

Senate Bill No. 1145 AN ACT CONCERNING OUTREACH BY COMMUNITY ACTION AGENCIES FOR SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM APPLICANTS.

Good morning Representative Tercyak, Senator Musto, Committee Members. I thank you for the opportunity to testify to you today regarding Senate Bill No. 1145 An Act Concerning Outreach By Community Action Agencies For Supplemental Nutrition Assistance Program Applicants.

My name is Sofia Segura-Pérez, and I am the Associate Director of the Center for Community Nutrition at the Hispanic Health Council. While based in Hartford, the Hispanic Health Council works statewide. We are one of the three contracted partners of the state's SNAP Outreach Plan. I'd like to share with you some information about the need for this program across the state and the unique role that the Hispanic Health Council plays in addressing that need, as do the other contracted outreach plan partners, and some concerns that I have about the raised bill.

Hispanics are more likely to live in poverty and to experience food insecurity when compared with Non-Hispanic Whites. They also experience many barriers to accessing needed services, such as lack of language proficiency, transportation and low literacy levels, among others. The Hispanic Health Council offers a variety of culturally competent services to clients in a welcoming, respectful and culturally relevant atmosphere on site and statewide.

The main goal of the SNAP Outreach Program is to increase participation in SNAP using a variety of strategies to reach those likely eligible for SNAP and likely to fall through the cracks in the safety net. We engage them where they are, including door-to-door outreach, visiting homeless shelters, halfway houses and community agencies, attending community events, doing educational presentations, conducting social marketing campaigns and producing and disseminating bilingual, culturally relevant materials such as our fotonovela series. We have built strong partnerships with service agencies across the state, and have a regular presence in many cities where we conduct outreach, education, pre-screenings and facilitate applications on site.

During the past 12 months, the program made more than 1,000 visits to locations around the state to conduct outreach, education and pre-screenings and to facilitate applications. In addition, we conducted a total of 2,000 SNAP pre-screenings for eligibility and facilitated nearly a 1,000 clients with first-time applications, and nearly 300 redetermination applications. This work involved:

- over 5,000 telephone calls, answering SNAP questions for clients or calling DSS on their behalf.
- intensive guidance with applicants about needed forms and information to assure completeness.
- rigorous follow-up with DSS about pending applications to promote their timely processing and conclusion;

- follow-up with clients who need to provide additional information; and
- advocacy as needed when clients are denied in error or pending applications are unreasonably delayed;
- home visits, to 50 people during the past year, to those who need SNAP – such as the client undergoing cancer treatment and feeling too weak to come to the office or go to DSS by bus, and the homeless client with a young, autistic child and without child care or transportation.
- outreach efforts at homeless shelters in order to engage and assist women with children in need residing in them
- outreach to elderly sites to support applications of elderly clients, such as the diabetic woman who was unable to consume a healthy diet until she had SNAP benefits; and
- outreach to immigrant families with US-born children who are afraid to enroll their (eligible) children in the program.

Based on DSS data, on average, 87% of the applications that we facilitated over the past year resulted in program participation. HHC's SNAP outreach work is similar to that conducted by the other contracted outreach partners in the state – flexible, multi-faceted, creative, culturally relevant and persistent. The end product is evidence for this approach to SNAP outreach. Based on recent major improvements in CT's participation rate, it is clear that our strategy is working. In fact, the work is being done by many in a cohesive and planned way, which is approved and supported by the Food and Nutrition Service of the USDA.

HHC appreciates your efforts to improve SNAP participation in CT. However, we feel that the problems are error rates and timeliness issues within DSS, which would not be solved by the proposed bill. The solution lies in supporting the ability of our state workers at DSS to do their jobs, through improvements in technology that would expedite their work. They are the ones who can make determinations. The Hispanic Health Council proposes that the new language in this bill starting on line 10 be removed and this put in its place: The Department of Social Services should report to this committee no later than January 30<sup>th</sup> of 2012 the progress they have made correcting the negative error rate, and timeliness issues for further review.

Thank you for your ongoing attention to increasing SNAP participation.