The Supplemental Nutrition Assistance Program (SNAP) constitutes our nation’s first line of defense against hunger and food insecurity, major drivers of ill health. Residents of every county in the United States participate in SNAP, making it a critical program in every community.

Decades of research from across the country show SNAP is effective in reducing food insecurity, improving health, reducing health care costs, and supporting educational success.
SNAP PROTECTS HEALTH FOR A LIFETIME

SNAP, our nation’s largest child nutrition program, is a crucial foundation for public health. SNAP protects children from costly health problems including low birth weight, malnutrition, infections, hospitalizations, mental health issues, impaired brain development, and, later in life, diabetes and heart problems.

One in four children in the United States live in families participating in SNAP. Policies that deprive them of adequate SNAP benefits damage the health of our children’s bodies and brains.

What are the health benefits of SNAP? Research shows SNAP...

- **Improves child health**
  Young children in families participating in SNAP are healthier, grow better, and are more likely to develop well emotionally and academically for their age compared to their peers in likely eligible families not participating in the program.

- **Improves caregiver health**
  Children need healthy families to thrive. Adults participating in SNAP have reported better mental health and SNAP participation has been associated with lower risk of obesity, diabetes, and hypertension among adults who participated in the program during early childhood.

- **Increases food security for families and children**
  Caregivers often try to protect children from hunger by forgoing meals themselves. Compared to families who are likely eligible, but not participating in SNAP, families with young children participating in SNAP are 22 percent more likely to be able to afford enough food for all members. Additionally, they are 33 percent more likely to have enough resources to protect children from having the size of meals cut.

- **Alleviates economic hardships**
  Working in tandem with other programs to preserve family health, SNAP has a positive ripple effect. Families participating in SNAP are 28 percent more likely to be able to pay for medical expenses without foregoing basic necessities like food, rent and utilities.
Doctor-Approved Policy Recommendations

Based on this robust scientific evidence, as health professionals we recommend the following policies to strengthen SNAP and overcome current regulatory barriers to maximize participation for America's families in need, providing resources to enhance healthy nutrition and eliminate inequities.

Eliminate inequitable eligibility restrictions and barriers to accessing SNAP by:

1. Removing the five-year bar on lawfully present immigrants eligible for SNAP. Policies that discriminate against immigrants and their families, including the requirement that immigrants otherwise eligible for SNAP wait five years, increase risk of food insecurity among immigrant families with children.

2. Eliminating federal prohibition of formerly incarcerated individuals participating in SNAP. The federal ban on SNAP for formerly incarcerated individuals enforced by many states has a disproportionate impact on the health and well-being of children of color.

3. Removing asset limits for SNAP eligibility. Widening wealth inequality in the US contributes to health inequities. Building assets is critical for financial stability and upward economic mobility.

4. Promoting and investing in opportunities to streamline enrollment and eligibility across public assistance programs. Reducing barriers to participation and streamlining application processes is necessary for promoting economic stability and health among families.

5. Retaining Broad Based Categorical Eligibility (BBCE): gives states the ability to address the needs of their residents and has afforded access to SNAP for working families across the country as they seek to increase income and build assets while also having resources necessary to feed their children.

6. Preserving the entitlement structure in SNAP. As the recent COVID-19 pandemic and resulting economic downturn demonstrated, the structure of SNAP is effective in rapidly responding to crises.

Improve the SNAP benefit to reflect the real costs of a healthy diet and basic living expenses by:

7. Increasing SNAP benefits by basing the calculation on the Low Cost Food Plan. This would put a healthy diet within reach for the millions of people participating in SNAP without adding further stigma associated with food restrictions or barriers built into many incentive models.

8. Lifting the shelter deduction cap. By removing the cap on shelter costs the SNAP calculation would provide a more accurate reflection of families’ real expenses, especially in areas with high housing costs.

9. Allowing all families with excess medical expenses to claim the medical deduction. A higher benefit would help to offset some of the additional costs faced by families that have members with special health care needs and promote food security.

