1016/j.advnut.2025.100413>

²²³ Ibid

²²⁴ See, Brigham Young University - Rethinking sugar: BYU study shows food source is key to understanding diabetes risk

(<https://news.byu.edu/intellect/rethinking-sugar-byu-study-shows-food-source-is-key-to-understanding-diabetes-risk>)

²²⁵ See, Mendoza, K., Smith-Warner, S. A., Rossato, S. L., Khandpur, N., Manson, J. E., Qi, L., Rimm, E. B., Mukamal, K. J., Willett, W. C., Wang, M., Hu, F. B., Mattei, J., & Sun, Q. (2024). Ultra-processed foods and cardiovascular disease: analysis of three large US prospective cohorts and a systematic review and meta-analysis of prospective cohort studies. *The Lancet Regional Health - Americas*, 37, 100859–100859.

<https://doi.org/10.1016/j.lana.2024.100859>

²²⁶ See, Dunford, E. K., Miles, D. R., & Popkin, B. M. (2025). Exploring disparities in the proportion of ultra-processed foods and beverages purchased in grocery stores by US households in 2020. *Public Health Nutrition*, 28(1), e85. [doi:10.1017/S1368980025000606](https://doi.org/10.1017/S1368980025000606)

²²⁷ See, Lustig, R., Schmidt, L. & Brindis, C. The toxic truth about sugar. *Nature* 482, 27–29 (2012).

<https://doi.org/10.1038/482027a>

analysis (ECBA) framework.²²⁸ **Given that the revenue from this tax would be invested solely in programs to make food more accessible and affordable, the net impact could be even more disproportionately beneficial to low-income households.**

The same article also cites studies from Mexico, Illinois, California, and Philadelphia concluding that sugar-sweetened beverages also had no negative impact on employment levels in sectors affected by the tax or the wider economy.²²⁹ In particular, it notes that a study examining the impact of San Francisco's tax found that "there was no discernible effect on employment for the overall economy, private sector, supermarkets and other grocery stores, convenience stores, limited-service restaurants, and beverage manufacturing, when compared with a suitable synthetic group."²³⁰

The following three options have no new analysis as of November 2025. The CWCSEO renews all analysis from the 2024 Report.

- Dedicating the Revenue from the 1% "prepared meals" surcharge
- Transfers from Other Funds or Private Sources
- Expanding the Luxury Tax to Cover High-Value Food and Drink Items:

Utilizing one or more of these funding options would ensure that a special fund can consistently invest in policies to combat food insecurity, and quite possibly save the state money in the long run. As stated in the previous report, there are a number of negative impacts of food insecurity that harm food insecure households and have a fiscal cost for the state to address, ranging from education to housing to healthcare and more. The most significant cost is likely Medicaid and other healthcare programs that treat the chronic diseases associated with both food and nutrition insecurity. As an example, one nationwide study from 2011 to 2013 found that food insecurity was associated with an average of slightly over \$1,800 per person per year in additional healthcare costs.²³¹ That would amount to a total cost of up to \$929 million per year for the full extra cost for all 516,640 Connecticut residents that are food insecure according to Feeding America.²³² On the other hand, a 2025 Fiscal Note estimated that raising the state minimum SNAP benefit to \$95 per month would cost an estimated \$18 million annually.²³³ The actual cost of food insecurity-related healthcare is likely far lower as the exact cost will vary by person, some individuals will not be on Medicaid, some of the Medicaid costs may be borne by the federal government, and the cumulative annual cost of all of the recommendations would easily exceed \$100 million (with universal free school meals alone likely getting most of the way there). **However, the example does serve to illustrate that there are fiscal costs to not**

²²⁸ See, Paraje, Guillermo, et al. "Taxation of Tobacco, Alcohol, and Sugar-Sweetened Beverages: Reviewing the Evidence and Dispelling the Myths." BMJ Global Health, vol. 8, no. Suppl 8, 1 Oct. 2023, pp. e011866–e011866, <https://doi.org/10.1136/bmjgh-2023-011866>.

²²⁹ Ibid

²³⁰ Ibid

²³¹ See, Berkowitz, S. A., Basu, S., Meigs, J. B., & Seligman, H. K. (2018). Food Insecurity and Health Care Expenditures in the United States, 2011-2013. *Health services research*, 53(3), 1600–1620.

<https://doi.org/10.1111/1475-6773.12730>

²³² See, Feeding America Map the Meal Gap - Food Insecurity among the Overall Population in Connecticut (<https://map.feedingamerica.org/county/2023/overall/connecticut>)

²³³ See, Office of Fiscal Analysis - Fiscal Note for SB 1418 AN ACT REDUCING BARRIERS TO FOOD SECURITY (<https://cga.ct.gov/2025/FN/PDF/2025SB-01418-R000437-FN.PDF>)

combating food insecurity, and savings to gain by addressing it. Establishing a Food & Nutrition Special Fund could help reduce those costs and realize those savings.

Implement Universal Free School Meals

One addition to this recommendation is that the statute should require that at least 15% of state funds for school meals be used to purchase food from Connecticut producers. This requirement would ensure that state money is being invested into the state food economy. A recent study conducted by Colorado State University indicated that for every dollar of nutrition incentives spent on farm direct purchases, such as at a farmers market, it is estimated to result in a contribution of up to \$3 in economic activity.²³⁴ This requirement could provide a reliable income source for local farmers, increasing their financial viability, ability to invest in growing more food in Connecticut, and strengthening the economies of rural areas where many of these farms are located. Additionally, this requirement would help offset the loss of \$5.6 million from the cancelled Local Food for Schools (LFS) program.²³⁵ If necessary, the requirement could gradually increase over time to reach 15% to give schools and farmers time to scale up their cooperation.

Should the cost of universal free school meals prove to be impractical, another option would be to offer partial funding based on the level of need in each district, in the model of the federal Community Eligibility Provision (CEP). CEP is a federal program that offers an alternative funding model to the standard National School Lunch Program (NSLP) and School Breakfast Program (SBP) formulas.²³⁶ Under CEP, the percentage of meals served by a school or district that are reimbursed at the free rate is calculated by the Identified Student Percentage (ISP) (percent of the student body categorically eligible for free meals) times 1.6, with the rest reimbursed at the federal paid rate.²³⁷ Establishing a companion “State CEP” program that provided ISP-based grants to any district that decided to adopt universal free school meals would ensure that low-income districts can provide free meals without any local cost by supplementing federal funding, while higher income districts would have the cost split three ways (local, state, and federal), making the local choice to adopt universal free school meals more realistic.

Establish a state food business incubator program

One primary adjustment to this recommendation is to, in the first version of the program, focus on **local residents in low-access areas (sometimes called “food deserts”)** who want to open a grocery store, farmstand, or other food business. The program would focus on recruiting local residents of these communities who are interested in opening a grocery store, similar outlet, or food production business (especially innovative food production methods such as indoor hydroponic growing). It would then provide participants with grants, loans, and tax abatements to help cover startup costs, technical support, mentorship, and training on how to run their business, and ongoing tax credits or incentives to support long-term viability and the offering of

²³⁴ See, Colorado State University - The Economic Contributions of Healthy Food Incentives (https://fairfoodnetwork.org/wp-content/uploads/2021/01/Economic_Contributions_Incentives_2_2_21.pdf)

²³⁵ See, CT Insider - Trump administration cuts nearly \$10 million in funding for CT schools, food pantries (<https://www.ctinsider.com/news/article/usada-connecticut-foodshare-funding-cut-20219674.php>)

²³⁶ See, USDA FNS - Community Eligibility Provision Factsheet (<https://www.fns.usda.gov/cn/cep/factsheet#:~:text=The%20Community%20Eligibility%20Provision%20is,cost%20to%20all%20enrolled%20students.>)

²³⁷ Ibid

services such as home delivery. Promoting local ownership of these stores could not only improve food access but also contribute to economic development and keep any state funds circulating in the community. Additionally, the CWCSEO recommends that this program be placed under an implementing Executive Branch Agency and that they be given sufficient additional staffing to administer the program. Should the program prove successful, it could then be expanded statewide.

