

# Tackling food insecurity: what can communities do?

## Valerie Tarasuk

Professor, Department of Nutritional Sciences  
Faculty of Medicine, University of Toronto

### ***Acknowledgements:***

*This research is funded by a programmatic grant from the Canadian Institutes of Health Research. This presentation draws heavily on the work of Naomi Dachner, Andy Mitchell, Rachel Loopstra, Sharon Kirkpatrick, Lynn McIntrye, Herb Emery, and Tim Li.*

## **Terminology:**

**“Food security exists when** all people, at all times, have physical and economic access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life.” (Canada’s Action Plan on Food Security, 1998)

### **Household food insecurity:**


insecure or inadequate access to food due to financial constraints

# Household Food Security Survey Module

*(administered on the Canadian Community Health Survey since 2004)*

18 questions, differentiating adults' and children's experiences over last 12 months:

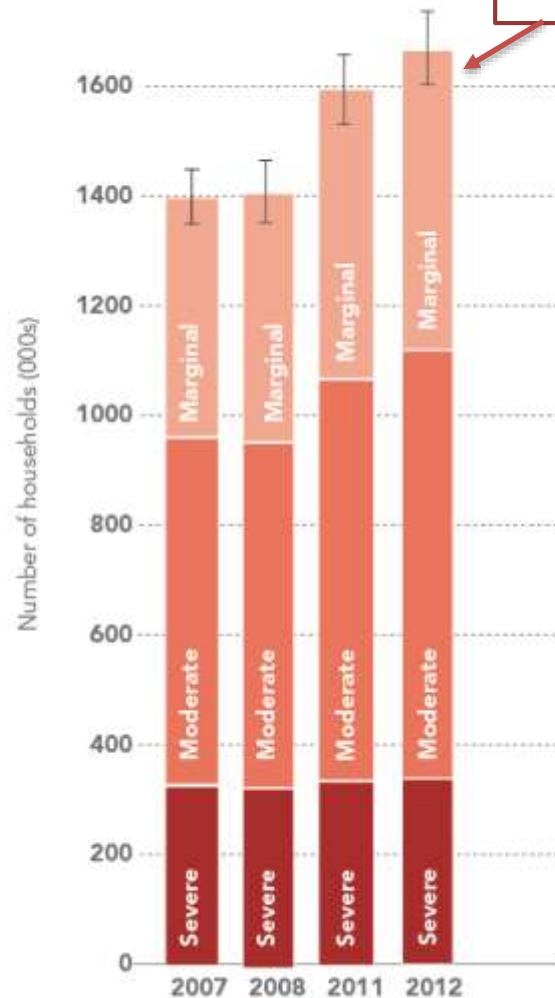
- Worry about not having enough food
- Reliance on low-cost foods
- Not being able to afford balanced meals
- Adults/children skip meals
- Adults/children cut size of meals
- Adults lost weight
- Adults/children not having enough to eat
- Adults/children not eating for whole day



“because there wasn't enough money to buy food?”

# Household Food Insecurity in Canada, 2007 - 2012

- 12.6% of households
- over 4 million Canadians  
*(an increase of > 600,000 since 2007)*



## Marginal food insecurity

Worry about running out of food and/or limit food selection because of lack of money for food.

## Moderate food insecurity

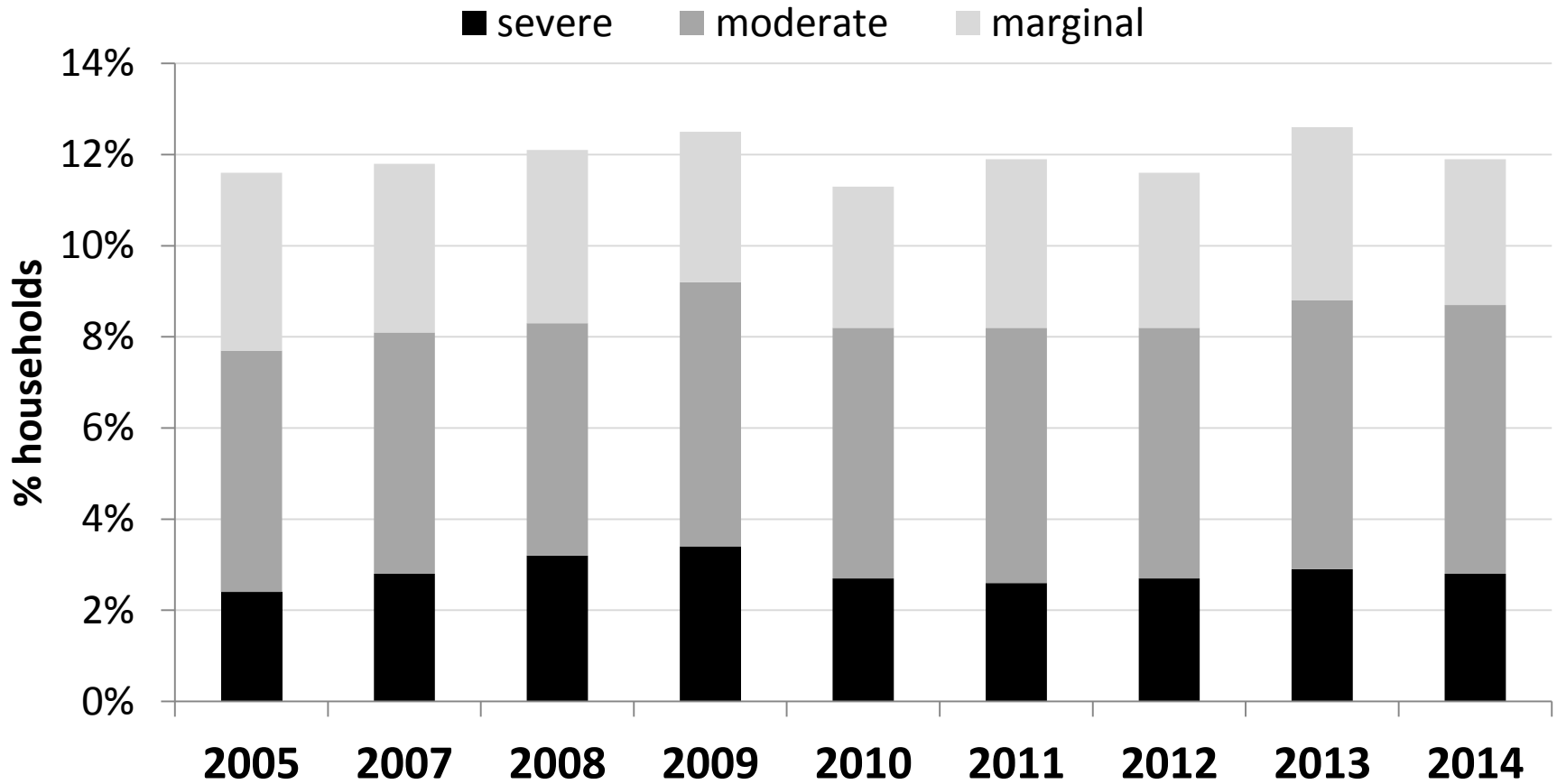
Compromise in quality and/or quantity of food due to a lack of money for food.

