Improving Diet Quality in SNAP

Society for Nutrition Education and Behavior Annual Meeting, July 2019
Orlando, FL

Tracy Fox, MPH, RD
Nutrition & Policy Consultants, LLC

Angie Tagtow, MS, RD, LC
Äkta Strategies, LLC

Joelle Johnson, MPH
Center for Science in the Public Interest

Jennifer Folliard, MPH, RDN
South Dakota State University, Extension

Kristy Anderson, MPP
American Heart Association

Moderated by: Colin Schwartz, MPP
Center for Science in the Public Interest
Improving Diet Quality in SNAP

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Tracy Fox, MPH, RD
President, Food, Nutrition & Policy Consultants, LLC
Culver, IN
tracy@foodnutritionpolicy.com
www.foodnutritionpolicy.com
@TracyFoxRD
The Agriculture Improvement Act of 2018

One hundred fifteenth Congress
Of the
United States of America

An Act
To provide for the reform and continuation of agriculture and other programs of the Department of Agriculture through fiscal year 2023, and for other purposes.
Federal law that governs an array of ag and food programs.

Renewed every 5 years to reassess and reallocate funds; make program changes

Twelve thematic areas called “Titles”

Four Titles account for majority of funding

2018 bill expected to cost total of $428 billion over 5 years
Farm Bill Spending

- **Nutrition**: 76%
  - SNAP, farm market vouchers, fruit/vegetable program, nutrition education
- **Crop Insurance**: 9%
  - Subsidies; crop insurance
- **Conservation**: 7%
  - Environmental stewardship/land management
- **Commodity Program**: 7%
  - Payments/loans when market prices low
- **Other**: 1%
  - Trade, research, energy, rural development, food safety
- **Other**: 0%

**Conservation**
- Environmental stewardship/land management

**Crop Insurance**
- Subsidies; crop insurance

**Commodity Program**
- Payments/loans when market prices low

**Other**
- Trade, research, energy, rural development, food safety

**Nutrition**
- SNAP, farm market vouchers, fruit/vegetable program, nutrition education
SNAP – The Impact

- Largest nut asst. pgm (40 million ppl; $60.6B); provides food to 1 in 7 Americans; 2/3 are kids, elderly, people w/ disabilities
- 84% benefits go to HH w/ children
- Reduces food insecurity and disparities
- “health care intervention”
- Bolsters local economy; enhances food purchasing power
- SNAP participants are an integral part of all communities!
- Impact on diet quality
Farm Bill 2018 - Wins

• SNAP: maintains access to and funding for SNAP; no harsh additional work req’t (BIG WIN – for now)

• FINI – now Gus Schumaker grant: increases funding; makes permanent; $25 million to produce Rx × 5 years

• SNAP-Ed: Maintains current funding/structure; online clearinghouse; stronger evaluation; training & TA

• Local foods: improvements to programs & funding for farmers market/local foods promotion; more EBT machines at markets

• Thrifty Food Plan: USDA to reevaluate and update

• Food Waste Liaison; report to Congress; improved awareness

• Establishes Urban Ag Office
Farm Bill 2018 – Losses

• Continues farm subsidy loopholes
• Cuts funding for conservation
• No healthy eating pilots (SNAP) beyond FINI
• Did not recognize diet quality as a core SNAP objective (along w/ food security & fiscal integrity)
• Did not improve transparency in SNAP retailer data
Missed Opportunities: Nutrition and SNAP
SNAP Attacks/Set Backs

**Prop Rule:** Able Bodied Adults Without Dependents (ABAWDs)

**Public Charge:** dependent on gov’t for public asst (SNAP) could = deny entry to US

**SNAP Data:** Lack of transparency on SNAP retailer data (Supreme Court Ruling)

**Prop Rule:** Providing Regulator Flexibility for Retailers in SNAP

“Spray cheese, beef jerky and stuffed olives to be counted as staples under Trump administration food stamp proposal” – Washington Post, May 30
Average Diet Quality Among U.S. Populations

Angie Tagtow, MS, RD, LD
Founder & Chief Strategist
Äkta Strategies, LLC
Current Eating Patterns in the United States
Percent of the U.S. Population Ages 1 Year and Older Who are Below, At, or Above Each Dietary Goal or Limit (Figure 2-1)

Note: The center (0) line is the goal or limit. For most, those represented by the blue sections of the bars, shifting toward the center line will improve their eating pattern.

