

Health and Nutrition:

Improving the Food Stamp Program

by Olivier Massot, 2008

Several years ago, while at the cashier aisle of the C-Town grocery store in my old Italian neighborhood of Williamsburg, Brooklyn, I stood watching two teenagers purchase with food stamps various food items: a jar of salsa, a large bag of corn chips and a family size container of Sunny Delight a.k.a. the "orange beverage."

Although the more well-to-do patrons with \$6 pints of ice cream seem equally culpable of poor food choices, I was curious as to why or how it was that food stamps could be used to buy junk food (highly processed foods made with excess salt, fat and sugar). For the cashier, there's only thinking about the grand total. Yet I was wondering about the consequences of not choosing healthier foods and the possible long term health challenges facing the teenagers and New York State's medical system. A different shopping list raced through my mind: fish, a few onions, carrots, garlic, tomatoes with dill! I stood silent. As of 2008, over 30 million low-income people receive food stamps. How might the Food Stamp Program improve the odds for people on limited incomes to access healthier foods?

In a 2005 study published in the [American Journal of Clinical Nutrition](#), researchers concluded:

"The rates of obesity and type 2 diabetes in the United States and other industrialized countries follow a socioeconomic gradient, with highest rates observed among minorities and the poor (52, 84-88). At the individual level, obesity rates are linked to low incomes, low education, minority status, and a

higher incidence of poverty (52, 84, 85, 89). At the environmental level, obesity rates were higher in lower-income neighborhoods, legislative districts, and low-income states (90). Although obesity rates have been increasing steadily in both sexes, at all ages, in all races, and at all educational levels (85, 91), highest rates continue to be observed among the most disadvantaged groups. [1]

It's no surprise that, of the disadvantaged low-income groups, the homeless face circumstances that put them at the highest risk for poor health and nutrition according to researchers at Johns Hopkins University School of Medicine who conducted a small [pilot study in 2007 in Baltimore](#) [2]. In America, there are more than 3 million homeless of whom 1.3 million are homeless children ([National Law Center on Homelessness and Poverty](#) [2]). With so many low-income and homeless Americans at high risk of obesity and in poor health, what is the Food Stamp Program doing to improve access to healthier foods such as fruits, vegetables and whole grains?

Out of a need to help the "under-nourished", the first government sponsored food program under the Department of Agriculture was started in 1939. The Food Stamp Act of 1964 became the first program specifically designed to address and improve nutritional needs of low-income households. It was not until the late 1980's, that homeless individuals were included in the provisions.

Through the Food Stamp Program (now called the [Supplemental Nutrition Assistance Program](#) or SNAP), the U.S. Department of Agriculture is exploring strategies to improve access to nutritious foods by developing incentives that encourage healthier dietary habits [4]. Under the existing system, there are minimal limitations on food stamps. A food stamp

recipient cannot buy non-food items like detergent, diapers, pet food, tobacco or alcohol. In addition, purchasing prepared meals from stores or restaurants, with the exception of meals provided at authorized shelters, is not permitted under the SNAP rules (see [Myths and Facts about Food Stamp Benefits and the Homeless \[5\]](#)). Although placing limits on processed foods high in added sugar, fats or salt would appear to be one way to prevent poor dietary habits, the USDA may see itself as being limited in its ability to regulate healthy purchases and, therefore, is taking a different approach in the Food Stamp Program.

In the 2007 report, [Improving Food Choices—Can Food Stamps Do More?](#), the USDA cites counter-arguments to imposing limitations on food stamp purchases [\[6\]](#). Restrictions to encourage healthy food purchases might not work because food stamp participants, 1) "might use some of their cash income currently being used for nonfood purchases to buy prohibited foods", 2) "manufacturers and retailers might develop or promote sweets or snack foods very similar to the prohibited items", and 3) "detailed regulations regarding allowable foods also could make food stamp purchases more complicated both for program participants and for the stores that accept food stamps."

