



Federal Actions and Child Nutrition in Oregon

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November 18, 2025

Agenda

1. Nutrition and children's well-being
2. The child hunger landscape in Oregon
3. WIC and SNAP: Key partners in Oregon's food safety net
4. WIC: Overview and federal impacts
5. SNAP: Overview and federal impacts
6. Other food programs
7. Q+A



Early nutrition is critical to well-being over the whole lifespan

Nutritional status impacts brain development during several key periods of brain formation:*

Pregnancy



Early childhood



Adolescence



Timing matters.

Nutritional deficiencies during critical or sensitive periods can disrupt the development of key brain regions and circuits, leading to long-term cognitive, emotional, and behavioral consequences.

*Cusik, S.E. and Georgieff, M.K.: [The Role of Nutrition in Brain Development: The Golden Opportunity of the "First 1000 Days."](#) Journal of Pediatrics, vol. 175 (2016).

Consequences of child hunger

Food insecurity

Having uncertain or limited access to adequate food



- Associated with **poorer health outcomes**: Food-insecure children are at least twice as likely to report being in fair or poor health.*
- Associated with **poorer academic outcomes**: Food insecurity in children is linked to lower IQ and reading and math scores, and higher dropout rates.**
- Associated with **behavioral and emotional problems**: Including poor social skills and hyperactivity.**

*Gunderson and Ziliak: [Food Insecurity and Health Outcomes](#). Health Affairs, vol. 34 no. 11 (2015)

**Frongillo, et. al: [Meta-review of child and adolescent experiences and consequences of food insecurity](#). Global Food Security, vol. 41 (2024)

Key considerations for children with developmental disabilities

Children with developmental disabilities are **more likely to have feeding challenges, nutritional deficiencies, malabsorption, greater adiposity, or be under or overweight.***



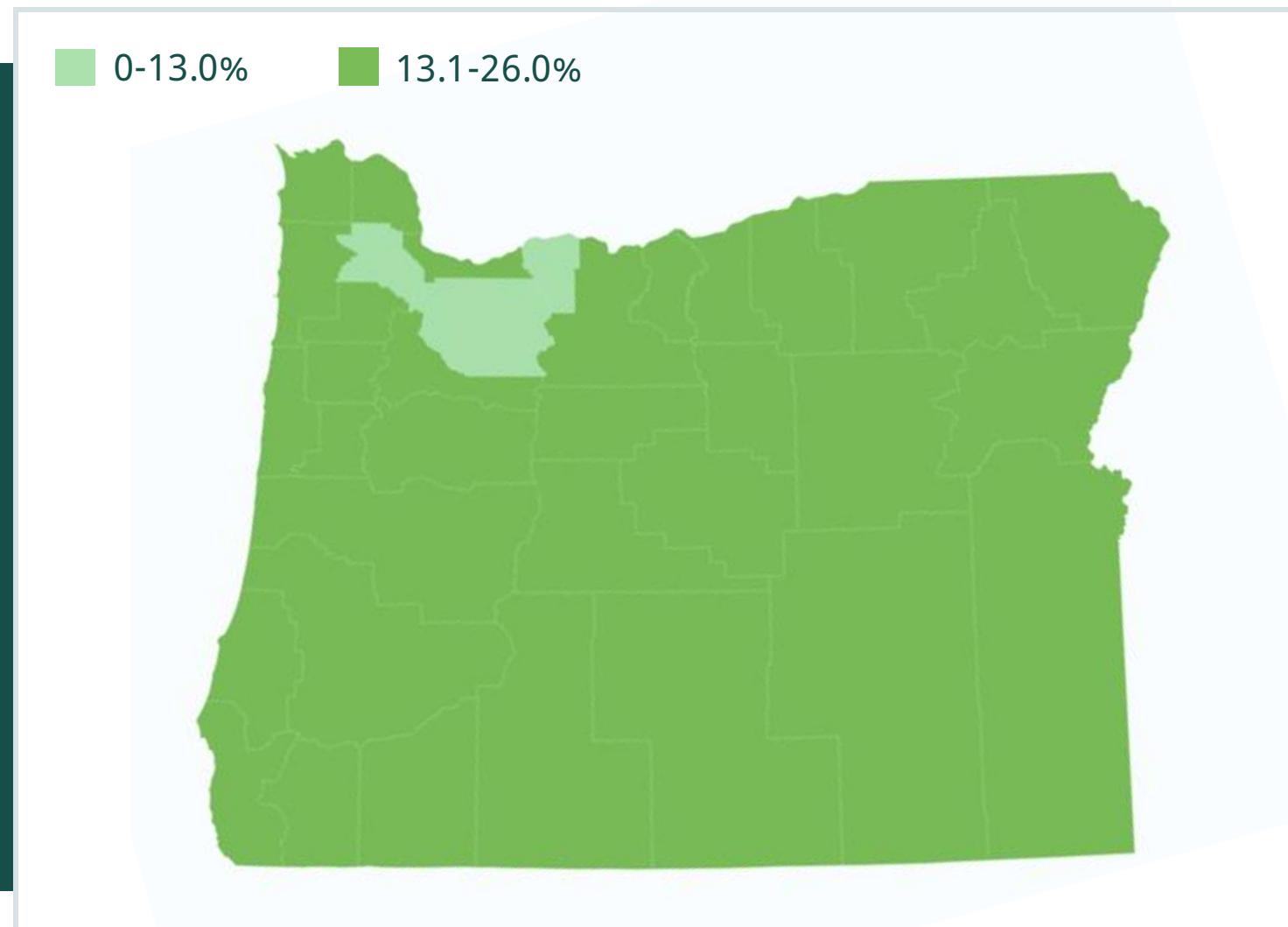
Sources: Bandini, et. al: [Obesity in children with developmental and/or physical disabilities](#). Disability and Health Journal, vol.8, issue 3 (2015); Chistol, et. al: [Sensory Sensitivity and Food Selectivity in Children with Autism Spectrum Disorder](#). Journal of Autism and Developmental Disorders, vol. 48 (2018); Pelizzo et. al: [Malnutrition and Associated Risk Factors Among Disabled Children](#). Sec. Pediatric Gastroenterology, Hepatology and Nutrition, vol. 7 (2019).

