







FIGURE 1: Latinx Communities Prior to and During COVID-19

Prior to COVID-19			During COVID-19		
					
Hunger	Poverty	Health	Hunger	Poverty	Health
Higher than the national average	Targeting by ICE and lack of jobs lead to high poverty rates; federal programs are not accessible to some due to immigration status	Disproportionate rates of chronic disease; lack of access to health insurance	Higher than the national average	High job loss; federal COVID-19 stimulus programs are not accessible to some due to immigration status	March 2021: Latinx Americans were 2.4 times more likely to have died from COVID-19 as White people

Source: Food Research & Action Center 2021 ©

Prior to COVID-19

Hunger: In 2019, 15.6 percent of Latinx households were food insecure¹ (10.7 percent with low food security and 4.9 percent with very low food security), compared to 7.9 percent of White households (4.6 percent low food security and 3.3 percent very low food security).² Latinx students are more likely to rely on free or reduced-price school meal programs than White students.³ In addition, Latinx immigrants are more likely to be food insecure than Latinx individuals born in the U.S.⁴

Poverty: In 2019, the poverty rate among Latinx populations was 15.7 percent compared to a national average of 10.5 percent and 9.1 percent among White populations⁵ (the Supplemental Poverty Measure was 18.9 percent among Latinx households and 10.5 percent among White households).⁶ Latinx individuals are more likely to work in essential jobs that cannot be done remotely and are also more likely to use public transportation to commute to work,^{7,8} putting them at high risk for contracting COVID-19.

Latinx people in the U.S. are particularly impacted by the structural racism inherent in the immigration system.⁹ Deportations result in economic disadvantage and trauma among family members who remain in the U.S.¹⁰ Empowering local law enforcement to carry out federal immigration laws is associated with increased food insecurity.¹¹ Fear of deportation reduces economic activity in communities and increases mistrust of public agencies, which results in lower

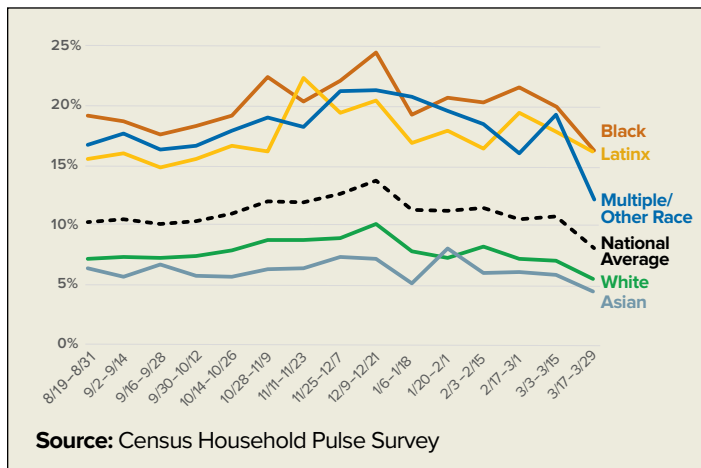
enrollment in social services, such as the Supplemental Nutrition Assistance Program (SNAP), which could help alleviate poverty and food insecurity.¹² Further fear was generated by the Trump administration’s decision to consider the use of SNAP as a factor in a public charge determination, in turn affecting green card eligibility. This change had a “chilling effect” on participation in SNAP as well as other federal nutrition programs among immigrants and their families.¹³

Health: Latinx people experience disproportionately high rates of chronic conditions.^{14,15} In 2018, 23 percent of employed Latinx individuals did not have health insurance.¹⁶ The uninsured rate among children has risen the fastest among Latinx children, increasing from 8.2 percent in 2018 to 9.2 percent in 2019, compared to an increase of 5.2 percent to 5.7 percent among all children.¹⁷

During COVID-19

Hunger: Food insufficiency reached a high of 21 percent among Latinx households in December 2020, compared to a national average of 14 percent. As of March 2021, 16.3 percent of Latinx households and 19 percent of Latinx households with children were experiencing food insufficiency compared to a national average of 8.8 percent and 11.2 percent respectively.¹⁸ This hardship has mental

FIGURE 2: Food Insecurity Rates During COVID-19 From the Census Household Pulse Survey, August 2020–March 2021



