Hunger in the United States: Policy Implications

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U.S. Hunger Policies

The Beginnings of U.S. Food Policies

The roots of present hunger policies in the United States reach back to the Great Depression of the 1930s, when unemployment, soup kitchens, and breadlines abounded and large quantities of surplus food were destroyed because the poor could not afford to buy it. In 1930, acting on legislation passed by Congress, the U.S. Department of Agriculture and the newly created Federal Emergency Relief Administration began distributing surplus farm products as food relief, thus helping farmers while feeding the poor. A more formal oversight of farm prices and production was authorized in 1933, and a food-distribution program was instituted in 1935. In 1936 the first school lunch program utilized surplus commodities donated to state-supported schools, and from 1939 to 1943 an experimental food stamp program permitted exchange of vouchers for surplus commodities and other foods. With the rise in war-stimulated employment and the decline in surplus foods as U.S. production was shipped abroad to the armed forces and the Allies, the 1946 National School Lunch Act stipulated that a considerable portion of its food aid be cash instead of commodities. Through the 1930s and early 1940s, the major aim of food distribution programs was to dispose of surplus agricultural products rather than to feed the poor.2

The War on Hunger

During the 1950s and early 1960s, the majority of U.S. citizens paid little attention to growing reports of poverty and hunger in America. The nation had become prosperous, a national food-distribution system had been established with the highway network begun in the Eisenhower administration and the growth of supermarkets, and it was generally assumed that every American was well fed. In 1961, however, President Kennedy outlined a program to expand food distribution and to establish eight pilot food stamp programs in selected "poverty" areas. In 1964 the program became available nationally; in 1966 the School Breakfast Program was instituted. Nevertheless, it was not until 1968 that a written report from the Field Foundation, Hunger U.S.A.,3 and the release of a nationwide television documentary, Hunger in America, based on its findings, brought the issue of hunger to national attention and action. The foundation had sent a team of physicians, legislators, and other concerned citizens to more than 250 "hunger counties" in 23 states. Their report described widespread malnutrition and poverty and called for immediate expansion of federal efforts to improve food assistance to the poor. The U.S. Senate appointed a bipartisan Select committee on Nutrition and Human Needs to lead its anti-hunger efforts. From 1968 to 1977, the Committee initiated legislation that expanded food assistance for families, children, and the elderly.4 In 1969,
President Richard M. Nixon announced a "war on hunger," and called a White House Conference on Food, Nutrition, and Health to advise on national policies to eliminate hunger and malnutrition caused by poverty.

During the 1970s, cash subsidies and vouchers gradually replaced commodities in federal food programs as part of an evolving strategy to increase the purchasing power of the poor. The food stamp program was expanded, the Women, Infants, and Children Program (WIC)—of which the Special Supplementation Food Program was a part—and other child food assistance programs were created, and nutrition programs were developed for the elderly. Between 1969 and 1977, annual federal expenditures for food assistance increased from $1.2 to $8.3 billion, and by 1979 donated farm products accounted for less than 10% of total federal expenditures on food programs. In 1977, the Field Foundation sent a team (with some of the same members of the earlier team) back to the "hunger counties" surveyed a decade before. The team found fewer cases of overt malnutrition, and concluded that although some hunger remained evident, its manifestations had become more subtle and, therefore, more difficult to identify.

Hunger Studies

At the beginning of the 1980s, new national policies shifted a greater degree of responsibility for social programs from the federal government to the states and the private sector. A series of legislative acts passed in 1981 and 1982 led to significant reductions in the benefits that had, at least in part, sheltered vulnerable groups from fluctuations in the business cycle. Because these reductions occurred at the same time as an economic recession, their impact was especially severe. Emergency food and shelter providers began to report an increasing use of their services by the "new poor": children, unskilled and unemployed youths, families with insufficient resources, and the deinstitutionalized mentally ill.

