## Everett Maroon

**Candidate for Washington State House of Representatives, District 16, Position 1 (Walla Walla)**

### If elected, what will you do to end hunger, alleviate poverty, and create opportunity in Washington state?

First, I want to bring single-payer health care to WA State and eliminate the potential for unexpected health care costs or bankruptcies that destroy financial stability for low-wage earners and middle class earners. I want to fund free college tuition and give young adults a significant support for entering the workforce with good paying jobs, and I support a statewide minimum wage that will be tied to inflation. For retirees who are food insecure, I want to revamp the pension and retirement plans in the state so that they have a more stable, cost-of-living associated income instead of losing their buying power as costs go up. I would like to rethink how we supply low income housing and help people stabilize their housing so that they can focus on other things like good nutrition.

### In Washington, 1 in 5 children experience food insecurity. What steps or legislative actions would you take to address child poverty and hunger?

We need to expand support for existing food programs across the state, using a public-private partnership. We need to support school food programs and increase their funding. And we’ve for too long let conservatives chip away at social safety net programs like TANF and CHIP -- so at the state level we have to come in and shore up supplemental programs.

### Food insecurity is a major contributor to poor health and higher healthcare costs, what steps or legislative actions would you take to help food insecure people with chronic diseases, like diabetes, have access to nutritious food?

I run a Ryan White Part B program for people living with HIV/AIDS and we have our own pantry of food staples. We also do a monthly food basket of around fifty pounds of groceries for our clients, and we support nutritional drinks for people who are underweight or who have malabsorption issues. But this works in an existing infrastructure around PLWHA, and that is not really in place for diabetes patients -- so for these individuals I would recommend enhanced food program fund balances so people can buy nutritious food on their own, I would support expansions of programs like meals on wheels, and I would support retail incentives to get more grocery outlets to work with these programs at a price reduction for program participating individuals.