An additional adjustment to this recommendation is that the implementing agency should be given the flexibility to include and support grocery stores, farms, or other food businesses that are not located in Low-Income Low-Access (LILA) areas/“food deserts” if those businesses can demonstrate that they would significantly and/or primarily improve food access for those areas. One example of this would be a proposed grocery store in Hartford which, although it would not be located in a LILA area, would sit at the intersection of nine public bus lines that run to various LILA areas throughout the North End of the city. **This flexibility would allow the program to take local factors such as public transit routes into account, and support food businesses in locations that provide the maximum number of residents with improved access to nutritious food.**

One additional function that this state incubator program could be to function as a sort of “**food business concierge**,” helping startup food businesses to acquire all of the necessary permits and certifications to operate and navigate local rules such as zoning regulations. Such support for food businesses was part of the Hartford Advisory Commission on Food Policy’s 2025 recommendations to promote “Good Food for Hartford,” and offering such support statewide could significantly improve both food security and economic development across the state.²³⁸ Additionally, state legislation to **ensure permit reciprocity across municipalities and simplify application processes as much as possible** could help make such a concierge more effective.

New Policy Recommendations:

While policies to invest in making food more physically accessible and affordable would address the largest and most widespread barriers to food and nutrition security, this report has demonstrated that information accessibility is also a significant barrier. **Just as the previous section focused on analyzing how information inaccessibility currently contributes to food and nutrition insecurity, this section will offer three new recommendations specifically designed to improve information and education accessibility.**

1. Develop Definitions and Data Metrics for Key Concepts in Statute and Set Targets as Part of an Official State Plan to Eliminate Food Insecurity

While this recommendation is very similar to one made in the previous report, it is being included here due to the need for more specificity and the presence of a number of terms used in this report that do not appear to be defined in statute or measured statewide by any government or non-government entity. While the exact definitions and metrics should be determined with

²³⁸ See, Hartford Advisory Commission on Food Policy - Good Food for Hartford 2025 (https://drive.google.com/file/d/1W11XOPoqgcjyPH4YD9qxqAwZ4woVDo_U/view)

discussion and input from as many experts as possible, the CWCSEO recommends the following definitions as starting points for such discussion:

- a. **Culturally Connected Food:** Foods that are associated with or hold importance for a specific cultural identity.²³⁹
- b. **Culturally Connected Food Provider:** A grocery store, farmstand, CSA, farmer with direct to public sales, food pantry, or other business or nonprofit providing food to the public that dedicates a significant portion of inventory (33% or more) to culturally connected foods.
- c. **Cultural Food Desert:** US Census Tracts where either there are no culturally connected food providers or the average resident distance to a culturally connected food provider is more than 1 mile.
- d. **Nutrition Insecurity:** The inability to have consistent access to the safe, healthy, affordable foods essential to optimal health and well-being.²⁴⁰
- e. **Food Swamp:** “Areas with a higher density of fast food and junk food options rather than healthy food options.”²⁴¹
- f. **Ultra-Processed Food and Beverages:** Any food or beverage item which is made mostly or entirely from substances derived from foods and additives, with little if any intact unprocessed food, and containing other sources of energy and nutrients not normally used in culinary preparations.²⁴²
- g. **Hyper-Palatable Food and Beverages:** Any food or beverage items which derive the specified percentages of calories or weight from one of the following combinations of sources:
 - 1. Greater than 25% of calories from fat and greater than 0.30% of weight from sodium (FSOD)
 - 2. Greater than 20% of calories from fat and Greater than 20% of calories from simple sugars (FS)
 - 3. Greater than 40% of calories from carbohydrates and greater than 0.20% of weight from sodium (CSOD)²⁴³

In addition to defining these terms in statute, the CWCSEO recommends that legislation be adopted to create a Workgroup including but not limited to the state’s Chief Data Officer, the CWCSEO, and research institutions such as UConn or Yale with statutory authority to develop and adopt official metrics for state-level measurement of all food and nutrition security related concepts and tools to collect necessary data for those metrics if the state does not already collect it. The legislation should also require the Workgroup to report back to the General Assembly with recommendations to designate specific state government offices or agencies which will be

²³⁹ Definition adapted from one provided by: CDC - Consider Cultural Food Preferences: FAQ

(<https://www.cdc.gov/food-service-guidelines-toolkit/php/strategize-act/cultural-food-preferences.html>)

²⁴⁰ Definition adapted from one provided by: USDA National Agricultural Library - Nutrition Security

(<https://www.nal.usda.gov/human-nutrition-and-food-safety/nutrition-security>)

²⁴¹ See, American Heart Association - Living near a “food swamp” may increase stroke risk among adults 50 and older

(<https://newsroom.heart.org/news/living-near-a-food-swamp-may-increase-stroke-risk-among-adults-50-and-older>)

²⁴² Definition adapted from one provided by: Open Food Facts - NOVA Groups for Food Processing

(<https://world.openfoodfacts.org/nova>)

²⁴³ Definition adapted from one provided by: Fazzino, T. L., Rohde, K., & Sullivan, D. K. (2019). Hyper-Palatable Foods: Development of a Quantitative Definition and Application to the US Food System Database. *Obesity*, 27(11), 1761–1768. <https://doi.org/10.1002/oby.22639>

responsible for collecting and maintaining data for each concept once a metric and necessary measurement tools have been developed by the work group. Specifically, the CWCSEO recommends that the following concepts be measured independently by the state government:

1. Food Insecurity
2. Nutrition Insecurity
3. Food Deserts/LILA Areas
4. Food Swamps
5. Cultural Food Deserts

- If new data must be collected for a developed metric, the CWCSEO recommends that the FY28-29 biennium budget provide the resources needed for staffing and/or consulting that would allow the relevant office to perform the data collection.
- We also recommend that any data collected under this recommendation be required to be provided to the Chief Data Officer and made available to the public on the Connecticut Open Data portal (if that is not already the case).
- As part of developing these metrics, the state should develop and **adopt an official Plan to End Food Insecurity** and codify it in statute, complete with targets to be met for each of the developed metrics. This plan could be developed by the same work group that developed the metrics.

There are a number of benefits that could be provided by the state defining, measuring, and setting targets for the aforementioned terms. Firstly, defining hyper-palatable and ultra-processed foods in statute is a prerequisite for any policy actions taken with regards to those foods, including recommendation 2 listed below.

Secondly, state-level measurement can reduce confusion and ensure data remains up to date. As noted in Section 1 of this report, there are three commonly cited sources for estimates of the level of food insecurity, each of which disagrees with the others on the current level of food insecurity in Connecticut. Establishing an official state metric that either adopts one of the current measures' methodologies or creates a new one would provide clarity for the purposes of state policymaking. For food deserts/LILA areas, there is currently only one widely used metric, the USDA Food Access Research Atlas (FARA). However, the FARA data is significantly out of date, with the most recent data being from 2019.²⁴⁴ Adopting a state metric and collecting state-level data would ensure that Connecticut would have access to more current information and not be dependent on infrequent USDA updates.

Developing state metrics could also allow Connecticut projects access to additional funding opportunities they may not otherwise be eligible for. For example, the Healthy Food Finance Initiative (HFFI) states on its website that “other areas not indicated on this [USDA] map that have low access to supermarkets or grocery stores under another methodology that has been adopted for use by government or philanthropic healthy food initiatives may also be eligible” for the various grant and funding opportunities they offer.²⁴⁵ Having state data that is more robust and current than federal data could help improve the competitiveness of Connecticut projects for

²⁴⁴ See, USDA ERS - Food Access Research Atlas

(<https://www.ers.usda.gov/data-products/food-access-research-atlas/go-to-the-atlas>)

²⁴⁵ See, America's Healthy Food Finance Initiative - Eligibility (<https://www.investinginfood.com/eligibility/>)

federal and philanthropic funding opportunities, improving the chances of more external funding coming into the state.

Finally and perhaps most importantly, some of these concepts are currently not measured at all in Connecticut. Doing so could provide valuable information to inform future state and local food security efforts, and setting targets in a State Plan to End Food Insecurity could help organize and coordinate those efforts around a common goal. The CWCSEO is not currently aware of any statewide, publicly available data that measures or maps nutrition insecurity, cultural food deserts, or food swamps in Connecticut, but believes that having such data would facilitate future policy and/or planning decisions for state and local governments as well as nonprofits and businesses.

