City of Cambridge
Executive Department

YI-AN HUANG
City Manager

CMA 2026-313
IN CITY COUNCIL
November 9, 2026

To the Honorable, the City Council:

In response to Awaiting Report 26-41, which asked that the City Manager work with relevant departments and community organizations on food insecurity and related City policies, programs, and expenditures, I am writing to provide an update on the City's recent work.

Over the summer and fall, City staff met with advocates, Councillors, and community partners to review the community's food access work, including the work of the Cambridge Community Foundation's (CCF) Food Access and Security Initiative, which CCF has coordinated in partnership with the Food Pantry Network. Coming out of those conversations, we agreed to prioritize SNAP and MassHealth funding and support, where federal changes are creating the most immediate risk for Cambridge residents and where the City can add the most support. This response summarizes those conversations, the community-led work that frames them, and an update on the City's SNAP/MassHealth initiative.

Building on years of City support for organizations in the emergency food network, and on the recommendations of the Cambridge Food Action Plan, CCF launched the Food Access and Security Initiative in 2023 with $1.1 million in grants to eight projects over three years. It built on more than $810,000 in infrastructure support from state CDBG-CV (CARES Act) funds that bought trucks, freezers, storage equipment, technology, and staff time.

- **Activities:** pantry assessments and technical assistance, a community-led Neighbor Advisory Council of residents with lived experience of food insecurity, a leadership fellowship for food sector leaders, and cross-sector working groups.
- **Outcomes:** pantries increased hours, staffing, and distribution, reduced wait times, and moved toward choice-based models. Many partners now also offer SNAP enrollment help, health and housing referrals, and essential goods.
- **Examples:** East End House distributed more than 25,000 pounds of food in July 2025, a 100 percent increase over July 2024. Margaret Fuller Neighborhood House now distributes 3,000 diapers a month through a new partnership.

When the federal government shutdown suspended SNAP benefits in November 2025, the City and CCF committed a joint $500,000 in emergency support for food pantries and grocery store gift cards for SNAP recipients. Community partners developed a distribution plan for these gift cards in less than 48 hours.

A community meeting on November 13, 2025 led CCF, the City, and community partners to launch three working groups, each of which met at least twice between February and April 2026:

- **Preparing for SNAP work requirements and eligibility changes.** It recommended a plain-language communications toolkit and aligned referral pathways for partners. These recommendations fed directly into the current SNAP/MassHealth initiative.
- **Addressing the North Cambridge food access gap.** CEOC's North Cambridge pantry has been closed since December 2024, with an estimated 500 unique families previously served, and its permanent space in a CHA development is expected to open in 2027. The group explored interim sites, including a new pantry location, but concluded that reinforcing existing sites was the more cost-effective path: the monthly school market (150+ community members), Just Eats (120 boxes every other week at Fresh Pond Apartments), and the St. James Helping Hands pantry.
- **Communication and resource sharing.** It recommended redesigning the Food and Fitness Policy Council as a complement to the Food Pantry Network, establishing a regular information-sharing mechanism with the City Council, and requesting more funding to expand the Food Pantry Network.

The Policy Order notes a SNAP enrollment gap of nearly 48 percent, with roughly 7,000 Cambridge residents likely eligible but unenrolled. Federal changes are widening that gap and extending it to health coverage:

- SNAP work requirements have expanded, immigrant eligibility has narrowed, and administrative costs are shifting to states.
- In October 2026, MassHealth began terminating coverage for immigrants who are no longer eligible. MassHealth work requirements and six-month renewals begin in January 2027.
- The Mass Law Reform Institute estimates that 80 to 90 percent of people subject to SNAP work requirements should be exempt, so the main barrier is paperwork and reaching DTA rather than eligibility.

This is the gap that hands-on application assistance can close, and it is where the City and its partners are focusing its efforts.

On September 8, 2026, the City convened partners across Cambridge to coordinate the SNAP/MassHealth response. The partnership is anchored by the City, CCF, and the Cambridge Economic Opportunity Committee (CEOC), and it includes more than 30 community-based organizations that meet through an ongoing Community of Practice. Progress to date:

- **Direct assistance:** in October, CEOC helped 172 residents with SNAP or health insurance (104 for health insurance, 66 for SNAP, and 2 for both).
- **Outreach:** 31 outreach events are scheduled between September 23 and December 2, and 14 have already taken place.
- **Public campaign:** launched in mid-October with a dedicated website, flyers in English and 13 other languages, and a communications toolkit for partners.
- **Training:** 6 provider trainings have been completed, including a kickoff webinar with 170 people registered.

Next steps. A second wave of outreach will launch in January 2027 as MassHealth changes take effect and partners will continue to reassess the support residents need as the federal landscape changes.

Very truly yours,



Yi-An Huang
City Manager

CITY OF CAMBRIDGE

SNAP / Medicaid Convening

City Manager's Office

September 8, 2026

Agenda

- Welcome
- The Landscape: SNAP and MassHealth
- Partnership Model Proposal
- Small-Group Breakouts
- Next Steps