In response, agencies and organizations in the public and private sectors began to document the increasing demands for food assistance through studies of hunger prevalence. Many of these reports are available only as unpublished manuscripts of limited distribution. The largest hunger study collection of which the authors are aware is that of the Food Research and Action Center (FRAC) in Washington, D.C. Although incomplete, it lists nearly 250 reports released since the early 1970s from 40 states, the District of Columbia, and Canada. The index to this collection reflects the rapid impact of the reductions in welfare spending initiated early in the decade. It lists three studies in 1981, 19 in 1982, 31 in 1983, 40 in 1984, and an additional 30 or so for each of the three subsequent years. The most recent studies were published in 1991.

The most widely publicized of these reports is a study issued in 1985 by the Physician Task Force on Hunger in America. The report defined hunger in economic terms: individuals were at risk if their income fell below the poverty line or if their food stamp benefits were inadequate. By these criteria, 20 million people in the U.S. were said to be suffering from hunger.

Methodologic Issues

Hunger studies have been ignored or greeted with skepticism by local and federal policymakers, who argue that signs of malnutrition occur only rarely in the U.S. population and that federal funding for assistance to the poor has increased greatly over the years. Critics point out that federal expenditures for Department of Agriculture food assistance alone exceeded $21 billion and provided benefits to more than 40 million individuals in 1989.

More important for this discussion is the claim by critics that the methods used to define and identify hunger rarely meet accepted standards of scientific proof, are anecdotal, and therefore greatly exaggerate the prevalence of this condition. This charge is not easy to address directly. Federal nutrition monitoring surveys do not yet measure the prevalence of hunger in the U.S. population, nor do they sample homeless people, migrant families, or certain other groups that might be expected to have limited access to food. The national surveys listed in the FRAC Index provide only limited data on participation rates in food assistance programs or on poverty rates in selected cities. Although the development of standards and means of measurement that more accurately portray hunger and poverty has long been recommended, the response has been slow. Because most hunger studies were conducted by advocates rather than by scientists, they often lack the systematic documentation, precise definitions, consistent study methods, and appropriate sampling techniques necessary for a determination of their reliability or applicability to large populations.

Measuring the extent of hunger is exceedingly difficult. No easily defined line of causality exists between hunger, biochemical indices of malnutrition, poor health, and disease. Chronic hunger over a substantial time may lead to undernutrition and disease, but the health effects of episodic hunger remain uncertain. Because it is difficult—and very

*12 million children and 8 million adults.
expensive—to measure clinical or biochemical indices of malnutrition in population surveys, few hunger studies have done so. Instead, researchers and advocates have identified a range of indirect measures of food insecurity, such as the level of poverty or unmet needs for food assistance, that can be used as indicators of hunger and malnutrition. Although each of these measures is imperfect, any one of them can be used to estimate the extent of hunger in a population. Furthermore, the use of multiple indicators should increase the reliability of such estimates.\textsuperscript{13}

State Hunger Surveys

The lack of a coherent federal policy to deal with hunger is, in part, a result of the paucity of national prevalence data. Thus, to develop policy recommendations based on the largest population surveys, the authors selected for analysis hunger studies that had been sponsored by state governments, identified from the FRAC Index and from private collections. These studies included 28 hunger surveys that had been authorized by the governors or legislatures of 18 states. Excluded from the analysis were studies restricted to specific age groups (e.g., children), or populations (e.g., users of soup kitchens). When a state had conducted more than one study, either the most recent or the one that had employed the broadest range of hunger indicators was selected. The final sample consisted of studies authorized by 11 states between 1984 and 1988.\textsuperscript{14–24}