Oregon's child hunger landscape

Oregon's overall child food insecurity rate is **17.3%.***

That's about **144,200 children** who lack adequate access to food.

*Feeding America (2022): [Food insecurity among child population in Oregon](#).

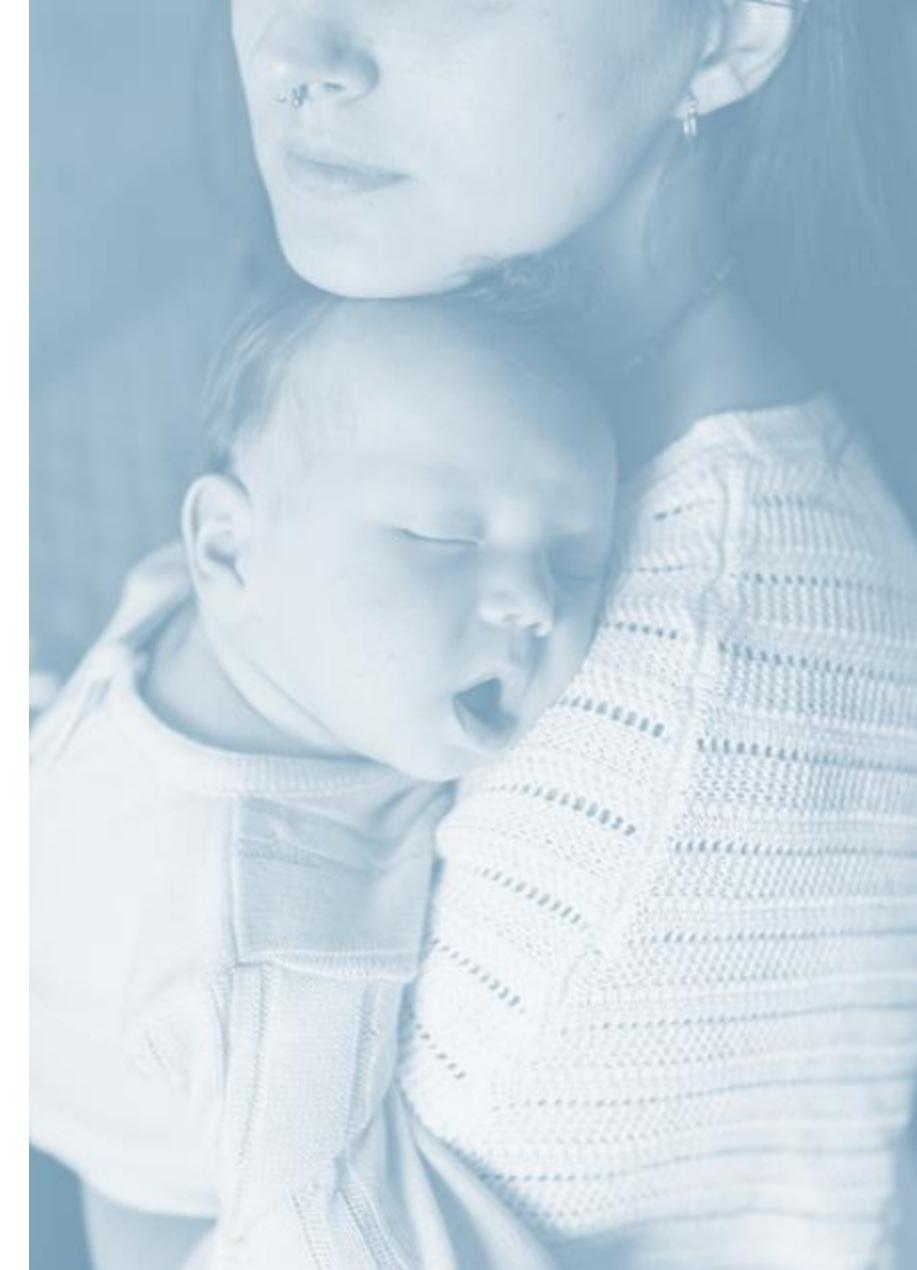


WIC and SNAP: Essential partners in the food safety net

	WIC	SNAP
Mission	Prevent nutrition-related illness and improve overall health outcomes	Prevent and reduce hunger
Eligibility	<i>Discretionary:</i> Program does not necessarily receive funds to serve every eligible person Pregnant and postpartum persons, infants, and children up to five years old with a nutrition risk with incomes at or below 185% the poverty line	<i>Entitlement:</i> All who apply, have incomes below 200% of the poverty line and meet eligibility criteria can receive benefits
Participants in Oregon	~83,000 individuals per month	More than 757,000 individuals in Jul 2025
