

## Why the Purchase of Sugar-Sweetened Beverages with SNAP Funds Should Be Restricted While the Purchase of Produce Should be Incentivized

The Supplemental Nutrition Assistance Program (SNAP)—formerly the Food Stamps Program—is a federal aid program overseen by the U.S. Department of Agriculture (USDA), that helps low- and no-income people in the U.S. purchase food. Benefits are dispensed by the states. About twenty percent of Americans, or 65 million people, qualify for SNAP. Of that number, about 47 millions people get SNAP benefits, and nearly half of those recipients are children. Over the years, many politicians have attempted to pass controversial bills limiting what can be purchased with SNAP benefits. Some states<sup>1</sup> have petitioned the USDA for permission to conduct pilot projects in which sugar-sweetened beverages (which for the remainder of this essay will be referred to as SSBs and defined as sweetened beverages containing more than ten calories per cup and which exclude fruit juices without added sugar, milk products, and milk substitutes) could not be purchased with SNAP, or where SNAP participants would receive an incentive of thirty cents for every SNAP dollar spent on targeted fruits and vegetables (which for the remainder of this essay will be referred to as TVFs and defined as fresh, canned, frozen, and dried fruits and vegetables without added sugar, salt, fats, oils, or salt, but exclude white potatoes) credited back to their SNAP Electronic Benefit Transfer (EBT) card.

The USDA as well as advocacy groups have expressed ethical and practical concerns about the exclusions and have rejected such proposals. Those concerns can be addressed in two ways: (1) by discussing if there are true matters of ethics involved, and (2) through demonstration projects or pilot studies. SNAP's primary aim to alleviate hunger and improve the nutrition and health of low-income people can be better supported by not only adding to the existing specifications of what can be purchased, but by also implementing financial incentives to purchase TFVs.

There are many ethical consideration concerning SSBs exclusions to SNAP purchase. Although exclusions already exist (items such as alcohol, hot foods, and kitchen wares, for example, cannot be purchased with SNAP), some argue that SSBs exclusions could cause embarrassment and further stigmatize SNAP recipients who, unaware of the new rules, would attempt to purchase SSBs with their EBT card and feel humiliated when their purchases are declined. This could potentially deter existing participants from using the program again and eligible people from enrolling. Although such an outcome is unlikely, situations such as this one could be prevented by effectively informing recipients several times in the months ahead of the change. Furthermore SNAP participants are expected to spend a portion of their income on food and could choose to purchase SSBs with that money instead. Any potential drawbacks

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<sup>1</sup>California, Florida, Missouri, New York, Wisconsin, and Texas

should be weighed against not only the potential benefits of the SSB exclusion—such as healthier BMIs and lower rates of diabetes—but against the stigma that health conditions such as obesity can bring. Moreover, this change could improve the public’s perception of SNAP from one of “welfare is for fat and lazy people” to one of a program that truly supports its participants’ health and nutritional well-being. Even if participants were to just switch to other beverages such as diet soda, this change would still support SNAP’s primary objective by reducing the amount of discretionary calories that are consumed. Another concern that opponents of SSBs exclusions have voiced is that such an exclusion would unjustly restrict the purchasing choice of SNAP participants. While it is true that SNAP participants would have fewer beverages to choose from than higher-income people have, “maximal consumer choice is incompatible with a nutritionally adequate diet, given the reality that many [...] Americans choose to purchase a nutritionally inadequate diet when faced with a food environment that heavily promotes inexpensive, unhealthy food items.” (Barnhill 2041). Additionally, data shows that our eating behaviors are influenced by a multitude of things in our environment: “Our external environment already clearly plays on our psychological capacity to make healthy choices, even when we have the freedom in a more narrow sense to make any number of consumption choices” (Kass 792). Our ability to choose our food freely is already affected by factors such as the color and placement of food-items in supermarkets, and therefore we are not fully in control of our choices.

Few pilot projects aimed at modifying SNAP rules have been approved. The ones that have been authorized only added incentives; no studies where exclusion was the sole variable have yet been approved. From November 2011 to December 2012, a pilot program named Healthy Incentives Pilot (HIP) was conducted in Hampden County, Massachusetts. The HIP groups was composed of 7,500 randomly assigned SNAP households, who were to receive an incentive of thirty cents for every dollar spent on TFVs at participating retailers. By the end of the pilot period, HIP households reported spending 8.5% more money on TFVs, also reporting that the incentive was the reason they purchased more TFVs. The average household consumed 26% more TFVs, an increase of about a quarter-cup per day. That increase of TFVs boosted participants’ scores on the Healthy Eating Index (HEI) from 50% to 62% (Bartlett 6). Although an improvement, it is still a low index score.

Another trial was conducted over the span of twelve weeks, with results published in 2016. This time, 279 people who qualified for SNAP, but were not enrolled, volunteered to be part of the study and were randomly divided into four groups that would receive SNAP-like benefits. In this trial, all retailers automatically participated. The first group comprised of seventy participants who were to receive an incentive of thirty cents for every dollar spent on TFVs. The restriction group was composed of sixty-nine participants who weren’t allowed to purchase SSBs, sweet baked goods, or candies with their benefits. The third group contained

seventy participants who were assigned incentives plus restrictions. The last seventy participants were part of the control group and had neither restrictions or incentives. The primary outcomes of this study were to determine intakes of energy, discretionary calories, and overall diet quality through various measures. Although both the incentive and the incentive-plus-restrictions groups saw a reduction in consumption of SSBs as well as an increase of TFVs, the incentive-plus-restrictions group also saw a significant difference in overall diet quality. This group consistently consumed fewer calories overall, fewer discretionary calories, less sugar, less fat, fewer restricted foods, and saw the greatest increase in their HEI, as well as reported the largest reduction of food-insecurity. Fewer improvements were observed between the incentive-only and the control groups (Harnack 1615). Those results indicate that, between those three conditions, the most effective way to improve the nutritional quality of the diet of SNAP participants is to simultaneously offer incentives and impose restrictions on what can and cannot be purchased with SNAP benefits.

Having both limitations and incentives is the the most effective way of achieving SNAP's goal of alleviating hunger and improving the nutrition and health of low-income people. To modestly expand the limitations of SNAP purchases is ethically defensible, but it can be argued that the only way for this to solidly pass an ethics test is by expanding the limitations on SSBs to other federally-funded institutions and programs as well. Similar laws are already in place, such as in the case of Title IX of the US Education Amendments of 1972<sup>1</sup>. Institutions such as schools and hospitals have symbolic importance by virtue of their missions and who they serve [...] which increases their responsibility to act in an exemplary manner (Kass 789). It is necessary to align government policies and programs with current dietary guidelines; not doing so creates dissonance and may send the message that SNAP participants are indeed the only ones unable to make sound food choices without additional government intervention. Implementing consistent rules across all federally-funded programs and institutions would instill long-term dietary changes in Americans, resulting in lowered health-care expenditures and, most importantly, increased well-being in Americans.

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<sup>1</sup>No person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity receiving Federal financial assistance.

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