Today's CoHosts



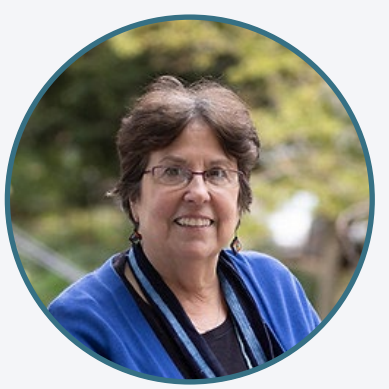
Yi-An Huang

City Manager,
City of Cambridge



Christina Turner

Vice President of Programs and Grantmaking, CCF



Tina Alu

Executive Director,
CEOC

Today's Attendees: 50+ individuals from 20 organizations

































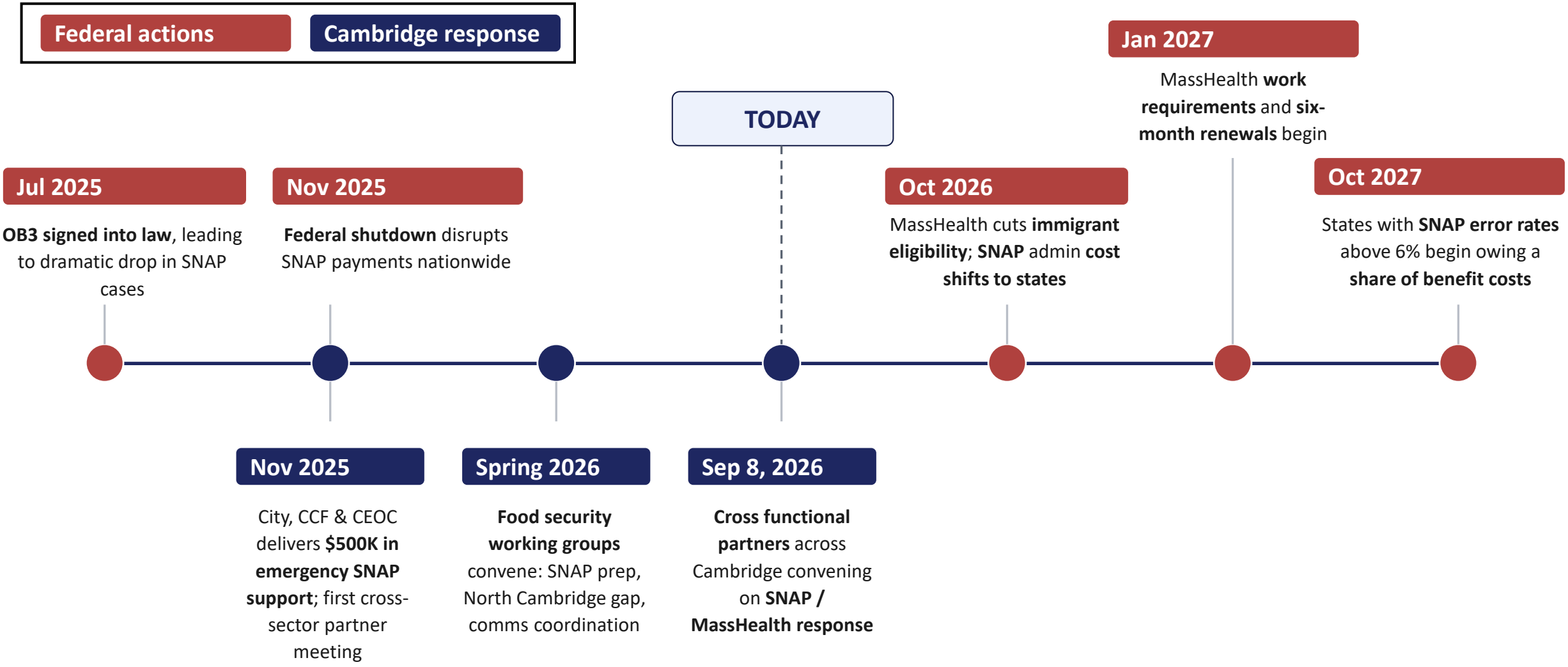








Cambridge and community partners responded quickly to the government shutdown in Nov 2025; partnership is needed again to combat ongoing OB3 impacts

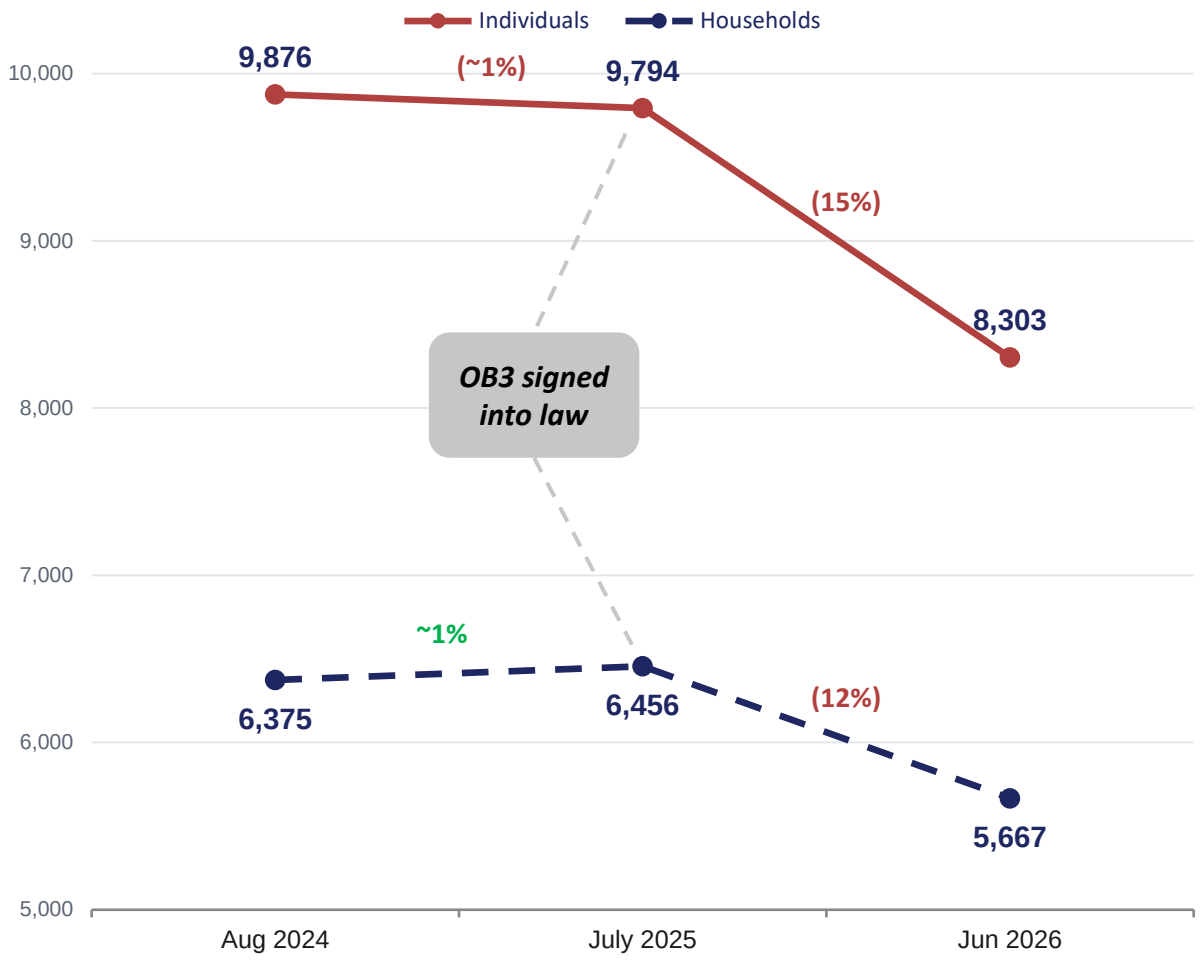


Agenda

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- **The Landscape: SNAP and MassHealth**
- Partnership Model Proposal
- Small-Group Breakouts
- Next Steps

