

Millions could see health benefits with changes to federal nutrition program, report finds

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Credit: American Heart Association

More than 40 million Americans who rely on a government nutrition program face risks for major health problems because the program lacks nutrition standards, according to a new report.

The [report](#) released this week by the Bipartisan Policy Center found there are still "untapped opportunities" to change the situation for people

using the Supplemental Nutrition Assistance Program, also known as SNAP. It's the only federal food assistance program without nutrition standards.

The center's report found while there is a growing concern about high rates of obesity and related chronic diseases, states and the federal government – which together provide millions with Medicaid and Medicare – are in a unique position to make a difference.

In addition to increasing education; coordinating federal and state agencies and programs; and aligning SNAP benefits with Medicaid, the report suggests:

- Making diet quality a core SNAP objective.
- Strengthening incentives for purchasing fruits and vegetables.
- Authorizing U.S. Department of Agriculture funds to for pilot projects to improve SNAP participants' diets.
- Strengthening SNAP retailer standards to improve the food environment for all shoppers.

"The overall purpose of this report is to shine a light on the fact that with more than 40 million people receiving SNAP benefits, their health can be improved through a greater attention on nutrition and what is actually being delivered," said former Tennessee Senator Bill Frist, a doctor and a co-chair of the Bipartisan Policy Center task force that produced the report.

The absence of [nutrition standards](#) for SNAP recipients is a longstanding problem.

A 2012 study found people using SNAP consume 39 percent fewer whole grains, 46 percent more red meat. Women in the program drank 61 percent more sugary beverages, the study found.

Sugary beverages are the largest single source of added sugars in Americans' diets and have been linked to heart disease and stroke risk factors, such as obesity, high blood pressure and cholesterol levels.

A 2016 study found that teen and adult SNAP recipients had larger waists and higher levels of obesity than people who aren't in the program, even when controlling for income.

Ann M. Veneman, former secretary of agriculture and the Bipartisan Policy Center's prevention initiative co-chair, said the new report reflects a shifting perspective on the impact of nutrition on health care.

"We know that so many diseases people experience today are diet and obesity related," she said. "We really believe that if we don't begin the discussion on how to connect the various federal programs that are impacting people's health, we won't be able to affect the underlying issue of the rising cost of health care."

SNAP plays a critical role in reducing poverty and hunger, and the challenge is how to keep the program strong and encourage healthier eating.

The American Heart Association is advocating for a voluntary pilot program in SNAP to be included in the farm bill reauthorization. The program would offer incentives for purchasing fruits and vegetables, exclude sugary beverage purchases and create evaluations to assess elements such as impact on consumer purchasing, stigma and retailer implementation.

States, which have a key role in administering SNAP, also could run such pilots and evaluate their effectiveness – with help from the federal government, the report suggests. It's also something the AHA supports.

The report also mentions that other waivers could be applied to allow states to combine SNAP and Medicaid data, as well as funds to improve [nutrition](#) and health outcomes in both populations.

The pilot programs, plus recommendations from the new report, could lead to important data that could help assess the importance of healthy food access and diet quality, AHA CEO Nancy Brown said.

"Moving forward, we believe this comprehensive report provides lawmakers with a good starting point for discussions on how maintain the current integrity and funding for SNAP," Brown said, "while successfully delivering the maximum public health benefits to the Americans it supports."

More information: Peter J Huth et al. Major food sources of calories, added sugars, and saturated fat and their contribution to essential nutrient intakes in the U.S. diet: data from the national health and nutrition examination survey (2003–2006), *Nutrition Journal* (2013). [DOI: 10.1186/1475-2891-12-116](https://doi.org/10.1186/1475-2891-12-116)

Cindy W Leung et al. Dietary intake and dietary quality of low-income adults in the Supplemental Nutrition Assistance Program, *The American Journal of Clinical Nutrition* (2012). [DOI: 10.3945/ajcn.112.040014](https://doi.org/10.3945/ajcn.112.040014)

Cindy W. Leung et al. SNAP Participation and Diet-Sensitive Cardiometabolic Risk Factors in Adolescents, *American Journal of Preventive Medicine* (2017). [DOI: 10.1016/j.amepre.2016.06.011](https://doi.org/10.1016/j.amepre.2016.06.011)

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