

# Low-Income Urban Mothers' Experiences with the Supplemental Nutrition Assistance Program



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## ARTICLE INFORMATION

### Article history:

Submitted 30 March 2016  
Accepted 9 January 2017  
Available online 2 March 2017

### Keywords:

Supplemental Nutrition Assistance Program (SNAP)  
Food stamps  
Food insecurity  
Low-income families  
Urban mothers and children

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<http://dx.doi.org/10.1016/j.jand.2017.01.008>

## ABSTRACT

**Background** Food insecurity remains a public health concern in the United States, particularly among low-income urban ethnically diverse families, even with the Supplemental Nutrition Assistance Program (SNAP). Limited phenomenologic data exist to capture how programmatic changes to SNAP address the needs of users and why a gap in SNAP use may exist.

**Objective** The primary aim of this study was to examine the experiences of low-income, Baltimore, MD, mothers in applying for and maintaining access to SNAP. Secondary aims included understanding participants' perspectives on the influence of changes in SNAP over a 3-year period and how SNAP fits into the overall system of social services for families.

**Design** In this qualitative, phenomenologic study, in-depth interviews were conducted with 13 mothers and three focus groups with 20 mothers, for a total sample of 33 mothers receiving SNAP benefits. Ten mothers participated in the first round of data collection (January to May 2010), and 23 in the second round (February to May 2013).

**Participants/setting** Participants were 33 mothers receiving SNAP benefits in Baltimore City, MD.

**Main outcome measures** Baltimore SNAP users' experiences with applying for and maintaining access to SNAP, as well as with program changes to the SNAP program.

**Data analysis** Data were analyzed using an iterative emergent design and phenomenologic approach. A constructivist perspective was implemented throughout the coding process.

**Results** SNAP functioned as a valuable support system within the broader social safety net for mothers living in poverty, yet participants expressed frustration about the processes of applying for and maintaining benefits due to communication problems and poor integration of services. In applying for and accessing SNAP, positive interactions with caseworkers and previous knowledge of the SNAP program were important for maintaining benefits. Interviews and focus group discussions revealed the need for additional outreach and education about the implemented program changes to build trust and improve access to SNAP among participants.

**Conclusions** Improving communication and supporting participants' ability to maintain relationships with the same caseworkers, as well as developing better integration with other aid programs, could improve the SNAP program.

*J Acad Nutr Diet.* 2017;117:1538-1553.

THE ECONOMIC RECESSION THAT BEGAN IN 2008 contributed to unstable economic conditions and a rise in food-insecure households.<sup>1</sup> Defined as limited access to adequate food due to a lack of money and other resources, food insecurity is associated with poor nutrition and a range of physical and mental health issues among adults and children.<sup>2</sup> Food insecurity disproportionately affects ethnic minority households: 22% of non-Hispanic black households are food-insecure compared with 13% of all US households, and twice as many non-Hispanic

black children grow up in food-insecure households compared with non-Hispanic white children (11% vs 6%).<sup>3</sup> This disparity is a concern for urban black families who are particularly vulnerable to food insecurity and are at high risk of obesity, diabetes, and other nutrition-related conditions, because the availability of healthy food is often limited in urban neighborhoods that are predominately black and low-income.<sup>4</sup>

The Supplemental Nutrition Assistance Program (SNAP), also known as the Food Supplement Program in Maryland, is

the largest federal aid program created to help low-income individuals and households buy food and reduce food-related hardships.<sup>5</sup> Nationally, 46 million individuals received SNAP benefits in 2015.<sup>6</sup> During the same year, approximately 26% of households receiving SNAP were black and 43% had children.<sup>6</sup> More than 59% of SNAP households with children were single-adult households, with a large proportion (more than 20%) headed by women.<sup>6</sup> SNAP has been effective at decreasing the percentage of food-insecure households by allowing families to purchase more food and provide for their families.<sup>2</sup>

Maryland has lagged behind the national average in Food Stamp use throughout the 2000s, ranking 41st in the nation in Food Stamp use in 2007.<sup>7</sup> Previous research in other states suggests barriers to SNAP participation include limited English language skills, stigma, lack of information, difficulties reaching the SNAP office, misunderstandings about the time limit on benefits, the lack of a linked enrollment system with other services, and the many verifications required to participate.<sup>8-13</sup> In addition, an estimated 30% to 50% of respondents do not understand SNAP rules, do not know whether they are eligible, or do not know how to apply for public benefits.<sup>12</sup>

