

The Academy of Nutrition and Dietetics' Priorities in the 2018 Farm Bill



EVERY 5 YEARS, THE US Congress considers a new farm bill, which is the primary legislation authorizing agriculture and food policy in the United States. The farm bill is a mechanism through which many of the public policy priorities of the Academy of Nutrition and Dietetics (Academy) come to life and is due to be reauthorized in 2018. The farm bill guides the US and global food supply and improves food security for millions of people. Farm bill programs provide support for the jobs held by Academy members who work in nutrition education and research, and who help Americans at risk of food insecurity, hunger, and chronic illnesses.

The Academy is committed to improving the health of Americans by ensuring that the US food supply is nourishing, safe, and affordable. Nutrition education and quality nutrition services should be integral components of nutrition assistance programs. The Academy's guiding principle for farm bill recommendations is a commitment to policies that improve health for everyone, especially those who are most vulnerable to food insecurity.

THE STAKES OF FOOD INSECURITY

Food insecurity affects millions of Americans every year from children to

seniors, including veterans and active duty military, families, and people with disabilities. In 2016, 12.3% of American households experienced limited access to adequate food because of a lack of money or other resources.¹ Households can face a wide variety of barriers that hinder their ability to attain food security, including inadequate transportation; a lack of variety of nutritious foods; or unaffordable nutritious food, particularly for families in economic distress.² The number of people experiencing food insecurity has declined in recent years, but has not yet fallen below prerecession levels in 2007.¹

Research clearly shows that the consequences of food insecurity are grave and long lasting. An inadequate diet can lead to physical and behavioral health impairments and increased risk for illnesses ranging from hypertension to asthma to cancer.³ The risk for chronic diseases increases along with the severity of food insecurity.⁴ Children face lasting consequences that include the development of chronic health conditions and a greater risk for other poorer developmental outcomes, including learning readiness.³ These outcomes underscore why the Academy is committed to ensuring access to a nourishing, safe, and affordable food supply, and why the farm bill is so important for the health of Americans.

FARM BILL RECOMMENDATIONS

The Academy has identified recommendations to strengthen the farm bill's current programs, to increase access to affordable and nutritious food (particularly for those most in need), and to improve the marketplace for the diversity of foods that is necessary for health and food security.

The Academy's Farm Bill Work Group developed recommendations for Congress that span three types of federal program:

History of Nutrition in the Farm Bill

Nutrition assistance programs have been entwined with agriculture programs since the nation's very first farm bill, the Agricultural Adjustment Act of 1933. Enacted during the Great Depression, this legislation is among the most lasting pieces of Franklin D. Roosevelt's New Deal. At the time, American farmers were producing extensive surpluses because new machinery made farms more productive while crop prices crashed due to pervasive global economic weakness. This set of conditions, along with families in need of support to put food on the table, led to the creation of the program that would become the Supplemental Nutrition Assistance Program. The government bought crops at discounted prices and distributed the food to agencies that helped hungry families, providing a market for struggling farmers as well as providing food to economically distressed families.⁵

The first nutrition assistance program ended in 1943 due to the economic improvement and reduction of poverty associated with the US war effort during World War II. A pilot program was revived in several states in 1961, and in 1964 the program was fully revived.⁶ Now more than 80 years after the first farm bill, farm and nutrition programs continue to operate in tandem, but with an increasingly complex relationship.⁶ Keeping agriculture and nutrition linked can continue to help achieve key policy goals. The farm bill now contains 12 sections: commodities, conservation, trade, nutrition, credit, rural development, research and extension, forestry, energy, horticulture, crop insurance, and a section addressing other related issues.

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- nutrition assistance programs that help individuals and families obtain access to healthful and nutritious food;
- nutrition education programs that empower people to develop skills to choose healthful diets and reduce the risks of developing chronic disease; and
- nutrition research programs that expand the frontier of scientific knowledge about nutrition, improve the functioning of nutrition assistance and nutrition education programs, and improve the quality of information provided by Academy members and other health practitioners.

Nutrition Assistance Programs Supplemental Nutrition Assistance Program.