Food costs (nationally)	\$43.65 average cost per participant per month	\$125.36 average cost per participant per month
Is nutrition education included?	Yes, it is a required WIC service.	Yes, but it is not required. (SNAP-Ed program discontinued by H.R.1)
Other services	<ul style="list-style-type: none">• Breastfeeding promotion and support• Health risk assessment• Healthcare and social services referrals	SNAP Employment and Training (SNAP E&T)
Food options	Only healthy foods recommended by the Institute of Medicine to meet nutritional needs.	Participants can choose any food except some prepared foods.

WIC in Oregon

Overview and federal impacts



WIC in Oregon

- Oregon WIC serves about 83,000 participants per month

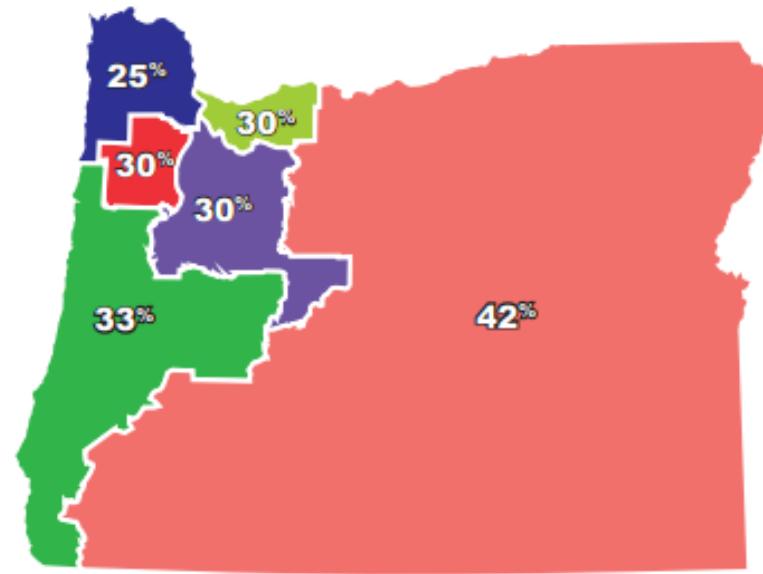
114,390

women, infants and children are served by the Oregon WIC Program

Congressional District	Adults served by WIC	Infants and Children served by WIC
1st	4,045	10,406
2nd	7,443	19,754
3rd	5,407	13,863
4th	4,671	12,730
5th	4,304	11,187
6th	6,099	15,952
Total	31,183	83,207

