

NATIONAL
HEALTH CARE
for the
HOMELESS
COUNCIL

April 6, 2018

Ms. Sasha Gersten-Paal
SNAP Program Development Division
Food and Nutrition Service
3101 Park Center Drive
Room 812
Alexandria, VA 22302

Re: Advanced Notice of Proposed Rulemaking: Supplemental Nutrition Assistance Program: Requirements and Services for Able-Bodied Adults Without Dependents RIN 0584–AE57

Dear Ms. Gersten-Paal:

Thank you for the opportunity to comment on USDA's Advanced Notice on requirements and services for Able-Bodied Adults Without Dependents (ABAWDs). The National Health Care for the Homeless Council (NHCHC) is a membership organization representing federally qualified health centers (FQHCs) and other organizations providing health services to people experiencing homelessness. In 2016, there were 295 Health Care for the Homeless (HCH) programs serving nearly 1 million patients in 2,000+ locations across the United States. Our members offer a wide range of services to support people without homes gain better health, to include comprehensive primary care, mental health and addiction treatment, medical respite care, supportive services in housing, case management, outreach, and health education.

As health care providers, we are very concerned about our patients getting access to a healthy and adequate supply of food so that they can help prevent and manage chronic health care conditions. Many of our patients are adults without dependent children, and many of them rely on SNAP benefits to survive. **A three-month time limit and work requirement on food assistance undermines broader national efforts to improve health outcomes, especially among vulnerable populations like those experiencing homelessness.** Conditions such as diabetes, hypertension, cardiovascular disease, as well as mental health and addiction, are much more difficult to manage when patients are unable to maintain a healthy diet. Also, our clients already struggle to engage in health care services because they are understandably focused on finding housing or some form of safe shelter. Being hungry and searching for food is an additional barrier to care that will only yield poor outcomes for low-income individuals, communities and the larger health care system.

Many of our patients access food at soup kitchens, but these once-a-day meals are not a substitute for regular, nutritious food that allows for independence and self-sufficiency with regard to shopping, cooking and food preparation. Soup kitchens are vastly underfunded and often unable to provide the fresh vegetables and fruits, whole grains, and low-fat lean meats needed to achieve good health. Unfortunately,

foods high in salt, sugar and fat are cheap and filling and form the bulk of the available food our patients receive. It is no surprise that we see high rates of emergency department visits and hospitalizations for out-of-control blood sugars and high blood pressure, and to see high rates of obesity caused by poor nutrition. SNAP benefits are a vital way to supplement limited food options with healthy foods, and allow us to work together with patients to tailor their food purchases to their individual health needs.

Subjecting SNAP recipients to a work requirement only serves to cut off access to food, which is a basic human need. Ironically, a lack of food only inhibits the ability to find and/or participate in work. **While we understand the intention to encourage employment, we would strongly suggest the Administration increase job training, adult education, child care, transportation options, and job opportunities**—which are sorely needed in the underserved communities where we practice. We strongly oppose any action that would limit access to food assistance for vulnerable people—which will only make them sicker and less able to work—and hope the USDA would eliminate SNAP time limits and work requirements, rather than expand them.

We believe a fair and just society provides for basic human needs and does not subject its poorest citizens to hunger and poverty. I understand that many others in the food assistance community are expressing concerns and opposition to time limits and work requirements. We echo these views and hope the USDA moves away from these harmful policies. Thank you for the opportunity to comment on the SNAP program. Please contact us if you should wish to discuss any aspect of these comments further. I can be reached at bwatts@nhchc.org or at 615-226-2262.

Sincerely,

A handwritten signature in blue ink that reads "G. Robert Watts". The signature is fluid and cursive, with the first name "G." and last name "Watts" clearly legible.

G. Robert Watts
Chief Executive Officer