



The Greater Boston Food Bank Nutrition Policy

Statement of Purpose

The Greater Boston Food Bank (GBFB) Nutrition Policy (Policy) is meant to guide GBFB decisions in acquiring and distributing foods that will contribute to more healthful diets of its clients while continuing to alleviate hunger and food insecurity in its service area. The Policy serves to inform all stakeholders (member agencies, donors, government programs and current and potential clients) about GBFB's intention to focus on promoting health by improving the nutritional quality of distributed foods.¹

Policy Rationale and Benefits

When this policy was first created in 2017, one in 11 people in Eastern Massachusetts was food insecure² and many relied on GBFB and its food assistance network to supply them with the food they needed to support healthy lives. Based on Feeding America estimates, the 2021 projected rate of food insecurity in Eastern Massachusetts is one in 10 people and one in 9 children. In fiscal year 2021, GBFB distributed 117 million pounds of food, an 18% increase over fiscal year 2020 and the equivalent of 96.6 million meals, through its membership network of over 600 food pantries, meal programs, and shelters, as well as through its four direct service programs at over 80 sites. The COVID-19 pandemic has caused an unprecedented surge in demand for food, with GBFB's partner agencies reporting they serve an average of 600,000 individuals each month.

Since GBFB's incorporation in 1981, its clients have changed from people accessing food resources on a short-term, emergency basis to clients depending on these resources for consistent access to food assistance.³ Due to the frequency with which clients visit GBFB's member agencies, and the reports of a sustained high number of people accessing services every month, the foods clients receive likely create a lasting impact on their health and well-being. Recent research on pantry clients' food and beverage preferences shows that emergency food program clients prefer healthy food (produce, dairy, and proteins) over less healthy food, like soda, candy, and snack foods⁴.

¹ U.C. Berkeley Center for Weight and Health. *Guide to Drafting a Food bank Nutrition Policy*. 2015.

² Feeding America Map the Meal Gap 2019.

³ Feeding America (2014). *Hunger in America 2014*. <http://www.feedingamerica.org/hunger-in-america/our-research/hunger-in-america>

⁴ Campbell E, Hudson H, Webb K, and Crawford P. 2011. Food preferences of users of the emergency food system. *Journal of Hunger and Environmental Nutrition* 6(2):179–187.

In addition, research has shown that adults with food insecurity are more likely to report poor physical and mental health and have higher risks for diseases and conditions like diabetes, hypertension, and depression than those who are food secure.⁵ While GBFB’s mission is to end hunger here by providing enough food to alleviate hunger, it is also committed to providing more nutritious foods so clients can develop and maintain healthier diets. As a client-driven organization, GBFB strives continually to satisfy the needs of those it serves. Implementing a policy that focuses on shifting acquisition towards healthier foods enables GBFB to further support client diet needs.

Policy Goals: FY22-FY24

The below goals represent GBFB’s three-year strategy to improve the quality of foods and expand the education opportunities for clients and member agencies.

- SWAP percentages represent the total percent of green and yellow foods that moved through GBFB and were eligible for ranking.
- Produce percentages represent percent of total pounds of fresh and frozen items distributed, including enabled and drop ship categories.
- Grains (including cereals) averaged 92.4% SWAP green and yellow in FY21 this metric will be maintained by continuing to prioritize whole grain options and using nutrition specifications for MEFAP and TEFAP purchases.

	FY21 Goals	FY21 Actual	FY22	FY23	FY24
SWAP	86%	94.3%	94%	Maintain	Maintain
Produce	26%	24%	26%	26%	26%
Grains SWAP	97%	92.4%	95%	95%	95%

Scope of Policy

The Policy will apply to food and beverage items including:

- Procured items using The Emergency Food Assistance Program (TEFAP, the Federal commodity program also referred herein as USDA) and Massachusetts Emergency Food Assistance Program (MEFAP) funds
- Purchased items for Co-op and Food Fund
- Donated foods from retail donors, community members, and other organizations (excluding salvage reclamation and enabled items)

Foods to Prioritize

The Policy’s goal is to improve client access to nutrient-rich foods that will provide a diet that is similar to the U. S. Department of Agriculture’s MyPlate dietary pattern recommendations. GBFB seeks to encourage the procurement and distribution of fresh fruits and vegetables, whole grains, low-fat dairy and lean proteins. GBFB uses the nutrition ranking system Supporting Wellness at Pantries (SWAP) to rank foods using a stoplight system. Based on their

⁵ Seligman HK, Laraia BA, Kushel MB. Food insecurity is associated with chronic disease among low-income NHANES participants. *The Journal of Nutrition*, 2010: 140.2: 304-310.

nutrition facts, foods are ranked as green, yellow or red, with green and yellow designations considered healthy.

GBFB currently does not accept, distribute, or enable:

- Alcohol
- Energy drinks and energy shots
- Dietary supplements
- Diet products containing appetite suppressants
- Over the counter (OTC) medications such as pain relievers, cough medicines, allergy medications, etc.
- Bulk-packed items containing more than 0.5g artificial *trans* fats
- Foods and beverages that are enhanced with marijuana derivatives such as cannabidiol (CBD) or tetrahydrocannabinol (THC)⁶.

GBFB has informal nutrition specifications in place for foods procured through USDA and MEFAP. To enhance our commitment to a more nutritionally sound offering to our agencies and clients, GBFB will actively seek, procure, and distribute the following foods and promote during food drives over the next three years and beyond:

- A wide variety of nutrient-dense fresh fruits and vegetables
- Canned and frozen fruits (e.g., fruit packed in water or juice)
- Canned and frozen vegetables (e.g., low-sodium or no salt added)
- 100% whole grain products (e.g., products that contain whole grain as first ingredient)
- Unflavored/unsweetened low-fat (1%) or skim/nonfat milk, yogurt, and other dairy products
- Unsweetened milk substitutes (e.g., soy milk, almond milk)
- Lean protein foods including meat, poultry, seafood (low-fat, low-sodium), eggs, nuts, nut butters, seeds, beans, and lentils and other plant-based proteins (low-sodium or no salt added)
- Healthy beverages (e.g., 100% juice, plain water, and unsweetened beverages)

Policy Implementation and Review

This Policy revision was created by the Nutrition Policy Working Group, a cross-sector group of GBFB's staff. GBFB's Board of Directors approved the original policy in September 2017. The original Policy became effective October 1, 2017, and this revision will be effective, pending approval, on November 18, 2021. The Policy will be disseminated and communicated to all stakeholders by January 25, 2022. The GBFB Nutrition Policy Working Group chairs will base any future revisions on ongoing metric tracking and reviews of efficacy. The Policy will undergo an annual review by the Board of Directors as needed.

⁶ In the November 8, 2016, election, Massachusetts voters passed a ballot initiative (Question 4) making recreational cannabis legal in the state.