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SNAP Helps 1.2 Million Low-Income Veterans, Including Thousands in Every State

By Lauren Hall

About 1.2 million veterans live in households that participated in SNAP (formerly food stamps) from 2017 to 2019, CBPP analysis of pre-COVID-19 data from the U.S. Census Bureau's American Community Survey finds.¹ In every state, thousands of low-income veterans use SNAP to help put food on the table. Florida has the largest number of veterans participating in SNAP (108,000), followed by Texas (94,000), and California (90,000). Oregon, Rhode Island, and Washington, D.C. have the highest per capita rate, with about 1 in 10 veterans living in households that received SNAP. (See Table 1 for state-by-state data.)

The 1.2 million figure, an annual average for the 2017-2019 period, represents the number of veterans who received SNAP at *any point* during the previous year.² For low-income veterans, who may be unemployed, working in low-wage jobs, or have disabilities, SNAP provides an essential support that enables them to purchase nutritious food for their families. Nationwide, SNAP is a powerful anti-hunger and anti-poverty tool: it lifted 6.6 million people above the poverty line in 2017, including 3.1 million children.³

While veterans are a diverse group, many face challenges making ends meet. Evidence is mixed about how veterans fare overall in the labor market, but some evidence shows worse outcomes for some groups. In 2020, the youngest veterans, aged 18 through 24, had higher unemployment rates than veterans of other ages, which may reflect their transition from service. In addition, Black and

¹ We defined veterans as those individuals who indicated they have ever served on active duty in the U.S. Armed Forces.

² The number of SNAP participants has increased since the onset of the COVID-19 pandemic, but is similar to the 2017-2019 period analyzed. Therefore, the 1.2 million figure may be comparable to current veteran participation. See <https://www.fns.usda.gov/pd/supplemental-nutrition-assistance-program-snap> for more detailed numbers.

³ CBPP analysis of U.S. Census Bureau's Current Population Survey and Supplemental Poverty Measure public use files. Corrections for underreported benefits from the Department of Health and Human Services/Urban Institute Transfer Income Model (TRIM).

Latino veterans had higher unemployment rates than white veterans, which may be due to structural racism and discrimination that creates barriers to employment for people of color.⁴

Veterans may face barriers to employment such as little work experience beyond military service, trouble finding employment that matches their skills, discrimination by employers, or lack of access to support services (such as military-to-civilian transition services or veteran hiring services).⁵ Younger veterans may be highly skilled but civilian employers may undervalue their military experience, leading to a disproportionate share who hold jobs for which they are overqualified for compared to younger non-veterans with similar skills. In addition to experiencing more job dissatisfaction and turnover as a result, some veterans may only be offered low-wage jobs, which can make it difficult for them to meet their basic needs.⁶

Some veterans also face challenges from physical and mental health conditions related to their service that can affect their well-being. For example, some conditions that are more prevalent among returning recent veterans, such as traumatic brain injuries or post-traumatic stress disorder, have been linked to negative outcomes such as reduced labor force participation, increased risk of poor physical and mental health, and worse quality of life including difficulty with community reintegration.⁷ About two-fifths of veterans who served in September 2001 or later reported a

⁴ Bureau of Labor Statistics (BLS), “Employment Situation of Veterans – 2020,” March 18, 2021, <https://www.bls.gov/news.release/pdf/vet.pdf>. Latino veterans may be of any race. Asian veterans had lower unemployment rates than white veterans in 2020. BLS did not publish data on veterans of other races.

