



FOOD JOURNAL

Volume XVIII, Number 9 - September 17, 2004

FOOD STAMP PROGRAM EXPANDING, BUT MANY NOT REACHED

Every year, the U. S. Department of Agriculture, Food and Nutrition Service estimates the rate of participation in the Food Stamp Program among those eligible for benefits. *Trends in Food Stamp Program Participation Rates: 1999-2002* (Cunnyngham 2004), presents an estimate of the national food stamp participation rate for 2002 and demonstrates recent participation changes.

In fiscal year 2002, the Food Stamp Program served about 54 percent of those eligible to receive benefits, reflecting a combination of increased participation, expanded eligibility standards designed to help working poor families, and improved techniques that yield more accurate estimates.

There were several changes from 2001 to 2002:

- The Food Stamp Program served more low-income families and individuals. The average monthly number of participants grew from about 17 million in 2001 to 19 million in 2002, an increase of 1.8 million people. This growth in caseload was combined with policy changes and other factors that increased the number of people eligible for food stamp benefits. As a result, the increase in participation did not increase the percentage of eligible recipients served to the degree it might

be expected.

- Important policy reforms opened the door to program benefits for many low-income families and individuals. New rules updated limits on the allowable value of vehicles. USDA estimated that about 2.7 million additional low-income individuals would qualify under the new vehicle rules in 2002.
- The number of eligibles grew in response to changing economic conditions. The program is designed to expand when the economy weakens and contract when it grows. On average, there were nearly 2 million more people unemployed in 2002 than in 2001, and 1.7 million more people in poverty. USDA estimates that changing economic conditions increased the number of eligible individuals by about 1.4 million in 2002.
- Technical improvements and more current information improved the accuracy of estimates of eligibility. Several technical improvements to the way USDA estimates eligibility were made which added another 2.3 million to the number of eligibles.

Looking ahead, USDA expects the Food Stamp Program to serve an average of about 23.7 million people in 2004.

*For a copy of the full report, visit
[www.fns.usda.gov/oane/MENU/Published/
FSP/FILES/Participation/TrendsSum99-
02.pdf](http://www.fns.usda.gov/oane/MENU/Published/FSP/FILES/Participation/TrendsSum99-02.pdf).*

NEW RESEARCH SUGGESTS LINK BETWEEN MATERNAL DIET AND CHILDHOOD LEUKEMIA RISK

A new study suggests that eating more vegetables, fruit and protein before pregnancy may lower the risk of having a child who develops leukemia, the most common childhood cancer in the United States.

“This is the first time researchers have conducted a systematic survey of a woman’s diet and linked it to the risk of childhood leukemia,” said Dr. Kenneth Olden, director of the National Institute of Environmental Health Sciences, the federal agency that funded the study.

The study was conducted by researchers at the University of California (U.C.) at Berkeley, and the study results are published in the August 2004 issue of *Cancer Causes and Control*.

Researchers compared 138 women who each had a child diagnosed with acute lymphoblastic leukemia (ALL) with a control group of 138 women whose children did not have cancer. The children of all the women in the study were matched by sex, age, race, and county of residence at birth.

After comparing the women’s diets in the 12 months prior to pregnancy, researchers found that the higher the intake of vegetables, fruit and foods in the protein group, the lower the risk of having a child with leukemia.

One of the more surprising results of the study is the emergence of protein sources, such as beef and beans, as a beneficial food group in lowering childhood leukemia risk. “The health benefits of fruits and vegetables have been known for a long time,” said principal investigator Gladys Block, professor of epidemiology and public health nutrition at U.C. Berkeley. “What we found in this study is that the protein foods group is also very important.”

The researchers looked further and found that glutathione was the nutrient in the protein group with a strong link to lower cancer risk. Glu-

tathione is an antioxidant found in both meat and legumes, and it plays a role in the synthesis and repair of DNA, as well as the detoxification of certain harmful compounds.

Within the fruit and vegetable food groups, certain foods including carrots, string beans and cantaloupe stood out as having stronger links to lower childhood leukemia risk. The researchers point to the benefits of nutrients, such as carotenoids, in those foods as potential protective factors. National guidelines recommend that people eat at least five servings of fruits and vegetables every day, and two to three servings of foods from the protein group.

