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Food Stamps and Health

The United States government's farm policy has significantly implications for the health of Americans. In particular, farm bills typically include policies pertaining to food stamps and other programs that can directly impact health. The U.S. House and Senate have each passed different versions of the Farm Bill that will potentially adversely effect human health. House and Senate negotiators will attempt to reconcile the differing versions in early September.

According to the AP: The House bill tightens work requirements for recipients of the Supplemental Nutrition Assistance Program (SNAP). Currently, able-bodied adults ages 18-49 without children are required to work 20 hours a week to maintain their benefits. The bill raises the top age of recipients subject to work requirements from 49 to 59 and requires parents with children older than six to work or participate in job training. Government auditors estimate that in ten years, the SNAP caseload would shrink by about 1.2 million people if the bill becomes law. The Senate version aims to reduce fraud in SNAP but doesn't cut funding from the program and does not impose work requirements or change the ages of eligibility, which helps feed more than 40 million people across the United States.

Very simply, food insecurity or the inability for financial reasons to buy healthy food affects one's health. The Health Impact Project recently released a detailed well-documented report demonstrating how the combination of poverty and a lack of food would lead to increases in illnesses like heart disease, diabetes and high blood pressure among adults. In children, the cuts would lead to higher rates of asthma and depression. Diabetes alone could increase federal and state health care

costs by nearly \$15 billion over the next 10 ten years, the report found. Children in food-insecure families are more likely to be hospitalized in early childhood than are those from food-secure households. Medical costs related to food insecurity in the United States amount to as much as \$67 billion per year in 2005 dollars.

According to the report just released by the Health Impact Project: Federal spending on SNAP has grown from \$34.8 billion in fiscal year 2007 to \$80.4 billion in FY 2012. This growth in spending has been attributed to several factors, including the rise in poverty and unemployment during the Great Recession (leading to higher participation rates); changes in state eligibility practices; and a temporary increase in benefit amounts conferred by the American Recovery and Reinvestment Act (ARRA). The Congressional Budget Office (CBO) predicts that under current policies, SNAP spending will fall in coming years as a result of the expiration of the ARRA benefit increase in November 2013 and continued improvement in the economy. Recent analysis suggests that the number of SNAP participants receiving monthly benefits leveled off in 2011 and 2012, and month-to-month participation declines were reported in 2013 for almost half of all states.

More information can be found at :

1. <http://www.pewtrusts.org/~media/assets/2014/11/hiahealthimpactsnapwhitepaper.pdf?la=en>
2. <https://www.usnews.com/news/top-news/articles/2018-06-21/us-house-approves-farm-bill-with-major-food-stamps-changes.>