US food insecurity and the role of SNAP
An Overview, Links with Health, and the Era of COVID

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Defining food security and insecurity

“Food security exists when all people, at all times, have physical and economic access to safe and nutritious food that meets their dietary needs and food preferences for an active and healthy life.”

SOURCE: World Food Summit 1996
Defining food security and insecurity

**Food security** exists when all people, at all times, have physical and economic access to safe and nutritious food that meets their dietary needs and food preferences for an active and healthy life.”

**Food insecurity** is the limited or uncertain availability of nutritionally adequate and safe foods, or limited or uncertain ability to acquire acceptable foods in socially acceptable ways.”

*SOURCE: World Food Summit 1996*  
*SOURCE: U.S. Department of Agriculture*
National trends in food insecurity

Who experiences food insecurity?

- **Household composition**
  - Households with children (14.8%)
  - Households with young children (15.3%)
  - Female headed household (27.7%)
  - Male headed household (16.3%)

- **Race/ethnicity**
  - Black, non-Hispanic household (21.7%)
  - Hispanic household (17.2%)

- **Income to poverty ratio**
  - Under 1.85 (28.6%)
  - Under 1.30 (33.1%)
  - Under 1.00 (35.3%)

Food insecurity and PDQS—COVID

Mean PDQS score

- Full food security: 53.2
- Marginal food security: 52.3
- Low food security: 51.3
- Very low food security: 50

Estimates adjusted for sociodemographic characteristics

Food insecurity and diet quality

- Fewer dark green vegetables
- Fewer cruciferous vegetables
- Fewer nuts and seeds
- Less liquid oils
- Less fish
- Less low-fat dairy
- Fewer whole grains
- More white potatoes
- More processed meats
- More fried foods
- More sugary beverages
- More refined grains

Food insecurity and cardiometabolic disease

- 48% higher prevalence of diabetes (Seligman et al. 2010)
- 65% higher odds of metabolic syndrome (Parker et al. 2010)
- 21% higher odds of inflammation (Gowda et al. 2012)
- 21% higher prevalence of hypertension (Seligman et al. 2010)
- 38% higher odds of non-alcoholic fatty liver disease (Golovaty et al. 2020)
Consequences of child food insecurity

- Increased developmental risk
- Lower physical function
- Lower psychosocial function
- Lower motor development
- Lower mental development
- Lower maternal attachment
- Hyperactivity
- Absence from school
- Aggression and anxiety
- Internalizing disorders
- Externalizing disorders
- Mood disorders
- Behavior disorders
- Depression
- Asthma
- Mental health problems
- Behavioral problems
- Substance abuse problems
- Lack of concentration
- Difficulty getting along with peers
- Suspension from school
- Thoughts of death, suicide attempts
Why the Role of Stress Matters

McEwen B. Allostasis and Allostatic Load: Implications for Neuropsychopharmacology. 2000
Food insecurity and SNAP during COVID
Assessing Food Insecurity among US Adults during the COVID-19 Pandemic

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**Abstract**

This research examines the intersection of social vulnerability, risk, and their impact on individual food insecurity odds during the COVID-19 pandemic. Data come from a national, post-stratification weighted sample of U.S. adults ($n=10,368$). Logistic regression analysis confirms what we hypothesized – socially vulnerable, fearful, persons in poorer health, and those with higher levels of depressive and anxiety symptoms have higher food insecurity odds. Findings underscore the importance of redesigning food systems in the U.S. during health crises like the current one: alternative strategies to meet increased food needs in the face of a pandemic are discussed.

**Keywords**

Food Insecurity; vulnerability; COVID-19; risk; fear

**Introduction**

In January 2020, the first case of the novel coronavirus (COVID-19) was

\textbf{March 23, 2020 (n=10,368 adults)}

\textbf{Food insecurity: 38.3%}

\textbf{March 29, 2020 (n=3,219 adults)}

\textbf{Food insecurity: 24.8%}
### Food insecurity in early months of COVID

<table>
<thead>
<tr>
<th></th>
<th>% with Food Insecurity</th>
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<tbody>
<tr>
<td><strong>Total</strong></td>
<td>44%</td>
</tr>
<tr>
<td><strong>Race/ethnicity</strong></td>
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<tr>
<td>NH White</td>
<td>42%</td>
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<tr>
<td>NH Black</td>
<td>48%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>52%</td>
</tr>
<tr>
<td><strong>Children in home</strong></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>54%</td>
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<tr>
<td>No</td>
<td>40%</td>
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<tr>
<td><strong>Income</strong></td>
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<tr>
<td>&lt;$35,000/year</td>
<td>47%</td>
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<tr>
<td>$35,000-$59,000/year</td>
<td>44%</td>
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<tr>
<td>≥$59,000/year</td>
<td>32%</td>
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</tbody>
</table>

Food insecurity in early months of COVID

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Food insecurity in early months of COVID

Food insecurity in early months of COVID

“I have lived week by week, just barely, to avoid asking for help. Now, I am falling through the cracks, invisible to a system suddenly flooded by the needs of people it already recognizes as needing help. I am in danger of losing my home and everything in it. I am very scared.”