“Fetal exposure to nutritional factors has a lot to do with what mom eats,” said Christopher Jensen, a nutritional epidemiologist at U.C. Berkeley and lead author of the paper. “These findings show how vital it is that women hoping to get pregnant, as well as expectant moms, understand that critical nutrients in vegetables, fruit and foods containing protein, such as meat, fish, beans and nuts, may protect the health of their unborn children.”

The few studies that have been conducted on maternal diet and childhood cancer risk looked only at specific foods or supplements, and results have been mixed. This study is the first attempt to capture a woman’s overall dietary pattern using a 76-food-item questionnaire and its relationship to the development of leukemia in a child. Researchers also studied the use of vitamin supplements, but did not find a statistically significant link to childhood leukemia risk.

A growing number of scientists believe that genetic changes linked to cancer later in life begin in the womb. “It goes back to the old saying to expectant mothers, ‘You’re eating for two,’” said co-author Patricia Buffler, U.C. Berkeley professor of epidemiology and head of the federally funded Northern California Childhood Leukemia Study. “We’re starting to see the importance of the prenatal environment, since the

events that may lead to leukemia are possibly initiated *in utero*. Leukemia is a very complex disease with multiple risk factors. What these findings show is that the nutritional environment *in utero* could be one of those factors.”

REVISIONS TO THE DIETARY GUIDELINES RECOMMENDED

A panel of doctors and scientists issued its final recommendations to the U. S. Department of Agriculture (USDA) and the Department of Health and Human Services (HHS) about what changes should be made to the federal dietary guidelines. By law, the Dietary Guidelines are to be “promoted by each federal agency in carrying out any federal food, nutrition, or health program.” This means that the Dietary Guidelines must be applied in menu planning in programs such as the National School Lunch Program; in educational materials used by the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and by many other federal programs; and in setting the Healthy People objectives for the nation. Using Dietary Guidelines helps policymakers, educators, clinicians, and others to speak with one voice on nutrition and health. The guidelines also form the basis for the food pyramid published by USDA. The food pyramid is designed to help Americans make the best food choices.

The 13-member 2005 Dietary Guidelines Advisory Committee was appointed by the HHS and USDA to assist the departments in providing sound and current dietary guidance to consumers. The departments are required by law to publish dietary guidelines every five years. The recommendations are to be targeted to the general public age two years and older and based on the preponderance of scientific and medical knowledge.

The Committee’s findings support the development of Dietary Guidelines that convey the following nine major messages:

- Consume a variety of foods within and among the basic food groups while staying within energy needs.
- Control calorie intake to manage body weight.
- Be physically active every day.
- Increase daily intake of fruits and vegetables, whole grains, and nonfat or low-fat.
- milk and milk products.
- Choose fats wisely for good health.
- Choose carbohydrates wisely for good health.
- Choose and prepare foods with little salt.
- If you drink alcoholic beverages, do so in moderation.
- Keep food safe to eat.

The panel’s proposals for the five-year update of government’s nutrition advice also say people should eat at least three one-ounce servings of whole grains each day, “preferably in place of refined grains” or white bread. The committee called for Americans to control their weight by being physically active. To prevent weight gain, many people should do up to 60 minutes a day of moderate to vigorous activity, and those who have lost weight and want to keep it off may have to do up to 90 minutes, the report said.

Unlike the current guidelines, issued in 2000, the new recommendations do not specifically tell people to be moderate in their use of added sugars. The recommended guidelines still urge people to be careful in their intake of sugar as a way to keep their weight under control.

The recommendations go to federal officials who will prepare reports for the secretaries of USDA and HHS, who must approve the findings before they can be issued. Officials expect the final nutrition report, and an updated version of the food pyramid, to be issued early next year.

For further information about the food guide pyramid, visit the Center for Nutrition Policy and Promotion web site at www.usda.gov/cnpp/pyramid-update/index.html.

CU RESEARCHER: HALF OF ALL AMERICANS WILL USE FOOD STAMPS DURING ADULTHOOD

To be worry-free about having enough food is not the norm in the United States, says a Cornell University sociologist.

“Rather, the need to use food stamps is a common American experience that at least half of all Americans between the ages of 20 and 65 will face,” says Thomas A. Hirschl, professor of Development Sociology at Cornell who has completed a study of food stamp use.

