

Is There a Link Between FSP and Obesity?

We all know how hard it is to eat healthy. We also know that low-income families have it harder because they lack environmental access (economic, social, and physical) to quality food and healthy lifestyles. Does this lack of access contribute to obesity? And is there a connection between the Food Stamp Program (FSP) and obesity?

In its April edition, the *Journal of Nutrition* published a symposium on food assistance and low-income families. Two of the articles focused on the problems of obesity and overweight.

The first, *The Modifying Effects of Food Stamp Program Participation on the Relation between Food Insecurity and Weight Change in Women*, identifies "persistent food insecurity" as the decisive factor. Among those who were persistently food insecure but not enrolled in the FSP, a weight loss of about 15.4 lbs was observed. Among those persistently food insecure and enrolled continuously in the FSP, a weight gain resulted (17.2 lbs). Among those who enjoyed periods of food security, enrollment in the FSP had no significant impact on weight.

The second article, *Long-Term Food Stamp Program Participation Is Positively Related to Simultaneous Overweight in Young Daughters and Obesity in Mothers*, researchers found that a family's continuous participation in the FSP over the previous five years was associated with an increase in the probability of the daughter being overweight (6.4 percent) and of the mother being obese (6.0 percent). The increased likelihood that a daughter was overweight only occurred in families with long-term FSP participation and where the mother was overweight. Other familial relationships were not investigated.

A recent publication from the Economic Research Service (ERS) at the USDA, attempts to address some of the many complexities of this subject. It notes that as originally conceived, the FSP was designed solely to alleviate hunger by boosting food consumption and energy intake. It has been successful in that regard. Studies have shown that FSP participants have increased access to energy, protein, and micronutrients (vitamin A and iron); they also tend to consume more meat, added sugars, and total fats (but fewer fruits, vegetables, grains, and dairy products).

On the other hand, the cyclic availability of food (plenty at the beginning of the month, little at the end) may lead to binge eating when the food is available and fasting when food is not available. This pattern tends to lead to weight gain over time.

Finally, the ERS publication acknowledges that the difference in weight between those participating in the FSP program and those eligible but not participating is not consistent for all age, gender, and racial/ethnic groups. Only women participating in the FSP tend to be consistently of a greater weight than their eligible counterparts not participating. This is consistent with the study described above.

No research to date shows a casual connection between FSP participation and obesity. And while long-term participation in the FSP increases the risk of overweight and obesity among girls and their mothers, this is likely to occur primarily among households that are food insecure. It is important that we use the opportunity provided by the FSP to provide nutrition education for those who are persistently food insecure. The difficulty in this task is reaching these families, and designing nutrition suggestions they can adopt within their already stretched resources.