THE IMPACT OF SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) BENEFITS ON FOOD SECURITY

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Issue

- Participants in the Supplemental Nutrition Assistance Program (SNAP) program make poor food choices thus increasing the chances of developing obesity and Type 2 Diabetes
Proposed Changes to SNAP

- Restrict purchase of certain foods
Impact

- Access – poor people may not have access to ‘healthier’ foods
- Cost – SNAP benefits will not stretch as far
- Cost – restrictions will put a burden grocery stores to manage the restrictions

Restrictions will further increase food insecurities and will appear as discrimination against recipients
SNAP

- 46 million people – $78 B (2011)
  - Average $138 per month
- Nearly half of SNAP participants are children
- About 41% of SNAP participants live in working households
- SNAP benefits moved 13% households above the poverty line in 2010
SNAP

- SNAP significantly reduces the depth and severity of child poverty
- Half of all new SNAP participants leave the program within 10 months

![Safety Net Programs Keep Millions out of Poverty](chart.png)

Source: CBPP analysis of Census Bureau data.
SNAP-Eligible Foods

- Breads and cereals
- Fruits and vegetables
- Cheese, milk and other dairy products
- Meats, fish, poultry and eggs
- Snack foods and soft drinks
- Most other food items that are not prepared hot foods
- Seeds and plants that produce food

Not covered:
- Liquor
- Cigarettes
- Imported foods (ban was lifted in 1973)
SNAP BENEFITS AND OBESITY – IS THERE A CORRELATION?
USDA Economic Research Service

- Are SNAP participants more obese as compared to the general population?

- Conclusion
  - No difference
  - Non-elderly females had a 2.5% increased rate for short term participation
  - 4.5-10% for long term participation
Southern Economic Journal

- Found that food stamps correlate with a positive rate of obesity in females
- Conclusion - The rate is very small
  - Accounts for 0.5% of the increase in obesity since the mid 1970s
Public Health Nutrition (2011)

- Increased prevalence of obesity
- SNAP participants – 30%
  - Male > Females
- Supplemental Security (SSI) recipients
  - 50% higher prevalence independent of food insecurity
Found increases in prevalence of obesity are not limited to nor typically highest among the poor.

Gender and race played a role regardless of income.

SNAP is not the obesity culprit.

Used the National Health and Nutritional Examination Surveys (NHANES 1972-2002)
Wisconsin’s Plan to Implement Restrictions

Require that 2/3 of all purchases be foods approved for Woman, Infants and Children (WIC) program
- Beef
- Pork
- Chicken
- Fish
- Fresh produce
- White potatoes

Opposed: Democrats
- Bill will stigmatize participants
- Will cost millions of dollars to add “food police”
‘Pro’ Restrictions

- Some tax payers
Anti-Restrictions

- The American Beverage Association
  - discrimination to restrict food choices
- The Grocery Manufacturers Association
  - no evidence that restricting what people buy will affect their purchases or increase produce purchases.
Anti-Restrictions: USDA

- No clear standards to define foods as healthy or unhealthy
- Pose major implementation challenges and increase program complexity and costs
- Restrictions may not change the nature of participants’ food purchases
- No evidence exists to indicate that food stamp benefits directly contribute to poor food choices and negative dietary outcomes, such as obesity
Recommendations

Form a task force to strengthen SNAP’s role in improving health outcomes without creating unnecessary challenges for program beneficiaries.

Consider
- increasing program participation
- increasing SNAP benefits
- and increasing access to healthy, affordable foods
Special thanks

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References

References


References


References

- USDA – Food and Nutrition Service, March 1, 2007