The Supplemental Nutrition Assistance Program (SNAP) is the largest component of the nation's food safety net and helps many families meet their basic nutrition needs. In 2017, more than 40 million people participated in SNAP. Over the past 4 years, SNAP caseloads and spending have declined, largely due to improvement in the economy, but remain higher than a decade ago. The Congressional Budget Office forecasts that the share of the population receiving SNAP will return close to the 2007 prerecession levels of around 9% by 2027.⁷

Research shows SNAP is effective in preventing food insecurity, and is linked with improved health outcomes and lower health care costs.⁸ A survey of 3,000 households with children showed that SNAP participation decreased the odds of experiencing food insecurity by one-third.⁹ SNAP is especially beneficial for pregnant mothers, reducing the likelihood by between 5% and 23% that a child will be born with low birthweight.¹⁰ Children participating in SNAP are less likely to have anemia and nutritional deficiencies, and are more likely to thrive¹¹ and have better academic outcomes.¹²

Although research shows the numerous health benefits of participating in SNAP, a 2013 report from the National Academy of Medicine (formerly Institute of Medicine) concluded that SNAP's maximum

benefit guarantee might not be sufficient for many families. SNAP is based on the Thrifty Food Plan as defined by the US Department of Agriculture (USDA), and makes several assumptions that may not always be warranted, including that families have time to prepare meals from scratch or that food costs are the same across the United States. The plan also calculates benefits by projecting the cost of food 16 months in advance and makes a number of technical adjustments that can leave participants with inadequate benefits.¹¹

SNAP has been shown to influence the overall economy by reducing the extent of poverty and encouraging labor-force participation. SNAP benefits are a fast and effective form of stimulus because many low-income individuals, by necessity, spend most of their income meeting daily needs, and therefore quickly spend their SNAP benefits on the purchase of additional food. Moody's Analytics¹³ has estimated that, when the economy is weak, a \$1 increase in benefits paid out by SNAP generates \$1.70 in economic activity. The Congressional Budget Office reports that SNAP has among the largest "bangs-for-the-buck" among policies that stimulate economic growth and job creation when the economy is weak.⁸

SNAP is an investment in the health of Americans and in our economy. Increasing SNAP benefits may lead to an improvement in diet quality and decrease health care spending.⁸ Benefit adequacy could be improved by combining incentives to purchase healthy food with nutrition education. A Healthy Incentives Pilot, completed by the USDA in 2014, showed promise at maximizing the effectiveness of current benefit levels. In the pilot program, a 30% incentive for certain fruits and vegetables significantly increased the amount of fruits and vegetables that participants consumed.¹⁴

Academy Recommendations. The Academy opposes making changes to the current structure of SNAP, including any effort to shift the program to a state-based grant system. The Academy supports increasing SNAP benefit levels to better prevent hunger and provide families with the resources they need to make healthful food choices. The Academy also supports elimination of the requirement that

military members must include their basic housing allowance in their income calculations when receiving SNAP benefits.

Although SNAP is the single largest nutrition assistance program in the United States, there are a number of other important nutrition programs that play a critical role in ensuring people have access to healthy food.

The Emergency Food Assistance Program.

As its name describes, this program provides emergency food and nutrition assistance, largely through food banks and pantries that play an important role supplementing the diets of low-income individuals and families. The Academy supports sufficient funding for this program.

The Commodity Supplemental Food Program.

The Commodity Supplemental Food Program is expected to provide about 697,000 low-income seniors with supplementary USDA foods during 2017, helping to protect older adults from food insecurity or malnutrition. The Academy supports reauthorizing The Commodity Supplemental Food Program and increasing funding to allow the remaining two states (Alabama and Wyoming) to begin participating. The Academy also supports extending the program's certification period to reduce its administrative burden.

Other Programs. The Academy also supports the innovative programs created in the 2008 and 2014 farm bills that were designed to support healthy food access and stronger food systems.⁶ The Food Insecurity Nutrition Incentive is a grant-based program which provides financial incentives for families to purchase healthy foods. The Healthy Food Financing Initiative is designed to stimulate economic development and job creation in low-income communities, underserved communities, and communities of color in urban and rural areas. The Healthy Food Financing Initiative supports farmers and healthy food retailers in these communities.

The Academy also continues to support projects to improve the distribution of fresh, frozen, and perishable foods on American Indian reservations, and throughout the entire food system.

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