

The Honorable Pat Roberts, Chair
The Honorable Debbie Stabenow
U.S. Senate Committee on Agriculture
Senate, Hart Building

The Honorable Michael Conaway, Chair
The Honorable Collin Peterson
U. S. House Committee on Agriculture
House of Representatives, Rayburn House

September 4, 2018

Dear Members of the 2018 Farm Bill Conference Committee,

As pediatricians and public health researchers, we seek to inform your deliberations on the 2018 Farm Bill by summarizing the most current medical research regarding health benefits of the Supplemental Nutrition Assistance Program (SNAP). Based on our 20 years of research and clinical experience with the non-partisan research collaborative Children's HealthWatch, we urge you to promote SNAP in the Nutrition title of the Farm Bill. SNAP provides a fundamental component of America's public health and economic infrastructure that sustains the patients and their families whom we serve and countless others across the nation when basic expenses overtake earnings, or when they are confronted with adversity such as natural disasters or economic downturns.

Based on our expertise and the research of others, we foresee that the proposed changes in the House version of the bill will particularly increase food insecurity and jeopardize the health, development, and well-being of our nation's children and their families.

Food insecurity threatens health among people of all ages,^{1,2,3,4,5} and SNAP is our nation's first line of defense against hunger and food insecurity. Extensive research, including research by Children's HealthWatch, has demonstrated that SNAP reduces food insecurity, across the lifespan, from the prenatal period through old age.^{6,7,8} We urge you to report out a Farm Bill that does not cut or make changes to SNAP that would endanger American's current and future health.

SNAP works like a potent medicine;⁹ it is an effective treatment for improving health of people of all ages, beginning during pregnancy and early childhood.^{10,11} Babies whose mothers participated in SNAP during pregnancy are less likely to be born at a low birth weight compared to similar non-SNAP participants.¹² Among infants and toddlers, SNAP decreases the likelihood that young children will be hospitalized, underweight, or developmentally at risk¹² – thus preventing conditions that cost this country billions of dollars.^{13,14}

The avoidable health- and education-related costs of food insecurity in the US population are staggering. Children's HealthWatch estimated total U.S. health, education, and lost productivity costs of food insecurity across all age groups at more than \$178 billion in 2014 alone.¹⁵ SNAP, on the other hand, is a cost-effective intervention for reducing healthcare expenditures among children and adults. Recent research shows that, compared to other adults with low incomes,

adults participating in SNAP have lower health care expenditures by approximately \$1,400 per person per year.¹⁶ Another study found that access to SNAP reduces the likelihood of hospital admissions and long term nursing home stays for older adults, resulting in an estimated \$2,100 in annual healthcare savings per senior enrolled in SNAP.¹⁷

The Farm Bill proposals passed by the House and Senate differ in substance and in spirit. Unlike the Senate Farm Bill, the House bill would potentially end or cut benefits currently received by millions of people including nearly 1 million families with children.¹⁸ We are very concerned about these proposals because our research and the research of many others shows that reductions in SNAP benefits are followed by deteriorating health outcomes for children and adults.¹⁹ Given the overwhelming evidence of the benefits of SNAP, we support the health-promoting Nutrition title in the Senate version of the bill. Out of our concern for the health and development of our nation's children, especially the 13 million children (nearly 1 in 6 children) living in food insecure households, we urge that SNAP be strengthened, not cut.

Passing a Farm Bill that promotes current and future health and opportunity by ensuring access to life sustaining food and nutrition for our neighbors of all ages is critical. As you prepare to negotiate and develop a final report for the bill, we strongly encourage you to rely on evidence from the disciplines of medicine, nutrition, child development, and economics to focus on SNAP's goal of reducing food insecurity and hunger in America.

Sincerely,



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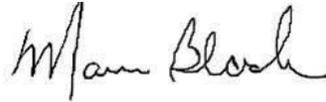
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[Children's HealthWatch](#) is a nonpartisan network of pediatricians, public health researchers, and policy and child health experts committed to improving children's health in America. Every day, in urban hospitals across the country, we collect data on children ages zero to four who are from families experiencing economic hardship. We analyze and release our findings to academics, legislators, and the public to inform public policies and practices that can give all children equal opportunities for healthy, successful lives.

For questions or further information, Allison Bovell-Ammon, Deputy Director of Policy Strategy for Children's HealthWatch at allison.bovell-ammon@bmc.org or 617-414-3580.

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