⁵ Mary Keeling, Sara Kintzle, and Carl A. Castro, “Exploring U.S. Veterans’ post-service employment experiences,” *Military Psychology*, February 28, 2018, <https://www.tandfonline.com/doi/abs/10.1080/08995605.2017.1420976>; Congressional Budget Office, “Labor Force Experiences of Recent Veterans,” May 2017, https://www.cbo.gov/system/files/115th-congress-2017-2018/reports/52418-laborforceveterans_0.pdf; Lisa Stern, “Post 9/11 Veterans With Service-Connected Disabilities and their Transition to the Civilian Workforce,” *Advances in Developing Human Resources*, December 19, 2016, <http://journals.sagepub.com/doi/full/10.1177/1523422316682928>; Institute of Medicine, “Returning Home from Iraq and Afghanistan: Assessment of Readjustment Needs of Veterans, Service Members, and Their Families,” National Academies Press, March 12, 2013, <https://www.ncbi.nlm.nih.gov/books/NBK206864/>; Rosalinda Maury, Brice Stone, and Jennifer Roseman, “Veteran Job Retention Survey,” Syracuse University Institute for Veterans and Military Families, <https://ivmf.syracuse.edu/wp-content/uploads/2016/10/VetAdvisor-ReportFINAL-Single-pages.pdf>.

⁶ Maury, Stone, and Roseman, *op. cit.*; Kim Parker *et al.*, “The transition to post-military employment,” Pew Research Center, September 10, 2019, <https://www.pewresearch.org/social-trends/2019/09/10/the-transition-to-post-military-employment/>; Sara Kintzle *et al.*, “Exploring the Economic & Employment Challenges Facing U.S. Veterans: A Qualitative Study of Volunteers of America Service Providers & Veteran Clients,” USC School of Social Work Center for Innovation and Research on Veterans & Military Families, May 2015, https://voa-production.s3.amazonaws.com/uploads/pdf_file/file/762/A_Study_of_Volunteers_of_America_Service_Providers_and_Veteran_Clients.pdf; Melissa Boatwright and Sarah Roberts, “Veteran Opportunity Report: Understanding an untapped talent pool,” LinkedIn, <https://socialimpact.linkedin.com/content/dam/me/linkedinforgood/en-us/resources/veterans/LinkedIn-Veteran-Opportunity-Report.pdf>.

⁷ See for example: Colleen E. Jackson *et al.*, “Associations Among Increases in Posttraumatic Stress Symptoms, Neurocognitive Performance, and Long-Term Functional Outcomes in U.S. Iraq War Veterans,” *Journal of Traumatic Stress*, June 2021, <https://onlinelibrary.wiley.com/doi/10.1002/jts.22663>; Helen Phipps *et al.*, “Characteristics and Impact of U.S. Military Blast-Related Mild Traumatic Brain Injury: A Systematic Review,” *Frontiers in Neurology*, November 2, 2020, <https://www.frontiersin.org/articles/10.3389/fneur.2020.559318/full>; Alicia A. Swan *et al.*, “Long-term physical and mental health outcomes associated with traumatic brain injury severity in post-9/11 veterans: A retrospective cohort study,” *Brain Injury*, October 1, 2018, <https://www.tandfonline.com/doi/full/10.1080/02699052.2018.1518539>; Rajeev Ramchand *et al.*, “Prevalence of, risk

service-connected disability in 2020, and more than half of this group had severe disabilities as a result of their military service. Recent veterans with a service-connected disability have a lower labor force participation rate than those without one.⁸

Due to these and other factors, some veterans struggle to meet basic needs. About 37,000 veterans were experiencing homelessness in January 2019, or about 8.1 percent of all homeless adults, according to the Department of Housing and Urban Development's annual point-in-time survey.⁹ Veterans with disabilities and without health insurance are also more likely to experience difficulty paying medical bills.¹⁰ It may be difficult for veterans who lack stable employment, housing, or resources to cover medical expenses to afford enough to eat.

According to the Department of Agriculture, 11 percent of veterans aged 18 to 64 experienced food insecurity in 2015-2019 and were more likely to experience it than non-veterans.¹¹ Veterans of color were more likely than white veterans to experience food insecurity. In addition, veterans who had a disability, were unemployed, or had lower education attainment were at greater risk of food insecurity. Another study found that depression and suicidal ideation were more common among food-insecure veterans.¹²

For veterans struggling to overcome obstacles to feed their families, SNAP makes a crucial difference. On average, low-income veterans are less likely to participate in SNAP than the low-income U.S. population, but many veterans who are most likely to be food insecure, including those who are young, less educated, or unemployed, are more likely than other veterans to participate.¹³

factors for, and consequences of posttraumatic stress disorder and other mental health problems in military populations deployed to Iraq and Afghanistan," *Current Psychiatry Reports*, May 2015, <https://www.ncbi.nlm.nih.gov/pubmed/25876141>.