## Severe food insecurity

Miss meals, reduce food intake and at the most extreme go day(s) without food.

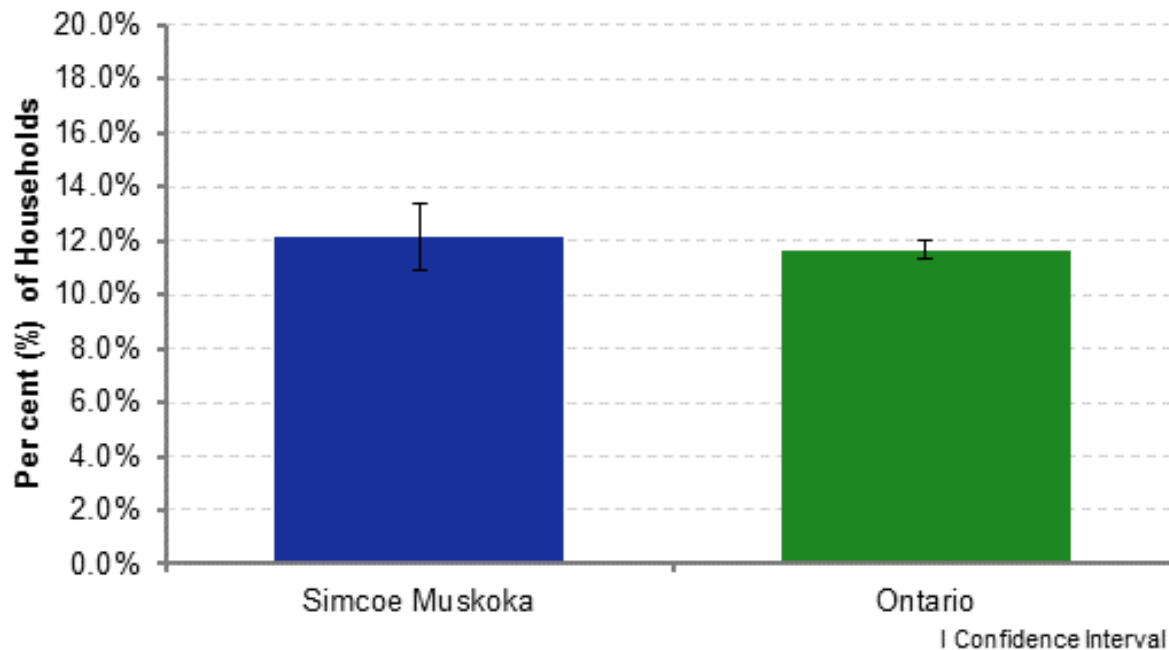
Data Source: Statistics Canada, CCHS, 2007, 2008, 2011, 2012 and 2013.

# Prevalence of household food insecurity in Ontario, 2005-2014



# Food insecurity has hovered around 12% provincially and in Simcoe Muskoka.

**Marginal, Moderate, or Severe Household Food Insecurity, Simcoe Muskoka & Ontario, 2007-2014 (combined)**



Data Source: Canadian Community Health Survey (CCHS) 2007-2014, Statistics Canada, Ontario Share File, Distributed by the Ontario Ministry of Health and Long-Term Care

Source: <http://www.simcoemuskokahealthstats.org/topics/determinants-of-health/socioeconomic-characteristics/household-food-insecurity>