10. Retaining the current structure and benefits of the Heat and Eat program. This will continue to provide important supports for families with low incomes and create more efficiency for state and local administrative offices.

11. Allowing for a more gradual decline in benefits as families increase income. A gentler decline will reduce financial resource volatility and support family economic mobility.

More details on each of the recommendations can be found at:
childrenshealthwatch.org/public-policy/policy-focus
The Supplemental Nutrition Assistance Program (SNAP) constitutes our nation’s first line of defense against hunger and food insecurity - major drivers of ill health throughout the lifespan. SNAP supports the nutrition of residents of every county in the United States. Each month more than 41 million people in the United States, almost half of whom are children, receive SNAP benefits. Decades of research show that SNAP is effective in reducing food insecurity, improving health across the lifespan, reducing health care costs, and supporting educational success, particularly during economic downturns and natural disasters.

The COVID-19 pandemic financially strained many households across the country, disproportionately affecting those already experiencing poverty. The pandemic also magnified preexisting racial and ethnic disparities in food security, for example, a greater prevalence of food insecurity within Black communities compared to national trends. Other data revealed that among food insecure families, households of color had more severe levels of food insecurity. Widespread closures of schools and child care centers further restricted access to nutrition for many families who relied on these settings for meals. However, pandemic-related expansions to SNAP and child nutrition programs mitigated some of this impact in the short term, but many of these expansions have now been rescinded.

1) **SNAP gives our babies and youngest children a healthy start and impacts their well-being across the lifespan**

SNAP offers partial protection against food insecurity when wages are not enough to pay for basic needs, work is hard to find, or not medically advised because it could worsen a person’s condition. Research from Children’s HealthWatch has demonstrated that compared to children from eligible families who did not receive SNAP, children who participate in SNAP were less likely to be hospitalized, underweight, or at risk of developmental delays. These families participating in SNAP were also less likely to experience food insecurity at household and child levels.

2) **SNAP increases family resources, benefitting children**

Although SNAP benefits alone are often too low for families to consistently afford healthful diets (benefits average $6.10 per person per day), they supplement household budgets and support more consistent access to nutrition, which is essential for healthy child development. By supporting food costs, SNAP helps free up family resources to afford other basic needs and important health services. SNAP purchasing power is also an important factor in child health. Benefit levels are determined using the Thrifty Food Plan, a diet plan established by the

“Decades of research show that SNAP is effective in reducing food insecurity, improving health across the lifespan, reducing health care costs, and supporting educational success, particularly during economic downturns and natural disasters.”
U.S. Department of Agriculture (USDA) designed to be nutritionally adequate at very low cost. In 2021, the USDA revised the Thrifty Food Plan and increased SNAP purchasing power to meet updated scientific recommendations for a healthy diet. Increases to SNAP benefits following this revision and at times of economic crises, such as during the Great Recession and COVID-19 pandemic, have been associated with reduced poverty for families with children, fewer challenges affording food, and improved health outcomes. Increased SNAP purchasing power has also been associated with an increase in use of preventive health care and reductions in outstanding health care needs due to lack of affordability.

SNAP’s role in supporting children’s health was evident during the COVID-19 pandemic, buffering families and children from material hardship and mental health problems. SNAP expansions helped reduce food insecurity and being behind on rent during the pandemic, despite it being a time of increased economic hardship. SNAP participation also may have lessened the pandemic’s impact on children’s mental, emotional, developmental, and behavioral health. Collectively, these findings underscore that children benefit from increased family resources provided through SNAP.