32% OF OREGON BIRTHS

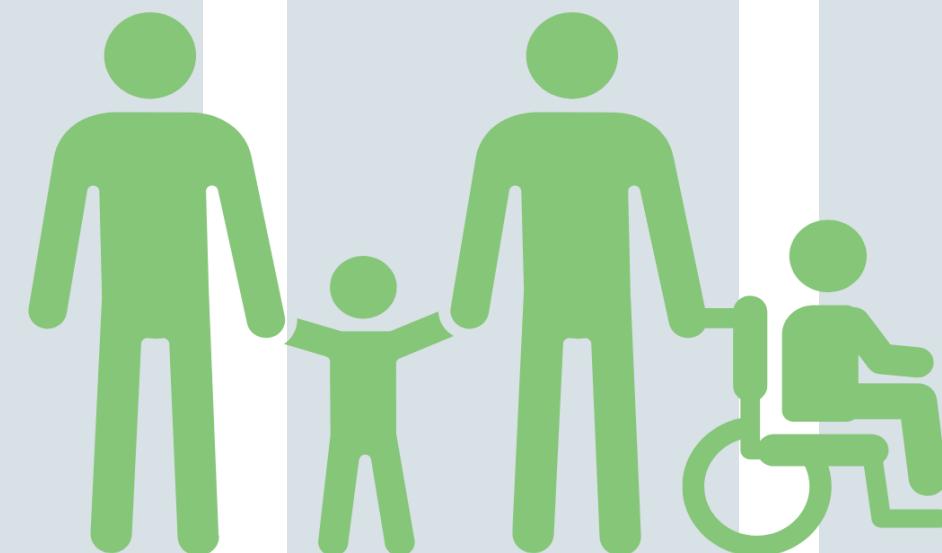
are to women who receive WIC during pregnancy



WIC Dual Eligibility

83,000

WIC
participants in
Oregon per
month



93%

WIC
participants on
Oregon Health
Plan (OHP)

55%

WIC
participants
also on SNAP

10%

WIC
participants
also on
Temporary
Assistance for
Needy Families
(TANF)

WIC Services

- Health and growth screenings
- Nutrition-focused education
- Breastfeeding and lactation support
- Community and health referrals
- A nutrient-dense, tailored food package



Nutrient-dense, tailored food package

- WIC offers a variety of health foods that are rich in vitamins, minerals, proteins, and anti-oxidants:
 - Fruits and vegetables
 - Whole grains
 - Milk
 - Cheese, including string and shredded cheeses
 - Eggs
 - Peanut butter/nut butter and/or beans
 - Cereal
 - Juice (which can be substituted for more fruits and vegetables)
 - Canned fish
 - Tofu and yogurt
 - Baby food (including organic options)
 - Formula



Oregon WIC Eligibility

- Oregonians need to be:
 - An Oregon Resident
 - Categorically Eligible
 - Pregnant, postpartum, or breastfeeding
 - Infants
 - Children under the age of 5 years
- Income Eligible
 - At or below 185% of the poverty level



Oregon WIC Eligibility (cont.)

- Currently, the required proof of residence is only to show that the family lives in Oregon. WIC continues to serve refugees, asylum seekers, and immigrants.
- Fathers, custodial grandparents, and foster parents can apply for children under age five in their care.
- Referrals to the program are welcome. Organizations can refer participants to the program using this link:

<https://www.oregon.gov/oha/PH/HealthyPeopleFamilies/wic/Pages/index.aspx>

Impacts of H.R. 1

- The federal House Resolution 1 (H.R.1) has indirect impacts on the Oregon WIC Program:
 - Fewer participants will be able to use adjunct eligibility. Those on Oregon Health Plan (OHP), TANF, and SNAP are automatically income-eligible for WIC. Without adjunct eligibility, there is a requirement for those participants to provide proof of family income to the WIC program. This increases the burden on the participant and increases administrative costs to the program.

