



Nutrition Issues to Address in the Farm Bill 2007: A California Perspective* Lucia Kaiser and Catherine Lamp**

Food and nutrition programs are the largest expenditures of the USDA typically accounting for more than forty percent of program outlays. The USDA has a variety of programs for food assistance, but the Food Stamp Program accounts for half of all spending. Food assistance through school lunch and breakfast; the Special Supplemental Nutrition Program for Women, Infants and Children (WIC); and childcare and adult care facilities accounts for another 45 percent of spending. Most of these programs and others date back many years.

The Nutrition title of the 2007 Farm Bill provides Congress the vehicle to revise these programs and reorient the outlays to the most important national priorities. California consumers, producers and taxpayers have a major stake in assuring that revisions be undertaken in the interest of more effective programs.

Food assistance programs and the food guidance system

U.S. food assistance programs date back to the 1930s or before. The National School Lunch Program was created in 1946 and has continued since then. School breakfast programs were added later as have additional school, summer, and other institutional nutrition programs that provide free or reduced cost meals to school age children or low-income adults. These programs include the School Breakfast Program, Summer

Food Service Program, and Child and Adult Care Food Program. The Food Stamp Program (FSP) has been even more important to overall national food assistance. FSP was created by the Food Stamp Act of 1964 “to strengthen the agricultural economy; to help to achieve a fuller and more effective use of food abundances; and to provide for improved levels of nutrition among low-income households.” Enrollment in the FSP reached 15 million people in 1974. The rapid expansion and increased expenditures made Congress pass a number of changes to improve the efficiency of FSP. In 2005, about 25 million individuals were served by the program with an average monthly benefit of about \$100 per person. The eligible population for Food Stamps is estimated to total about 38 million. Between 85 and 90 percent of eligible children are enrolled, but only about 30 percent of the eligible elderly population participate in the program. About 2 million individuals participate in the program in California, with the California share of eligible population enrolled well below the national average.

One of the most important food assistance programs is the Special Supplemental Nutrition Program for Women, Infants and Children (WIC). WIC was not authorized as a part of the Farm Bill, but the Nutrition title of the Farm Bill could be used to revise the program. WIC provides vouchers to purchase specific nutritious foods and offers education and counseling to pregnant

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mothers and those with small children. More than 8 million individuals are served by the program (including about half the children born in the United States). Outlays are about \$5 billion per year. Unlike the FSP, the WIC budget must be appropriated each year and the population served and amount of food provided depends on the appropriated funds.

In an important contribution that has a broader scope than food assistance programs, the first set of Dietary Guidelines for Americans was published in 1980. This document, revised every 5 years, is intended to be a primary source of dietary information for policymakers, nutrition educators, and health providers. Developed by an expert committee, the 2005 Dietary Guidelines is based on the latest scientific evidence and provides advice to prevent disease by choosing a nutritious diet, maintaining a healthy weight, being physically active, and handling food safely. The Dietary Guidelines are currently used to guide policies influencing food and education provided through the U.S. Department of Agriculture (USDA) food assistance and nutrition education programs.

Nutrition problems in U.S. populations

When the food assistance programs were begun generations ago, the main concerns were assuring that low income children and adults had access to adequate diets to prevent hunger and nutritional deficiency diseases such as anemia, rickets, and several others. In particular, a major rationale for the school lunch program, initiated after World War II, was ensuring that young men would be strong and healthy enough to defend the nation in time of war. Within the last decade, obesity has reached epidemic proportions in adults, youth, and children in the United States. In 1999-2002, 65 percent of adults, ages 20 years and older, were overweight or obese. Among children ages 6-19 years, 16 percent were overweight and another 31 percent were