Analysis of these studies provides a broader perspective on hunger issues than can be obtained from local community surveys and as much of a national perspective as is available at the present time. The studies employed a variety of methods to estimate the extent of hunger and food insecurity in their populations. All had collected subjective information on professional or personal experience with the hunger problem, or responses to questionnaires or interviews.\textsuperscript{14,15,19–22,24} Some had conducted secondary analyses of state data on poverty levels,\textsuperscript{16–18,20,21,23} the prevalence of conditions related to undernutrition,\textsuperscript{16,18,22} or the use of public and private food and income assistance programs.\textsuperscript{14,16,19,23}

One study\textsuperscript{24} had used the standardized sampling and survey methods of the Community Childhood Hunger Identification Project.\textsuperscript{25}

Despite these diverse methods, the findings were similar. Without exception, the state studies found hunger and food insecurity to be problems affecting large numbers of their people. All reported increasing demands for food assistance and the inadequacy of federal, state, and private resources.\textsuperscript{14–24} They found the individuals most at risk of hunger to include women, children, and the elderly.\textsuperscript{14–16,18,20,21,23,24} Many of them members of minority groups.\textsuperscript{14–16,18,24} They attributed the cause of food insufficiency to poverty,\textsuperscript{14,15,18,20,21,23} and the poverty to unemployment or underemployment,\textsuperscript{14,15,17–19,22,24} the high costs of housing and other basic needs,\textsuperscript{14,15,18,23,24} and inadequate welfare and food assistance benefits.\textsuperscript{14,16–19,23,24}

The studies’ recommendations were also remarkably similar. They suggested strategies to increase the federal contribution to state food and welfare assistance programs and client access to their benefits.\textsuperscript{14–21,23,24} Some studies also addressed more fundamental issues, such as the need for increased employment opportunities,\textsuperscript{14,17–19,23} higher wages,\textsuperscript{24} improved access to low-cost housing,\textsuperscript{14,18,24} and other forms of income redistribution.\textsuperscript{24}

Conclusions

The findings and recommendations of state hunger studies are indistinguishable from those of county, city, and community studies conducted during the past decade\textsuperscript{26,27} and more recent studies using improved survey methods.\textsuperscript{25} The striking consistency of the results of virtually all hunger studies, no matter how they were conducted, provides ample—and sufficient—evidence for several broad conclusions:

- Food insufficiency has become a chronic problem in the United States.\textsuperscript{11,14–24}
- Food insufficiency is not due to food shortages.\textsuperscript{14,15,20,21,23}
- People who lack access to a variety of resources—not just food—are most at risk of hunger.\textsuperscript{14–19,23,24}
- The federal poverty level is an inappropriate index of hunger, since it is based on a formula that fails to account for changes in the cost of living, regional variations in costs, or unusual expenses that may be required.\textsuperscript{28}
- The U.S. social welfare system does not provide an adequate safety net.\textsuperscript{14–16,18,20,21,23}
- Private charity cannot solve the hunger problem. Such voluntary activities are necessarily limited in expertise, time, and resources and are likely to require government support to permit them to continue.\textsuperscript{14,16,19}
- Hunger is inextricably linked to poverty, which in turn is inextricably linked to underemployment and the costs of housing and other basic needs.\textsuperscript{14,15,17–19,22–24}

Policy Implications

This analysis suggests little need for more methodologically sophisticated hunger studies to prove that a significant segment of the U.S. population experiences periodic food shortages. The consistency
and weight of the evidence as presented by state-authorized studies, as well as those conducted by local groups, lead to this inescapable conclusion.

The inadequacies of current welfare and food assistance policies underscore the need for alternative solutions. Both liberals and conservatives are now suggesting strategies that recall policies of the 1930s. They focus on provision of full employment that guarantees to low-income individuals and families an income that can raise them out of poverty. They also call for an increase in the minimum wage, wage supplements, and, for low-income working families, income tax credits adjusted for the number of children.

Serious consideration of these strategies requires understanding of hunger as a chronic societal problem that no longer can be addressed in isolation from other correlates of poverty such as underemployment, inadequate housing, or poor education. Hunger studies provide overwhelming evidence to support such an understanding.

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