Data Source: What We Eat in America, NHANES 2007-2010 for average intakes by age-sex group. Healthy U.S.-Style Food Patterns, which vary based on age, sex, and activity level, for recommended intakes and limits.

The Healthy Eating Index (HEI) is a measure of diet quality used to assess how well a set of foods aligns with key recommendations of the Dietary Guidelines for Americans.
How Healthy Is the American Diet?

U.S. Scores Over Time

<table>
<thead>
<tr>
<th>Year</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>2005-2006</td>
<td>56</td>
</tr>
<tr>
<td>2007-2008</td>
<td>57</td>
</tr>
<tr>
<td>2009-2010</td>
<td>59</td>
</tr>
<tr>
<td>2011-2012</td>
<td>60</td>
</tr>
<tr>
<td>2013-2014</td>
<td>59</td>
</tr>
</tbody>
</table>

U.S. Scores by Age Group

- Ages 2-5: 60
- Ages 6-11: 53
- Ages 12-17: 53
- Ages 18-64: 58
- Ages 65+: 66

The Healthy Eating Index Score shows that Americans do not align their eating choices with the Dietary Guidelines. (on a scale from 0-100)

Data source for Healthy Eating Index scores: What We Eat in America, National Health and Nutrition Examination Survey (undated data are from 2013-2014).
Leading Causes of Death in the US, 1980 & 2017
(adapted from National Center for Health Statistics, 2018)

<table>
<thead>
<tr>
<th>Rank</th>
<th>1980</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Cause of Death</td>
<td># Deaths</td>
</tr>
<tr>
<td>1</td>
<td>Diseases of heart</td>
<td>761,085</td>
</tr>
<tr>
<td>2</td>
<td>Malignant neoplasms</td>
<td>416,509</td>
</tr>
<tr>
<td>3</td>
<td>Cerebrovascular diseases</td>
<td>170,225</td>
</tr>
<tr>
<td>4</td>
<td>Unintentional injuries</td>
<td>105,781</td>
</tr>
<tr>
<td>5</td>
<td>Chronic obstructive pulmonary diseases</td>
<td>56,050</td>
</tr>
<tr>
<td>6</td>
<td>Pneumonia and influenza</td>
<td>54,619</td>
</tr>
<tr>
<td>7</td>
<td>Diabetes mellitus</td>
<td>34,851</td>
</tr>
<tr>
<td>8</td>
<td>Chronic liver disease and cirrhosis</td>
<td>30,583</td>
</tr>
<tr>
<td>9</td>
<td>Atherosclerosis</td>
<td>29,449</td>
</tr>
<tr>
<td>10</td>
<td>Suicide</td>
<td>26,869</td>
</tr>
</tbody>
</table>
## GDP & National Health Expenditures in the US 1960, 1980 & 2017
(adapted from National Center for Health Statistics, 2018)

<table>
<thead>
<tr>
<th></th>
<th>1960</th>
<th>1980</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Gross Domestic Product (GDP)</strong></td>
<td>$542.4</td>
<td>$2,857.3</td>
<td>$19,485.4</td>
</tr>
<tr>
<td><strong>National Health Expenditures</strong></td>
<td>$27.2</td>
<td>$255.3</td>
<td>$3,492.1*</td>
</tr>
<tr>
<td><strong>National Health Expenditures as Percent of GDP</strong></td>
<td>5.0%</td>
<td>8.9%</td>
<td>17.9%</td>
</tr>
<tr>
<td><strong>Health Expenditures Per Capita</strong></td>
<td>$146</td>
<td>$1,108</td>
<td>$10,739</td>
</tr>
</tbody>
</table>

* 34% private health insurance, 20% Medicare, 17% Medicaid, 10% Out-of-pocket
Conformance with Healthy Eating Patterns Reduces Health Care Costs

- An daily increase of 2 cups of fruits and vegetables consumed would save an estimated $32 billion in health care expenditures\(^a\)

- A 20% increased conformance to a healthy eating pattern as measured by HEI-15 would save an estimated $31.5 billion in health care expenditures\(^b\)

- An 80% increased conformance to a healthy eating pattern as measured by HEI-15 would save an estimated $55.1 billion in health care expenditures\(^b\)

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Research on Diet Quality Among SNAP Participants

Joelle Johnson, MPH
Center for Science in the Public Interest
Participating in SNAP does not improve diet quality

**Overall Diet Quality**

- Diet quality among low-resourced Americans is poor, regardless of participation in SNAP
  - HEI for adult SNAP participants = 47/100
  - HEI for adult income-eligible non-participants = 51/100

Overall SSB Consumption

Source: Bleich et al., 2017
Differences in SSB consumption by income and race

- Daily sugary drink intake is higher among low-income Americans (60% vs. 45%)
  - 236 vs. 140 calories per day

- Despite declines, consumption remains higher among Black and Hispanic populations.

