



The Link Between Grain and Goodness

SNAP Choice: Maintaining Dignity and Efficiency in the Program

About SNAP

The Supplemental Nutrition Assistance Program (SNAP) is the cornerstone of the nation's nutrition assistance safety net. The program works with states and the private sector to efficiently and equitably provide food to those in need using existing channels of commerce. SNAP customers are treated with dignity as, by law, they are treated equally to non-SNAP customers. SNAP customers are able to decide where to shop and what to purchase, including foods applicable to certain medical conditions and culturally appropriate. SNAP restrictions would harm the efficiency, efficacy, equity, and dignity inherent in the program.

SNAP Responds to Increases in Need

SNAP expands and contracts with the overall economic environment. The COVID-19 pandemic and associated economic turmoil increased SNAP participation considerably, as roughly 8 million more Americans received benefits in 2020, compared to 2019.¹

SNAP also helps individuals and communities during disaster recovery. In 2021, SNAP aided disaster victims in Alabama, California, Connecticut, Florida, Iowa, Kentucky, Louisiana, Massachusetts, Michigan, Mississippi, New Jersey, New York, North Carolina, Pennsylvania, Tennessee, Texas, and West Virginia.²

SNAP Customers Include Particularly Vulnerable People

SNAP helps low-income individuals, families with children, people with disabilities, senior citizens, and military veterans in rural, suburban and urban areas meet their nutritional needs, with an average benefit per person per day of \$5.45.³ More than 80 percent of SNAP households include a child, an elderly person, or a person with disabilities; 86 percent of all SNAP benefits go to such households.⁴ SNAP serves an estimated 1.2 million low-income military veterans.⁵

SNAP's positive impacts are felt in all types of communities and may be particularly pronounced in rural areas. It is estimated that in 2020 SNAP reduced poverty in metro areas by 0.8 percent and in rural areas by nearly double that (1.4 percent).⁶

SNAP Has Positive Impacts on Food Security, Health, and Economic Well-Being⁷

¹ *Program data overview*. Food and Nutrition Service U.S. Department of Agriculture. (2022, April 13).

² *Leveraging Federal Nutrition Resources for Disaster Recovery in COVID-19*. Food Research & Action Center. (2022, January 25).

³ *Leveraging Federal Nutrition Resources for Disaster Recovery in COVID-19*. Food Research & Action Center. (2022, January 25).

⁴ FRAC, Beaudoin, S., & Boldt, C. *Supplemental Nutrition Assistance Program (SNAP)*. Food Research & Action Center. (2021, November 30).

⁵ By Lauren Hall, More from the Authors Lauren Hall Areas of Expertise , Lauren Hall Areas of Expertise Child Nutrition and WIC Recent Work: A Closer Look at Who Benefits from SNAP: State-by-State Fact, Recent Work. *Snap helps 1.2 million low-income veterans, including thousands in every state*. Center on Budget and Policy Priorities.

⁶ Schanzenbacht, Diane. *Snap supports rural families - aei.org*. (n.d.).

⁷ *The Role of the Supplemental Nutrition Assistance Program in Improving Health and Well-Being*. Food Research and Action Center (n.d.).

Research shows that SNAP reduces food insecurity.⁸

- Compared to low-income non-participants, adults in SNAP have average annual health care costs that are \$1,400 to \$5,000 lower on average.⁹
- Adults who had access to SNAP during childhood exhibit lower adult obesity risk and other lower risk of chronic health conditions such as cardiovascular disease and type 2 diabetes;¹⁰
- Children who participate in SNAP have better health status than their eligible non-participating peers and are less likely to reside in households that forgo health care in lieu of other household necessities.¹¹

SNAP Restrictions Would Grow Federal Costs and Bureaucracies

No clear standard exists in the federal government for defining foods as good or bad, healthy or not healthy. With more than 650,000 food and beverage products on the market today and approximately more than 20,000 introduced each year, creating and maintaining those standards would be difficult, if not impossible.

Restricting choice will not reduce the cost to taxpayers. It would have the opposite effect: identifying, evaluating and tracking the nutritional profile of every food available would be a substantial undertaking, in addition to implementation and enforcement. This expanded bureaucracy would mean increased, not decreased, administrative costs. Managing a SNAP-eligible foods list would be an unending task that would have to be staffed, maintained and communicated to retailers, customers, and manufacturers on a real-time basis.

In November 2016, USDA released a feasibility study on capturing SNAP purchases at the point of sale. The study found that this technology would require an initial \$400 million investment and ongoing costs of \$600 million per year.¹² Even then, tracking would be impossible for smaller stores with less sophisticated cash register systems.

Washington Would Decide What's 'In' and What's 'Out'?

Defining foods as “in” or “out” means a bureaucratic approach to picking winners and losers on retailer’s shelves and in grocery carts, increasing their influence over private enterprise and making decisions about what Americans can buy. The presence or absence of certain nutrients, as well as the total ingredient list of a food product, offers no clear answer as to whether food is “good” or “junk.” USDA has rejected state requests to restrict purchases of “junk food” because of the lack of clear standards for defining foods as good or bad, healthy or not healthy.

⁸ *The Role of the Supplemental Nutrition Assistance Program in Improving Health and Well-Being*. Food Research and Action Center (n.d.).

⁹ Carlson, Steven, Keith-Jennings, Brynne. *SNAP Is Linked with Improved Nutritional Outcomes and Lower Health Care Costs*. (January 17, 2018).

¹⁰ Hoynes H, Schanzenbach DW, Almond D. *Long-Run Impacts of Childhood Access to the Safety Net*. *Am Econ Rev*. 2016;106(4):903-934 (n.d.)

¹¹ Ettinger de Cuba S, Weiss I, Pasquariello J, et al. *The SNAP Vaccine: Boosting Children’s Health*. *Children’s HealthWatch*; (February 1, 2012).

Joyce KM, Breen A, Ettinger de Cuba S, et al. *Household Hardships, Public Programs, and Their Associations With the Health and Development of Very Young Children: Insights From Children’s Healthwatch*. *J Appl Res Child*. (n.d.)

¹² *Feasibility Study of capturing Supplemental Nutrition Assistance Program (SNAP) purchases at the point of sale*. Food and Nutrition Service U.S. Department of Agriculture. (2016, November 18).