

RESEARCH BRIEF

A Brief Review of Strategies to Bolster SNAP's Role in Improving Nutrition as well as Food Security



Introduction

The Supplemental Nutrition Assistance Program (SNAP), formerly the Food Stamp Program, is a profoundly important program for tens of millions of low-income people, boosting food security and with well-documented benefits to child and adult health and well-being as well as the economy.

Much discussion has centered on whether SNAP can play a bigger role in improving nutrition and fighting obesity without harming its other positive outcomes. This brief provides SNAP background information; highlights research on SNAP's role in dietary quality, obesity, and other health outcomes; reviews several promising strategies to further promote healthy eating and address obesity in SNAP; and describes why restricting food choice in SNAP, as some have proposed, is a flawed strategy.

SNAP Background

SNAP is the largest nutrition assistance program administered by the U.S. Department of Agriculture (USDA) and the first line of defense against hunger and undernutrition in the nation. According to the latest figures, more than 43.2 million Americans — or approximately 1 in 7 Americans — participate in SNAP. Nonetheless, approximately one in six people eligible for SNAP go unserved.

Among those participating in the program, most are children, elderly persons, or disabled individuals. Furthermore, SNAP recipients are diverse with regards to race-ethnicity, many have earned income, and the vast majority of SNAP households do

not receive cash welfare benefits. Half of SNAP participants entering the program are enrolled 12 months or less. In FY2015, the average monthly benefit per household was \$254.

Impact of SNAP Participation on Nutrition, Obesity, and Health

Research shows that SNAP plays a critical role in improving dietary intake, protecting against obesity, reducing food insecurity, and improving other nutrition-related and health outcomes. For example:

- Each additional SNAP dollar increases a household's score for overall dietary quality.

- SNAP participation is associated with better dietary quality among those low-income adults who are food insecure.
- SNAP reduces rates of childhood food insecurity, obesity, and poor general health.
- A larger amount of SNAP dollars received in the previous month is associated with significantly lower BMI and waist circumference among women reporting SNAP benefit levels.
- Exposure to SNAP in utero or in early childhood reduces the incidence of metabolic syndrome in adulthood and, for women, increases economic self-sufficiency.
- The temporary increase in SNAP benefit levels from the American Recovery and Reinvestment Act (ARRA) of 2009 helped reduce food insecurity by 2.2 percentage points and very low food insecurity by 2.0 percentage points among low-income households.
- Inpatient Medicaid cost growth significantly declined in Massachusetts after the ARRA benefit increase, especially among people with chronic illnesses.

Next Steps: Promising Strategies to Further Promote Healthy Eating and Address Obesity among SNAP Participants

There are steps that can strengthen SNAP's role in improving dietary quality and health outcomes, and lessening obesity as well as food insecurity.

- Increase participation in SNAP.
- Improve SNAP benefit levels so people can afford adequate diets, including healthier foods.
- Promote fruit and vegetable purchases with SNAP benefits.
- Support SNAP use at farmers' markets, in Community Supported Agriculture (CSA), and other farm-to-consumer venues.
- Enhance SNAP Nutrition Education.
- Increase access to healthy, affordable foods in underserved communities.

The Wrong Path Forward: Restricting Food Choice in SNAP

Some have suggested that restricting SNAP consumers' choice might improve dietary intake and combat obesity among low-income people. There are many problems with the rationale, practicality, and potential

effectiveness of an approach that restricts the use of SNAP benefits. Avoiding singling out poor people based on misconceptions or exaggerations is just one reason restricting SNAP is the wrong path. There are numerous others:

- SNAP does not cause poor diets or contribute to the current obesity problem.
- There are no agreed on and easily applicable standards — in science or policy — that can be used to determine the foods to target for restriction.
- Implementing food restrictions would increase the program's complexity and costs.
- Limiting food purchases will be particularly ineffective in changing behavior if SNAP consumers do not have reasonable access to eligible foods at affordable prices.
- Purchasing restrictions likely would increase confusion and stigma at grocery check-out, potentially causing a decline in SNAP participation that could worsen food insecurity and increase obesity risk among this vulnerable group.
- Trying to control food purchases of one group of beneficiaries of public payments starts down a slippery slope.

Conclusion

SNAP is a profoundly important program that reaches millions of vulnerable Americans, and plays a critical role in alleviating food insecurity and improving dietary intake and health in the nation. The nation has a serious hunger problem, and a serious obesity problem. There are a number of promising strategies that can strengthen SNAP's role in improving health outcomes without creating unnecessary challenges for program beneficiaries. Such thoughtful, comprehensive strategies need to be the priority in discussions about SNAP's impacts on diet, obesity, and health.

For more information, including a 2013 report on the topic, visit FRAC.org