SNAP

Overview and federal impacts



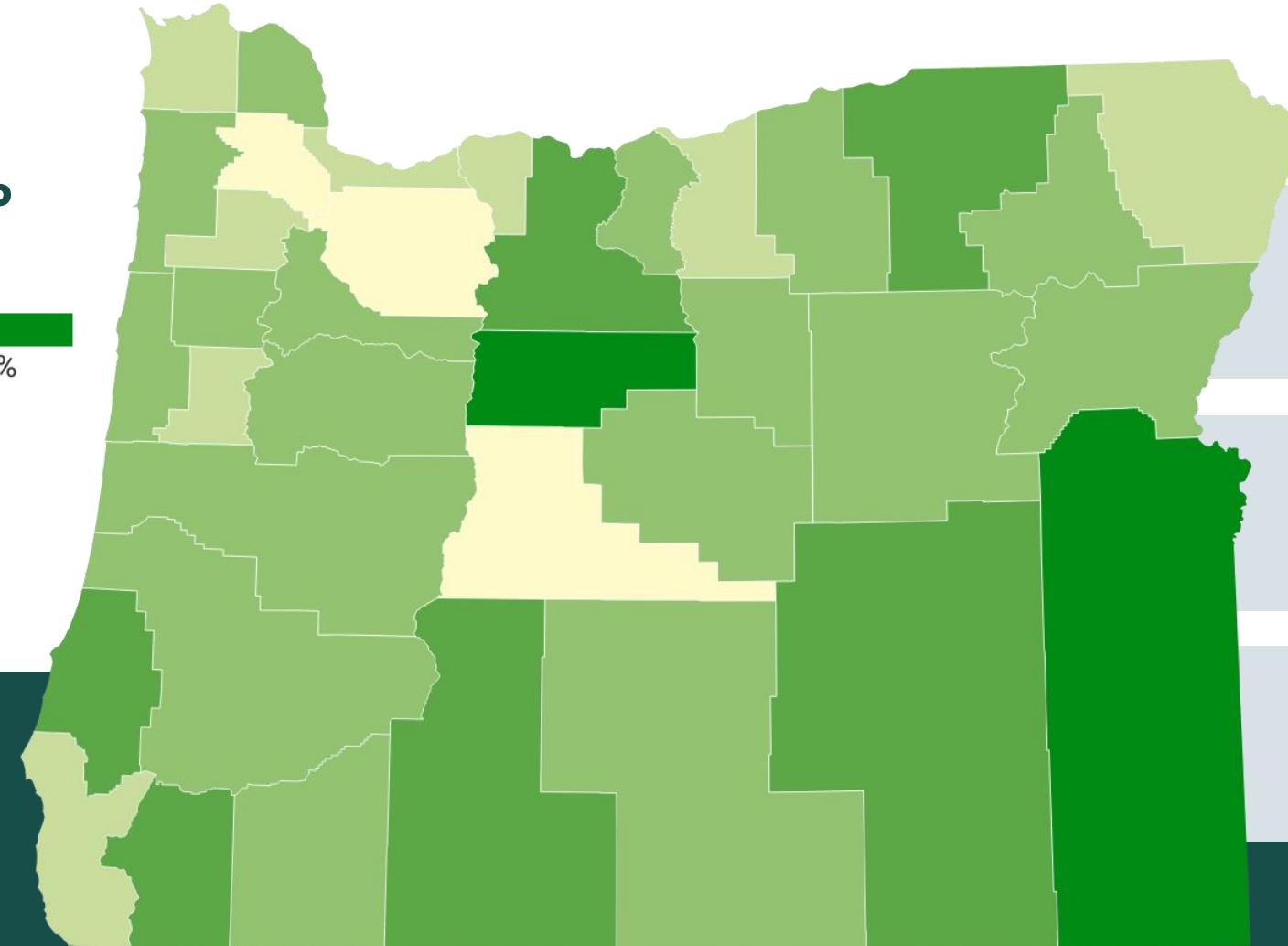
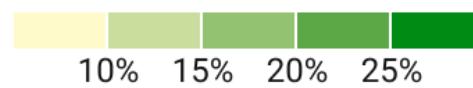
USDA SNAP mission

Our mission is to increase food security and reduce hunger in partnership with cooperating organizations by providing children and low-income people access to food, a healthy diet and nutrition education in a manner that supports American agriculture and inspires public confidence.



1 in 6 Oregonians participate in SNAP

Percentage of households receiving SNAP by county



Map graphic based on American Community Survey 5-Year data (2017-2021) as presented by the Food Research & Action Center.