# Food insecurity is associated with a myriad of negative health outcomes across the life cycle.

Maternal and  
infant health

- Poorer birth outcomes
- Impaired growth and development

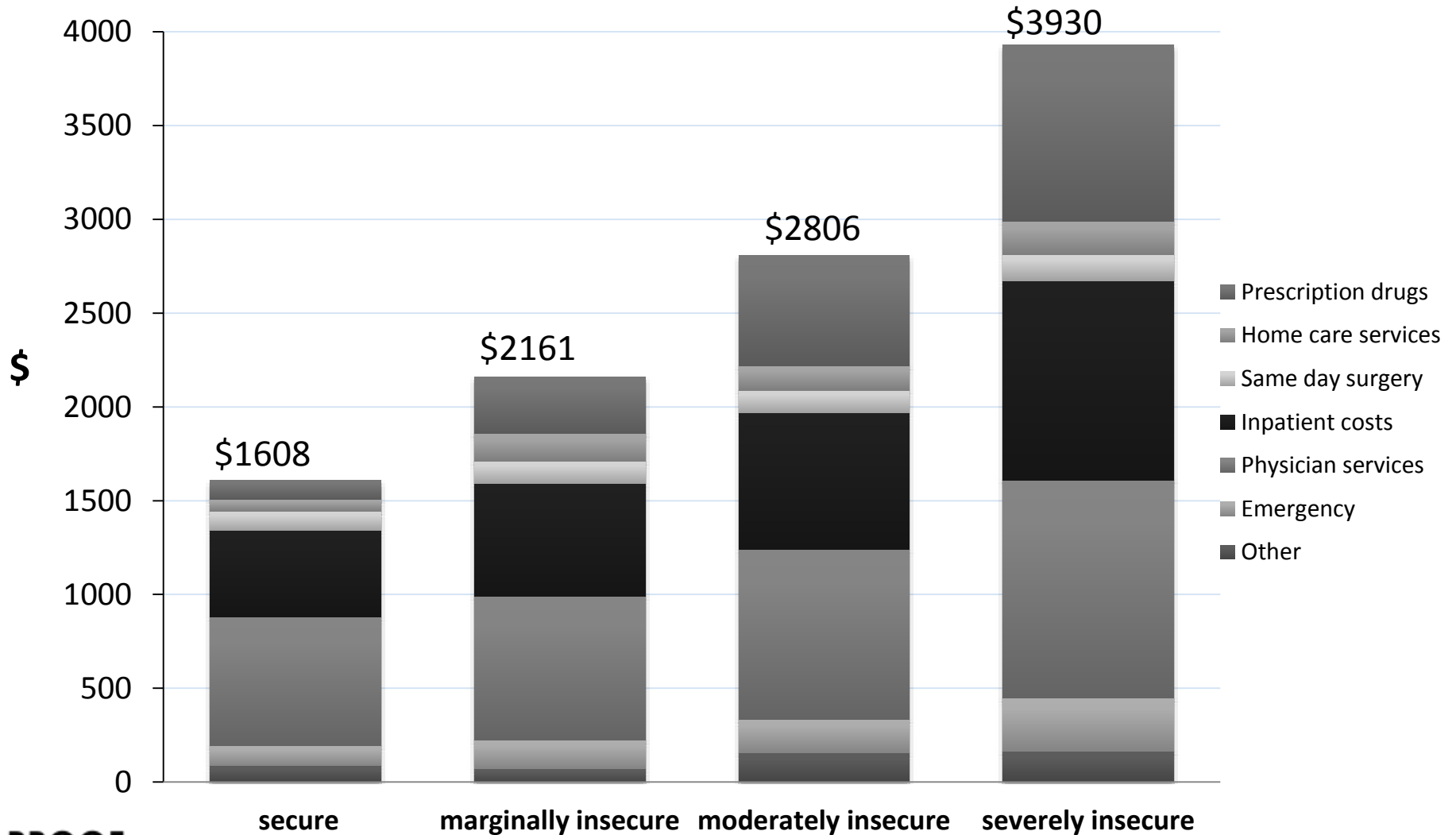
Children

- Poorer development and learning
- Impeded disease management
- Increased likelihood of developing asthma, depression, other chronic conditions.

Adults

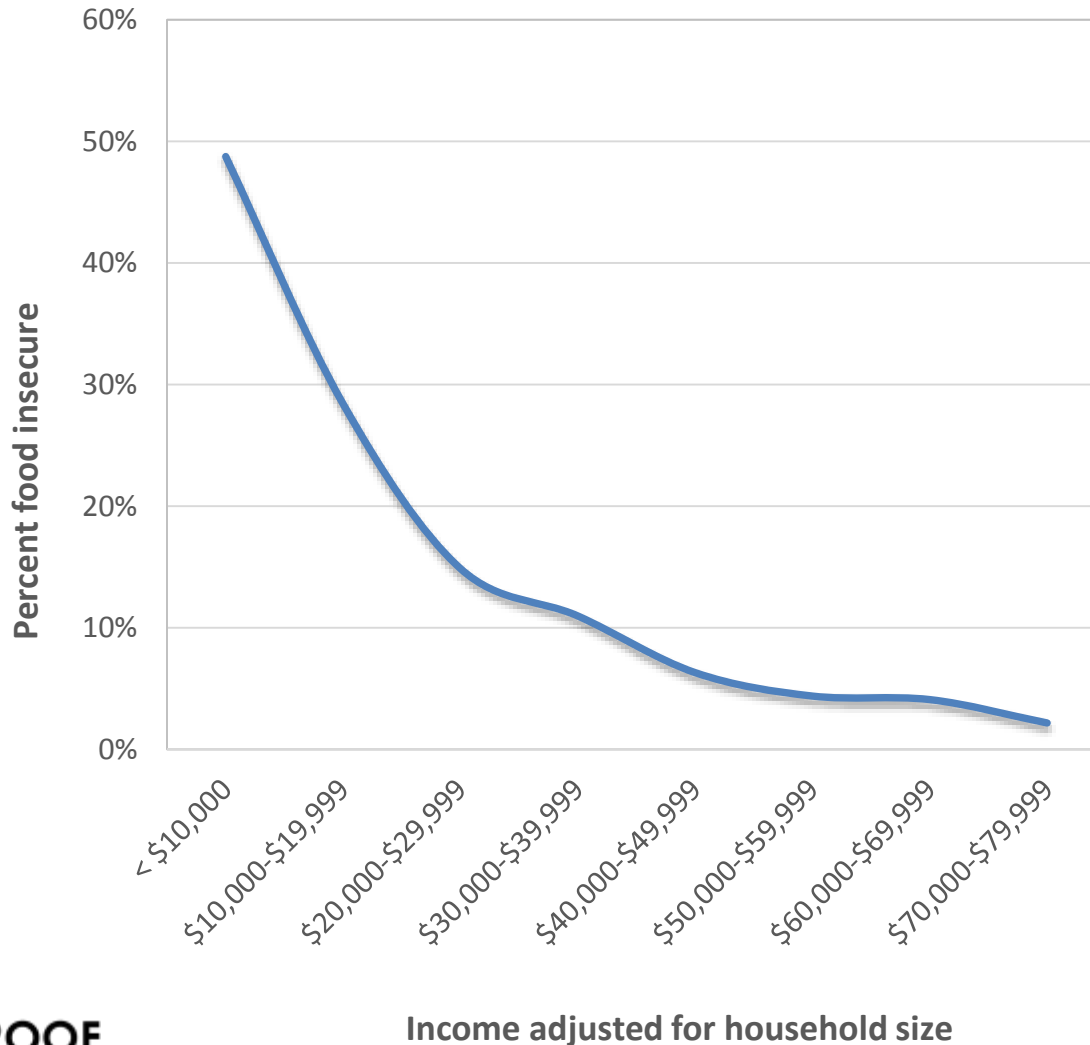
- Compromised physical and mental health
- Poor disease management and heightened odds of negative outcomes (including mortality).