Cambridge SNAP enrollment has fallen by ~15% since July 2025; many of the individuals who lost coverage are denied for procedural reasons

Cambridge SNAP Enrollment – Individuals & Households



WHAT'S CHANGED

For Recipients

- **Work requirements** now apply to adults up to age 64 (up from 54), and newly include parents of kids 14+ [2]
- **Immigrant eligibility** narrowed - refugees, asylees, and other previously-eligible groups no longer qualify [3]

For States

- **Federal reimbursement** for SNAP admin costs drops from 50% to 25% starting Oct 2026 [4]
- If the state's **payment error rate** isn't brought under a new 6% threshold, Massachusetts will owe a share of SNAP benefit costs [5]
- **DTA SNAP case-to-worker ratio** has increased dramatically since Covid [6]

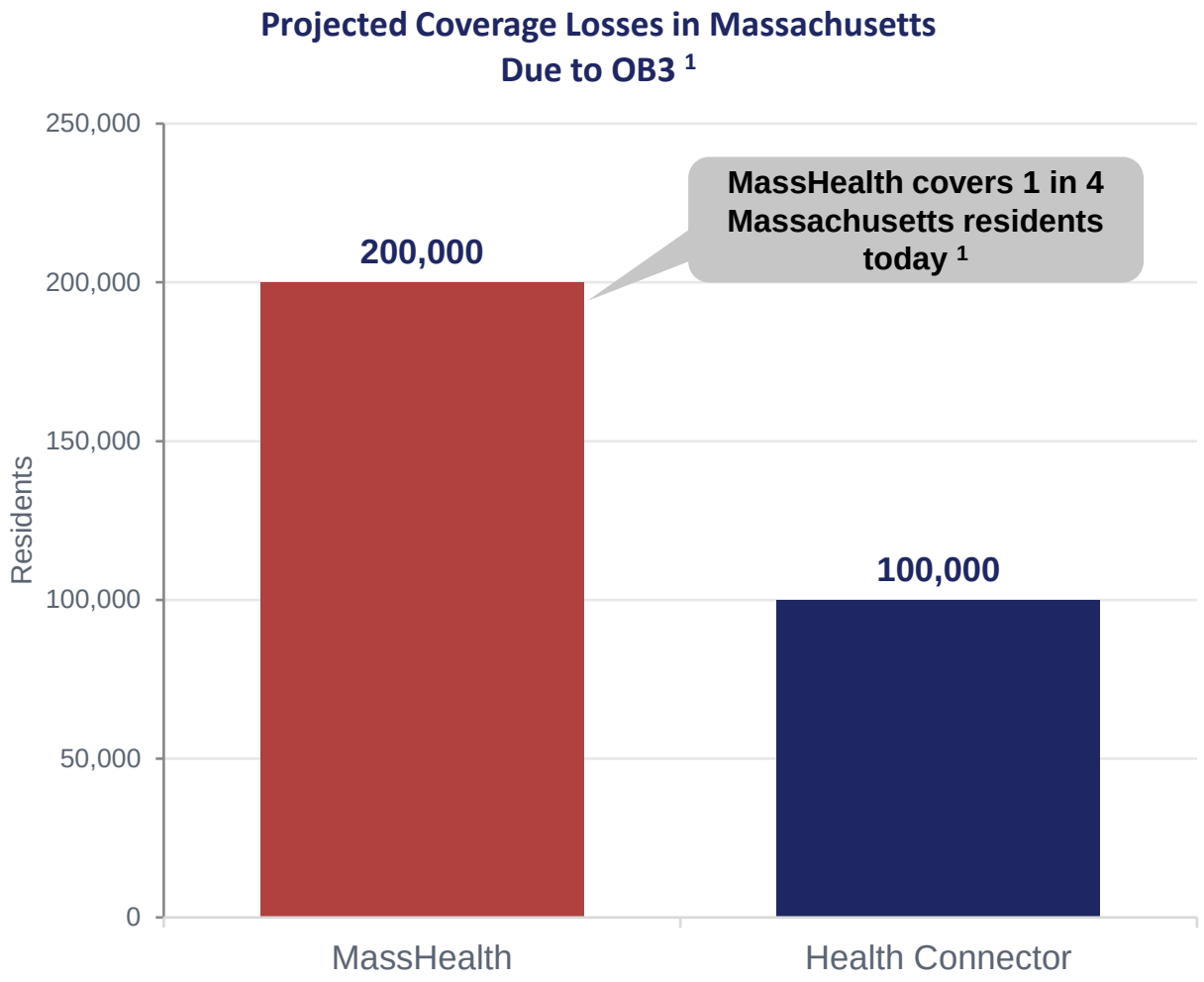
IMPACT

77% of **DTA calls are disconnected** before a caseworker is free to answer [6]

70% of **application denials** and 50% of Recertifications were **denied SNAP for procedural reasons** [6]

Sources: 1 Massachusetts Law Reform Institute (MLRI) analysis of DTA SNAP caseload data by city/town, data as of June 2026; 2 USDA Food and Nutrition Service, SNAP Provisions of the One Big Beautiful Bill Act of 2025: ABAWD Exceptions – Implementation Memorandum; 3 USDA Food and Nutrition Service, Section 10108 implementation guidance, "Alien SNAP Eligibility"; 4 USDA FNA, Proposed Rule: SNAP Changes in Federal-State Administrative Cost Sharing; 5 One Big Beautiful Bill Act (P.L. 119-21), Section 10105 — "Matching Funds Requirements"; 6 Massachusetts Law Reform Institute (MLRI), "SNAP: Severe Access Barriers, Harm to MA"

MassHealth recipients are expected to experience similar administrative hurdles, with up to ~200K current members potentially losing coverage in January 2027