Graphs from: Healthy Food America, 2018
SSB marketing targets communities of color and SNAP participants
Improving Diet Quality within the Supplemental Nutrition Assistance Program

A Community Nutrition Perspective

Jennifer Folliard, MPH, RDN
Family and Community Health Field Specialist

July 2019
Diet Quality: Direct Education

• Literature review, food security and diet quality
  – Strong study design, even with few number of studies -> SNAP-ED increase food security
  – While some studies indicated increased diet quality, the evidence was not as strong as food security impact
Diet Quality: Policy, Systems and Environment

- Community food environment as a mediating factor
- Sustaining a healthy community food environment is key to sustained and improved diet quality
Collective Impact Model to Improve Diet Quality

• Common Agenda
• Mutually Reinforcing Activities
• Continuous Communication
• Backbone Support Organization
Treatment vs. Comparison

Community Coaching

Food Council Creation Guide

Food Pantry Toolkit

Coaching Confidence Scorecard

Food Council Scorecard

MyChoice Scorecard

Food Pantry Toolkit

Food Council Creation Guide

Food Pantry Toolkit
Diet Quality: Financial Incentives

- Economic incentive for the consumer and for the retail outlet
- Scoping review
  - Comprehensive set of strategies
  - Incentives/rebates for healthy food
  - Improved access to healthy food
  - Restrictions on purchase
Building Statewide Support for Healthy SNAP Strategies

Joelle Johnson, MPH
Center for Science in the Public Interest
Creating state and local momentum

Consensus-building Model

**Phase 1 – Data Collection & Dissemination**
- Regional convenings in key states
- Key informant interviews
- Focus groups and/or interviews with SNAP participants
- SNAP retailer interviews
- Disseminate results

**Phase 2 – Pilot**
- Identify research partners
- Secure funding
### Statewide Recommendations

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<tr>
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</thead>
<tbody>
<tr>
<td><strong>Consensus on 4 strategies</strong></td>
<td><strong>Recommendations from convening</strong></td>
</tr>
<tr>
<td>1. Opt into a pilot that offers FV incentives in exchange for not purchasing soda</td>
<td>• In-store marketing</td>
</tr>
<tr>
<td>2. Expand existing FV incentives to more retailers</td>
<td>• SNAP mobile app</td>
</tr>
<tr>
<td>3. Stronger minimum stocking standards for SNAP retailers</td>
<td>• Expand HIP to grocery stores</td>
</tr>
<tr>
<td>4. In-store nutrition education</td>
<td><strong>Recommendations from retailers</strong></td>
</tr>
<tr>
<td></td>
<td>• Combine marketing (placement, shelf tags, etc.) with other strategies like incentives or education</td>
</tr>
<tr>
<td></td>
<td>• FV incentives in grocery stores</td>
</tr>
<tr>
<td></td>
<td>• Partial consensus on pairing FV incentives with opting out of soda purchases.</td>
</tr>
</tbody>
</table>
# Action Steps for Improving Diet Quality Among SNAP Participants

<table>
<thead>
<tr>
<th>Engage</th>
<th>Implement</th>
<th>Inform &amp; Educate</th>
<th>Research</th>
<th>Protect &amp; Advocate</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓SNEB Advisory Committee on Public Policy ✓SNEB Position Statement proposal ✓NANA Coalition</td>
<td>✓Stronger linkages between USDA research and programming and practice ✓Technical assistance centers for incentive programs</td>
<td>✓Food security, economic, and health impacts of SNAP ✓In-store nutrition education</td>
<td>✓Incentive and disincentive pilots to test various approaches to improve diet quality ✓Publish results</td>
<td>✓Nutrition as a core objective of SNAP ✓Enhanced support for SNAP-Ed ✓Minimum stocking standards for SNAP retailers ✓Funding for pilots, programs, and research</td>
</tr>
</tbody>
</table>