# Average health care costs per person incurred over 12 months for Ontario adults (18-64 years), by household food insecurity status:





# Relationship between food insecurity and household income:



**Food insecurity captures material deprivation.**

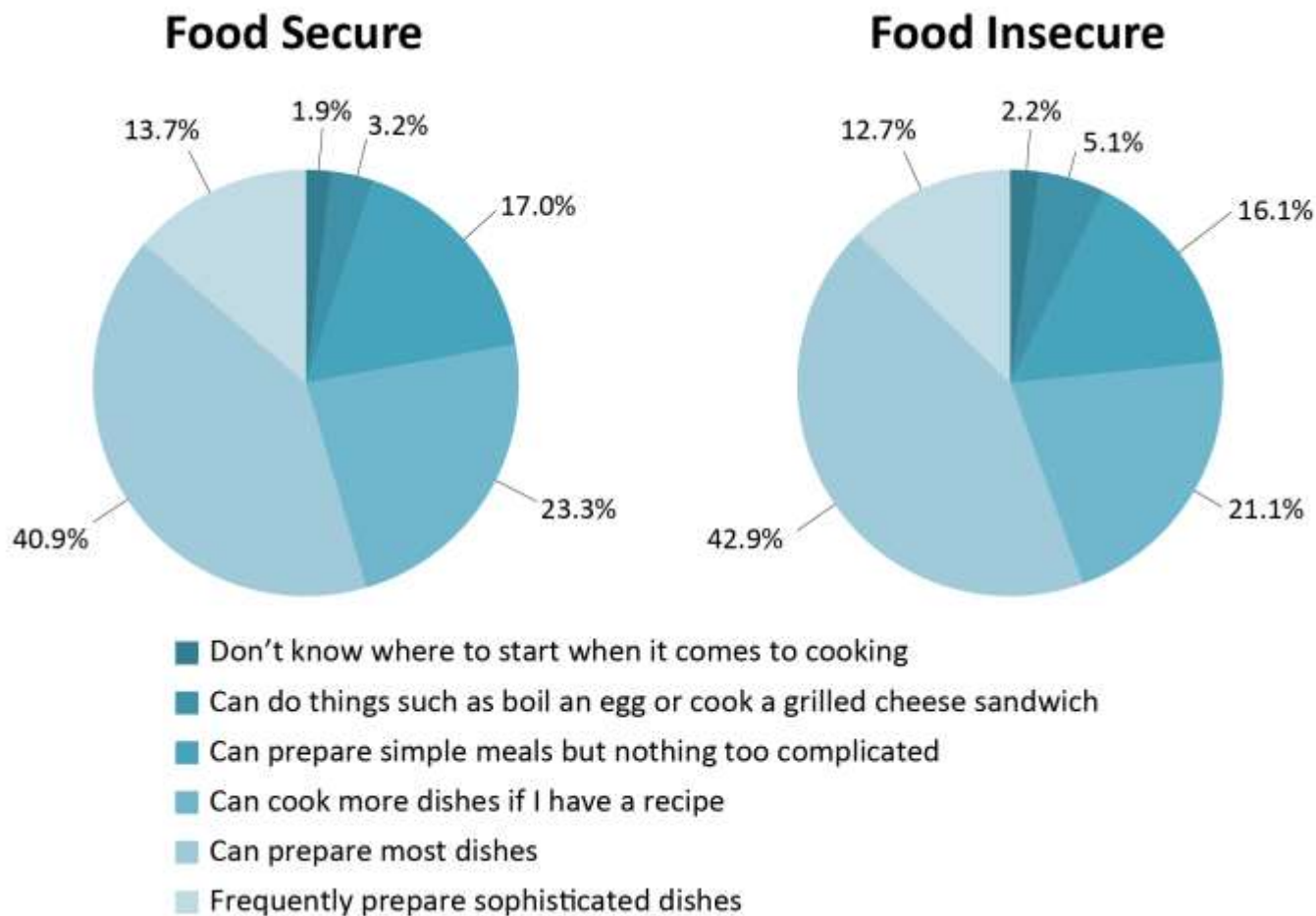
*the product of*

- **income** - stability, security, and adequacy relative to expenses (e.g., shelter, food, medications, debt)
- **assets** / home ownership