The state of New Jersey offers one of the strongest examples of state-level metrics and data around food security. The state's Economic Development Authority developed a methodology for their own "Food Desert Index" that tracked food access and identified "Food Desert Communities" across the state.²⁴⁶ Additionally, the New Jersey Office of the Food Security Advocate has worked to develop its own "Food Security Index" which is designed "to measure the intensity of food insecurity in three New Jersey counties."²⁴⁷ This data also has allowed the state to conduct expanded analysis of food insecurity and its impact on other issues, such as the state's "Hunger, Food Security, and Maternal Health Interactive Report" released in January of 2025.²⁴⁸ The data has also helped inform targeted policies to combat food insecurity, with one prominent example being the state's "Food Desert Relief Program" that provides "up to \$40 million per year in tax credits, loans, grants, and/or technical assistance" to support grocery stores in the "Food Desert Communities" identified by the aforementioned food desert index.²⁴⁹ California also enacted a new law in 2025 banning ultra-processed foods in school meals, which is "a bipartisan, first-in-the-nation law providing a statutory definition of ultra-processed foods (UPF)."²⁵⁰ While not developing their own metrics, both Maine and Rhode Island have developed state food strategies, namely Maine's Roadmap to End Hunger by 2030 and the Relish Rhody State Food Strategy, which can help to guide and coordinate individual policies and efforts around food insecurity and the food system, respectively.^{251 252}

²⁴⁶ See, New Jersey Economic Development Authority - Food Desert Community Designation Proposal Methodology (<https://www.njeda.gov/wp-content/uploads/2022/01/NJ-Food-Desert-Communities-Designation-Proposal-Methodology-January-2022.pdf>)

²⁴⁷ See, New Jersey Office of the Food Security Advocate - Research at OFSA (<https://www.nj.gov/foodsecurity/our-work/research/>)

²⁴⁸ See, New Jersey Department of Health - NJ Department of Health Releases Hunger, Food Security, and Maternal Health Interactive Report (<https://www.nj.gov/health/news/2025/approved/20250123a.shtml>)

²⁴⁹ See, New Jersey Economic Development Authority - Food Desert Relief Program (<https://www.njeda.gov/food-desert-relief-program/>)

²⁵⁰ See, California Office of the Governor - Governor Newsom signs first-in-the-nation law to ban ultra-processed foods from school lunches (<https://www.gov.ca.gov/2025/10/08/governor-newsom-signs-first-in-the-nation-law-to-ban-ultra-processed-foods-from-school-lunches/>)

²⁵¹ See, State of Maine - Maine's Roadmap to End Hunger by 2030 (<https://www.maine.gov/future/sites/maine.gov.future/files/2023-06/maines-roadmap-to-end-hunger.pdf>)

²⁵² See, Rhode Island Food Strategy - Food Strategy 1.0 - Relish Rhody (<https://www.visitrhodeisland.com/relish-rhody/the-plan/about-relish-rhody/>)

The CWCSEO would hope to contribute to the data collection effort in a number of ways.

- We would be willing to participate in and/or administer the recommended work group.
- We are in the process of developing a toolkit to facilitate the creation and maintenance of local food guides in each town, which would, as currently constructed, identify culturally connected food providers. We would be willing to provide all created resources to the work group and create any other surveys or other data collection tools recommended for use by the work group.
- We would be able to use any data generated to further populate the food system databases and interactive maps already housed on our website.²⁵³
- We would be willing to draft the State Plan to End Food Insecurity document itself, following the guidance of the work group charged with creating it.

2. Develop Labeling Requirements Regarding Food Content and Nutrition Rankings

This recommendation would directly address the information barriers to consumers knowing the contents of the food they are buying, as discussed in Section 2. By making critical facts about a food or beverage item immediately and easily clear to shoppers, they will be better able to make informed decisions about what to buy and in what quantity. **Specifically, the CWCSEO recommends two levels of requirements be adopted with regard to food and beverage labeling: store-level nutrition ranking requirements with an adapted version of the Supporting Wellness at Pantries (SWAP) model and manufacturer/distributor level food content and processing label requirements.**

Implement a Modified Version of SWAP on Food Store Shelves

The CWCSEO recommends that all Connecticut food retailers be required to implement a version of the Supporting Wellness at Pantries (SWAP) nutrition labeling system on their store shelves to indicate the nutritional value of each food and beverage item for sale. SWAP is a nutrition labeling system that was developed for use in food banks and pantries, with food and beverage items being sorted into one of three categories (green/choose often, yellow/choose sometimes, and red/choose rarely) based on their levels of sodium, saturated fat, and sugars.²⁵⁴

²⁵³ See, CWCSEO - Food & Nutrition (https://wp.cga.ct.gov/cwcseo/sub_commission/food-nutrition/)

²⁵⁴ See, UConn Rudd Center for Food Policy and Health - Supporting Wellness at Pantries (https://uconnruddcenter.media.uconn.edu/wp-content/uploads/sites/2909/2023/10/SWAP_NeighborFlyer_ENGLIS_H.pdf)

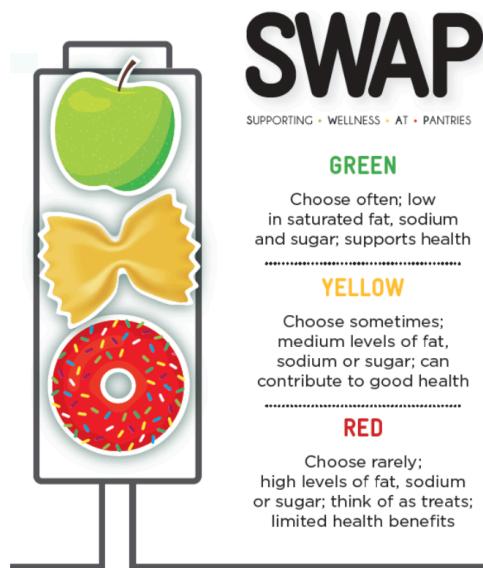


Figure 6: SWAP Ranking Levels
Source: [Gleaners Nutrition Hub](#)

This system was jointly developed by Connecticut Foodshare, University of St. Joseph, and the UConn Rudd Center for Food Policy and Health, and the USDA notes that “research on SWAP shows that the availability of healthy food increases significantly when nutrition ranking is used.”²⁵⁵ The shelves that each item is stored on are labeled with red, yellow, or green stickers so food pantry users can see each item’s nutritional ranking, with posters in the building explaining in detail what each label means. Currently, at least one grocery store in Connecticut, the Grocery on Broad in Hartford, already uses SWAP labeling on their store shelves.

²⁵⁵ See, USDA - Supporting Wellness at Pantries using the HER Nutrition Guidelines for the Charitable Food System (<https://snaped.fns.usda.gov/library/intervention/supporting-wellness-pantries>)



Figure 7: Example of SWAP Guide Displayed in a Food Pantry with Green and Yellow Labels Below Individual Items

Source: [Maryland Food Bank](http://MarylandFoodBank)

There are a number of factors that would make this policy viable at the state level in Connecticut. Firstly, the SWAP system already exists, and adapting it for use in grocery stores could be as simple as replacing references to food pantries in the branding. Additionally, given that the tool was developed by Connecticut institutions, it should be more feasible to work with the system's creators on any adaptations that would be necessary. Thirdly, the simplicity of the system, with its main requirement being to add the stickers to the store shelves, suggests that it should be fairly easy for stores to implement and require minimal staffing or resources to comply (especially after the initial shelf labeling is complete).

The CWCSEO recommends that the Department of Consumer Protections be granted authority to develop regulations regarding the practical implementation of this requirement, and that the adapted SWAP system be maintained online by the Department, ideally with QR codes being added to shelf labels and/or SWAP posters so shoppers can easily get additional information on the system and the nutritional value of products. Finally, this online system should include an online digital tool to allow stores to look up a product and immediately know what sticker to use. This could be modeled on the WellSCAN digital tool developed by UConn for this exact purpose, and could involve a partnership with UConn to adapt or develop WellSCAN for this purpose.²⁵⁶

Require Front of Package Food Content and Processing Level Labels

In addition to a system that can provide basic nutrition information on store shelves, the CWCSEO recommends that more expansive requirements be established to require clear warnings on the front of food and drink packaging. Specifically, companies should be required to print clear, simple labels on the front of their packaging indicating that their product is

²⁵⁶ See, WellSCAN - Nutrition Ranking for Food Banks and Pantries (<https://wellscan.io/>)

ultra-processed, hyper-palatable, and/or containing excessive amounts of sugar, sodium, and saturated fat. Additionally, products sold online should be required to contain the same warning symbols or similar explanations. These front of package symbols, particularly the ones identifying food as ultra-processed and/or hyper-palatable, can help provide additional information that is currently not accessible to most consumers. This knowledge can help consumers make more informed choices about the products they purchase without impairing their ability to make the choice for themselves.