Race and education, Hirschl says, have dramatic links to food stamp use: More than 85 percent of African Americans will use food stamps some time between the ages of 20 and 65, compared with 37 percent of white Americans; about 64 percent of adults with less than 12 years of education will use food stamps, compared with 38 percent of adults with 12 or more years of education.

The study, co-authored with Mark R. Rank, professor of Social Work at the George Warren Brown School of Social Work at Washington University, will be published in the December 2004 issue of the *Journal of Nutrition Education and Behavior*. The findings were presented at the Society for Nutrition Education annual meeting in Philadelphia in July 2003.

Looking at the two extremes, the researchers found that about one-quarter of white males with 12 or more years of education will use food stamps, while more than 90 percent of black females with less than 12 years of education will use food stamps some time between ages 20 and 65.

“We also find that while the use of food stamps is often brief, of those who have used food stamps once, about three-quarters will use them again in a different year,” says Hirschl. “These findings are in sharp contrast to the belief that the use of the nation’s food nutrition safety net

is something that happens to someone else and is atypical of the American experience. Rather, they indicate that Americans have a substantial need and use of food stamps, and they suggest a significant risk of food insecurity across the life course.” Food insecurity is defined as the limited or uncertain availability of nutritionally adequate and safe foods or the acquisition of acceptable foods in socially acceptable ways.

The researchers merged 30 waves (1968 to 1997) of the nationally representative Panel Study of Income Dynamics data set to analyze 260,000 “person years” of information on food stamp use, defined as an individual in a household receiving food stamps sometime during the year.

“The patterns that emerged from our analysis are particularly troubling in light of the fact that food insecurity, along with hunger, have been shown to be closely related to various health problems, including an increased risk in the development of chronic diseases, impairment of psychological and cognitive functioning among children and a greater likelihood of self-reporting health status as poor,” report Hirschl and Rank. “The fact that at least four out of 10 Americans will experience food insecurity at some point during their adulthood would appear to represent a significant public health cause for concern.”

“The findings show that many Americans rely on food stamps to help them through periods of economic turmoil. Yet ironically, the food nutrition safety net that was designed to help alleviate food insecurity and hunger has been under attack in recent years and is threatened by proposals to reduce and restrict enrollment,” says Hirschl.

The research was supported by a U.S. Department of Agriculture-funded research development grant administered through the Northwestern University/University of Chicago Joint Center for Poverty Research.

CENSUS BUREAU REPORTS INCOME STABLE, POVERTY UP, NUMBERS OF AMERICANS WITH AND WITHOUT HEALTH INSURANCE RISE

Real median household income remained unchanged between 2002 and 2003 at \$43,318, according to *Income, Poverty, and Health Insurance Coverage in the United States: 2003*, a report released by the U.S. Census Bureau. At the same time, the nation's official poverty rate rose from 12.1% in 2002 to 12.5% in 2003. Although up from 2002, this rate is below the average of the 1980s and 1990s.

The report's data were compiled from information collected in the 2004 Annual Social and Economic Supplement (ASEC) to the Current Population Survey (CPS). The report also reveals that:

- The number of people with health insurance increased by 1.0 million to 243.3 million between 2002 and 2003, and the number without such coverage rose by 1.4 million to 45.0 million. The percentage of the nation's population without coverage grew from 15.2% in 2002 to 15.6% in 2003.
- The child poverty rate increased from 16.7% to 17.6%. The number of children living in poverty increased 733,000 to 12.9 million.
- Neither people 18-64 years nor 65 and over experienced a change in their poverty rate, 10.8% and 10.2% in 2003, respectively.
- Conversely, New Hampshire's poverty rate (6.0%) was lower than those of 48 states and the District of Columbia, except Minnesota.
- Seven states — Illinois, Michigan, Nevada, North Carolina, South Dakota, Texas and Virginia — showed increases in their poverty rates based on two-year moving averages (2001-2002 and 2002-2003), while two states — Mississippi and North Dakota — showed decreases.