WHAT'S CHANGED

For Recipients

- **Work requirements** begin Jan 1, 2027: adults 19-64 without young children must show 80 hrs/month of work, school, or volunteering [2]
- **Immigrant eligibility** narrowed beginning Oct 1, 2026: refugees, asylees, and other previously-eligible groups no longer qualify [2]

For States

- **Eligibility renewals shift from annual to every six months**, doubling the paperwork burden [2]

IMPACT

141K–203K

MassHealth members could **lose coverage** from work requirements and six-month renewals alone, starting Jan 2027 [2]

90%

of adult Medicaid enrollees are **already working or would be exempt** from a work requirement [3]

Sources: 1 Blue Cross Massachusetts Foundation Call to Action: Solutions to Confront Pressing Health Care System Challenges; 2 Blue Cross Massachusetts Foundation "One Big Beautiful Bill" Act (OB3): Key Health Care Provisions and Impacts in Massachusetts; 3 Center on Budget and Policy Priorities "Medicaid Work Requirements Will Harm Low-Paid Workers"

The Cambridge economy has already lost ~$3M in annual SNAP benefits, with tens of millions more at risk from future MassHealth changes

SNAP ECONOMIC IMPACT

~$2.95M

in annualized federal SNAP dollars lost to Cambridge [1]

789

fewer Cambridge Households enrolled in SNAP [1]

×

~$3,744

Average per-household SNAP benefit per year [1]

MASSHEALTH ECONOMIC IMPACT

~$28.8M

in annualized federal MassHealth dollars lost to Cambridge [2]

~2,400

Cambridge residents at risk of losing MassHealth benefits [2]

×

~$12,000

Average MassHealth spend per enrollee per year [2]

IMPACT TO FAMILIES BY DOLLARS LOST

- Hard **tradeoffs** between **food, rent, utilities** and **medicine**
- **Skipped meals** or **less nutritious** food

IMPACT TO INDIVIDUALS BY DOLLARS LOST

- **Delayed** or **skipped preventive care** and routine screenings
- **Unmanaged chronic conditions** without steady access to care or medication

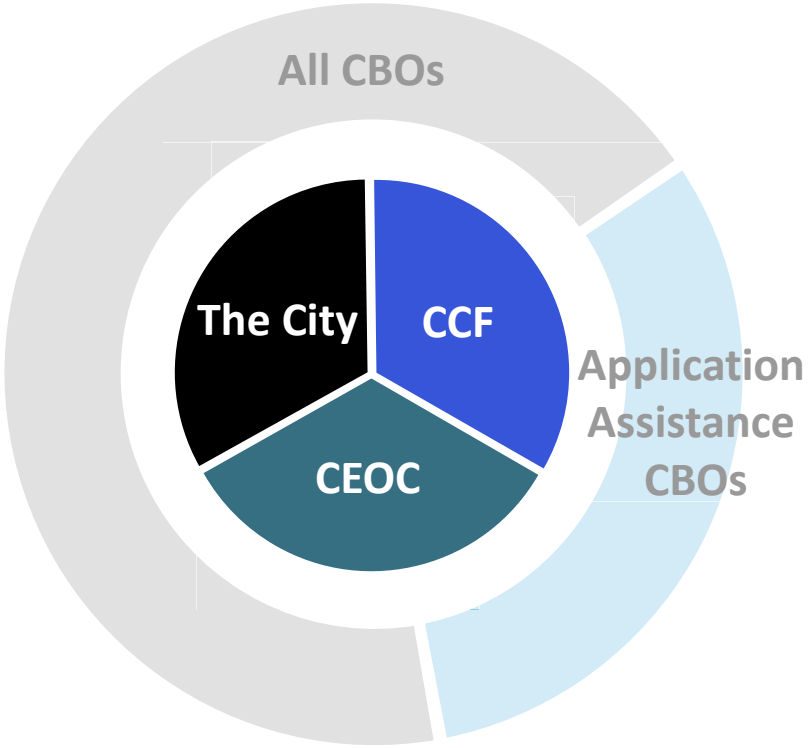
Sources: 1 *MLRI analysis of DTA SNAP caseload data. Calculated as caseload decline × average per-household SNAP benefit × 12 months; 2 Statewide 141K–203K residents at-risk of losing MassHealth × Cambridge population share (1.7%) × MA Medicaid avg. spend/enrollee (USAFacts: https://usafacts.org/answers/how-much-does-medicaid-cost-in-the-us/state/massachusetts/)*

Agenda

- Welcome
- The Landscape: SNAP and MassHealth
- **Partnership Model Proposal**
- Small-Group Breakouts
- Next Steps

The City and CCF will provide resources to support program implementation across app assistance, outreach, and training; CEOC directly supports CBOs and residents

LEADERSHIP TEAM



City of Cambridge

- Manage **creation** and **distribution of communications content**

CCF

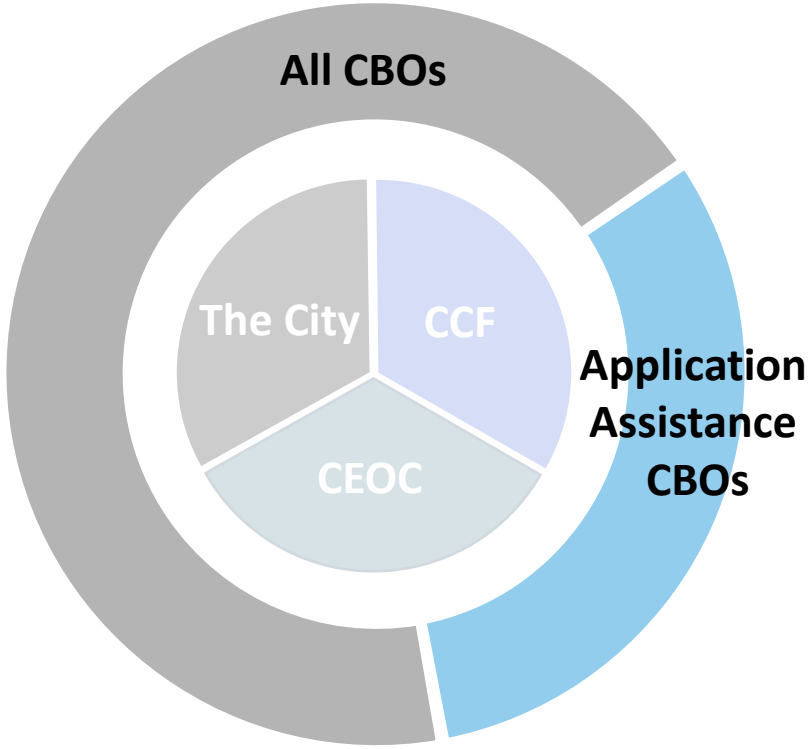
- Jointly with the City, **provide funding** for the implementation of program components which may include support for:
  - **Providers already providing SNAP / MassHealth application assistance**
  - Increased **outreach efforts**
  - Participating in **trainings**, or engaging in the **Community of Practice**