757,000
individuals*

8,600 Tribal
members**

450,000
households*

*Based on July 2025 ODHS caseload data

**Based on Sept 2025 ODHS caseload data
and Tribal membership self-attestation

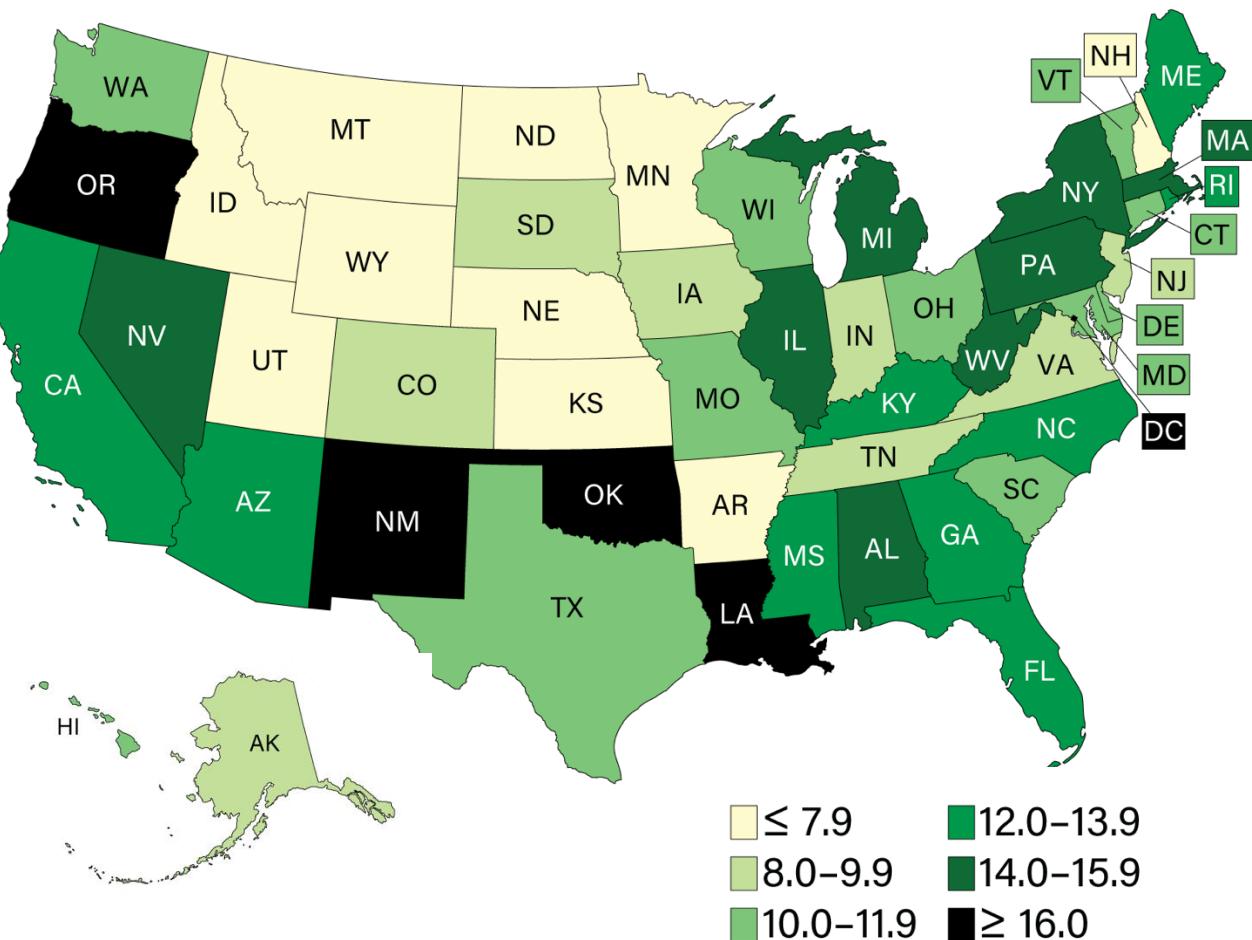
How Oregon compares

Oregon: 1 in 6
Nationally: 1 in 8

Key factors:

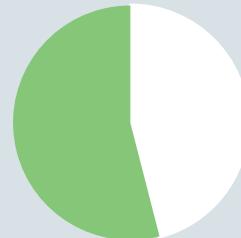
- Higher cost of living
- More working families on SNAP
- Broader income eligibility
- Strong access and outreach

Percentage of population receiving SNAP in federal fiscal year 2024

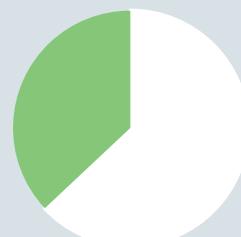


SNAP combats hunger and poverty

- More than **54%** of Oregon SNAP participants are in families with children.



