



# BUILDING STRONG FOUNDATIONS: Advancing Comprehensive Policies for Infants, Toddlers, and Families



## Nutrition Assistance: A Critical Support for Infants, Toddlers, and Families

**Low-income families with infants and toddlers and pregnant women should have access to nutrition support programs.** Infants, toddlers, and pregnant women need access to affordable, nutritious food— such as fresh fruits and vegetables, whole grains, fat-free or low-fat dairy products, as well as lean meats and poultry<sup>1</sup> — to ensure proper health and development. Unfortunately, food insecurity (defined as lacking consistent access to nutritious food due to insufficient money or other resources) is far too common among parents and young children. Nutrition support programs reduce food insecurity by helping low-income families afford healthy foods and providing information about nutrition.

Good nutrition is an important part of a healthy lifestyle for both children and parents because it improves their ability to grow and develop, along with achieve and maintain a healthy weight. Eating nutritious foods provides pregnant women and children the nutrients they need to stay healthy, active, and strong. A lack of access to healthy foods is particularly harmful prenatally and in early childhood, when humans experience rapid growth. Studies have shown that inadequate nutrition, even mildly below target nutritional goals, stunts growth and development.<sup>2</sup> Infants and toddlers from food-insecure families are 90 percent more likely to be in fair or poor health and 30 percent more likely to be hospitalized than those in food-secure households.<sup>3</sup> Research also shows clear links between inadequate food and low birth weights, anemia, mental health problems, and poor educational outcomes.<sup>4</sup>

Nutrition assistance programs effectively reduce food insecurity by helping people purchase healthy food they would not otherwise be able to afford, thereby increasing healthy eating.<sup>5</sup> In doing so, nutrition assistance programs have significant positive effects on health outcomes more broadly,

especially for children. Research over four decades has demonstrated that nutrition assistance directly targeted at young children and pregnant women is effective in reducing the likelihood of low birth weight, infant mortality, and childhood anemia and improving diet quality and nutrient intake, initiation and duration of breastfeeding, cognitive development and learning, immunization rates, and use of health services.<sup>6</sup> Women who receive nutrition assistance give birth to healthier babies, provide their babies with more nutritious diets, and implement better infant feeding practices.

Currently, two main federal programs help to meet these needs for low-income families with infants and toddlers: the Supplemental Nutrition Assistance Program (SNAP) and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC). SNAP, formerly known as food stamps, provides financial assistance to low-income households to purchase food. It is designed to respond to economic downturns, population changes, and increased need during disasters.<sup>7</sup> As the need for nutrition assistance increases and SNAP participation rises, funding for the program increases to ensure that all eligible households receive the necessary support. Unlike most other means-tested programs that don't have sufficient funding to reach all who are eligible, SNAP is broadly available to almost all households with low incomes regardless of age, disability, number of children, or marital status.

WIC, which provides healthy foods, nutrition education, breastfeeding support, and referrals to health care and social services for millions of low-income families, plays a crucial role in improving lifetime health for women and young children. States have the flexibility to set monthly income limits between 100 and 185 percent of federal poverty level, but can also deem certain households income-eligible if they participate in SNAP, Medicaid, or Temporary Assistance for Needy Families cash assistance.<sup>8</sup>

**Nutrition supports provide necessary food and resources to help families on their path out of poverty, but many families remain food insecure.** Most recent estimates suggest that roughly 14 percent of households in the United States—16.9 million in total— are food insecure.<sup>9</sup>

SNAP reaches more than 43 million people in 21 million households each month.<sup>10</sup> Over two-thirds of all SNAP *participants* live in families with children; nearly half of all SNAP *households* include at least one child, and nearly a third of the children are younger than 5 years old.<sup>11</sup> SNAP is both effective and efficient: it reaches roughly three-quarters of eligible households,<sup>12</sup> raising many out of poverty and addressing food insecurity. The most recent U.S. Census Bureau poverty data found that SNAP raised 4.6 million individuals out of poverty in 2015,<sup>13</sup> and a 2013 study by the Food and Nutrition Service in the U.S. Department of Agriculture found that participating in SNAP for 6 months resulted in a 5- to 10-point decrease in the percentage of households that were food insecure.<sup>14</sup> Preservation of current funding for SNAP is critical for the many families who benefit from this nutrition support program. However, policy changes could better support early development if benefit levels were increased or eligibility requirements were changed to reduce the impact of benefit loss as family income rises.

Temporarily enhanced SNAP benefits included in the American Recovery and Reinvestment Act (ARRA) of 2009 initially lowered child food insecurity substantially and increased the number of children in SNAP families likely to be classified as “well,” compared with similar children not receiving SNAP.<sup>15</sup> However, rising food prices during the Great Recession eroded SNAP's ability to reduce food insecurity even with the benefit increase,<sup>16</sup> suggesting that benefits—which have now returned to pre-recession levels—are insufficient to protect the health and development of young children. Research also shows that the sudden decline in nutrition benefits that occurs as family income increases causes food insecurity to rise along with risks for poor health and developmental delays in young children.<sup>17</sup>

In the 2015 federal fiscal year, the number of women, infants, and children receiving WIC benefits each month reached approximately 8 million,<sup>18</sup> 4.2 million of whom were children, 1.9 million were infants, and 1.9 million were women.<sup>19</sup> States can improve access to WIC by ensuring that eligibility is set at the highest threshold possible (185 percent of the federal poverty level) to reach more families in need. Of course, to support these eligibility levels, increased funding for the WIC program is necessary on the federal and state levels. States can supplement federal investment with state funds to help bolster the reach of WIC programs.

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Access to these basic and vital services helps children grow and develop and helps their families stay healthy, too. Preserving the current funding and preventing reductions in benefits is important to ensure that infants, toddlers, and their families have access to vital nutrition supports in times of need. Increased benefit levels could also greatly benefit families who struggle to buy the food that they need because the benefits are not keeping pace with inflation and the cost of food. Additionally, policymakers may consider revising eligibility requirements so that as income rises and benefits decrease, the impact of benefit loss is reasonable and does not harm families. To ensure that all children have a path that allows them to grow, develop, and succeed, we need continued, sustainable funding and policies for nutrition assistance programs that meet the needs and circumstances of families with infants and toddlers.

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