

POSITION STATEMENT:

Congress Must Protect Funding for SNAP, WIC, and School Breakfast/Lunch Programs

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The Society of Behavioral Medicine urges Congress to protect funding for the Supplemental Nutrition Assistance Program; the Special Supplemental Nutrition Program for Women, Infants, and Children; and school breakfast and lunch programs.

One in six American children suffers from food insecurity,^{1,2} meaning they have “limited or uncertain access to adequate food.”^{1,3} In households with food insecurity, families run out of food by the end of the month and parents forgo food so their children can eat.^{4,5} Children are never sure there is going to be enough food.^{4,5}

Food insecurity has serious and potentially permanent effects on children’s neurological development,^{6,7} cognitive development,^{7,8} educational functioning,⁷ and overall health.^{7,9} Food insecurity in children is related to profound psychosocial distress, including risk of suicide.¹⁰ The inadequate intake of important nutrients can lead to behavior problems, poor health,^{7,9} and, counterintuitively, to obesity.¹¹

Three federal nutrition assistance programs help families avoid food insecurity and its harmful impacts. The Supplemental Nutrition Assistance Program (SNAP, previously known as food stamps) gives low-income families money to purchase eligible food items. SNAP helps 20 million children every month.² The Center for Budget and Policy Priorities calls SNAP “the nation’s most important anti-hunger program.”¹² Children receiving SNAP benefits are more likely to experience:

- better health and normal development;¹³⁻¹⁵
- healthier weight;¹³⁻¹⁵
- improved reading and math skills;⁹
- increased graduation rates;⁹ and
- as adults, better health outcomes² and economic self-sufficiency.⁹

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) provides food, referrals for health care and social services, breastfeeding support, and nutrition education to more than 8 million low-income pregnant and postpartum women, along with their infants and young children.¹⁶⁻¹⁸ About 53% of all U.S. infants receive WIC benefits.¹⁶ WIC is associated with:

- reduced preterm births, low birthweights, and infant mortality;^{19,20}
- increased immunization rates;²¹
- increased attendance at well-child visits and use of pre-



- ventative care;^{22,23}
- reduced anemia;²⁴ and
- improved early-childhood cognitive development and scholastic achievement.²⁵

School breakfast and lunch programs provide free and reduced-cost nutritionally-balanced meals to low-income school children. Approximately 92% of all U.S. schools offer breakfast programs.^{10,26-28} Even more schools—95%—offer lunch programs.²⁹ During the 2015-16 school year, 12.1 million children participated in school breakfast programs³⁰ and 30 million took part in school lunch programs.^{31,32} School breakfast and lunch programs are associated with:

- increased school attendance and reduced tardiness;^{26-28,33-36}
- better psychosocial functioning, including fewer behavior problems and less anxiety, depression, and hyperactivity;^{26,28}
- better dietary intake,^{26,28} including increased consumption of fruit, milk, Vitamin C, Vitamin A, and calcium;²⁸
- improved health outcomes, including lowered body mass index and fewer visits to the school nurse;²⁶ and
- improved test performance and high school graduation rates.^{28,33,36,37}

But deep cuts have been proposed to SNAP, WIC, and school meal programs.³⁸ The Trump administration’s fiscal year 2018 budget proposes \$192 billion in cuts to SNAP³⁹ and \$11.1 billion in cuts to WIC.⁴⁰ It would also fund school meal programs with fixed block grants instead of the current, more flexible federal entitlements. This change stands to reduce school meal funding by 12%.^{41,42}

The proposed reductions to these critical programs will exact an overwhelming toll on individuals, families, and children in particular. They would also create crippling financial costs for communities, cities, and states, which would need to support individuals and families suffering from severe financial crises and food deprivation.

RECOMMENDATIONS

1. The Society of Behavioral Medicine (SBM) recommends Congress continue to fund nutrition assistance programs such as SNAP, WIC, and school breakfast and lunch programs. Congress should resist any attempts to "block-grant" school breakfast and lunch programs.⁴³
2. SBM recommends Congress improve the scope and quality of reporting on nutrition assistance program outcomes. This could be achieved by regularly evaluating program implementation and tracking participants' health and economic well-being.
3. SBM also recommends increasing public awareness of SNAP, WIC, and school meal programs, and encouraging participation by eligible individuals, children, and families.

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