Increases in Food Insecurity due to COVID-19: What Can be Done?

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Defining Food Insecurity

• A household’s food insecurity status is based on responses to 18 questions in the Core Food Security Module (CFSM)

• Examples of questions:
  – “I worried whether our food would run out before we got money to buy more”
  – “Did you or the other adults in your household ever cut the size of your meals or skip meals because there wasn’t enough money for food”
  – “Were you ever hungry but did not eat because you couldn’t afford enough food”
  – “Did a child in the household ever not eat for a full day because you couldn’t afford enough food”

• Categories
  – food insecure if have 3 or more affirmative responses
  – very low food secure (VLFS) if 8 or more affirmative responses (6 or more for households without children)
CHILD FOOD-INSECURITY RATES
Determinants of Food Insecurity

• Resources
  – Lower incomes
  – Low levels of education
  – Not a homeowner
  – Being unemployed
  – Not receiving child support
  – Lack of access to social capital
  – Declines in asset levels
  – High food prices
  – High cost of housing

• Race/ethnicity
  – Household head is African-American
  – Household head is American Indian

• Household structure
  – Having someone with a disability in the household
  – Being in a single-parent household
  – Having a non-custodial father who does not visit regularly
  – Older children
  – More children
  – Not having a grandparent in the household
  – Having a grandchild in the household
  – Changes in household composition

• Other
  – Having a parent who was incarcerated
  – Lack of financial management skills
  – Being at high risk of homelessness
  – Summertime
  – Changes in residence
  – Declines in child health
  – Declines in mental health
  – Lack of access to payday lenders
Some Health Consequences Associated with Food Insecurity

- Lower levels of self-reported health
- Poor sleep outcomes
- Complications with Asthma
- Worse mental health
- Chronic disease
- Poor glycemic control
- Higher cardiovascular disease risk
- Coronary artery disease
- Loss of vision due to diabetic retinopathy
- Iron deficiency
- Dental caries
- Mental distress
- Worse diabetes self-efficacy
- Poor glucose control
- Being bullied
- Lower nutrient intakes
- Behavioral problems
- Higher than normal blood serum copper levels
- Psychological distress
Food Insecurity and Health Care Costs

• Need to treat the negative health outcomes
  – leads to higher health care costs
    • a food insecure adult has annual health care costs that are over $1,800 higher than a food secure adult
  – many of these costs are borne by government through increased Medicaid and Medicare payments

• Total increase in health care costs for locality depends on
  – number of food insecure households
  – cost of health care in area
Figure 2. Health care costs associated with food insecurity (A) and per capita health care costs associated with food insecurity (B), by county, United States, 2012–2013.
Costs of Food Insecurity

• Almost $52,000,000,000 more in health care costs due to food insecurity

• For each adult brought onto SNAP
  – upper-bound impact in reduction in health care costs is $761
  – lower-bound impact in reduction in health care costs is $214
Broad Overview of Supplemental Nutrition Assistance Program

- In existence for over 50 years
- Available to eligible Americans of all ages
  - largest “near-cash” assistance program
- Serves about 40 million Americans
  - at its peak, about 50 million
  - a substantial portion of Americans receive SNAP at some point in their lives
- Total expenditures is about 65 billion dollars (0.03% of GDP; 0.13% of federal budget)
  - at its peak, about 80 billion dollars
- Central goal is to reduce food insecurity
  - succeeds
- Why does it succeed?
Reaches Those in Need

• Eligibility criteria
  – Gross income test
    • total income less than 130% of the poverty line
      – states have option to set higher – 200% in Florida
      – not binding for seniors and persons with disabilities
  – Net income test
    • net income less than the poverty line
    • calculated as gross income minus various deductions
      – excess shelter costs
      – excess health care costs
      – 80% of value of earnings
  – Asset test
    • total assets less than $2,250
    • waived at least partially in most states
Reaches Those in Need

• Establishment of benefit levels
  – maximum benefit is roughly 35% of the poverty line
    • tied to value of Thrifty Food Plan (TFP)
    • almost $700 per month for a family of 4
  – each additional dollar of income leads to about a 30% decline in benefits
  – as household size increases, benefit increases
    • set by equivalency scales based on TFP
Has an Effective Mechanism