- While median income for households overall did not change, median income fell for some groups, most notably households headed by young adults — those under age 34 — and Hispanics. For instance, median income fell \$1,589 between 2002 and 2003 — or 3.4% — among households headed by someone aged 25 to 34. It fell \$1,413, or 5%, among households headed by a 15-to-24 year-old person. Median income dropped \$864, or 2.6%, among Hispanic households.
- Real median household income remained unchanged between 2002 and 2003 in three of the four census regions — Northeast (\$46,742), Midwest (\$44,732) and West (\$46,820). The exception was the South, where income declined 1.5%. The South continued to have the lowest median household income of all four regions (\$39,823). The difference between median household incomes in the Northeast and West was not statistically significant.
- Income inequality showed no change between 2002 and 2003. The share of aggregate income received by the lowest household income quintile (20% of households) declined from 3.5% to 3.4%, while remaining unchanged for the other quintiles.
- The number of people living in extreme poverty — those with incomes below half of the poverty line — increased by 1.2 million in 2003, to 15.3 million people. Some 43% of all poor people had incomes this low.

For commentary on the report, visit:

- Food Research and Action Center at www.frac.org/html/news/Census_2003_Response.html;
- Center on Budget and Policy Priorities at www.cbpp.org/8-26-04pov.htm; or
- Children's Defense Fund at www.childrensdefense.org/pressreleases/040827.asp.

*For a copy of the report, go to,
www.census.gov/hhes/www/income.html.*

NIH RELEASES RESEARCH STRATEGY TO FIGHT OBESITY EPIDEMIC

The National Institute for Health (NIH) released a *Strategic Plan for NIH Obesity Research*, a multi-dimensional research agenda to enhance both the development of new research in areas of greatest scientific opportunity and the coordination of obesity research.

“We are pleased about this focused effort to identify research opportunities in obesity. We are especially concerned about the serious problems we see emerging in overweight children. Many of these are problems that we used to see only in adults,” said Elias M. Zerhouni, MD, NIH Director.

Health and Human Services (HHS) Secretary Tommy G. Thompson has targeted obesity as a major priority for HHS. “There is no doubt that obesity is an epidemic that must be stopped. This plan gives us a clear focus for confronting obesity with science-based research approaches,” Thompson said.

Emphasizing the importance of cross-cutting investigations, the plan calls for interdisciplinary research teams to bridge the study of behavioral and environmental causes of obesity with the study of genetic and biologic causes. Lifestyle interventions could be improved through a greater understanding of genetic and biologic aspects and vice versa. Also, successful prevention and treatment of obesity may require a combination of behavioral, environmental and medical approaches in highly susceptible individuals.

The plan calls for intensifying efforts along several fronts:

- Behavioral and environmental approaches to modifying lifestyle to prevent or treat obesity;
- Pharmacologic, surgical and other medical approaches to effectively and safely prevent or treat obesity;

- Breaking the link between obesity and diseases such as Type II Diabetes, Heart Disease, and certain cancers;
- Research on special populations at high risk for obesity, including children, ethnic minorities, women and older adults;
- Translating basic science results into clinical research and then into community intervention studies; and
- Disseminating research results to the public and health professionals.

The most recent figures from the Centers for Disease Control and Prevention show that 65 percent of U.S. adults—or about 129.6 million people—are either overweight or obese. In addition to decreasing quality of life and increasing the risk of premature death, obesity and overweight cost the nation an estimated \$117 billion in direct medical costs and indirect costs such as lost wages due to illness.

Against this backdrop, Zerhouni created the NIH Obesity Research Task Force in the Spring of 2003 to intensify basic and clinical research and to enhance coordination of obesity research across NIH. The group developed the *Strategic Plan for NIH Obesity Research* with input from many scientists at academic and other settings across the country, organizations advocating for patients and health professionals, and other members of the public.

“By focusing on goals with the greatest scientific opportunity and challenge, we are optimistic that NIH can greatly expand the knowledge base on this complex, multi-faceted disorder,” said Allen M. Spiegel, M.D., Director of the National Institute of Diabetes and Digestive and Kidney Diseases. Spiegel also co-chairs the Task Force with Barbara Alving, M.D., Acting Director of the National Heart, Lung, and Blood Institute.

NIH invested \$378.6 million for obesity research in fiscal year 2003, will invest about \$400.1 million in fiscal year 2004, and is projected to sup-

port obesity research amounting to about \$440.3 million in fiscal year 2005, an increase of about 10 percent over 2004.

“Obesity increases individuals’ risk for a whole host of diseases, with cardiovascular disease right at the top of the list,” said Dr. Alving. “By addressing obesity in such a comprehensive way, NIH stands to make major inroads to helping both children and adults enjoy healthy and fully active lives.”