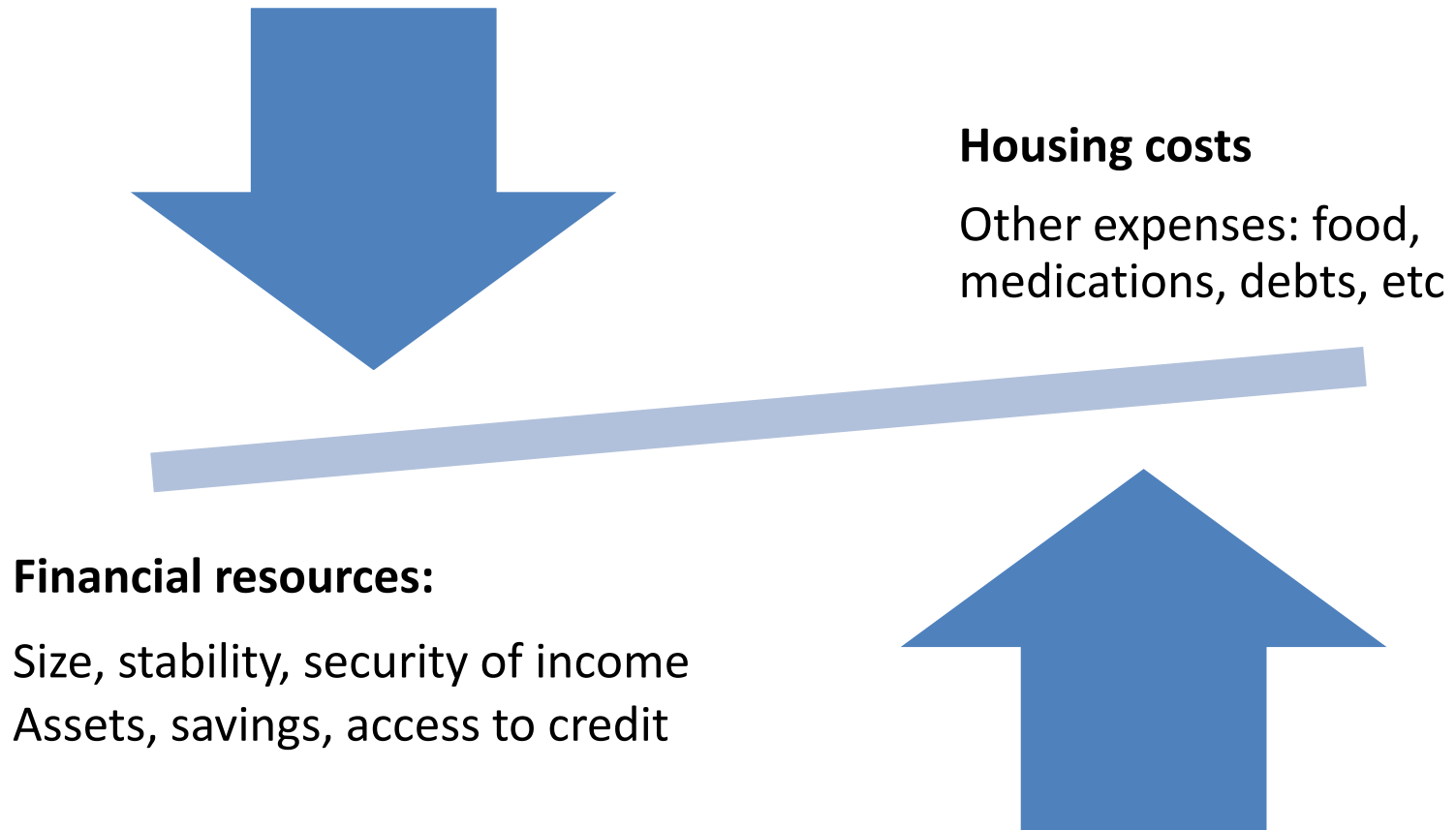
In addition to income, other factors associated with heightened vulnerability to food insecurity include:

- Not owning one's home
- Being aboriginal or black
- Being unattached or living with children < 18 years (vs being a couple without children)
- Relying on social assistance, Employment Insurance or Workers' Compensation