– Adult with LFS

“I have anxiety disorders, so this is worse on me. Every sniffle or runny nose... I now think is a death sentence. I am a nervous wreck anytime I have to go anywhere.”

– Adult with MFS

“I’m low income so even missing one day [of work] could make me and my family go hungry [...] we are suffering because other people got sick even though we are healthy.”

- Adult with VLFS
Food insecurity from March to June 2020

National trends in food insecurity

PERCENTAGE OF HOUSEHOLDS THAT SOMETIMES OR OFTEN DIDN’T HAVE ENOUGH TO EAT

- All households
- Households with children

Dec. 29, 2020: Stimulus check #2 sent out

March 12, 2021: IRS begins sending stimulus check #3

January 2021: SNAP benefits increase by 15 percent

July 15 and Aug. 13, 2021: Child tax credit payments sent out

Note: Data is plotted as of the end of the two-week survey collection period. Dotted lines represent breaks in survey collection.
Source: Biweekly Census Bureau Household Pulse Survey of an average of 250,000 Americans
By: Annette Choi/POLITICO
Mobilization of SNAP

• **Families First Coronavirus Response Act of March 2020** *(ends with PHE)*
  • Raised SNAP benefit allotments to maximum benefit amount for HH size
  • Relaxed 3-mo limit for ABAWDs to receive benefits
  • Provide states greater flexibility to recertify existing participants

• **American Rescue Plan Act of 2021** *(ends with PHE)*
  • Increased SNAP benefits by 15%
  • Allow states greater administrative support to process increased SNAP applications

• **Online Purchasing Pilot** *(permanent)*
  • Expanded to 47 states in 2020

• **White House Executive Order** *(permanent)*
  • Reevaluated Thrifty Food Plan, leading to 21% permanent increase of SNAP benefits
SNAP POLICY & THE PUBLIC HEALTH EMERGENCY

Chloe Green
Sr. Policy Associate, Food and Nutrition Services

April 5, 2023
ABOUT US

Member Driven
Representing leaders from state, county, and city human services agencies across the country.

Bipartisan
With a focus on building common ground and generating practical solutions that work for people and communities.
Administer and align services that build resilience and bolster family well-being through access to food, health care, housing, employment, child care, and many other key building blocks necessary for thriving communities.

Drive innovation in complex Information Technology (IT) systems, performance measurement and data analysis, legal considerations, and workforce development and training.
So, what’s changed lately in SNAP?

2020

Onset of COVID-19 public health emergency and passage of legislation for SNAP flexibilities
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**2020**
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**2021**
States use of flexibilities vary, $1.15B in SNAP admin funds passed in the American Rescue Plan
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**2020**
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**2021**
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**2022**
States prepare for the end of the PHE. Dec ‘22 Omnibus passes an early end to extra SNAP benefits
So, what’s changed lately in SNAP?

- **2020**: Onset of COVID-19 public health emergency and passage of legislation for SNAP flexibilities
- **2021**: States use of flexibilities vary, $1.15B in SNAP admin funds passed in the American Rescue Plan
- **2022**: States prepare for the end of the PHE. Dec ‘22 Omnibus passes an early end to extra SNAP benefits
- **2023**: All states must end emergency allotments and other flexibilities tied to PHE
WHAT SNAP FLEXIBILITIES ARE TIED TO THE PHE?

Emergency Allotments: Money added to monthly SNAP benefit to reflect max benefit level (or more).

College Students: Adds additional ways for students to qualify for SNAP — including work study qualification or expected family contribution of $0.

Interviews: States had the option to waive the requirement to conduct an interview prior to certification of eligibility.

Work Requirements: Suspended ABAWD 3-month time limit during the PHE and for one month after.

Telephonic Signature: Allows states and counties to accept verbal signatures without additional tech.

Certification Periods & Periodic Reporting: Allows states to modify or push these out to keep people on SNAP.
WHAT’S THE CURRENT STATE OF SNAP?

- All states required to stop issuing EAs by March ‘23
- Medicaid unwinding started by April 1
- Additional college student flexibilities start to end June ‘23
- ABAWD time-limit for work requirements will resume July ‘23
- States have options to use certain flexibilities to support PHE transition

National Public Health Emergency is set to end May 11, 2023
HOW ARE STATES SUPPORTING CUSTOMERS DURING THIS TRANSITION?

- **Using State Budgets to Increase SNAP Benefits (permanently or temporarily):** MA passed a bill to fund a step-down SNAP benefit after the end of emergency allotments, and states like NJ, CA, and MD have raised minimum benefits or will in the near future.

- **Investing in Modern Technology to Improve Customer Experience:** Learning from the pandemic, states are investing in tools to support self-service tools and make it easier to update information on your phone or computer.

- **Increasing Outreach & Supporting Alignment Across Medicaid & SNAP:** As Medicaid unwinding takes place, programs are working together to support clients.
What’s next?