CEOC

- **Train service staff of CBOs** to provide baseline level of assistance
- **Directly support residents** with SNAP and MassHealth, capitalizing on **specialized access to DTA and MassHealth** back end
- Provide **technical assistance** and **guidance** through a Community of Practice
- Provide regular **updates** on **federal changes**, **eligibility rules**, and **trends**

CBO partners have a menu of options through which they can choose to participate, supported by a Community of Practice to address challenges

OPPORTUNITIES FOR INVOLVEMENT



Community of Practice

All CBOs

- **Host events** where **you're doing direct outreach** to participants about SNAP/MassHealth
- **Host events** where **CEOC could do direct outreach** to participants about SNAP/MassHealth and do on-site application assistance
- Have staff **participate in training** on advocacy tips and changing federal rules
- Make **direct referrals to CEOC** and get updates on the case status of your referrals
- **Get the message out** via your communications channels, including through your newsletter, social media, etc.
- **Post flyers** and/or **posters** for visibility

Application Assistance CBOs

- **Resolve straightforward cases** directly
- Make **referrals to CEOC** for complex cases

Community of Practice

- Participating CBO staff that **meet on a recurring basis** to discuss **issues**, **barriers to outreach**, **trends**, and **capacity constraints**
- Forum to **share best practices** that will also be distributed via email blast to all partners

The City will create communications content for CBO partners to use and share

MARKETING MATERIALS

…including:

- **social media graphics**
- **text/messaging** for your newsletter or website
- **translated flyers**



EMAIL UPDATES

…with **SNAP/MassHealth updates**, guidance, trends, and **best practices**



CITY-HOSTED, PUBLIC-FACING WEBPAGE

…with resources for **SNAP/MassHealth recipients**, regular **updates on federal changes** and where residents can find help



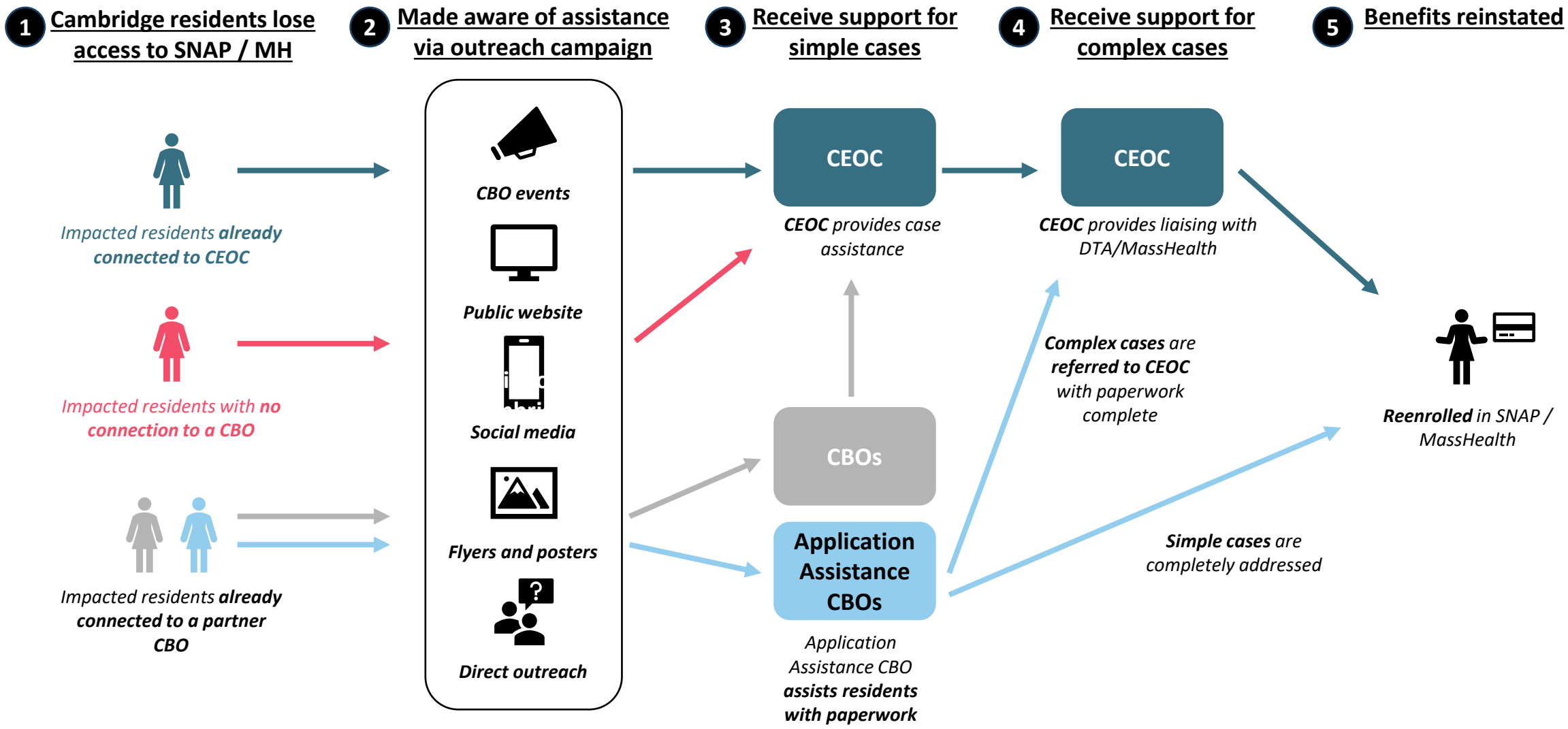
DIRECT REFERRAL PATHWAY

…to **track** and **process referrals** and **client status** over time as residents move between CBO partners and CEOC