If the small size of Connecticut proves to be a practical issue for labeling requirements, the statute could include a triggering provision, where requirements would only take effect once a certain number of other northeastern states adopt similar provisions. In this way, Section 21a-92c of the Connecticut General Statutes could serve as a precedent, which instructs the Commissioner of Consumer Protection to adopt regulations to require food products be labeled as “Produced with Genetic Engineering,” once four other northeastern states (all of New England plus New York, New Jersey, and Pennsylvania) with a total population of 20 million people adopt similar requirements.²⁵⁷ The total population number could even be increased to 35 million (or 32 million without Connecticut), as that would be more than the population of Texas (which has already implemented a similar labeling law) and more than 10% of the total US population.

There are a number of other jurisdictions that have implemented similar labeling requirements around food contents. As of June 22nd, 2025, Texas Senate Bill 25 was signed into law by the Governor after passing with bipartisan support in the House and unanimously in the Senate, which will require certain products to contain a label reading “WARNING: This product contains an ingredient that is not recommended for human consumption by the appropriate authority in Australia, Canada, the European Union, or the United Kingdom.”²⁵⁸ The law also authorizes the imposition of civil penalties for failure to comply with this requirement. Similarly, California’s Proposition 65 requires labeling warnings be included on products including but not limited to food that contain certain chemicals linked to cancer and/or birth defects.²⁵⁹

Additionally, several countries have adopted systems similar to the ones recommended by this report. Australia has developed and adopted a “Health Star Rating System,” which calculates a health score between 0.5 stars (least healthy) and 5 stars (healthiest) using “negative points” based on the energy, sugar, saturated fat, and sodium content of the item and “positive points” based on fiber, protein, concentrated fruits and vegetables, and other fruits, vegetables, nuts, and legumes.²⁶⁰ Once the star rating is calculated, the rating must be displayed on the front of all food packaging, along with key nutrition facts such as sodium, sugar, and saturated fat levels.²⁶¹ This system has been implemented in both Australia and New Zealand.

²⁵⁷ See, Connecticut General Assembly - Chapter 418 Uniform Food, Drug and Cosmetic Act (https://www.cga.ct.gov/2023/pub/chap_418.htm#sec_21a-92c)

²⁵⁸ See, Legiscan - Texas Senate Bill 25, 2025-26 Session (<https://legiscan.com/TX/text/SB25/2025>)

²⁵⁹ See, State of California Proposition 65 - Foods (<https://www.p65warnings.ca.gov/fact-sheets/foods>)

²⁶⁰ See, Government of Australia - Health Star Rating System Calculator (<https://www.healthstarrating.gov.au/calculator>)

²⁶¹ See, Government of Australia - Health Star Rating System for Shoppers (<https://www.healthstarrating.gov.au/shoppers>)



Figure 8: Example of a Required Health Star Label Placed on Food Packaging in the Commonwealth of Australia

Source: [Food Label Solutions Information Center](#)

Chile also has a food labeling law which requires foods that exceed certain thresholds for sodium, sugar, saturated fat, or energy/calories to be labeled with black “stop signs” identifying them as being high in the relevant ingredient.²⁶² Any product bearing more than one of these stop signs may not be sold in schools or advertised to children.²⁶³



Figure 9: Required Warning Labels Placed on Food Packaging in the Republic of Chile (translated into English)

Source: [Food Label Solutions Information Center](#)

Existing research evidence suggests that labeling can effectively share information with consumers, help them make healthier choices, and even influence manufacturers. A 2019 meta-analysis of 60 studies across 11 countries found that food labeling decreased intakes of total fat, unhealthy dietary options, sodium, and artificial trans fat while increasing consumption of vegetables.²⁶⁴ Additionally, studies have measured the impact on a number of specific labeling practices. A study on the impact of Prop 65 in California found that, while blood and urine concentrations of “biomonitoried chemicals” declined across the country over time regardless of their inclusion on the Prop 65 list, “Californians generally had lower levels of biomonitoried

²⁶² See, US International Trade Administration - Chile Country Commercial Guide (<https://www.trade.gov/country-commercial-guides/chile-labeling-marking-requirements>)

²⁶³ Ibid

²⁶⁴ See, Shangguan, S., Afshin, A., Shulkin, M., Ma, W., Marsden, D., Smith, J., Saheb-Kashaf, M., Shi, P., Micha, R., Imamura, F., Mozaffarian, D., & Food PRICE (Policy Review and Intervention Cost-Effectiveness) Project (2019). A Meta-Analysis of Food Labeling Effects on Consumer Diet Behaviors and Industry Practices. *American journal of preventive medicine*, 56(2), 300–314. <https://doi.org/10.1016/j.amepre.2018.09.024>

chemicals than the rest of the US population.”²⁶⁵ The study also concludes that “increased scientific and regulatory attention, as well as public awareness of the harms of Prop 65-listed chemicals, prompted changes in product formulations that reduced exposure to those chemicals nationwide,” though increased concentrations of chemicals not listed in Prop 65 suggested manufacturers were likely swapping one chemical for another.²⁶⁶ A study analyzing the impact of Chile’s labeling law found that compared to the counterfactual, the law was associated with statistically significant decreases in consumption of calories (3.5%), sugar (10.2%), saturated fat (3.9%), and sodium (4.7%).²⁶⁷ A study focused on the Australian labeling system noted that the diet recommended by the Healthy Star Rating System “is associated with a lower risk of weight gain, cardiovascular disease, and mortality,” though this does not speak to the effectiveness of the labeling system itself, which the study recommends be refitted to also consider processing level (as this report’s recommendations would).²⁶⁸ Finally, an experiment in Brazil about adding an ultra-processed warning to nutrition labels significantly increased consumers’ ability to identify ultra-processed foods, though its impacts on purchase intentions, perceived product healthfulness, and perceived label effectiveness were not statistically significant.²⁶⁹

3. Establish a Holistic Food Education State Roadmap and Develop Model Curricula

This recommendation would hope to address a number of the information access barriers to food and nutrition security by developing holistic food education classes that could integrate education around nutrition, cooking, food safety, growing food, food systems, agriculture, eating disorders, and more. Specifically, the CWCSEO recommends that a Holistic Food Education Work Group be convened with statutory authority to develop a Holistic Food Education State Roadmap to set objectives and guarantee access to holistic food education for Connecticut students of all ages, adults, and medical professionals. Additionally, for each age group, the work group should be tasked with developing an official model school policy and model curriculum with lesson plans that schools may elect to adopt.

K-12 Students:

For K-12 students, the CWCSEO recommends such a group take a 2-tier approach to ensure holistic food education meets the CDC’s recommended 40-50 hour minimum of annual nutrition education, reoccurs each year to prevent learning loss, and integrates various food skills and knowledge into school curricula.

²⁶⁵ See, Knox, K. E., Schwarzman, M. R., Rudel, R. A., Polksy, C., & Dodson, R. E. (2024). Trends in NHANES Biomonitoried Exposures in California and the United States following Enactment of California’s Proposition 65. *Environmental Health Perspectives*, 132(10). <https://doi.org/10.1289/ehp13956>

²⁶⁶ Ibid

²⁶⁷ See, Taillie, L. S., Bercholz, M., Popkin, B., Reyes, M., Colchero, M. A., & Corvalán, C. (2021). Changes in food purchases after the Chilean policies on food labelling, marketing, and sales in schools: a before and after study. *The Lancet Planetary Health*, 5(8), e526–e533. [https://doi.org/10.1016/s2542-5196\(21\)00172-8](https://doi.org/10.1016/s2542-5196(21)00172-8)

²⁶⁸ See, Barrett, E. M., Pettigrew, S., Neal, B., Rayner, M., Coyle, D. H., Jones, A., Maganja, D., Gaines, A., Mozaffarian, D., Taylor, F., Ghammachi, N., & Wu, J. H. Y. (2024). Modifying the Health Star Rating nutrient profiling algorithm to account for ultra-processing. *Nutrition & Dietetics*, 82(1).