Due to the low rates of SNAP use, Maryland's SNAP implemented several programmatic and management changes starting in 2010 to improve access to services as part of Maryland's No Kid Hungry Campaign and the No Wrong Door Policy.<sup>14,15</sup> One major change was expanding Service Access and Information Link (SAIL), an online application system that enables Maryland residents to apply, renew, or learn about social services such as SNAP (now replaced with my Department of Human Resources [myDHR]).<sup>16,17</sup> Another change included a common application form for some programs and a transition away from an assigned case manager system to seeing clients on a first come, first served basis to reduce wait time and improve efficiency (E. Tatum, MPA, personal communication, August 31, 2015).

Despite these changes, a gap in access to SNAP remains: 36% of those eligible did not receive benefits in 2015.<sup>18</sup> Although data on SNAP use are routinely collected, beneficiary perspectives have not been widely studied. Policy research on SNAP has primarily examined the program's economic influence and effect on food security.<sup>17,19,20</sup> Research has focused on the potential influence SNAP may have on the diet and health of low-income families participating in the program, particularly rates of overweight and obesity.<sup>21,22</sup> Less has been published on beneficiaries' experiences of the program that may help explain health behaviors and provide insight into some of the observed findings linking SNAP and health outcomes. A few qualitative studies on SNAP have been conducted. One gathered experts' opinions on barriers to healthy eating and one assessed food choice of low-income women on a SNAP budget in the Midwest.<sup>23,24</sup> An evaluation conducted for the US Department of Agriculture included in-depth interviews with participants, but focused on SNAP's influence on food security of families.<sup>25</sup> Understanding the context and meaning of this phenomenon from the participants' perspective can inform the development of strategies to improve experiences with SNAP and expand access.

This study addresses an important gap in research on SNAP by providing qualitative data from low-income, ethnically

diverse urban mothers at different time points to provide insight on specific program changes. Examining the effect of these changes from the participants' perspectives provides preliminary data on the acceptability and effectiveness of these strategies beyond observed use, which is critical given the significant health consequences of food insecurity and malnutrition.<sup>26</sup> The primary aim of this study was to examine the perspectives of Baltimore SNAP users to identify how SNAP is meeting their needs, what barriers they experience, and how their experiences in accessing and maintaining benefits varied at each of the two time points. Secondary aims included understanding low-income families' experiences with SNAP after program changes in 2010 and how SNAP fits into the overall system of social services for families.

## MATERIALS AND METHODS

### Sample

Criterion sampling, selecting participants based on a pre-determined criteria, was used to purposively select mothers who were eligible for SNAP.<sup>27</sup> The sample included only those eligible for SNAP because these informants could speak in detail about each aspect of SNAP from enrollment to recertification to benefit use.

Participants were recruited via flyers and in-person recruitment sign-ups at five early childhood education sites, three Early Head Start Centers, and two Maryland Family Network Centers, as well as through identification by Advocates for Children and Youth, the study's partner organization. These sites were selected based on their access to the study's target participants, as well as interest and response from the sites about the study. To be eligible for the study, participants had to be at least aged 18 years, have at least one child or legal dependent, speak English, and be eligible for SNAP.

The final sample included 33 women receiving SNAP benefits: 10 women in the first round of data collection (January to May 2010) and a separate group of 23 women in the second round of data collection (February to May 2013). Participants were predominately African American (N=31 women) and were currently receiving SNAP benefits in Baltimore, MD. Participant names and detailed demographic information were not collected to encourage open participation and ensure confidentiality during focus group discussions.

### Data Collection

An emergent design was used in this phenomenologic study to explore experiences of low-income mothers in Baltimore about SNAP during a 3-year period, using two rounds of qualitative interviews and focus groups. A phenomenologic study is a form of qualitative research with the goal of describing and understanding a phenomenon, including people's emotions, attitudes, thoughts, meanings, perceptions, or experiences.<sup>27</sup>

The research teams consisted of graduate students trained through a qualitative research course (consisting of three student researchers in 2010 and six student researchers in 2013) supervised by professors experienced in qualitative research. Researchers conducted a total 23 in-depth interviews with 13 women and three focus group discussions with 20 women between 2010 and 2013. Ten of the 13 in-depth interview participants were interviewed twice during

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