SINGLE POINT OF CONTACT FOR QUESTIONS / REFERRALS: snapmasshealth@ceoccambridge.org

The proposed model would leverage outreach to guide residents to the right touch point; CBO partners will resolve simple cases and refer more complex cases to CEOC



Example Flow #1 |Impacted resident with no prior connection to a CBO is made aware of SNAP / MH support via outreach campaign

1 Cambridge resident loses access to SNAP / MH

2 Made aware of assistance via flyer / poster

3 Resident contacts CEOC

4 CEOC assigns them to a staff member



5 CEOC staff member works on resident case

6 Benefits reinstated



Support includes:
- ***submitting documents on the person's behalf***
- ***reapplying for SNAP / MH***
- ***contacting DTA / MassHealth***

Reenrolled *in SNAP / MassHealth*

Example Flow #2 |Non-application assistance CBO refers impacted resident to CEOC for support

1 **Cambridge resident loses access to SNAP / MH**



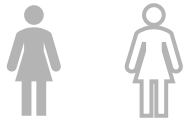
Impacted resident already ***connected to non-application assistance CBO***

2 **CBO made aware of lost benefits due to pre-existing relationship**

CBOs

3 **CBO helps resident fill out release form**

PSI in case of SNAP
NDF in case of MassHealth



Resident ***CBO staff***

4 **CBO refers resident to CEOC with release form**

Referral made via Smartsheet

CEOC

CEOC evaluates complexity of individual case

5 **If SIMPLE, CEOC will resolve case via phone call with resident**



Simple cases include:

- ***Needing to submit a document***
- ***Needing to get an interview scheduled***

6 **If COMPLEX, CEOC will book an appointment directly with resident**



Complex cases include:

- ***Counseling on work requirements***
- ***Changed immigration status***

7 **Benefits reinstated**



Reenrolled *in SNAP / MassHealth*

Example Flow #3 |Application assistance CBO owns the case of impacted resident with support from CEOC

1 **Cambridge resident learns they are at risk of losing benefits**

Social media

Impacted resident already ***connected to application assistance CBO***

2 **Resident visits application assistance CBO**

Application Assistance CBOs

3 **CBO evaluates notices to diagnose the problem**

Resident ***CBO staff***

4 **If SIMPLE, CBO resolves case independently**

Simple cases include:

- ***Uploading a document***
- ***Help resident understand a recent notice***

5 **If COMPLEX, CBO sends a release and referral to CEOC**

CEOC

Referral made via Smartsheet

6 **CEOC goes into backend of DTA / MH, then resolves issue with DTA / MH contact**

CEOC ***DTA / MH system***

CEOC ***DTA / MH liaison***

7 **CEOC relays info back to CBO, then CBO resolves case**

CEOC may never have interaction with the client when CBO owns the case

8 **Benefits reinstated**

Reenrolled *in SNAP / MassHealth*

Agenda

- Welcome
- The Landscape: SNAP and MassHealth
- Partnership Model Proposal
- **Small-Group Breakouts**
- Next Steps

Small-Group Breakout Instructions

In your group, discuss the following three questions:

1. **Where would your organization fit in this model and what would it take for you to do more?** — ~8 min
2. **What feedback do you have for the proposed partnership model?** — ~8 min
3. **What questions do you still have?** — ~8 min

✎ **Please designate one person in your group to take notes** — we'll ask each group to report back on common themes.

QUESTION 1 OF 3

~8 min

1

Where would your organization fit in this model and what would it take for you to do more?

QUESTION 2 OF 3

~8 min

2

What feedback do you have for the proposed partnership model?

QUESTION 3 OF 3

~8 min

3

What questions do you still have?

~20 min



What We Heard

Each group: share your key takeaways

~10 min



Q & A

Agenda

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- **Next Steps**

Successful implementation includes a fully operational partnership within 100 days and SNAP/MH reenrollment numbers responding positively by Spring 2027

	CONVENE AND ALIGN	BUILD INFRASTRUCTURE	TRAIN AND LAUNCH	OUTREACH AND ENROLLMENT
	Sep 8 – Late Sep	***Late Sep – Mid Oct***	***Mid Oct – Late Dec***	***Late Dec – Ongoing***
KEY MILESTONES	• Hold **kickoff meeting** • **Incorporate feedback** from kickoff meeting • **Confirm all partners** and degree of involvement • **Align on roles** across City, CEOC, and CBO partners	• Stand up **data tracking / referral system** (Smartsheet) • Finalize **comms channels** and **materials**	• Deliver **CEOC-led training** to CBO partners • **Launch outreach campaign** (events, direct outreach, public channels) • Go **live with referral pathway**	• **Sustained outreach** across all 3 resident segments

Next Steps

~5 min

Please scan the QR codes below to fill out the feedback and partnership involvement forms

Feedback Form



Complete by

Today

Partnership Involvement Form



Complete by

September 18

Thank You!

CEOC Contact Info

snapmasshealth@ceoccambridge.org

(617) 868-2900 x328



Cambridge Community Foundation

FOOD ACCESS AND SECURITY INITIATIVE

BACKGROUND

In 2023, the Foundation launched the Food Access and Security Initiative, with an initial $1.1 million grantmaking investment in eight projects over three years. It was the first initiative of a five-year strategic plan. The initiative invested in nonprofit organizations and collaborative efforts to strengthen the Cambridge food system—with a specific focus on addressing the needs of the emergency food system, activating recommendations from the 2022 Cambridge Food Action Plan, and responding to increasing food insecurity post-pandemic throughout Massachusetts.

In phase one, the initiative supported: more effective sector and cross-sector communication and collaboration; program sustainability and expansion; and capacity building for better service delivery.

The initiative also built on the Foundation's more than $810,000 in infrastructure support made possible with grant funds from Massachusetts CDBG CV (CARES ACT—federal emergency COVID-19 funding). Infrastructure grants allowed for the purchase of trucks, freezer units, storage equipment, technology upgrades, and staff time.

"The commercial refrigerator changed the game—thousands more pounds of food have meant more people served, healthier communities."