<https://doi.org/10.1111/1747-0080.12892>

²⁶⁹ See, Campos, A. D., Ng, S. W., Duran, A. C., Khandpur, N., Taillie, L. S., Christon, F. O., & Hall, M. G. (2024). “Warning: ultra-processed”: an online experiment examining the impact of ultra-processed warning labels on consumers’ product perceptions and behavioral intentions. *International Journal of Behavioral Nutrition and Physical Activity*, 21(1). <https://doi.org/10.1186/s12966-024-01664-w>

For K-8 students, the CWCSEO recommends the work group explore the integration of holistic food education into existing core classes. Additionally, relevant standards could be developed to ensure that content is included. This would ensure that food and nutrition education is occurring each year and is the focus for at least a month without adding complications to school schedules. Additionally, these units could implement project based learning to help students understand scientific concepts while simultaneously learning practical skills. For example, a unit on plant biology and agriculture could include a project teaching students to grow their own plants and taste test what they grow. In other examples, a unit in another grade level could be on chemistry and basic cooking/food preparation where projects could involve pickling vegetables, another could be on anatomy, physiology, and nutrition where students learn about how the body process nutrients, fats, or sugars and track their consumption of each in school meals, and another could be on bacteria and look at how food spoils and what is and is not safe to eat or store. These food units, if tied into a wider state roadmap, would also allow for integration with school meals and farm to school efforts, as students learning about the science of growing plants could take a field trip to a local farm involved in farm to school programs, while school breakfasts and lunches could be used to further illustrate lessons on nutrition and physiology and share tables and school food donation policies could underscore bacteria growth and food safety. This project-based model of learning could also improve education outcomes overall, as a cluster randomized control trial study conducted in 3rd grade science classes in Michigan found that students who were taught with project based learning performed better on standardized science tests than students who were not.²⁷⁰ Additionally, having at least a full unit of instruction every year could improve outcomes, as a meta-analysis of 11 different studies concluded that nutrition education can significantly increase the consumption of fruits and vegetables, but that effect appears to fade after a year, leading to a need for continuing interventions.²⁷¹

**Young Cooks & Farmers Week Seven:
Kitchen Chemistry**

August 12, 2025

Our Young Cooks & Farmers program brings children ages 6-11 to Yellow Farmhouse Education Center to experience sustainable farming and seasonal cooking. What makes bread rise? How does temperature change consistency? What is fermentation? Explore these questions and more through cooking experiments and tastings. August

Figure 10: Example of a Lesson Series Teaching Chemistry and Cooking Skills to Elementary School Age Children in Stonington in Summer 2025

Source: [Yellow Farmhouse Education Center](https://yellowfarmhouse.org/young-cooks-farmers-week-seven-kitchen-chemistry/)

For high school students, the CWCSEO recommends that a model curriculum be developed for “Food 1” and “Food 2” courses. These courses would be modified versions of Family and Consumer Sciences (FCS) courses already offered as electives in many schools.

²⁷⁰ See, Krajcik, J., Schneider, B., Miller, E. A., Chen, I-Chien., Bradford, L., Baker, Q., Bartz, K., Miller, C., Li, T., Codere, S., & Peek-Brown, D. (2022). Assessing the Effect of Project-Based Learning on Science Learning in Elementary Schools. *American Educational Research Journal*, 60(1), 70–102.

<https://doi.org/10.3102/00028312221129247>

²⁷¹ See, Medeiros, G. C. B. S., Azevedo, K. P. M., Garcia, D., Oliveira Segundo, V. H., Mata, Á. N. S., Fernandes, A. K. P., Santos, R. P. D., Trindade, D. D. B. B., Moreno, I. M., Guillén Martínez, D., & Piavezam, G. (2022). Effect of School-Based Food and Nutrition Education Interventions on the Food Consumption of Adolescents: A Systematic Review and Meta-Analysis. *International journal of environmental research and public health*, 19(17), 10522.

<https://doi.org/10.3390/ijerph191710522>

According to the American Association of Family and Consumer Sciences (AAFCS), FCS is “focused on the study of individuals, families, and communities with the aim of assisting them to live healthy and successful lives through the provision of education, research, and technology.”²⁷² The class is the contemporary version of Home Economics, and in fact the AAFCS was founded as the “American Home Economics Association” in 1909 before later changing its name.²⁷³ FCS courses can include or even solely focus on critical food skills such as cooking and food safety. For example, East Hartford High School offers three total FCS courses, which are titled “Intro to Food,” “Advanced Food Preparation Honors (CCP),” and “Advanced Baking Honors (CCP).”²⁷⁴ Similarly, Food 1 would cover basic skills and knowledge with regards to, at a minimum: cooking, food safety, nutrition, identifying food contents (including identifying ultra-processed foods), food systems, and growing food. Food 2 would cover the same skills at a more advanced level. Each of these courses would be one semester in length. The state could also require that these courses be offered as electives, albeit with an opt-out for small schools below a certain enrollment threshold who may struggle to add to their course offerings.

With regards to developing the curriculum for these classes, there are a number of pre-existing resources that could make doing so more feasible. As mentioned in the previous paragraph, many Connecticut high schools already offer some version of FCS courses as electives. These pre-existing curricula could likely meet the minimum requirements for Food 1 and Food 2 with minor edits to remove non-food focused lessons and replace them with any missing food competencies, making the development of a model curriculum more feasible. Similarly, existing FCS educators would likely be well-qualified to teach these courses.

At the K-8 level, integrating food education into existing classes and linking it to concepts that are already taught would similarly allow existing educators to teach these lessons with their current certifications. Furthermore, nonprofit organizations such as FoodCorps are already teaching lessons in schools “about growing, cooking, and eating nourishing food,” suggesting that some lessons or curricula already exist and that could inform the development of units and lessons for each grade level.²⁷⁵ It is also worth noting that due to changes to Americorps at the federal level, FoodCorps will not be providing programming in any Connecticut schools in academic year 2025-26 for the first time in 12 years. This means that many of the students who did receive some food education in the past will not this academic year, heightening the need for policy intervention on this topic.

The CWCSEO recommends that this work group include state agencies, FCS educators, school administrators, food education nonprofits, academic experts, and other relevant stakeholders.

²⁷² See, Alliance for Family and Consumer Sciences - Family and Consumer Sciences Overview of a 100-year-old industry sector

(https://higherlogicdownload.s3.amazonaws.com/AAFCS/2549ad11-af30-4808-9a50-c4b3b2d4c030/UploadedImages/Alliance%20for%20FCS/About_FCS/FCS_Overview_of_a_100_year_Final.pdf)

²⁷³ See, American Association of Family and Consumer Sciences - About AAFCS

(<https://www.aafcs.org/about/about-aafcs>)

²⁷⁴ See, East Hartford High School - Family & Consumer Science

(https://ehhs.easthartford.org/academics/career_and_technical_education_cte/family_consumer_science)

²⁷⁵ See, FoodCorps - What We Do (<https://foodcorps.org/what-we-do/>)

Food and nutrition education requirements have recently been adopted by the Texas State Legislature. In addition to the food labeling requirements mentioned in the previous recommendation, Senate Bill 25 requires Texas high schools to offer a “Nutrition and Wellness” course that “may incorporate other relevant material, including culinary skills, horticulture, and consumer economics.”²⁷⁶ The same law also requires K-8 standards for the health curriculum to include “nutrition instruction” and requires that higher education institutions also offer nutrition education courses.²⁷⁷ Similarly, while not fully requiring it, the California Department of Education “strongly encourages all California schools to offer a NE [Nutrition Education] class or to integrate NE into the core subjects for grades PreK–12” and notes that “ideally, educators would teach NE as a separate subject.”²⁷⁸

Additionally, there is research evidence that food education can have a number of positive impacts. A meta-analysis of 23 studies (including nine randomized control trials) concluded that cooking classes for children improved cooking knowledge, though results were mixed for its impacts on attitudes towards cooking and frequency of cooking were mixed and “improvements in dietary intake were rarely achieved” (significant improvement in just two studies out of 15 that measured diet intake).²⁷⁹ Another meta-analysis of 19 studies concluded that “school-based interventions” were associated with a reduced risk of childhood obesity, especially for “longer-running programs.”²⁸⁰ It is, however, important to note that these interventions were not necessarily limited to or focused on nutrition education, and could include or focus on alternatives such as physical activity. A different meta-analysis of 34 studies that did focus exclusively on teacher-delivered nutrition education in schools associated these lessons with decreased intakes of energy (calories) and sugar, increased intakes of fruit and vegetables, and increased nutritional knowledge.²⁸¹

Ultimately, the goal of this roadmap and accompanying curricula would be to eliminate many of the information access barriers discussed in Section 2 of this report, ensuring that young adults are equipped with the tools they need to minimize their risk of food and nutrition insecurity.