3) SNAP improves children’s access to health care and use of preventative health services, mental health

SNAP participation helps families afford children’s medical care when needed and reduces delays in seeking care. Families with young children who participated in SNAP compared to eligible non-participants were less likely to report health cost sacrifices, when families have difficulty affording other basic needs as a consequence of paying out-of-pocket medical costs. Research has also shown that SNAP participation for both children and adults reduced needing but having to go without dental care or eyeglasses. Other researchers have shown SNAP participants were more likely than non-participants to attend well-child medical visits and receive childhood immunizations that offer protection against serious illness. SNAP benefits reduced medical hardships among children and decreased emergency department visits, including for childhood asthma, a common chronic childhood health condition, particularly among children from households with low incomes. SNAP benefits may also have a role in reducing depressive symptoms among adolescents.

“This SNAP benefits may also have a role in reducing depressive symptoms among adolescents.”

This is notable because depression is common among those experiencing food insecurity. For children and adolescents, good health is not only important for general well-being, but it also has an important downstream effect on their school attendance and performance, which is critical to promote success later in life.

4) SNAP decreases reports of child neglect

Reports of child maltreatment and neglect often relate to material hardship – the absence of a child’s most basic needs such as food, clothing, housing, and medical care. SNAP has been shown to mitigate both food insecurity and reduce the risk of child maltreatment and neglect. The presence of SNAP-authorized retailers, and thus families’ ability to use SNAP benefits, has also been associated with
fewer maltreatment reports, especially in rural areas.28 This reinforces the importance of SNAP benefits as a social support, potentially reducing both stress and improving families’ ability to provide basic needs for their children, preventing instances of food insecurity and neglect.26

5) SNAP participation in childhood improves health in adulthood and keeps adults healthy

The positive effects of SNAP in early life extend well beyond childhood. Access to SNAP before birth and during early childhood has been linked to a significant reduction in metabolic syndromes (obesity, high blood pressure, diabetes) in adulthood, as well as greater odds of overall good health.29 SNAP also has been shown to reduce food insecurity among adults. This is important because food insecurity is associated with greater adult health care utilization and expenditures, including emergency department visits, inpatient admissions, outpatient visits, and pharmaceuticals.30,31 It is also associated with having chronic conditions, being a high health care user, and having high health care costs.30,31 SNAP also may buffer adults from poor mental health outcomes associated with food insecurity, including depression and psychological distress.32 In general, SNAP participation and continuity of benefits during adulthood has been associated with improved health status.33,25 Among middle-aged adults, SNAP reduced the risk of premature mortality indicating SNAP had a protective effect on overall life expectancy.24 Among seniors, SNAP participation has been shown to decrease the rate of cognitive decline compared to SNAP-eligible non-participants.35

6) SNAP reduces health care costs for children and adults

Food insecurity is linked to avoidable societal and individual health care expenditures. Children in families that struggle to afford food have higher health care utilization and costs.30,36 Food insecurity was conservatively estimated in 2014 (which remains the most current estimate available) to cost the US economy more than $160 billion in excess healthcare costs annually.37 The largest portion of cost was due to resulting mental health problems, including depression and anxiety. Other major contributors included worse general health, suicide, and hospitalizations.37 Study authors noted, “even conservatively estimated, the health costs of hunger are greater than some of the country’s most expansive public investments. For example, $160 billion is more than all state and federal spending on higher education.”37

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Children in food insecure households also had increased health care utilization, including higher likelihood of emergency department or primary care visits (for medical treatment) compared to food secure children.36 Parents in food insecure households also reported more difficulties accessing care when needed for routine and urgent issues, consistent with increased emergency department use.36 Children’s HealthWatch research showed that infants
from food-insecure families hospitalized with common medical conditions had greater lengths of hospitalizations and thus approximately $2,000 higher health care costs than those from food-secure families. Researchers who studied health care costs associated with food insecurity found that adults who were food insecure had significantly greater health care expenditures – an extra $1,863 per year, totaling $77.5 billion annually – than those who were food secure. Among able-bodied adults with low incomes, participation in SNAP reduced annual health care spending by $1,400 compared to low-income adults without SNAP. For each month of SNAP participation, the average health care spending decreased by $98 per adult. Among senior citizens, the estimated cost savings was even higher at $2,100 per senior. SNAP has the potential to help rein in the nation’s rising health care costs by reducing food insecurity and improving health.