THE FIRST THREE YEARS—PHASE ONE

Activities

- Relationship and trust building across the sector
- Pantry assessments and technical assistance to pilot new models and improve services
- Formation of the Neighbor Advisory Council
- New Sector Leadership Fellowship for food sector leaders
- Collective emergency SNAP response
- SNAP response working groups and recommendations

Phase One Outcomes

Since its launch, the initiative has strengthened Cambridge's emergency food system by expanding capacity, improving service delivery, and deepening collaboration among partners. Organizations increased pantry hours, staffing, and distribution volumes, reduced wait times, and expanded access to healthy, culturally appropriate food. Many pantries transitioned to or enhanced choice-based models, promoting dignity and better meeting community preferences. Partners also evolved beyond food distribution into resource hubs, integrating wrap-around services such as SNAP enrollment, health supports, housing referrals, and essential goods like diapers.

"The fact that the same people are still in this group that started three years ago is a testament to the program's success. It's a sector with a lot of turnover but the capacity that exists is still there and still building."

At the system level, trust, coordination, and collaboration grew through regular convenings, peer learning, and site visits, leading to adoption of best practices and measurable improvements in operational capacity, including a documented increase in capacity through the training and technical assistance provided by More than Food Consulting, which provides services and conducts research to encourage better practices to approaching food insecurity. The Neighbor Advisory Council, a community-led council to empower residents with lived experience in food security, was also formed. The council has provided feedback on pantry operations, directly shaping service improvements, reducing lines, and ensuring clients receive food with dignity.



The system-wide trust and relationship building gained through the initiative also enabled a quick and comprehensive response to the SNAP freeze in November 2025, allowing for the development of a distribution plan of half a million dollars to SNAP families in less than 48 hours.

"Our first year was about social cohesion and trust-building, providing feedback to food pantries, and now we are building beyond that—thinking about collective fundraising, data, and communication with city councilors."

FOOD SECURITY—PHASE TWO

Even with the tremendous amount of work that has already been accomplished, food insecurity is broader and more sustained than before. Demand is rising, patrons are coming more frequently, and food need is increasingly tied to other pressures like housing, medical, and daily living costs.

The second phase of the food security initiative will build on relationships with trusted partners in the Cambridge food system and continue work already started. **We will provide multi-year funding for the following purposes:**

- **Capacity Building.** Collective fundraising, communication and information sharing mechanisms; and infrastructure support.
- **Sector Collaboration.** Exploration and implementation of shared data collection tools, expansion of Neighbor Advisory Council, standardizing/streamlining communication processes across the network.
- **Program Sustainability.** Ongoing general support for hub organizations, small community-based pantries, and ecosystem organizations.

"We have passion and commitment, but our individual organizations may not have infrastructure to do the work alone. We need to work together."



GRANT FUNDING GOAL FOR PHASE TWO: $1,575,000

	YEAR ONE	YEAR TWO	YEAR THREE
Hub organizations	$240,000	$240,000	$240,000
Ecosystem organizations	$125,000	$125,000	$125,000
Community-based pantries	$25,000	$25,000	$25,000
Collaborative work	$135,000	$135,000	$135,000
TOTAL	$525,000	$525,000	$525,000

"The face of hunger is changing. The image that people have is no longer or was never relevant."



MAKING GOOD ✳

Food Access and Security Initiative

Cambridge
Community Foundation

CCF'S STRATEGIC DIRECTION



1

ECONOMIC MOBILITY



2

SOCIAL COHESION

Cambridge
Community Foundation

ECONOMIC MOBILITY AND FOOD SECURITY



1

ECONOMIC MOBILITY

Economic Mobility refers to one's ability to have power and autonomy over their standard of living, because of their income, assets, and social connections. **Economic stability** is defined by the Economic Policy Institute as "the income a family needs in order to attain a modest yet adequate standard of living", a crucial step in achieving economic mobility. For a Cambridge family of four, that equates to more than 500% of the Federal Poverty Line, $153,000 based on EPI's 2023 data. **Food security can play a significant role in building economic stability by improving the standard of living for individuals and families on their path to achieving economic mobility.**

Cambridge Community Foundation



FOOD ACCESS AND SECURITY

In 2023, the foundation launched **The Food Access and Security Initiative**, with an initial **$1.1 million** grantmaking investment to 8 projects over three years. It was the first initiative of our new 5-year strategic plan.

The initiative built on the Foundation's more than $810,000 in infrastructure support made possible with grant funds from Massachusetts CDBG CV (CARES ACT). Infrastructure grants purchased trucks, freezer units, storage equipment, technology upgrades, and staff time.

Initiative Goals

- **Sector Collaboration and Communication** |More effective sector and cross sector relationships, more frequent information and knowledge sharing
- **Program Sustainability and Expansion** |Appropriate staffing and resources to execute work as intended
- **Capacity Building**| Better service delivery, increased operational abilities

The Evolution of Community Needs

2020-2023	Investments in food system infrastructure
2021	Increased MA Food Insecurity
2022	Cambridge Food Action Plan
2023	End of SNAP COVID payments

Cambridge Community Foundation

THE FIRST 3 YEARS

ACTIVITIES

- Relationship and trust building across the sector
- Pantry assessments and technical assistance facilitated by **More than Food Consulting,** which provides services and conducts research to encourage better practices to approaching food insecurity, to pilot new models and improve service
- Formation of the **Neighbor Advisory Council,** a community-led council to empower residents with lived experience in food security
- **New Sector Leadership Fellowship** or food sector leaders, a cohort-based program that integrates leadership development for mission-driven professionals.
- Collective emergency SNAP response, cross-sector working groups, and evolution of the food and fitness policy council

COLLECTIVE OUTCOMES

- Pantry partners are collaborating more closely, and cross-organization trust and coordination have significantly improved.
- **The Neighbor Advisory Council (NAC)** is working extremely well and is starting to expand its scope – thinking about data collection and policy advocacy
- Partners have started to expand access to other services - hygiene access, referrals, SNAP support, healthcare connections, etc.
- Partners have improved the quality of their food programs, serving more patrons in more people-centered, and thoughtful ways