# Adults in food insecure households do not lack food skills.



# Food insecurity reflects the imbalance of available financial resources and necessary expenses.

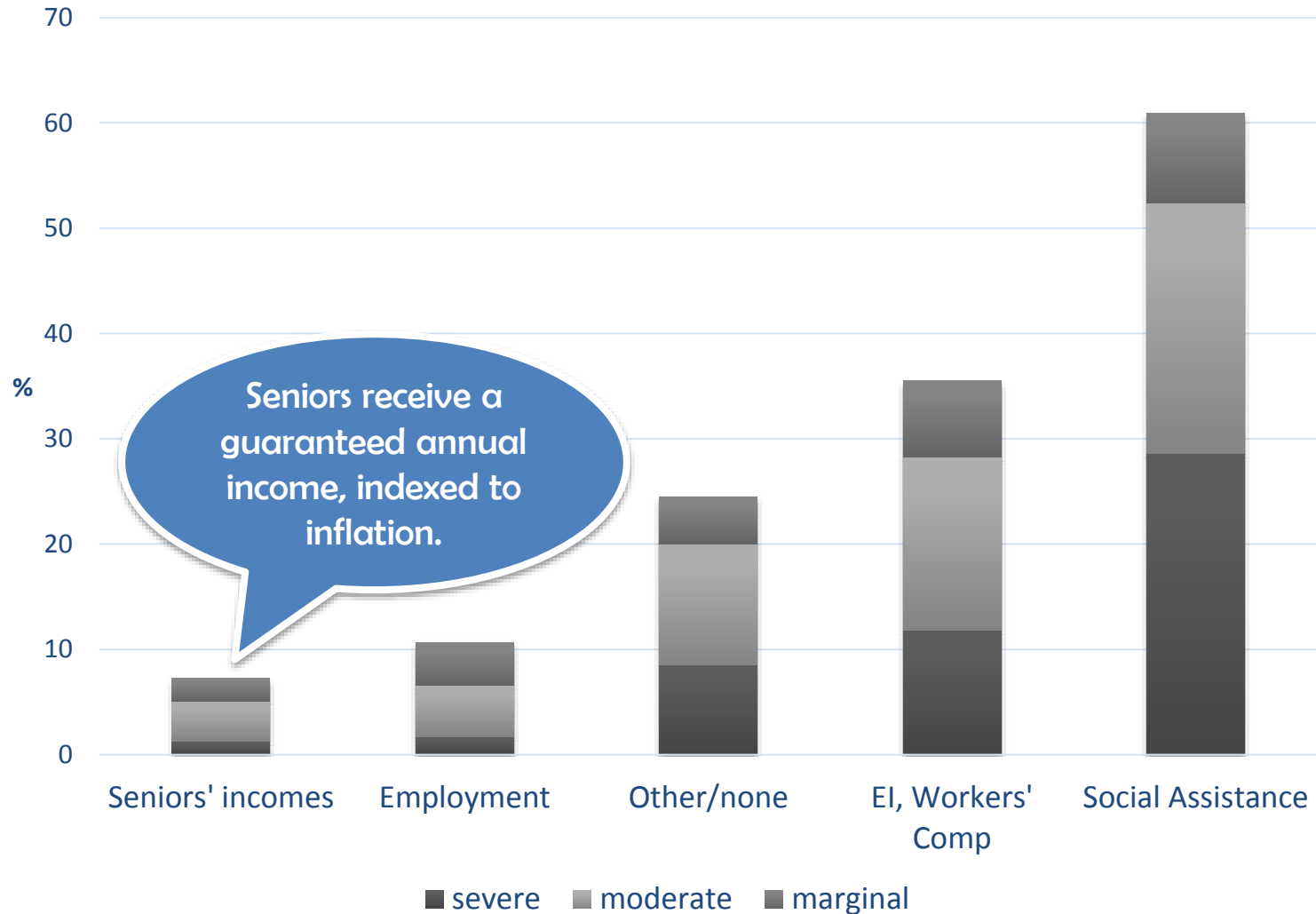


# Household food insecurity is more than a food problem.

By the time people are struggling to feed themselves and their families, they are very likely facing many other challenges:

- Inadequate and insecure housing
- Compromises in spending on other necessities  
e.g., prescription medications, dental care, telephone, transportation, clothing.
- Debt
- Stress, marginalization, and social isolation
- Difficulty managing chronic health problems

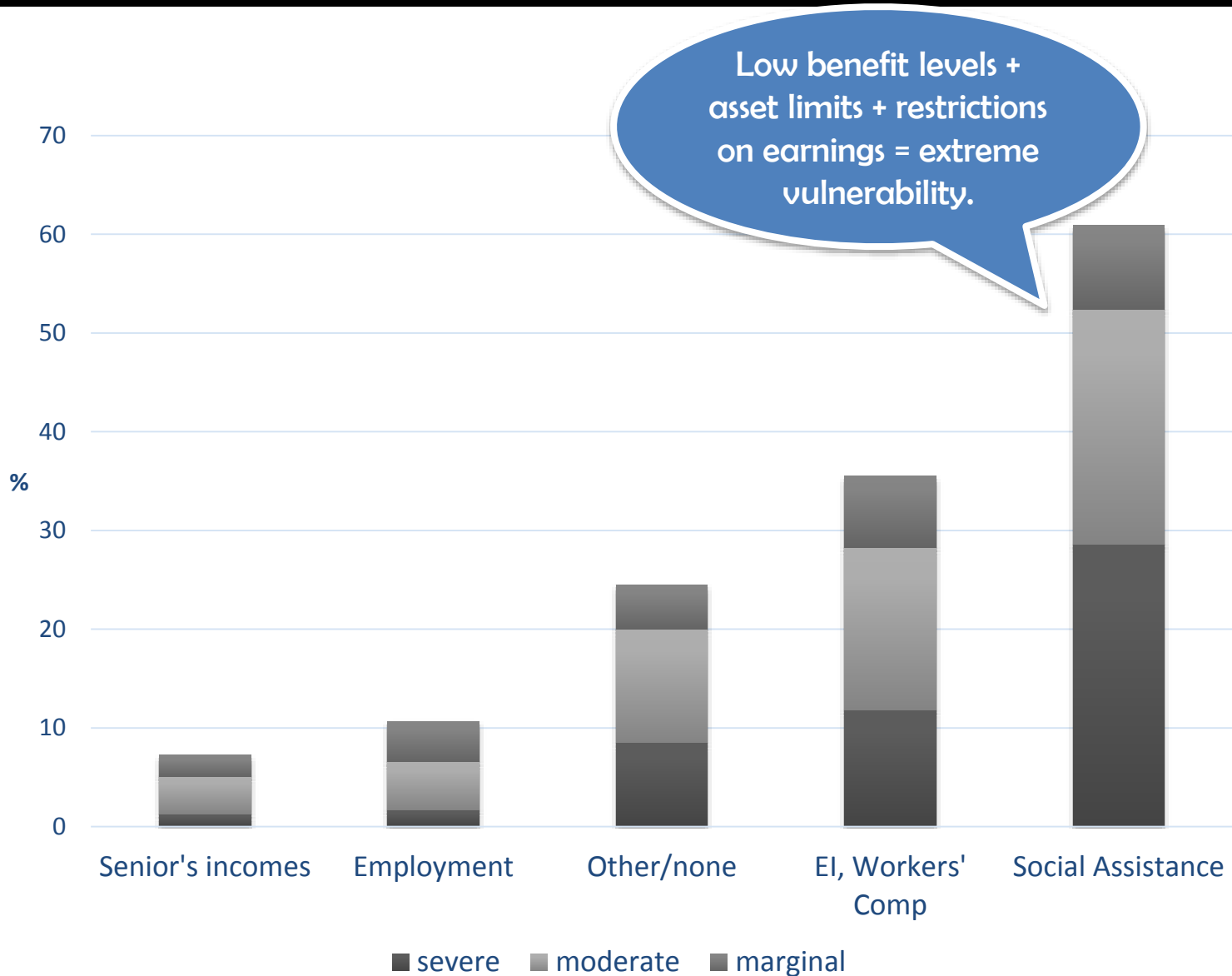
# Prevalence of food insecurity by main source of income, 2014