7) SNAP improves children’s educational outcomes

SNAP improves educational outcomes necessary for healthy communities and a robust future workforce. One study that investigated preschool and kindergarten age children found participation in SNAP was positively associated with early math skills. For the most economically disadvantaged children, SNAP was also positively associated with early reading and school readiness skills. Further, research using national data found that among children living in poverty, SNAP participants were less likely to repeat a grade compared to SNAP-eligible non participants.

Timing and receipt of SNAP benefits and the purchasing power of the benefits also has been linked with educational outcomes. Several studies found that students’ performances on standardized tests were lower near the end of the month, when benefits were exhausted and families stretched resources to afford food. Taking a college admissions exam in the last two weeks of the benefit cycle lowered the student’s probability of attending a four-year college. In regions of the country where the purchasing power of SNAP was higher, children missed fewer school days compared to children in regions with a lower purchasing power.

8) SNAP helps families working jobs with low wages and/or volatile hours put food on the table

Nearly three-quarters of adults who participate in SNAP are low-wage workers, and close to two-thirds of SNAP participants are children, elderly, or disabled. For families with low and inconsistent wages, SNAP helps to supplement budgets and keeps food on the table without sacrificing other basic needs, including rent, utilities, child care, and health care.

“These findings show that SNAP participation, purchasing power, and timing of benefits are important factors in school attendance and academic performance.”

“For families with low and inconsistent wages, SNAP helps to supplement budgets and keeps food on the table without sacrificing other basic needs, including rent, utilities, child care, and health care.”
and health care. This supplementary assistance can be an important support during periods of job transition and without earned income. Families and individuals with low incomes eligible for SNAP are more likely to work jobs with volatile work hours, temporary positions, and/or seasonal employment, which may result in fluctuations in their SNAP benefits and churn (the cycle of exiting the program and rapidly re-entering within a short time period). When families begin to increase wages or work hours, they can experience an abrupt loss of SNAP referred to as the ‘cliff effect’. Families whose SNAP benefits are terminated or reduced because of this are at substantially greater risk of food insecurity, which ultimately may have negative impacts on their children’s health and development and educational outcomes. Reducing barriers to SNAP benefit continuity is essential to protecting child and family health. Moreover, preventing additional and misguided bureaucratic restrictions that take food away from children and families with low incomes – namely, sanctions on households who struggle to obtain, maintain, or prove employment – is critically important to protecting the health and well-being of children.

9) SNAP is vital for the health of every community

The future of our nation, economy, and local communities depends on the healthy growth and development of our nation’s children - our future community leaders and workforce - and the health and stability of our caregivers and workers. A robust and growing body of evidence documents the benefits of SNAP across the lifespan. Decades of research show strong associations between SNAP and improved health outcomes, lower health care costs, and a healthier population, from our youngest children to our senior neighbors and caregivers. Ensuring that SNAP remains strong is critically important for the health of every community nationwide.

Policy Recommendations Summary

1. Remove the five-year bar on lawfully present immigrants eligible for SNAP.
2. Eliminate federal prohibition of formerly incarcerated individuals participating in SNAP.
3. Remove asset limits for SNAP eligibility.
4. Promote and invest in opportunities to streamline enrollment and eligibility across public assistance programs.
5. Retain Broad Based Categorical Eligibility (BBCE).
6. Preserve SNAP’s entitlement structure.
7. Increase SNAP benefit amounts by basing the calculation on the Low Cost Food Plan.
8. Lift the shelter deduction cap.
9. Allow all families with excess medical expenses to claim the medical deduction.
10. Retain the current structure and benefits of the Heat and Eat program.
11. Allow for a more gradual decline in benefits as families increase income.
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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 from the frontlines of pediatric health care, 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 in the United States equal opportunities for healthy, successful lives.

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