Adults and Healthcare Professionals:

For adults, the creation of new curricula may not be as necessary as maximizing access to existing ones. One example of how to do this would be to **revive SNAP-Ed at the state level**. As discussed in Sections 1 and 2, SNAP-Ed is a pre-existing program with curriculum already developed and educators already trained but has been defunded at the federal level. As such,

²⁷⁶ See, Legiscan - Texas Senate Bill 25, 2025-26 Session (<https://legiscan.com/TX/text/SB25/2025>)

²⁷⁷ Ibid

²⁷⁸ See, California Department of Education - Nutrition Education in California Schools (<https://www.cde.ca.gov/ls/nu/he/nutritionedcaschools.asp>?)

²⁷⁹ See, van der Horst, K., Smith, S., Blom, A., Catalano, L., Costa, A. I. A., Haddad, J., & Cunningham-Sabo, L. (2024). Outcomes of Children's Cooking Programs: A Systematic Review of Intervention Studies. *Journal of nutrition education and behavior*, 56(12), 881–892. <https://doi.org/10.1016/j.jneb.2024.08.002>

²⁸⁰ See, Gonzalez-Suarez, C., Worley, A., Grimmer-Somers, K., & Dones, V. (2009). School-Based Interventions on Childhood Obesity. *American Journal of Preventive Medicine*, 37(5), 418–427.

<https://doi.org/10.1016/j.amepre.2009.07.012>

²⁸¹ See, Cotton, W., Dudley, D., Peralta, L., & Werkhoven, T. (2020). The effect of teacher-delivered nutrition education programs on elementary-aged students: An updated systematic review and meta-analysis. *Preventive medicine reports*, 20, 101178. <https://doi.org/10.1016/j.pmedr.2020.101178>

reviving the program would instead require approximately \$4.7 million in funding to replace the lost federal funding.

Another way to improve access to information for adults who may be experiencing information barriers to food and nutrition security is to ensure they can receive critical information through their medical providers. For doctors, the CWCSEO recommends statutory requirements for initial and ongoing nutrition education, ensuring they have sufficient expertise to support their patients. Specifically, the CWCSEO recommends requiring that all medical schools in Connecticut include a minimum amount of formal nutrition education in their curricula, in line with the National Academy of Sciences' recommendation. Additionally, all residency programs in the state should be required to include formal nutrition training or rotations. Including nutrition training in medical school and residencies would ensure that doctors are taught the newest research and best practices around nutrition and health, and are able to provide that information to their patients. If needed, grants could be provided to medical schools to make implementation feasible, with the grants contingent on meeting these requirements.

Additionally, these education requirements could be paired with the required use of existing nutrition screeners by doctors at patients' annual physicals and providing doctors with guidance on when to refer patients to experts such as a dietitian for further support. Additionally, **legislation could be adopted to require both Medicaid and private insurance to cover preventative dietitian visits when referred by GP doctors when such visits are not currently covered, even if the patient does not yet have a diagnosis such as diabetes or obesity.** Such a preventative approach could not only remove barriers to individualized food and nutrition education, but help minimize the risk of diet-related diseases for patients.

Nutrition education for medical professionals is another area which Texas has addressed through Senate Bill 25, which states that any "institution providing graduate medical education" will only be eligible for state grant funding if they develop nutrition education requirements and require all medical students and graduate students in "nursing, allied health, or other majors related to health care service" to complete those requirements.²⁸²

²⁸² See, Legiscan - Texas Senate Bill 25, 2025-26 Session (<https://legiscan.com/TX/text/SB25/2025>)

Conclusion

The conclusion of the 2024 report stated that “food and nutrition insecurity in Connecticut are widespread, persistent, and having a significant negative impact on lives and communities across the state. Furthermore, available evidence suggests that without a significant policy intervention or a major change in circumstances the situation is more likely to get worse than it is to get better.”²⁸³ Unfortunately, that conclusion is as true today as it was a year ago, if not more so. **The cost of food continues to rise, the gradual rollback of federal support since 2022 has not abated, and exemplary efforts at the state, local, and nonprofit level simply do not have the resources to keep pace with the growing need.** As a result, food insecurity levels continue to grow higher with each passing year, and more Connecticut residents are faced with the negative impacts on their physical and mental health, housing security, financial security, and even life expectancy. Unfortunately, none of these facts are new in 2025, and the situation has been growing worse for several years in a row.

Timely state government intervention is needed to prevent this crisis from growing beyond its current level. While the cost of several of the policies recommended in this report would be significant, the unfortunate reality is that the state is likely to spend substantial amounts of money due to food insecurity no matter what. If nothing is done and food insecurity continues to affect hundreds of thousands of residents, the state would be paying substantial amounts of money to deal with the negative impacts of food insecurity on housing, education, health/well-being, and more.

Every source of funding, including the five offered in this report, has drawbacks, but few of those drawbacks will be as severe or costly as the ones that come with allowing food insecurity to keep affecting more Connecticut households each year. Addressing food and nutrition insecurity will require the state to make difficult decisions, but those decisions can have an outsized impact on many other parts of residents' lives and bring savings for the state as a whole.

As such the CWCSEO encourages the General Assembly to invest in the people of Connecticut and our communities by allocating funding to address food insecurity so that no one has to go to bed hungry in our state.

²⁸³ See, CWCSEO - 2024 Food Security Annual Report, Pg. 87

(<https://wp.cga.ct.gov/cwcseo/wp-content/uploads/2025/01/Food-Insecurity-in-Connecticut-Report-2024.pdf>)

Appendix

Appendix A: Expanded Food and Nutrition Education Program (EFNEP) Report

EFNEP System

Feedback Report 2024

University of Connecticut

Period: 10/01/2023 - 09/30/2024

Funding: 555,945

Cost/Participant: \$553.73 ✓

Regions: 13

11/01/2024

Staff	People	FTE
Professional	1	0
Paraprofessional	14	7.5 ✓
Volunteer	100	0.4
Total	115	7.9

Demographic Data

Adults		
Total Adults	396	✓
Others in Family	966	
Adult Programming	39%	
Not Pregnant/No Kids (n=141)	36%	⚠
Public Assist (Entry)	80%	
No Poverty Data (n=152)	38%	⚠
<i>Graduates</i>		
Graduation Rate (n=243)	61%	
Mean Months	2.6	
Mean Lessons	8.5	
Mean Sessions	0	
Mean Hours	8.9	✓
<i>Youth</i>		
Total Youth	608	✓
Total Youth Groups	32	
Mean Youth/Group	19	
Youth Programming	61%	
<i>Graduates</i>		
Graduation Rate	90%	
Mean Months	1.9	
Mean Lessons	9.6	
Mean Sessions	0	
Mean Hours	11.7	
<i>Participation Breakdown</i>		
K-2	28%	
3-5	45%	
6-8	3%	
9-12	21%	✓

Outcome/Impact Data

Adult Diet Recalls		
Graduates with Recalls	102%	✓
Positive Change (any food group)	96%	✓
<i>Change in Consumption</i>		
Whole Grains	0.1	
Fruits	0.4	
Vegetables	0.4	
Dairy	0.5	
SoFAS	2	
HEI Change (Entry: 51.4; Exit: 55.6)	4.2	
Food Cost Savings (n=196)		
Cost Savings	\$1,758.89	✓
Avg Cost Savings	\$8.97	✓
Adult Questionnaires		
Questionnaires with all Zeros	0	
Graduates with Questionnaires	101%	✓
Youth Questionnaire Data		
Youth w/ Questionnaires (n=525)	86%	✓
Improvement in one or more practice		
Diet Quality	95%	✓
Physical Activity	63%	⚠
Food Safety	71%	✓
Food Security	38%	✓
Food Resource Mgmt	91%	✓

Key

✓ Values that look good

⚠ Values you may need to take a closer look at

Appendix B: Food Items Summary from the FY26-FY27 Biennium Budget (Sources: [Office of Fiscal Analysis Connecticut State Budget FY26-FY27](#) and [Connecticut General Assembly - HB No. 7287 AN ACT CONCERNING THE STATE BUDGET FOR THE BIENNIUM ENDING JUNE 30, 2027, AND MAKING APPROPRIATIONS THEREFOR, AND PROVISIONS RELATED TO REVENUE AND OTHER ITEMS IMPLEMENTING THE STATE BUDGET](#)

*Note: Line items highlighted in blue are items that receive a funding increase during the biennium while items highlighted in red receive a funding decrease.