The plan is on the web at www.obesityresearch.nih.gov. Printed copies may be ordered from NIH by calling (877) 946-4627.

LABELING BILL REQUIRES DISCLOSURE OF ALLERGENS IN PLAIN ENGLISH

President George Bush has signed new food labeling legislation that will provide clear, consistent and reliable ingredient label information—an essential first line of defense for the 11 million of Americans who have food allergies, according to The Food Allergy & Anaphylaxis Network (FAAN). The new labeling bill will ensure that all allergens are disclosed and the ingredient terms are understandable to the average consumer and not just scientists. The bill, which will take effect January 1, 2006, is referred to as The Food Allergen Labeling and Consumer Protection Act (FALCPA) and is included as Title II of Senate Bill 741.

Government agencies and advocacy organizations lauded the passage of the bill and applauded the dedication and leadership of the bill’s sponsors in the Senate, including Health, Education, Labor, and Pensions Committee Chairman Judd Gregg and Ranking Member Edward Kennedy as well as Senators Jeff Sessions and Jeff Bingaman. In the House, the primary sponsors of companion legislation on food allergen labeling legislation were Representatives Nita M. Lowey and James C. Greenwood.

The bill requires food manufacturers to use plain English words like “milk” or “wheat” rather than less familiar words like “casein” or “semolina” to identify the most common food allergens on ingredients lists. Eight ingredients—eggs, fish, milk, peanuts, shellfish, soybeans, tree nuts, and wheat—account for most allergic reactions. The bill requires disclosure of allergens in natural flavorings, natural colorings, and spices. The bill requires the Food and Drug Administration to inspect food manufacturing facilities for inadvertent cross-contamination of foods with allergens during processing. The bill also directs the Centers for Disease Control and Prevention to collect data on adverse reactions to allergenic foods.

The Center for Science in the Public Interest (CSPI), the nonprofit nutrition and food-safety watchdog group that has been advocating for the changes to food labels, praised the bill’s passage. “This legislation will be of great help to Americans who cope with food allergies, particularly parents of young children who have food allergies,” said CSPI Executive Director Michael F. Jacobson.

FDA’s Acting Commissioner Dr. Lester M. Crawford said today, “FDA applauds the passage of the FALCPA. It will be of great help to consumers that are prone to allergies. We welcome this legislation which is consistent with FDA’s initiatives to provide consumers with the information they need to make healthy choices.”

Each year 29,000 Americans are hospitalized and 150 die from allergic reactions to food.

Archived Food Journals are now available on line at www.tacaa.org. The Food Journal welcomes your comments and ideas for stories. To contact us, please call (800) 992-9767 ext. 203, or e-mail comments and suggestions to foodjournal@tacaa.org.



FOOD JOURNAL

NON-PROFIT ORG.
U.S. POSTAGE PAID
AUSTIN, TX
PERMIT NO. 1767

Please report address changes to foodjournal@taca.org or fax to (512) 462-2004.

TEXAS ASSOCIATION OF COMMUNITY ACTION AGENCIES, INC.

2512 IH 35 South, Suite 100

Austin, Texas 78704-5751

Telephone: (512) 462-2555 or (800) 992-9767

Fax: 512/462-2004

E-Mail: foodjournal@taca.org Web Site: www.taca.org

TACAA STAFF

Stella Rodriguez	Executive Director
Laurie S. Haney	Executive Assistant
Colyn Frazier	Office Manager
Pam Lawrie	Program Manager
Janet Leubner	Program Coordinator
Anitra Hendricks	Program Assistant
Gilbert Blanco	Field Representative

TACAA OFFICERS

Joe A. Martinez	President
Karen Swenson	First Vice President
vacant	Second Vice President
Beverly Logan	Treasurer
Leona Johnson	Secretary
Carol Brown	Parliamentarian

The TACAA Food Journal is published monthly by the Texas Association of Community Action Agencies, Inc. (TACAA). Funding for the newsletter is provided under a contract with the Texas Department of Housing and Community Affairs (TDHCA) under the Community Food and Nutrition Program. Opinions expressed are those of TACAA staff and do not necessarily represent views of TDHCA, TACAA, or its members. TACAA provides the Food Journal at no cost to readers throughout the state, and encourages readers to submit articles and comments for review and publication.