



March 18, 2019

Certification Policy Branch  
SNAP Program Development Division  
Food and Nutrition Service, USDA  
3101 Park Center Drive  
Alexandria, Virginia 22302

**RE: Proposed Rule: Supplemental Nutrition Assistance Program (SNAP):  
Requirements for Able-Bodied Adults without Dependents RIN 0584-AE57**

To Whom It May Concern:

As a non-profit, non-partisan organization that promotes optimal health for every person and community, Trust for America's Health (TFAH) is grateful for the opportunity to provide comments on United States Department of Agriculture's (USDA) Proposed Rulemaking on SNAP requirements and services for Able-Bodied Adults Without Dependents (ABAWDs). TFAH strongly supports the SNAP program and recognizes that it is critical to both combatting hunger and improving nutrition among some of the most vulnerable Americans. As SNAP supporters, we fear that the proposed rule to restrict food assistance would result in the loss of SNAP benefits for 755,000 adults, by the USDA's own estimates. Low-income people rely on SNAP benefits to meet nutritional needs. Without access to healthy foods, the health and wellbeing of Americans will be negatively impacted.

**Background**

In TFAH's most recent edition of our annual report, *State of Obesity 2018: Better Policies for a Healthier America*<sup>1</sup>, we outlined the severity of the obesity epidemic. Obesity rates are alarmingly high – 18.5 percent of children and 39.6 of adults had obesity in 2015-2016 – and sustained, meaningful reductions have not yet been achieved nationally, except possibly among young children enrolled in the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC).

Obesity and its comorbidities including heart disease, hypertension, diabetes, stroke, cancer, asthma, and osteoarthritis account for billions of dollars in preventable healthcare spending every year. Most troublingly, low-income communities bear a disproportionate burden of obesity compared to their higher-income counterparts due to, in part, to a lack of access to nutritious and fresh food options.<sup>2</sup>

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<sup>1</sup> Warren, M., Beck, St., & Rayburn, J (2018). *The State of Obesity 2018: Better Policies for a Healthier America*. [www.tfah.org/stateofobesity2018](http://www.tfah.org/stateofobesity2018)

<sup>2</sup> Bell, J., Mora, G., Hagan, E., Rubin, V., & Karpyn, A. (2013). *Access to healthy food and why it matters: A review of the research*. Philadelphia, PA: The Food Trust.

SNAP provides much-needed support to low-income Americans by addressing hunger in vulnerable communities. Nearly 39 million people were enrolled in the program in FY19.<sup>3</sup> Across demographics, 20 million households benefit from the program:<sup>4</sup>

- In FY16, African American households received an estimated \$20 billion in SNAP benefits.<sup>5</sup>
- 16 percent of Latino adults live below the poverty line.<sup>6</sup> The U.S Department of Agriculture found that 19 percent of total SNAP benefits went toward Latino households in 2016.
- 44 percent of recipients are under the age of 18.<sup>7</sup>
- Seniors receive \$6.6 billion in SNAP benefits, more than half of which toward seniors who live alone.<sup>8</sup>
- Census Bureau’s American Community Survey finds that approximately 1.4 million veterans benefit from households enrolled in SNAP.

USDA Economic Research analysis also finds that SNAP generates \$1.79 in economic activity for every federal dollar spent, which directly benefits local economies such as farmers and small business owners.