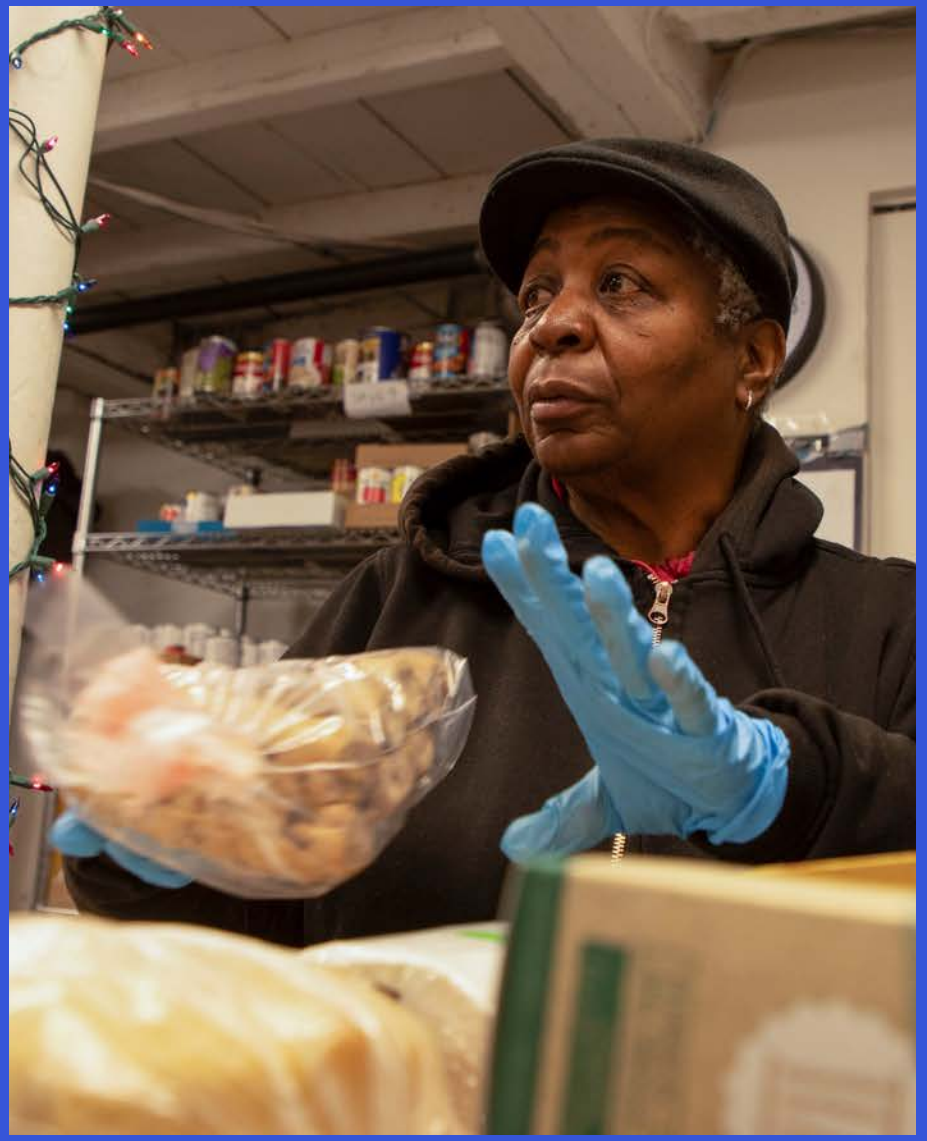


“The fact that the same people are still in this group that started three years ago is a testament to the program’s success. It’s a sector with a lot of turnover but the capacity that exists is still there and still building.”

“The commercial refrigerator at EEH changed the game – thousands more pounds of food has meant more people served, healthier communities.”

“Rachel’s work to build the food pantry network and neighbor advisory council is such a success– something clicked to forward the work to another level.”

“Our first year was about social cohesion and trust building, providing feedback to food pantries, and now we are building beyond that – thinking about collective fundraising, data, and communication with city councilors.”



SAMPLE PARTNER OUTCOMES

East End House increased its food ordering, rescue, and distribution by almost a third and doubled the number of fresh-perishable items available thanks to infrastructure improvements. In July 2025, they distributed 25,000+ lbs. of food, a 100% increase from July 2024.

Through best practice sharing through work with More than Food Consultants, **Cambridge Community Center** adopted a new a randomized number system to shorten lines and wait times. The system transformed both the experience and efficiency of going to the pantry.

At **Margaret Fuller Neighborhood House,** a new collaboration with Beantown Baby Diaper Bank enables the distribution of 3,000 diapers per month, addressing holistic family needs and expanding support beyond food access. They also implemented the use of a barcode system for patron cards, streamlining check-in, improving staff workflows, and boosting analytical capacity for demand tracking and planning.





SHAPING THE NEXT PHASE

The Continued Need

Food insecurity is broader and more sustained than before.
Demand is rising, patrons are coming more frequently, and food need is increasingly tied to other pressures like housing, medical, and daily living costs.

- **Capacity Building |** Collective fundraising, communication and information sharing mechanisms. Infrastructure support.
- **Sector Collaboration |** Exploration and implementation of shared data collection tools, expansion of Neighbor Advisory Council, standardizing/streamlining communication processes across the network.
- **Program Sustainability |** Ongoing general support for food hubs, small community-based pantries, and supporting ecosystem organizations.

"The face of hunger is changing. The image that people have is no longer or was never relevant."

POTENTIAL GRANT FUNDING FOR PHASE TWO

$1,575,000

	Year 1	Year 2	Year 3
Hub Orgs	$240,000	$240,000	$240,000
Ecosystem Orgs	$125,000	$125,000	$125,000
Community-based orgs	$25,000	$25,000	$25,000
Collaborative Work	$135,000	$135,000	$135,000
Total	$525,000	$525,000	$525,000

"We have passion and commitment, but our individual orgs may not have infrastructure to do the work. We need to work together."

Capacity Building

Collective fundraising, communication and information sharing mechanisms. Infrastructure support.

Sector Collaboration

Exploration and implementation of shared data collection tools, expansion of Neighbor Advisory Council, standardizing/streamlining communication processes across the network.

Program Sustainability

Ongoing general support for food hubs, small community-based pantries, and supporting organizations.

NEXT STEPS

October 2026

- Final convening of phase 1 – October 14, 2026
- Final grantee reflections
- Evaluation interviews

November 2026

- Evaluation interviews
- Report draft

December 2026

- Evaluation and final report complete

January – March 2027

- Finalize second phase goals, funding, and partners
- Applications, grantmaking, and onboarding
- First convening of phase 2