Overall State Spending

Total Amounts	FY26	FY27
State "Core Food and Nutrition Security"	\$20,102,128.00	\$25,032,128.00
State "Broader Food System"	\$31,919,022.00	\$31,919,022.00
State "Food Security Organization Earmarks"	\$2,418,500.00	\$2,076,000.00
Total	\$54,439,650.00	\$59,027,150.00

“Core Food Security Items”

Item	Page	Fund	Department	FY26	FY27	FY25	% Change 25-26	% Change 26-27	Notes
“Senior Food Vouchers”	130	General	Agriculture	\$518,418.00	\$518,418.00	\$517,571.00	0.16%	0.00%	Provides benefits for seniors to use at farmers markets
“WIC Coupon Program for Fresh Produce”	130	General	Agriculture	\$247,938.00	\$247,938.00	\$247,938.00	0.00%	0.00%	Provides benefits for WIC recipients to use at farmers markets
“Maintain Funding for CT Grown for CT Kids”	130	General	Agriculture	\$1,000,000.00	\$1,000,000.00	\$1,000,000.00	0.00%	0.00%	Listed under “policy revisions”
“Food Stamp Training Expenses”	198	General	Social Services	\$9,341.00	\$9,341.00	\$9,341.00	0.00%	0.00%	
“Nutrition Assistance”	198	General	Social Services	\$3,020,994.00	\$6,020,994.00	\$1,000,000.00	202.10%	99.31%	Provides money to buy food for food banks and pantries
“Elderly Nutrition”	211	General	Aging and Disability Services	\$5,141,074.00	\$5,141,074.00	\$4,904,171.00	4.83%	0.00%	Provides home delivered and congregate meals to elderly residents
“Local Food for Local Schools Incentive Program”	226	General	Education	\$1,500,000.00	\$3,430,000.00	\$1,500,000.00	0.00%	128.67%	Provides partial reimbursement to eligible boards of education for the purchase of locally and regionally sourced food for school meals
“Child Nutrition State Match”	226	General	Education	\$2,354,000.00	\$2,354,000.00	\$2,354,000.00	0.00%	0.00%	
“Health Foods Initiative”	226	General	Education	\$4,151,463.00	\$4,151,463.00	\$4,151,463.00	0.00%	0.00%	
“School Breakfast Program”	227	General	Education	\$2,158,900.00	\$2,158,900.00	\$2,158,900.00	0.00%	0.00%	
Totals				\$20,102,128.00	\$25,032,128.00	\$17,843,384.00	12.66%	24.52%	

“Broader Food System”

Item	Page	Fund	Department	FY26	FY27	FY25	% Change 25-26	% Change 26-27	
“Dairy Farmer - Agriculture Sustainability”	130	General	Agriculture	\$1,000,000.00	\$1,000,000.00	\$1,000,000.00	0.00%	0.00%	
“Fish Hatcheries”	133	General	Energy and Environmental Protection	\$3,004,540.00	\$3,004,540.00	\$3,446,925.00	-12.83%	0.00%	
“Food Desert Tax Abatement”	143	General	Economic and Community Development	\$0.00	\$0.00	\$500,000.00	-100.00%	0.00%	Program eliminated under “Policy Revisions”
“Vocational Agriculture”	227	General	Education	\$26,295,732.00	\$26,295,732.00	\$18,824,200.00	39.69%	0.00%	
Agricultural Viability Grant Program	641 (PA 25-168 Text)	General	Agriculture	\$625,000.00	\$625,000.00	\$500,000.00	25.00%	0.00%	Provided under the Donald E. Williams, Jr. Community Investment Account within the General Fund
Farm Transition Program	641 (PA 25-168 Text)	General	Agriculture	\$625,000.00	\$625,000.00	\$500,000.00	25.00%	0.00%	Provided under the Donald E. Williams, Jr. Community Investment Account within the General Fund
“To encourage the sale of Connecticut-grown food to schools, restaurants, retailers and other institutions and businesses in the state”	641 (PA 25-168 Text)	General	Agriculture	\$125,000.00	\$125,000.00	\$100,000.00	25.00%	0.00%	Provided under the Donald E. Williams, Jr. Community Investment Account within the General Fund
Connecticut Farm Link Program	641 (PA 25-168 Text)	General	Agriculture	\$93,750.00	\$93,750.00	\$75,000.00	25.00%	0.00%	Provided under the Donald E. Williams, Jr. Community Investment Account within the General Fund
Seafood Advisory Council	641 (PA 25-168 Text)	General	Agriculture	\$59,375.00	\$59,375.00	\$47,500.00	25.00%	0.00%	Provided under the Donald E. Williams, Jr. Community Investment Account within the General Fund
Connecticut Farm Wine Development Council	641 (PA 25-168 Text)	General	Agriculture	\$59,375.00	\$59,375.00	\$47,500.00	25.00%	0.00%	Provided under the Donald E. Williams, Jr. Community Investment Account within the General Fund
Connecticut Food Policy Council	641 (PA 25-168 Text)	General	Agriculture	\$31,250.00	\$31,250.00	\$25,000.00	25.00%	0.00%	Provided under the Donald E. Williams, Jr. Community Investment Account within the General Fund
Total	n/a	General	Various	\$31,919,022.00	\$31,919,022.00	\$25,066,125.00	27.34%	0.00%	

“Food Security Organization Earmarks”

Item	Page	Fund	Department	FY26	FY27	FY25	% Change 25-26	% Change 26-27	Notes
“Haven’s Harvest”	131	General	Agriculture	\$150,000.00	\$150,000.00	N/A	N/A	0.00%	Included under “policy revisions”
“Filling in the Blanks”	131	General	Agriculture	\$100,000.00	\$100,000.00	N/A	N/A	0.00%	Included under “policy revisions”
“Eastend Popup Market”	131	General	Agriculture	\$50,000.00	\$50,000.00	N/A	N/A	0.00%	Included under “policy revisions”
“West Haven Food Insecurity Nonprofit”	131	General	Agriculture	\$25,000.00	\$25,000.00	N/A	N/A	0.00%	Included under “policy revisions”
“Forge City Works”	139	General	Economic and Community Development	\$365,000.00	\$300,000.00	N/A	N/A	-17.81%	Grant to a food insecurity focused nonprofit
“City Seed”	139	General	Economic and Community Development	\$300,000.00	\$300,000.00	N/A	N/A	0.00%	Grant to a food insecurity focused nonprofit
“Amazing Grace Food Pantry”	146	General	Economic and Community Development	\$25,000.00	\$25,000.00	N/A	N/A	0.00%	Under “various grants”
Angel of Edgewood, Inc.	146	General	Economic and Community Development	\$100,000.00	\$100,000.00	N/A	N/A	0.00%	Under “various grants”
“Brass City Harvest Regional Food Hub”	147	General	Economic and Community Development	\$150,000.00	\$150,000.00	N/A	N/A	0.00%	Under “various grants”
“Enfield Food Shelf”	147	General	Economic and Community Development	\$5,000.00	\$0.00	N/A	N/A	-100.00%	Under “various grants”
“SilverSource, Inc.”	148	General	Economic and Community Development	\$150,000.00	\$150,000.00	N/A	N/A	0.00%	Under “various grants”
“Team Inc.”	148	General	Economic and Community Development	\$100,000.00	\$100,000.00	N/A	N/A	0.00%	Under “various grants”
“Human Resources Agency of New Britain Paving at Food Pantry”	149	General	Economic and Community Development	\$100,000.00	\$0.00	N/A	N/A	-100.00%	Under “various grants”
“Beth-El Shelter”	204	General	Social Services	\$25,000.00	\$25,000.00	N/A	N/A	0.00%	Under “provide funding for various grants” within “policy revisions”
“Enfield Loaves and Fishes”	204	General	Social Services	\$5,000.00	\$0.00	N/A	N/A	-100.00%	Under “provide funding for various grants” within “policy revisions”