• Recipients use electronic benefit transfer (EBT) card
  – benefits loaded once a month
    • date is often random but same each month
  – akin to a debit card

• Can be used at over 250,000 food outlets
## Redemptions by Firm Type – Firms with at least 1% of Total Redemptions

<table>
<thead>
<tr>
<th>Firm Type</th>
<th>Percent of Firms</th>
<th>Percent of Redemptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Combination grocery/other</td>
<td>22.2</td>
<td>5.4</td>
</tr>
<tr>
<td>Convenience store</td>
<td>45.3</td>
<td>5.6</td>
</tr>
<tr>
<td>Large grocery store</td>
<td>1.4</td>
<td>2.1</td>
</tr>
<tr>
<td>Medium grocery store</td>
<td>3.6</td>
<td>2.1</td>
</tr>
<tr>
<td>Small grocery store</td>
<td>5.0</td>
<td>1.3</td>
</tr>
<tr>
<td>Super store</td>
<td>7.6</td>
<td>52.3</td>
</tr>
<tr>
<td>Supermarket</td>
<td>6.7</td>
<td>29.5</td>
</tr>
</tbody>
</table>
Dignity and Autonomy

• SNAP recipients can procure food
  – in same food channels as the general population
  – in same manner as the general population
    • can choose food that is most appropriate for their families
Food Insecurity in Austin during time of COVID-19

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Purpose of Today’s Presentation

• FRESH-Austin COVID-19 Study
  – Concerns
  – Food Insecurity in Austin
  – Changes in accessing food
  – Response by the City of Austin
COVID-19 Study: Demographics

- FRESH-Austin COVID-19 participants (n=257; ongoing recruitment)
  - 80% female
  - 49% Hispanic
  - 36% white
  - 7% African American
  - 8% Other
  - 20% Only Spanish speakers
  - 16% English and Spanish

- Age: mean: 44 years of age – range 18-84
COVID-19 Study: Concerns

• Employment Status Changes
  – 18%: lost job
  – 21%: wages decreased
  – 10%: other (includes others in household losing jobs, etc)

• Primary Concerns:
  – 23% becoming infected
  – 16% financial
  – 16% food costs
  – 12% food access
  – 11% employment

Other concerns: child care, safe transportation, distance learning for children
COVID-19 Study: Concerns Food Access

- 56% reported issues with food access
  - 70% agreed that food is more expensive now
  - 58% spending more money on food
  - 84% finding it difficult to find food they usually buy
  - 63% shopping at different stores
    - 22% no food
    - 16% safer
    - 10% closer
    - 7% cheaper
COVID-19 Study: Food Access

• How are participants accessing food:
  – 39%: regular trip to grocery store
  – 13%: curbside
  – 14%: online and home delivery
  – 8%: food bank
  – 9% schools
  – 8%: friends
<table>
<thead>
<tr>
<th>Study</th>
<th>Food secure</th>
<th>Food insecure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Before COVID</td>
<td>163 (63.42%)</td>
<td>94 (36.58%)</td>
</tr>
<tr>
<td>During COVID</td>
<td>127 (49.42%)</td>
<td>130 (50.58%)</td>
</tr>
</tbody>
</table>

60% of people who used food banks/food pantries before COVID-19 are now using them more often.
Food security in households with children, n=252

- 1 or more child in household (n=160)
  - Food insecure (%): 37.5%
  - Food secure (%): 62.5%

- No children in household (n=92)
  - Food insecure (%): 30.43%
  - Food secure (%): 69.57%
COVID-19 Study: Food Insecurity

Employment and Food Security after COVID-19, n=257

- No change in employment (n=128): 33.59% Food insecure, 66.41% Food secure
- Lost job or reduced wages (n=103): 26.21% Food insecure, 73.79% Food secure
New food resources in Austin

- [http://connectatx.org/](http://connectatx.org/) website
- Food pick up at schools for children and caregivers
- Pandemic-EBT
- Delivery programs specific for lower income populations (i.e. Farmshare, Good Apple)
- More food pantry locations
- Pop-up grocery stores
THANK YOU!

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