### **Food Insecurity and Its Impact on Health**

Nutrition is a vital component of good health, and we are concerned that the loss of benefits will negatively impact individuals’ health in a variety of ways. The absence of nutrition-rich foods impacts physical health, which increases stress. Research shows that stress contributes to poor emotional wellbeing and increases the risk of chronic mental health issues. A 2005 study showed an association between household food insufficiency and depression. Controlling for poverty and other risk factors, the authors found that changes in food insecurity affect rates of depression.<sup>9</sup>

Individuals who are food insecure are more likely to use coping strategies to stretch their budgets, such as forgoing foods needed for special medical diets, making trade-offs between food and housing or transportation, and delaying medical visits.<sup>10</sup> For people with diet-related diseases such as obesity, type 2 diabetes, or heart disease, the ability to adequately care for

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<sup>3</sup> U.S. Department of Agriculture, “SNAP Participation,” Food and Nutrition Service, September 2018, <https://fns-prod.azureedge.net/sites/default/files/pd/34SNAPmonthly.pdf>

<sup>4</sup> Center on Budget and Policy Priorities, “SNAP Helps Millions of Children,” April 2017, <https://www.cbpp.org/research/food-assistance/snap-helps-millions-of-children>

<sup>5</sup> Center on Budget and Policy Priorities, “SNAP Helps Millions of African Americans,” February 2018, <https://www.cbpp.org/research/food-assistance/snap-helps-millions-of-african-americans>

<sup>6</sup> U.S. Census Bureau, Current Population Survey, 2017 Annual Social and Economic Supplement.

<sup>7</sup> U.S. Department of Agriculture, “Characteristics of USDA Supplemental Nutrition Assistance Program Households: Fiscal Year 2016 (Summary),” Food and Nutrition Service, November 2017, <https://fns-prod.azureedge.net/sites/default/files/ops/Characteristics2016-Summary.pdf>

<sup>8</sup> Center on Budget and Policy Priorities, “SNAP Helps Millions of Low-Income Seniors,” April 2017, <https://www.cbpp.org/research/food-assistance/snap-helps-millions-of-low-income-seniors>

<sup>9</sup> Colleen M. Heflin, Kristine Siefert, and David R. Williams, “Food Insufficiency and Women’s Mental Health: Findings from a 3-Year Panel of Welfare Recipients,” *Social Science & Medicine* 61, no. 9 (2005), 1971.

<sup>10</sup> Food Research & Action Center, “The Impact of Poverty, Food Insecurity, and Poor Nutrition on Health and Well-Being,” December 2017, <http://frac.org/wp-content/uploads/hunger-health-impact-poverty-food-insecurity-health-well-being.pdf>

themselves is significantly impacted.<sup>11</sup> In this way, household food insecurity also contributes to higher healthcare costs for patients.

In particular, the SNAP program has been proven to have a positive impact on health. A study which examined long-term effects found that individuals whose households had access to food stamps during early childhood had better health outcomes than those who lived in counties without the program, including significantly lower rates of obesity, high blood pressure, and diabetes.<sup>12</sup> SNAP participants often have lower healthcare costs – nearly 25 percent less – compared to low-income adults who are not enrolled.<sup>13</sup>

### **Food Insecurity and Economic Stability**

Studies of the theory behind work requirements in safety net programs show that they do not improve long-term economic wellbeing.<sup>14</sup> Recent research on the expansion of work requirements in SNAP found that a majority of individuals exposed to these requirements were already attached to the labor force and would be unable to meet the threshold as a result of persistent health issues.<sup>15</sup> Studies have found that work reporting requirements are ineffective in connecting people to sustainable job opportunities.<sup>16</sup>

Rates of food insecurity are disproportionately higher for people of color. Under the proposed rule, stringent time limit waivers will cut SNAP benefits for the nation's most vulnerable populations. Tenuous proximity to full-time work, unreliable transportation, inconsistent housing, and criminal records all exacerbate unemployment rates. Without a plan to mitigate causes of unemployment, SNAP time limits are a counterintuitive measure that could worsen physical and mental health and economic stability.

### **Positive Impact of SNAP**

As the largest program providing healthy food options and resources to low-income Americans, the positive effects of SNAP are far-reaching. Research shows that SNAP reduces food insecurity and lifts households out of poverty. According to the Census Bureau's Supplemental Poverty Measure, 3.4 million people have been lifted out of poverty since receiving SNAP

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<sup>11</sup> Gregory, C., A. & Coleman-Jensen, A. "Food insecurity, chronic disease, and health among working-age adults," *Economic Research Report*, 235. Washington, DC: U.S. Department of Agriculture, Economic Research Service.