- More than **37%** are in families with members who are older adults or have disabilities.



- 35%** of participating Oregon households have income at or below 50% of the poverty line.



Between 2015 and 2019, SNAP lifted **96,000 Oregonians** above the poverty line, including **44,000 children**.

All data on this slide sourced from the Center for Budget and Policy Priorities:
[Oregon Supplemental Nutrition Assistance Program](#), January 2025.



SNAP monthly snapshot

\$313

Average benefit per household

\$183

Average benefit per person

210k+

Participating children

130k+

Participating adults 65+



Source: Oregon Department of Human Services caseload data, March 2025.

H.R.1 and SNAP: Risks to children



Children's access to SNAP is narrowed as H.R.1 **delinks energy assistance programs and SNAP** for all households that do not include an older adult or member with a disability.



Former foster youth no longer qualify for able-bodied adult without dependents (ABAWD) work requirements waiver.



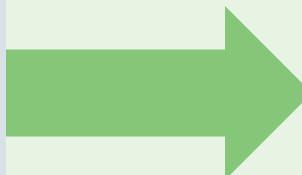
Refugees, asylees and other lawfully present immigrants **lose SNAP eligibility for their households, including their non-citizen children.**



Parents and caregivers whose youngest child is 14 and over no longer qualify for ABAWD work requirements waiver.

Domino impacts: Children's access to school meals

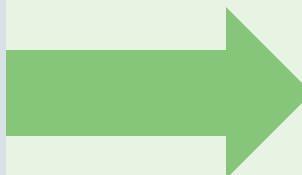
Household participation in **SNAP certifies children to receive free or reduced-price school meals** without additional paperwork.



SNAP cuts may shrink the number of students receiving these meals at school.



Schools with 25% or more of students certified for SNAP can participate in the **Community Eligibility Provision (CEP)**, **allowing all their students to receive meals** without any paperwork.



SNAP cuts may shrink the number of schools able to use CEP.

