

The Effects of Public Benefits Enrollment on Older Adults' Wellbeing

Executive Summary – For Internal Use Only

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There is evidence that the Supplemental Nutrition Assistance Program (SNAP) reduces food insecurity¹, reduces depression², increases prescription adherence³, and leads to better nutritional outcomes and lower healthcare costs⁴. However, less is known about the effect of benefits on wellbeing outcomes. To better understand the effects of participation in benefit programs, the National Council on Aging (NCOA) partnered with Social Policy Research Associates (SPR) to design and conduct a research study aimed at understanding how enrolling in public benefit programs affects older adults' wellbeing. For this study, wellbeing is defined as quality of life, which includes physical, psychological, and social aspects of functioning.

Methodology

Older adults were recruited from the clients served by seven different Benefits Enrollment Centers (BECs), which were selected for their diversity in both client race/ethnicity and geographic location⁵. Older adult BEC clients were recruited at the time they were seeking assistance with enrolling in a benefits program for which they were likely to qualify.

Participants were asked to complete a baseline survey after receiving assistance from BECs to enroll in one of six benefits programs⁶. Approximately six months later, the same participants were asked again to complete the survey. The purpose was to capture differences in wellbeing outcomes between the moment of applying for benefit(s) and a later point in time that would be similar across study participants. Surveys were administered either by telephone or mail. Respondents received small gift card incentives for their participation. The baseline data collection occurred between September 2019 and February 2020. Follow-up data collection occurred amid the COVID-19 pandemic, between April

¹ Bitler, M. (2014). The health and nutrition effects of SNAP: Selection into the program and a review of the literature on its effects. University of Kentucky Center for Poverty Research Discussion Paper Series, DP2014-02. Retrieved March 19, 2019 from <http://www.ukcpr.org/Publications/DP2014-02.pdf>.

² Leung, C. W., Epel, E. S., Willett, W. C., Rimm, E. B., & Laraia, B. A. (2015). Household food insecurity is positively associated with depression among low-income supplemental nutrition assistance program participants and income-eligible nonparticipants. *The Journal of nutrition*, 145(3), 622-627.

³ Carlson, S., & Keith-Jennings, B. (2018). SNAP is linked with improved nutritional outcomes and lower health care costs. Center for Budget and Policy Priorities. Retrieved May 13, 2021 from https://www.cbpp.org/research/food-assistance/snap-is-linked-with-improved-nutritional-outcomes-and-lower-health-care#_ftn17

⁴ Ibid.

⁵ Adelante - Albuquerque, NM; Live ON-New York, NY; Legal Aid of the Bluegrass - Covington, KY; Elder Law of Michigan - Lansing, MI; Catholic Charities Archdiocese of New Orleans - New Orleans, LA; Feeding the Gulf Coast - Theodore, AL; Age Smart IL - O'Fallon, IL

⁶ SNAP, Medicare, Medicare Savings Programs (MSP), Part D Extra Help/Low-Income Subsidy, Medicaid, and the Low-Income Home Energy Assistance Program

2020 and August 2020. There were 299 older adults who participated at baseline, a 70% response rate. Of the original 299 who completed the baseline survey, 209 completed the follow-up survey, a 70% response rate. See the full report for the respondent characteristics.

Analytic Approach

Despite expectations that nearly all respondents would be enrolled in additional benefits after receiving assistance from a BEC, we found that some respondents lost their enrollment in some programs but gained enrollment in others. The overall proportion of enrollment stayed essentially constant. Between baseline and the follow-up data collection, 42% of respondents were enrolled in at least one additional program⁷, 41% were enrolled in the same number of programs, and 17% were enrolled in fewer programs. There are several caveats to this that need to be taken into consideration. First, the COVID-19 pandemic overlapped with the follow-up survey which could have impacted the timing of benefits enrollment. Second, while participants were contacted soon after seeking help from a BEC to capture their baseline levels of wellbeing, there is the possibility that delays in reaching respondents meant they were already enrolled in the additional benefit when the baseline survey was conducted. Third, benefits program enrollment was self-reported by respondents rather than collected from administrative sources, leaving the potential for error. There has been considerable evidence that participation in public benefit programs is under-reported in surveys.⁸

To estimate the effects of participation in benefit programs, we used a quasi-experimental approach in which the “treatment” group consisted of those who became enrolled in additional benefits and the comparison group consisted of those who were enrolled in the same number or fewer programs at follow-up. We utilized two statistical methods to analyze the results. See the full report for more information about Propensity Score Matching (PSM) and difference-in-difference (DiD) analytic methods.

Results

The survey included two food insecurity questions adapted from the U.S. Census Survey of Income and Program Participation (SIPP). **The analysis found statistically significant evidence that enrolling in more public assistance benefits led to a decrease in food insecurity.** At baseline, 38% of older adults in the “treatment” group were experiencing food insecurity while at the follow-up, after receiving additional benefits, the proportion experiencing food insecurity decreased to 16%. For those in the comparison group, 30% experienced food insecurity at baseline and 25% experienced it at the follow-up. Therefore, food insecurity decreased much more within the treatment group. Subgroup analyses revealed that men and the older respondents (age 75+) experienced the greatest reductions in food insecurity.

The survey included the Financial Wellbeing Scale from the Consumer Financial Protection Bureau (CFPB). While financial wellbeing increased slightly for participants on average between baseline and follow-up, the “treatment” group did not experience greater increases. Therefore, **there is no evidence**

⁷ Of those who became enrolled in an additional program, almost half (48%) were new to SNAP, a quarter (25%) were new to an MSP, and 15 percent or fewer were new to other programs.

⁸ Meyer, B. D., Mittag, N., & George, R. M. (2020). Errors in survey reporting and imputation and their effects on estimates of food stamp program participation. *Journal of Human Resources*, 0818-9704R2.

to suggest that enrolling in additional public assistance benefits led to increases in financial wellbeing. We did, however, see evidence that **older respondents (age 75+) and Black/African American respondents who accessed more benefits experienced the greatest increases in their financial wellbeing** between baseline and follow-up.

The survey included the Medical Outcomes Study Questionnaire Short Form (SF-36) Health Survey to measure changes in social, emotional, and physical wellbeing. **The analyses revealed that being enrolled in more benefit programs was associated with modest increases in social and emotional wellbeing.** Impact estimates by subgroup also revealed that **women, participants age 65 and over and Black/African American respondents experienced the largest increases in wellbeing associated with being enrolled in more benefit programs.**

Conclusion

This study found promising evidence that participating in a larger number of public benefit programs was associated with large reductions in food insecurity and modest to moderate increases in social and emotional wellbeing for older adults. The more vulnerable groups of older adults – including women, the oldest respondents (age 75+) and Black/African American individuals – appeared to benefit more than other groups⁹.

⁹ The full report discusses limitations and future research ideas.

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