"Person to Person Darien"	204 General	Social Services	\$250,000.00	\$250,000.00	N/A	N/A	0.00%	Under "provide funding for various grants" within "policy revisions"
"Teeg"	204 General	Social Services	\$100,000.00	\$100,000.00	N/A	N/A	0.00%	Under "provide funding for various grants" within "policy revisions"
"Support Meals on Wheels & Congregate Meals"	213 General	Aging and Disability Services	\$150,000.00	\$150,000.00	N/A	N/A	0.00%	Provides funding to the Middletown Senior Center to support Meals and Wheels and Congregate Meal Programs under "policy revisions"
Montville School Lunch Debt	231 General	Education	\$36,000.00	\$36,000.00	N/A	N/A	0.00%	Under "provide funding for various grants" within "policy revisions"
Waterford School Lunch Debt	231 General	Education	\$30,000.00	\$30,000.00	N/A	N/A	0.00%	Under "provide funding for various grants" within "policy revisions"
Chrysalis Center	278 General	Judicial	\$15,000.00	\$15,000.00	N/A	N/A	0.00%	Within "other expenses"
Angel of Edgewood, Inc.	282 General	Judicial	\$5,000.00	\$0.00	N/A	N/A	-100.00%	Within the "Youth Services Prevention" Line Item
Cook and Grow, LLC	283 General	Judicial	\$20,000.00	\$0.00	N/A	N/A	-100.00%	Within the "Youth Services Prevention" Line Item
East End NRZ Market and Cafe	284 General	Judicial	\$45,000.00	\$0.00	N/A	N/A	-100.00%	Within the "Youth Services Prevention" Line Item
Hispanic Health Council	284 General	Judicial	\$10,000.00	\$0.00	N/A	N/A	-100.00%	Within the "Youth Services Prevention" Line Item
New Britain ROOTS, Inc	285 General	Judicial	\$45,000.00	\$0.00	N/A	N/A	-100.00%	Within the "Youth Services Prevention" Line Item
United Way of Greenwich, Inc.	286 General	Judicial	\$40,000.00	\$0.00	N/A	N/A	-100.00%	Within the "Youth Services Prevention" Line Item
"Yellow Farmhouse Education Center Inc."	286 General	Judicial	\$2,500.00	\$0.00	N/A	N/A	-100.00%	Within the "Youth Services Prevention" Line Item
New Britain ROOTS, Inc	287 General	Judicial	\$15,000.00	\$15,000.00	N/A	N/A	0.00%	Within the "Youth Violence Initiative" Line Item
New Opportunities, Inc	287 General	Judicial	\$5,000.00	\$5,000.00	N/A	N/A	0.00%	Within the "Youth Violence Initiative" Line Item
Totals	n/a	General	\$2,418,500.00	\$2,076,000.00				

"CT Spending Compared to 3 programs from other Northeastern States"

FY26 CT Total Spending (51 items)	CT Population (July 1, 2024)	Other State	Other State Population	Population Ratio (CT/Other State)	Other State 3 Food Insecurity Programs	FY26 3 Program Spending	Spending Ratio (other state/CT)	Population-Adjusted 3 Program Spending	Population-Adjusted Spending Ratio (other state/CT)
\$54,439,650.00	3,675,069	Massachusetts	7,136,171	51.50%	"Healthy Incentives Program," "Emergency Food Assistance", "School Meals"	\$250,000,000.00	459.22%	\$128,747,930.79	236.50%
\$54,439,650.00	3,675,069	Vermont	648,493	566.71%	"Vermonters Feeding Vermonters," "Vermont Local Food for Schools and Childcare Grants," "School Meals"	\$18,500,000.00	33.98%	\$104,841,187.95	192.58%
\$54,439,650.00	3,675,069	New York	19,870,000	18.50%	"the Hunger Prevention and Nutrition Assistance Program (HPNAP)," "Nourish NY Program," School Meals	\$368,000,000.00	675.98%	\$68,063,683.54	125.03%
\$54,439,650.00	3,675,069	New Jersey	9,500,851	38.68%	"Aid to the state's food banks," "State Minimum SNAP Benefit," "Food Desert Relief Program"	\$155,000,000.00	284.72%	\$59,956,281.28	110.13%

Appendix C: UConn Extension SNAP-Ed 2024 Impact Summary

UCONN | EXTENSION

2024 | BY THE NUMBERS

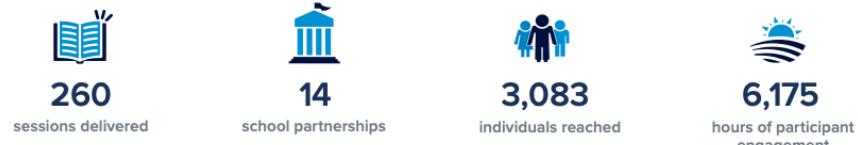


Building Healthier Futures with UConn Extension's SNAP-Ed

Many families in Connecticut face challenges maintaining healthy eating and oral health habits, leading to higher risks for chronic disease and poor dental outcomes. Accessible, evidence-based education is essential to promoting healthier lifestyles for individuals with limited incomes.

Through innovative education and community engagement, UConn Extension's SNAP-Ed and Healthy Family Connecticut programs are helping children youth, and adults in Connecticut adopt healthier eating habits and dental health practices, strengthening public health and reducing future healthcare burdens.

SNAP-ED ENGAGEMENT



HEALTHY FAMILY CONNECTICUT DIGITAL PROGRAM



Appendix D: List of Federal Nutrition Programs

1. **Supplemental Nutrition Assistance Program (SNAP):** Provides benefits to eligible families to help purchase groceries. This is by far the most utilized federal program with over 42 million individuals participating nationwide as of August 2024.²⁸⁴ (administered by CT Department of Social Services)
2. **Special Supplemental Nutrition Program for Women, Infants, and Children (WIC):** Provides grants to states to provide benefits to low-income pregnant, breastfeeding, and

²⁸⁴ See, USDA FNS - FNS Program Participation Dashboard (<https://www.fns.usda.gov/data-research/data-visualization/program-participation>)

non-breastfeeding postpartum women and children up to the age of 5 to purchase nutritious foods. (administered by CT Department of Public Health)

3. **Farmers Market Nutrition Program (FMNP):** Provides benefits to eligible WIC recipients to buy produce at approved farmers markets. (administered by CT Department of Agriculture)
4. **Senior Farmers Market Nutrition Program (SFMNP):** Provides benefits to low-income seniors to buy produce at approved farmers markets. (administered by CT Department of Agriculture)
5. **National School Lunch Program (NSLP):** Provides paid, reduced-price, and free school lunches at participating schools (administered by CT Department of Education)
6. **School Breakfast Program (SBP):** Provides reimbursements to states to operate a nonprofit program providing paid, reduced-price, and free school breakfasts at participating schools. (administered by CT Department of Education)
7. **Child and Adult Care Food Program (CACFP):** Provides reimbursements to programs such as child care centers, adult day cares, after school programs, and emergency shelters that provide nutritious meals or snacks to eligible recipients. (administered by CT Department of Education)
8. **Fresh Fruit and Vegetable Program:** Provides free fresh fruit and vegetable snacks to students at eligible elementary schools. (administered by CT Department of Education)
9. **Special Milk Program:** Reimburses schools to provide free milk to children who do not receive meals from the NSLP or SBP. (administered by CT Department of Education)
10. **Summer Food Service Program (SFSP):** Provides free snacks and meals to children at meal sites during summer break. (administered by CT Department of Education)
11. **Summer EBT (SUN Bucks):** Provides eligible families with \$120 per child to buy groceries during the summer. (administered by CT Department of Social Services)
12. **Commodity Supplemental Food Program (CSFP):** Provides monthly nutritious food packages to low-income seniors. (administered by CT Department of Social Services)
13. **The Emergency Food Assistance Program (TEFAP):** Purchases and distributes free food to low-income individuals via local agencies such as food banks. (administered by CT Department of Social Services)
14. **USDA Foods in Schools:** Provides funds to purchase 100% American-grown foods for schools participating in the NSLP, SBP, and CACFP (administered by CT Department of Education).²⁸⁵
15. **The Patrick Leahy Farm to School Program:** Provides funds for grants, technical assistance, and training to support the inclusion of local foods in the NSLP, SFSP, CACFP, and other child nutrition programs (administered by CT Department of Education).²⁸⁶
16. **Elderly Nutrition Program:** Provides grants to states to provide meals to individuals over the age of 60 at congregate meal sites or via home delivery as well as nutrition education and other support (administered by CT Department of Aging and Disability Services).²⁸⁷

²⁸⁵ See, USDA FNS - USDA Foods in Schools (<https://www.fns.usda.gov/usda-fis>)

²⁸⁶ See, USDA FNS - The Patrick Leahy Farm to School Program (<https://www.fns.usda.gov/f2s/farm-to-school>)

²⁸⁷ See, Administration for Community Living - Older Americans Act Nutrition Programs (https://acl.gov/sites/default/files/news%202017-03/OAA-Nutrition_Programs_Fact_Sheet.pdf)