<sup>12</sup> Hoynes H, Schanzenbach DW, Almond D. "Long-run impacts of childhood access to the safety net." *American Economic Review*, 106(4): 903–934, 2016.

<https://pdfs.semanticscholar.org/c94b/26c57bb565b566913d2af161e555edeb7f21.pdf>

<sup>13</sup> Berkowitz, S.A., Seligman, H.K., Ridgdon, J., Meigs, J.B., & Basu, S., "Supplemental Nutrition Assistance Program (SNAP) participation and health care expenditures among low-income adults." *JAMA Internal Medicine*, 177(11), 1642-1649. 2017.

<sup>14</sup> Pavetti L. Work Requirements Don't Cut Poverty, Evidence Shows. Washington, DC: Center for Budget and Policy Priorities, June 7, 2016. <https://www.cbpp.org/research/poverty-and-inequality/workrequirements-dont-cut-poverty-evidenceshows>.

<sup>15</sup> Bauer L, Whitmore Schanzenbach D, and Shambaugh J. Work Requirements and Safety Net Programs. Washington, DC: The Brookings Institution, The Hamilton Project, October 2018. [https://www.brookings.edu/wp-content/uploads/2018/10/WorkRequirements\\_EA\\_web\\_1010\\_2.pdf](https://www.brookings.edu/wp-content/uploads/2018/10/WorkRequirements_EA_web_1010_2.pdf)

<sup>16</sup> Ladonna Pavetti, "Work Requirements Don't Cut Poverty, Evidence Shows," Center on Budget and Policy Priorities, June 2016. <https://www.cbpp.org/research/poverty-and-inequality/work-requirements-dont-cut-poverty-evidence-shows>

benefits.<sup>17</sup> SNAP participation reduced the percentage of families that were food insecure by as much as 17 percent.<sup>18</sup> In another estimate, SNAP alleviates food insecurity by 30 percent.<sup>19</sup> Beneficiaries also report that SNAP helps to reduce stress due to economic uncertainty and strained finances.<sup>20</sup>

### **Current Rule Should Stay in Place**

Since the proposed rule could potentially restrict access to affordable food options to over three-quarters of a million Americans, TFAH recommends that the proposed rule should not be implemented and that the current rules around SNAP eligibility remain as-is.

While a \$15 million cut to food benefits may seem like a cost-saver, this short-term gain will ultimately certainly increase healthcare costs and heighten the risk of poor physical and mental health.

Thank you for your consideration of these comments. If you have any questions, please do not hesitate to contact Daphne Delgado, TFAH's Senior Government Relations Manager, at (202) 865-5945 or [ddelgado@tfah.org](mailto:ddelgado@tfah.org).

Sincerely,



John Auerbach  
President and Chief Executive Officer

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<sup>17</sup> U.S. Census Bureau, Current Population Survey, 2018 Annual Social and Economic Supplement. <https://www.census.gov/content/dam/Census/library/visualizations/2018/demo/p60-265/figure8.pdf>

<sup>18</sup> Mabli, J. & Ohls, J. "Supplemental Nutrition Assistance Program participation is associated with an increase in household food security in a national evaluation," *Journal of Nutrition*, 145(2), 344-351. 2015.

<sup>19</sup> Ratcliffe C. McKernan, S.M., & Zhang, S. "How much does the Supplemental Nutrition Assistance Program reduce food insecurity?" *American Journal of Agricultural Economics*, 93(4), 1082-1098.

<sup>20</sup> Juster, R-P., McEwen, B.S., & Lupien, S.J. "Allostatic load biomarkers of chronic stress and impact on health and cognition," *Neuroscience and Biobehavioral Reviews*, 35(1), 2-16.