Rather than try to define which foods are good or unhealthy, or burden participants and retailers with figuring out which food items are restricted by food stamps, the USDA authors endorse programs like the one in the State of California that offer cash back for every dollar spent on fresh fruits and vegetables thereby increasing participants' purchasing power.

The 2008 report by the Government Office of Accountability (GOA) [Options for Delivering](#)

[Financial Incentives to Participants for Purchasing Targeted Food](#) suggests researching similar incentive programs:

"New York City's Department of Health and Mental Hygiene [which] is partnering with farmers' markets to distribute Health Bucks—\$2 coupons for fresh produce—to EBT [Electronic Benefit Transfer] customers who spend \$5 [on] local produce at the markets [\[7\]](#)."

While cash back or coupon programs effectively lower the cost of nutritious food and increase the purchasing power of food stamp participants, these incentives alone may not be enough to improve consumption of healthy foods such as fruits, whole grains and vegetables.

Another possibility for improving the dietary habits of low-income and homeless people participating in the Food Stamp Program is to insure access to local retailers who not only accept food stamps, but also carry a variety of healthy foods. In a graduate student paper from the class of Assistant Professor Joan L. Walker at Boston University's Department of Geography and Environment Center for Transportation Studies titled, [How Variety and Location of Stores that Accept Food Stamps Impact Nutrition](#) two neighborhoods in Boston are compared and assessed according to their ability both to accept food stamps and to offer foods rated high in nutritional value [\[8\]](#). The paper concludes that only 28% - 31% of stores in the researched areas met the needs of food stamp participants. To overcome problems of accessibility, it is recommended that more stores with "high" nutritional ratings be built near low-income neighborhoods and that additional bus routes be established to improve access to these stores.

An effective Food Stamp Program for low-income and homeless individuals presents many challenges including educating participants and advocates about the terms of eligibility and the application process. In order to bridge the gap between food insecurity and accessibility to nutritious foods, advocates for low-income and homeless people will have to follow a holistic approach. They will have to build relationships with city and transportation planners, retailers and farmers, social services and community networks, as well as with schools. For two teenagers from Brooklyn using food stamps at C-Town, the purchase begins with an opportunity and ultimately ends with a choice. I hope that given the best access and education for a healthy lifestyle they will next time choose a grocery bag filled with fruits, whole grains and vegetables.

Article Links:

- [1] American Journal of Clinical Nutrition. Vol. 82, No. 1, 265S-273S, July. 2005. *The economics of obesity: dietary energy density and energy cost.*
<http://www.ajcn.org/cgi/content/full/82/1/265S>
- [2] MedGenMed. 2007; 9(1): 48. *High Prevalence of Overweight and Obesity in Homeless Baltimore Children and Their Caregivers: A Pilot Study.*
<http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=1925022>
- [3] National Law Center on Homelessness and Poverty, Homelessness & Poverty in America.
<http://www.nlchp.org/hapia.cfm>
- [4] USDA Food and Nutrition Service, *A Short History of the Supplemental Nutrition Assistance Program.*
<http://www.fns.usda.gov/snap/rules/Legislation/about.htm>
- [5] USDA Food and Nutrition Service, *Myths and Facts about Food Stamp Benefits and the Homeless*
<http://www.fns.usda.gov/FSP/outreach/pdfs/myths-homeless.pdf>
- [6] AmberWaves, April 2007. *Improving Food Choices—Can Food Stamps Do More, An expanded focus on nutrition may steer food stamp participants to better diets .*
<http://www.ers.usda.gov/AmberWaves/April07/Features/Improving.htm>
- [7] United States Government Accountability Office GAO Report to the Chairman, Committee on Agriculture, Nutrition, and Forestry, U.S. Senate, July 2008. *Food Stamp Program. Options for Delivering Financial Incentives to Participants for Purchasing Targeted Food.*
<http://www.gao.gov/new.items/d08415.pdf>
- [8] GE 365 Final Project. *How Variety and Location of Stores that Accept Food Impact Nutrition.*
http://people.bu.edu/joanw/GE365_Stud1.pdf