Domino impacts: Reduced access to linked supports



Federal shutdown

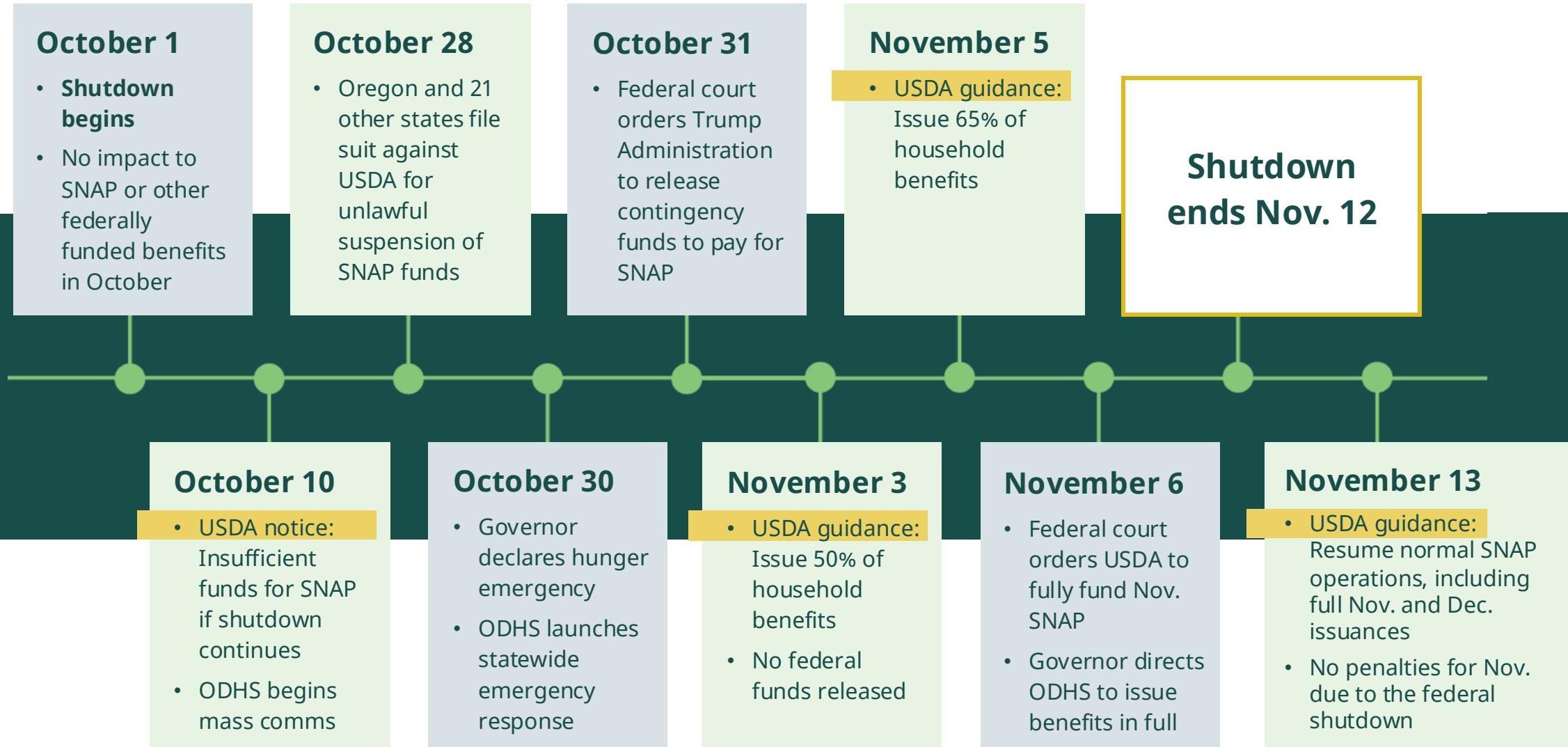
November SNAP benefits issued in full

- Governor directed ODHS to issue **100% of November's benefits** to SNAP recipients by the morning of Nov. 7.
 - All people who were SNAP-eligible on November 7 and 8 received their full benefit then.
 - As of Nov. 14, all remaining benefits have been issued.



Shutdown timeline

Federal guidance and state response



Continuing resolution (CR)

The CR signed on November 12 includes **SNAP** and **WIC** for federal fiscal year 2026.



- **SNAP:** \$107 billion in mandatory funding will keep the program operational through September 2026.
- **WIC:** \$8.2 billion in discretionary funding ensures full funding for the program and protects cash value benefit for fruits and vegetables.
- **Contingency funds:** CR included funds to replenish SNAP contingency fund, which had been used to cover some benefit costs during the shutdown.

SNAP payment error rate (PER)

What it is:

- An agency's PER is a measure of the **accuracy of households' SNAP allotments**.



What it is not:

- PER is **not** a measure of application timeliness or fraud.



SNAP PER and House Resolution 1 cost-share tiers

PER	State Cost-share
Under 6.00%	0%
6.00 – 7.99%	5%
8.00 – 9.99%	10%
10.00% or higher	15%

- Oregon's last PER was **14.06%**
- The target window for improvement begins **October 1, 2025**.
- If error rate is above 13.4% on June 30, 2025, we can **delay to 2030**.

Complicated policies and rules contribute to client mistakes

Earned income reporting accounts for most errors:

- Sometimes we don't receive the full picture or timely updates about household changes that could affect eligibility.



Shelter expenses:

- Claimed shelter costs may be paid by someone outside the household.
- Utilities are sometimes double counted (counted in rent + utility allowance).

Unearned income:

- Child support is hard to calculate correctly.



Household makeup:

- Sometimes we receive incomplete information about who is currently living in a household.

Addressing Oregon's PER



Additional Nutrition Programs

Overview and federal impacts



Medically Tailored Meals & School Nutrition

- In 2025, MTM and nutrition education are available to eligible Oregon Health Plan (OHP) members as part of their Health-Related Social Needs (HRSN) benefits. This includes some children.
- Additional HRSN nutrition benefits are planned, including fruit and vegetable benefits and pantry stocking benefits, but not until later in 2026
- Oregon school nutrition programs give children nutritionally-balanced, low-cost or no-cost lunches each school day

Oregon Children on OHP

Ages 0-5: 140,634

Ages 6-18: 348,733



Questions



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HEALTH
AUTHORITY



OREGON DEPARTMENT OF
Human Services