⁸ Bureau of Labor Statistics, *op. cit.* Veterans are assigned disability ratings on a scale of 0 to 100 based on adverse health conditions from their military service. A disability rating of at least 60 percent is considered severe in this context.

⁹ Meghan Henry *et al.*, "The 2019 Annual Homeless Assessment Report (AHAR) to Congress," U.S. Department of Housing and Urban Development, January 2020, <https://www.huduser.gov/portal/sites/default/files/pdf/2019-AHAR-Part-1.pdf>.

¹⁰ Liyun Wu, Gang Wang, and Charles M.S. Birore, "Disabilities Status, Health Insurance, and Medical Hardship among Veterans," *Social Work in Public Health*, November 30, 2018, <https://www.tandfonline.com/doi/full/10.1080/19371918.2018.1546253>.

¹¹ Matthew P. Rabbitt and Michael D. Smith, "Food Insecurity Among Working-Age Veterans," U.S. Department of Agriculture Economic Research Service, May 2021, <https://www.ers.usda.gov/webdocs/publications/101269/err-829.pdf?v=1434.9>. Food insecurity is measured at the household level. In this study, individual veterans and individual non-veterans were assigned their household's food insecurity status.

¹² Nipa P. Kamdar *et al.*, "Risk for depression and suicidal ideation among food insecure US veterans: data from the National Health and Nutrition Examination Study," *Social Psychiatry and Psychiatric Epidemiology*, March 26, 2021, <https://link.springer.com/article/10.1007/s00127-021-02071-3>.

¹³ Andrew London and Colleen Heflin, "Supplemental Nutrition Assistance Program (SNAP) Use Among Active-Duty Military Personnel, Veterans, and Reservists," *Population Research and Policy Review*, December 2015, Vol. 34, Issue 6, pp. 805-826, <https://link.springer.com/article/10.1007%2Fs11113-015-9373-x> and Karen E. Cunyngnam, "Reaching Those in Need: Estimates of State SNAP Participation Rates in 2012," U.S. Department of Agriculture, February 2015, <https://fns-prod.azureedge.net/sites/default/files/ops/Reaching2012.pdf>. London and Heflin found 21.9 percent of low-income veterans participated in SNAP using five-year American Community Survey data for 2008-2012. USDA

One study found about 1 in 4 low-income veterans and nearly 1 in 3 food-insecure veterans participated in SNAP in the previous year.¹⁴

Important advances, including the recent implementation of food-insecurity screenings in the Veterans Administration system, are helping to better identify veterans at risk of food insecurity.¹⁵ However, much more needs to be done to help close the veteran SNAP participation gap and to better connect struggling veterans with available resources.¹⁶

found that 83 percent of eligible low-income people in the U.S. participated in SNAP in 2012 (with 82 percent participating in 2018, according to the most recent report).

¹⁴ Jennifer Pooler *et al.*, “Prevalence and Risk Factors for Food Insecurity Among Low-Income US Military Veterans,” *Public Health Reports*, January 21, 2021, <https://journals.sagepub.com/doi/abs/10.1177/0033354920974662> and Jennifer Pooler *et al.*, “Veterans and Food Insecurity,” IMPAQ, November 2018, https://impaqint.com/sites/default/files/issue-briefs/VeteransFoodInsecurity_IssueBrief_V1.3.pdf. Pooler *et al.* pooled National Health Interview Survey data from 2011 to 2017. The food insecurity reference period is the last 30 days, while Rabbitt and Smith’s study uses a reference period of 12 months.

¹⁵ Christine Going and Anne Utech, “Food insecurity screenings connect Veterans, resources,” VAntage Point, September 2, 2021, <https://blogs.va.gov/VAntage/94006/food-insecurity-screenings-connect-veterans-resources/>.