at risk of becoming overweight. It is critical to understand that obesity is a form of malnutrition, and that nutritional deficiencies may still occur in people who are obese or overweight. While lack of physical activity contributes to obesity and other health problems, over consumption of high-fat and high-sugar foods is clearly related to the obesity problem in the United States. Since 1985, average calorie consumption has increased by about 300 calories per person a day, with intake of fat up by 24 percent and sugar intake up by 23 percent. Americans also consume more servings of refined grain products and fewer servings of whole grains, fruit, and vegetables than recommended. As a result, the typical American diet provides too many calories but is still lacking in certain nutrients, including vitamin E, potassium, magnesium, fiber, and calcium, all of which are needed for optimum health. Inadequate intake of these nutrients, along with excessive calorie intakes, plays a role in increasing risk of coronary heart disease, type 2 diabetes, stroke, and cancer, which are the major causes of death in the US.

Since the early 1990's, the term "food insecurity" has been used to describe the problem of not being able to afford a nutritionally adequate diet. In 2005, about 11 percent of all U.S. households reported some level of food insecurity. In the U.S., food insecurity has been associated with poor diets; poor cognitive development and behavioral problems in children; and health problems. Recently, food insecurity in children has also been linked to risk of becoming overweight. The USDA food assistance programs buffer low-income households from the full effects of food insecurity and hunger.

However, in the late 1990's, participation in FSP declined, largely due to confusion about eligibility, difficulty in accessing the program, and greater stigma associated with participation, rather than decreased numbers eligible for the program. For example, in 2003, only 45

percent of the FSP-eligible population actually participated in the program in California. A recent analysis of data from the 2002-2004 California Women's Health Survey found that nearly 43 percent of potentially eligible women do not apply for FSP because they do not know how to get food stamps, find it too hard to apply, or are not aware they might be eligible.

Ways to address nutrition problems in the 2007 Farm Bill

The 2007 Farm Bill can be used to address some of the concerns about nutritional adequacy of the diet for many Americans. The following list outlines important reforms to consider.

- To address low participation in FSP, it is important to streamline and simplify procedures for accessing the Food Stamp Program. Additional outreach and nutrition education to low-income households would help them to make better use of the program and to use food assistance to prevent nutrition-related chronic diseases. For California, it is particularly important to increase FSP program participation by low-income households who speak Spanish as their primary language.
- Food assistance programs, particularly FSP, can be revised to provide a greater incentive to families to purchase nutritious foods. For example, a discount feature to enable households to purchase more fresh fruit and vegetables and whole grain products would expand consumption of these healthy alternatives.
- USDA nutrition education programs, including the Expanded Food and Nutrition Education Program (EFNEP) and the Food Stamp Nutrition Education (FSNE) should be supported to convey stronger messages about the importance of diet in preventing specific chronic diseases, including type 2 diabetes, heart disease, and others. The Dietary Guidelines, which dic-

tate the content of these programs, should be revised to include more specific health-related information. Current guidelines apply to Americans ages 2 years and older. Dietary Guidelines should also be established for younger children, ages 0-2 years.

- It is important for long-term healthy diet patterns to support increased ways to make fruits and vegetables more available and attractive to school-age children, not only through the School Breakfast and School Lunch programs but also through after-school and summer programs. The current small pilot programs can be expanded and revised to achieve this goal.
- Improving access to fresh fruits and vegetables through the WIC program could also be used to increase nutritional awareness of mothers and young children and stimulate healthy consumption patterns at an early age. The Farm Bill should support the recommendations made by the Institute of Medicine Committee to Revise the WIC Food Packages to provide food assistance that is more consistent with the Dietary Guidelines and other expert guidance.
- Supporting nutrition research and nutrition monitoring in the population is important so that policies affecting the USDA food and education programs will be evidence-based. In particular, the impact of policies in the child feeding programs on childhood obesity must be considered a priority.
- Nutrition policy and commodity policy can be linked through efforts to improve productivity of fresh fruits and vegetables and lower consumer prices for these products. Prices of fruits and vegetables have risen over time relative to grains, oilseeds and meats. Increased attention to the causes and consequences of these increased prices could facilitate affordability of a more healthy diet.