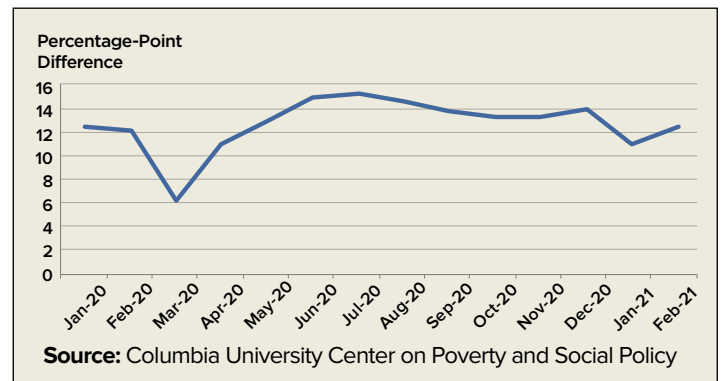
health consequences — in April and May, Latinx people were more likely to report poor mental health due to not having enough food or stable housing than adults in other racial and ethnic groups.¹⁹

Poverty: The passage of additional stimulus packages in December and January has not lowered poverty in the Latinx community to the same degree as the Black community. The Latinx-White disparity remained at 12 percent percentage points in February 2021, virtually unchanged from January 2020.²⁰ In March of 2021, 43 percent of Latinx adults sometimes or often had trouble paying usual household expenses, compared to 29 percent of adults overall.²¹ Latinx have been at higher risk of job loss during the pandemic due to disproportionate representation in hourly wage and gig jobs in industries such as the food sector, hospitality, and retail. Between February and April, Latinx employment fell by 18 percentage points compared to 12 percentage points for White employment.²²

Health: As of March 2, 2021, Latinx people represent 19.2 percent of all COVID-19 deaths despite representing 18.3 percent of the population. After adjusting for age, Latinx people have been 2.4 times as likely to have died of COVID-19 as White Americans.²³ Outbreaks in meat and poultry processing plants have disproportionately impacted Latinx communities.²⁴ In addition, as of March 2021, 17 percent of Latinx adults lacked health insurance compared to 7.4 percent nationwide.²⁵

Read more: [Food Over Fear: Overcoming Barriers to Connect Latinx Immigrant Families to Federal Nutrition and Food Programs](#)

FIGURE 3: Disparity in Poverty Rates Between Latinx and White Adults During COVID-19



Impact of the Federal Nutrition Programs

The federal nutrition programs reduce food insecurity, improve educational outcomes, improve physical and mental health, and promote economic stability.^{26,27} In addition, the programs are built around the core principle of decreasing stigma, including allowing for choice in SNAP, the use of electronic benefit cards, and the increase in community eligibility for school meals programs. These program features are key to promoting inclusivity and access among populations suffering disproportionately from hunger, poverty, poor health, and the impacts of COVID-19.

The chilling effect of Trump-era “public charge” regulations reduced participation in SNAP and in other nutrition programs not covered by the rule. The Biden administration permanently blocked the public charge rule on March 10, 2021, ensuring that immigrants would be able to access federal nutrition programs without fear of participation impacting their application for citizenship.²⁸

Gains in program access and benefit adequacy during COVID-19 provide important best practices for strengthening and expanding the federal nutrition programs. The Biden administration and Congress must continue to invest in these critical programs. In addition, FRAC supports a broad range of policies to address the root causes of hunger, poverty, and poor health. For current recommendations, see FRAC’s [Action Center page](#).

Want to learn more? This brief summarizes information from the report *COVID-19’s Impact on the Relationship Between Hunger, Poverty, and Health*. See [FRAC’s COVID-19 dashboard](#) for the full report and additional statistics on hunger during the pandemic.

Endnotes

- ¹ Food insecurity is the inability to acquire adequate nutritious food due to a lack of resources. Official estimates for food insecurity are measured through the Current Population Survey Food Security Supplement. Note, however, that official estimates for 2020 will not be available until September 2021. The Census Household Pulse Survey was developed to collect data quickly and frequently during COVID-19 and measures food insufficiency, which they define as “sometimes” or “often” not having enough to eat. Food insufficiency is more severe than food insecurity. See [Defining Food Insecurity and Measuring it During COVID-19](#) for more details.
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