¹⁶ Josh Protas, “Reviewing the Availability of Resources to Address Veteran Hunger,” testimony from MAZON: A Jewish Response to Hunger to U.S. House Committee on Veterans Affairs Subcommittee on Economic Opportunity, January 9, 2020, <http://docs.house.gov/meetings/VR/VR10/20200109/110350/HHRG-116-VR10-Wstate-ProtasJ-20200109.pdf>.

TABLE 1

Veterans Receiving SNAP Benefits, 2017-2019 Average

State	Estimated number of veterans receiving SNAP	Estimated total number of veterans	Estimated share of veterans receiving SNAP
Alabama	22,000	323,000	7%
Alaska	5,000	63,000	7%
Arizona	29,000	486,000	6%
Arkansas	10,000	191,000	5%
California	90,000	1,524,000	6%
Colorado	20,000	369,000	5%
Connecticut	9,000	160,000	6%
Delaware	5,000	67,000	7%
District of Columbia	3,000	26,000	10%
Florida	108,000	1,425,000	8%
Georgia	45,000	614,000	7%
Hawai'i	7,000	100,000	7%
Idaho	7,000	119,000	6%
Illinois	45,000	553,000	8%
Indiana	19,000	379,000	5%
Iowa	10,000	178,000	5%
Kansas	8,000	177,000	5%
Kentucky	17,000	257,000	7%
Louisiana	19,000	238,000	8%
Maine	8,000	105,000	7%
Maryland	21,000	362,000	6%
Massachusetts	19,000	294,000	6%
Michigan	41,000	532,000	8%
Minnesota	12,000	288,000	4%
Mississippi	13,000	161,000	8%
Missouri	26,000	388,000	7%
Montana	5,000	86,000	6%
Nebraska	6,000	115,000	5%
Nevada	16,000	207,000	8%
New Hampshire	3,000	94,000	3%
New Jersey	14,000	312,000	5%
New Mexico	12,000	143,000	8%
New York	57,000	676,000	8%
North Carolina	48,000	654,000	7%
North Dakota	2,000	46,000	4%
Ohio	50,000	685,000	7%
Oklahoma	21,000	264,000	8%
Oregon	31,000	272,000	11%

TABLE 1

Veterans Receiving SNAP Benefits, 2017-2019 Average

State	Estimated number of veterans receiving SNAP	Estimated total number of veterans	Estimated share of veterans receiving SNAP
Pennsylvania	62,000	737,000	8%
Rhode Island	5,000	52,000	10%
South Carolina	21,000	359,000	6%
South Dakota	4,000	57,000	7%
Tennessee	32,000	425,000	8%
Texas	94,000	1,435,000	7%
Utah	7,000	121,000	6%
Vermont	2,000	35,000	7%
Virginia	27,000	671,000	4%
Washington	43,000	522,000	8%
West Virginia	12,000	124,000	9%
Wisconsin	18,000	325,000	6%
Wyoming	1,000	44,000	3%
United States	1,212,000	17,844,000	7%

Notes: Estimates are for veterans living in households that received any SNAP income during the last 12 months. Estimates of SNAP participation in a given month would be lower. Estimates use three-year averages due to small sample sizes in some states in one-year data; these three-year estimates are rounded to the nearest thousand and may not add up to totals.

Source: CBPP analysis of data from the U.S. Census Bureau, American Community Survey 1-year series, 2017 to 2019

Notes on Methods

CBPP analyzed the 2017-2019 American Community Survey 1-year Public Use Microdata Sample (ACS PUMS) for this state-level analysis. Veterans were identified as individuals who indicated that they had ever served on active duty in the U.S. Armed Forces. The figures presented here represent our best estimate of the number of veterans living in households that receive SNAP at some point during the year.

The analysis combines data for three years (2017 through 2019) to improve the reliability of the state estimates. The figures, which total 1.2 million veterans nationwide for the three-year average, refer to veterans living in households where anyone received SNAP benefits at any time in the last 12 months. The ACS surveys housing unit addresses and residents of group quarters facilities, including shelters. It omits any homeless individuals who are not staying at an address (for example, with friends or family) or at a shelter at the time of survey. Given the transient nature of this population, the ACS likely undercounts people experiencing homelessness, including homeless veterans.