The 2023 Farm Bill!
RESOURCES TO DIVE DEEPER

- APHSA’s 2023 Farm Bill Recommendations & Resources
- SNAP Waivers & Adaptations During the COVID-19 Pandemic: A Survey of State Agency Perspectives in 2020
- Exploring States’ SNAP Modernization Projects
- APHSA Summary of Consolidated Appropriations Act of 2023
- USDA FNS Resources to Support Transition out of PHE
Learn more about APHSA and our partners

www.aphsa.org
The Role of Our Safety Net during COVID and the Importance of SNAP

Marianne Bitler, Ph.D.

University of California-Davis

National Bureau of Economic Research
Role of the public safety net

• Currently, we have a patchwork safety net, with a wide range of safety net and social insurance programs. They serve 2 purposes
  1. Floor for eligible person’s consumption
  2. Stabilizers during downturns

• Our federalized system means programs vary considerably across locations. Reforms have made our safety net more “in work”

• The lack of integration of programs and data and the need for eligible people to apply differs from many other OECD countries.

• The Great Recession and then, more recently, COVID, stressed our system.
Big Picture Where We Started: More in-work welfare, less automatic stabilization

• The US has moved towards both a work-based safety net and away from an out-of-work safety net since the mid 1990s.
• EITC: Increases LFP for some, some + effects for kids and mothers.
• TANF (block grant): Largely repurposed former cash entitlement program for state's preferred in-kind spending, fixed in nominal terms.
• Food Stamp Program remains the main unconditional program left.
• In the background, unemployment insurance, also run by states.
• Are these programs adequate? Maybe not at very bottom, not all responsive to shocks.
• What does this mean when crisis hits? Evidence from the Great Recession and COVID
Key features of our federalized system for SNAP

• Relatively "uniform" program
• Some role for states, local offices
• Some state variation in policy pre-COVID and which USDA options states implemented
Federalized System For SNAP: Pros and cons

- **States and localities can make choices that better reflect local needs**, closer to citizens, sort to local good provision you want-efficiency through competition (Oates, Tiebout)

- But state/local actors also **may have different goals than Federal Government** (principal/agent)

- **Data acquisition and bureaucracy** and ease/public costs of eligibility determination **vary widely across locations** due to capacity constraints, other factors
Responsiveness of SNAP to labor market shocks pre-COVID: What did we expect?

Great Recession Evidence

- Used administrative data on people and spending with population counts at the state level from 2000-as close to COVID as we could get.
- We look at responsiveness with respect to state unemployment rates, with state and year fixed effects.
- SNAP nearly as responsive as UI (most responsive), AFDC not anymore. Means tested programs do less than the social insurance programs.
- Makes sense, program is an entitlement, and should respond to shocks, people can get on the program relatively quickly.
Responsiveness of SNAP to labor market shocks during COVID

**COVID era:** Drawn from Bitler, Hoynes, and Schanzenbach (2020, BPEA; forthcoming, Russell Sage Journal), other’s work

- Survey data: CPS, Census Pulse
- Administrative data: Treasury Statements for spending, USDA data on SNAP caseloads and disbursements
- SNAP spent more: First paid all the max. allotment, later make sure those at max. also gained (later)
- SNAP easier to stay on: Other changes to make it easier to stay on the program, not kicked off, also Pandemic EBT
- SNAP is an entitlement, participation should go up
Shock was massive:
Unemployment rates by race/ethnicity
People suffered: Annual food insecurity by race/ethnicity: Hardship among children in 2019 vs. 2020
Massive Response: >1.4 trillion $$ more in spending overall through mid August 2021 (New Spending in Figure), yet much need, additional SNAP small as a share of additional spending yet still important
Not all relief spending targeted to shock, more SNAP $ to places with smaller employment losses.

\[ \beta = 0.5144^{**}, \quad R^2 = 0.0021 \]
Safety net currently not designed for economic downturns for the poor

Shift over 25 years to a work-based safety net

- Boosts low earnings (EITC)
- Little out-of-work payments (TANF)
- These provide no insurance against job loss
- SNAP spending countercyclical but worst off not targeted with some COVID expansions.
- Leverage what we learned during COVID and more broadly.
  - People stay on programs if they can recertify less or more easily. (SNAP, other food assistance, Medicaid.)
  - Reducing administrative burden works if the goal is more participation among eligibles.
  - Trying to add new programs on the fly is hard. Build this into current programs.
More suggestions for SNAP

• Political economy: In kind benefits are attractive across the aisle, in kind programs like SNAP shift spending towards food consumed at home, increase food spending. Economists like efficiencies to letting households choose their bundles.

• Better targeting expansions: Useful to quickly expand max. allotments through the system, but those at the max. allotment likely benefited from raising their benefits. Comparisons to ARRA.

• Automatic stabilizers: Have the federal government determine responses (e.g., waiving ABAWD rules that doesn’t depend on state timelines). SNAP benefits are fully funded so states only pay for their share of administrative costs. SNAP always relatively big, so easier to ramp up than some programs.

• On line shopping for everyone possibility?

• Pandemic EBT (in pandemic for those getting school meals, new proposals to make it replace summer programs): Effective and perhaps a model.

• Even this federal program has considerable variation across places. Role of state policy choices and federalism.