# Probability of moderate and severe food insecurity by age among low-income unattached adults (CCHS 2007-13)

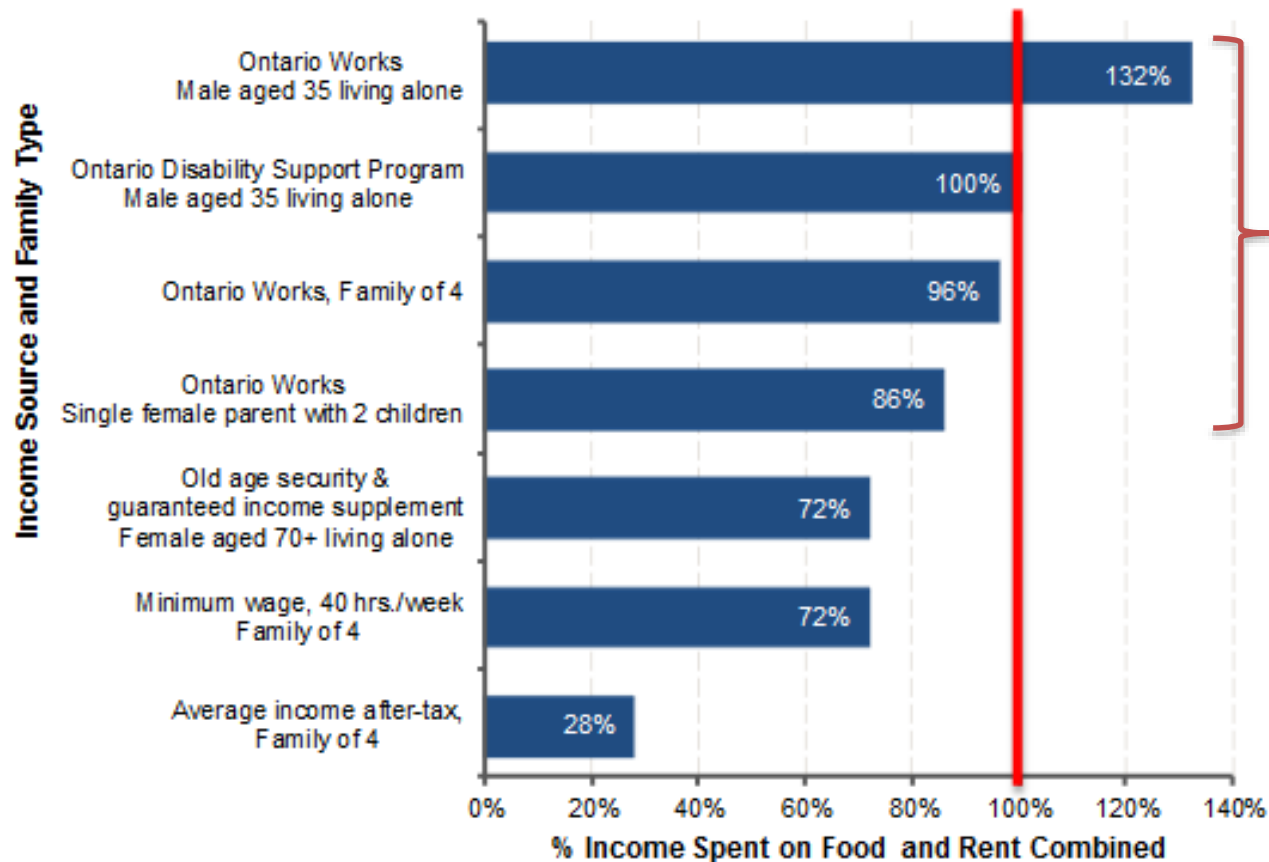


# Prevalence of food insecurity by main source of income, 2014





## The Cost of Food and Housing Among Low Income Earners Simcoe Muskoka, 2016

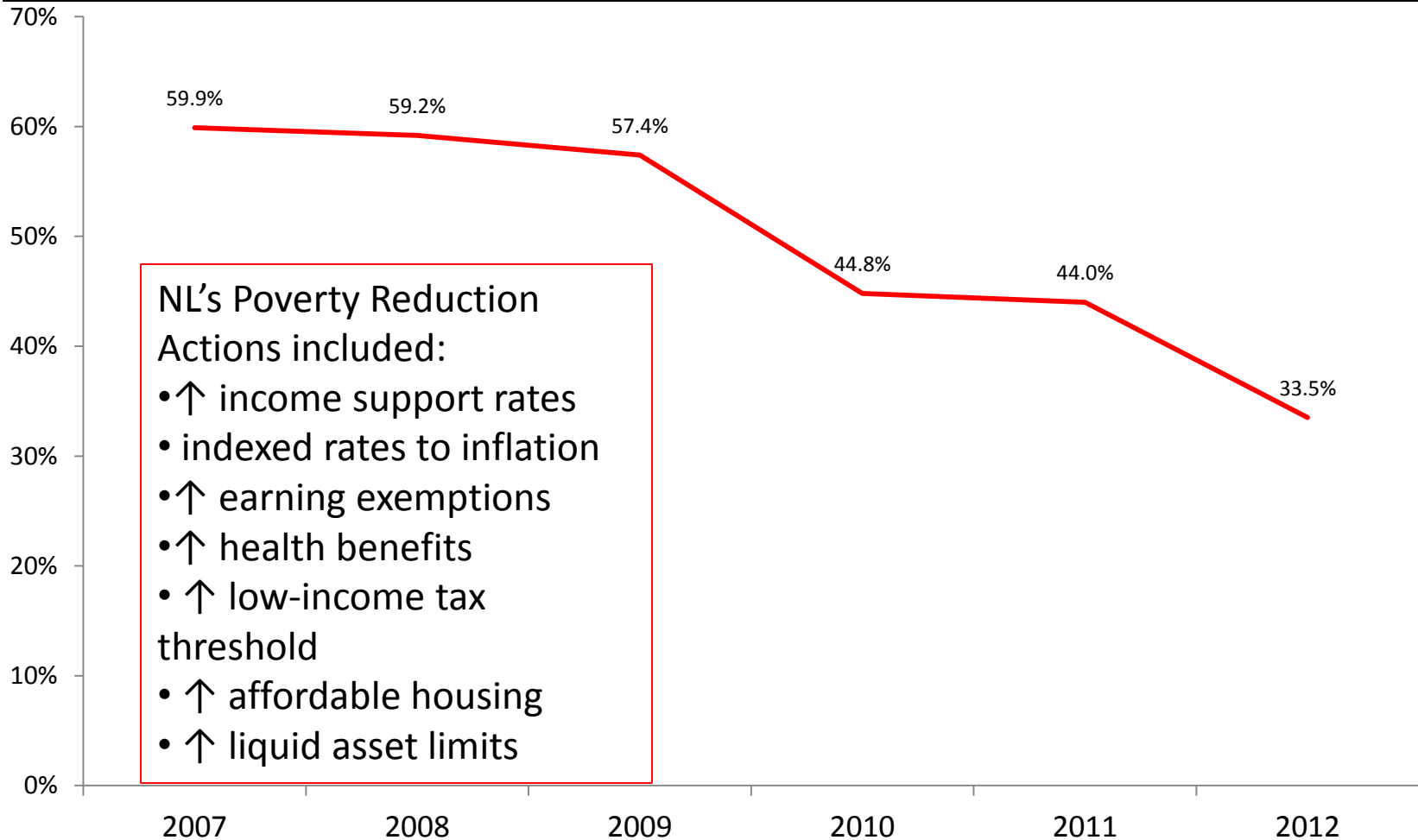


*Almost 2/3 of households reliant on OW or ODSP are food insecure.*

Data Sources: Nutritious Food Basket Survey, Simcoe Muskoka District Health Unit, 2016.  
Market Rental Report Fall 2015, Canadian Mortgage and Housing Corporation.

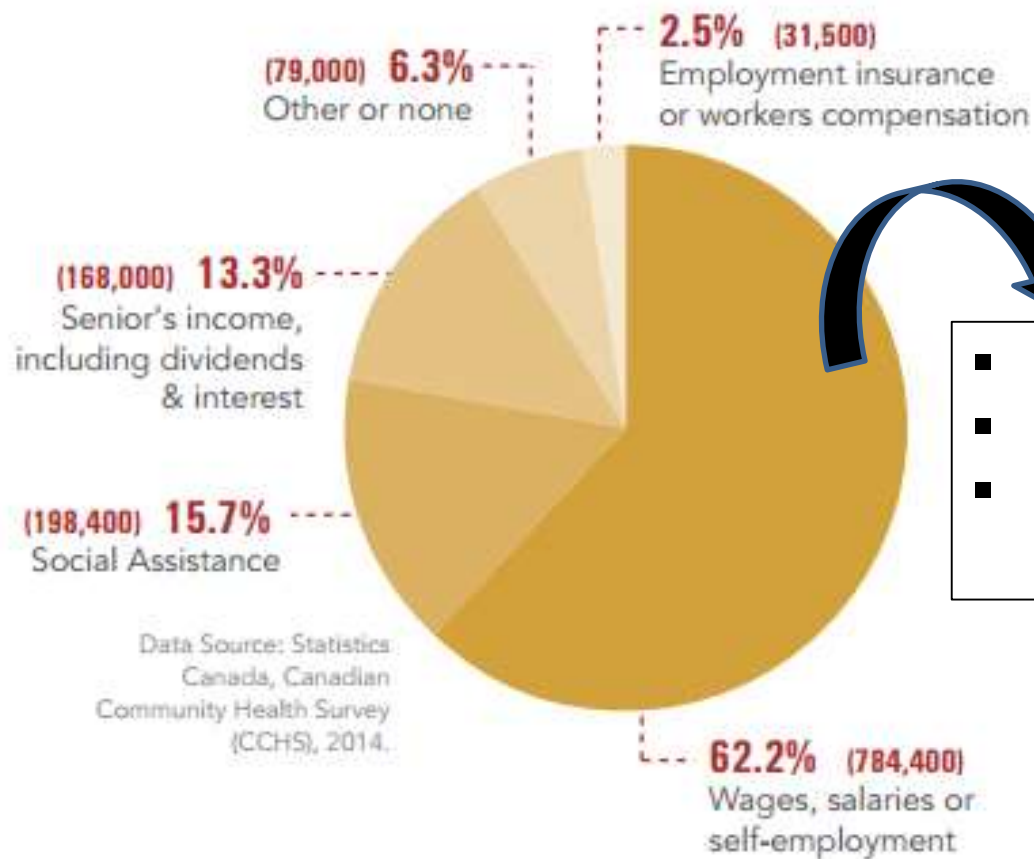
Source: <http://www.simcoemuskokahealthstats.org/topics/determinants-of-health/socioeconomic-characteristics/household-food-insecurity>

# Prevalence of food insecurity among households in Newfoundland and Labrador reporting any income from social assistance.



## Food insecure households' main source of income

---

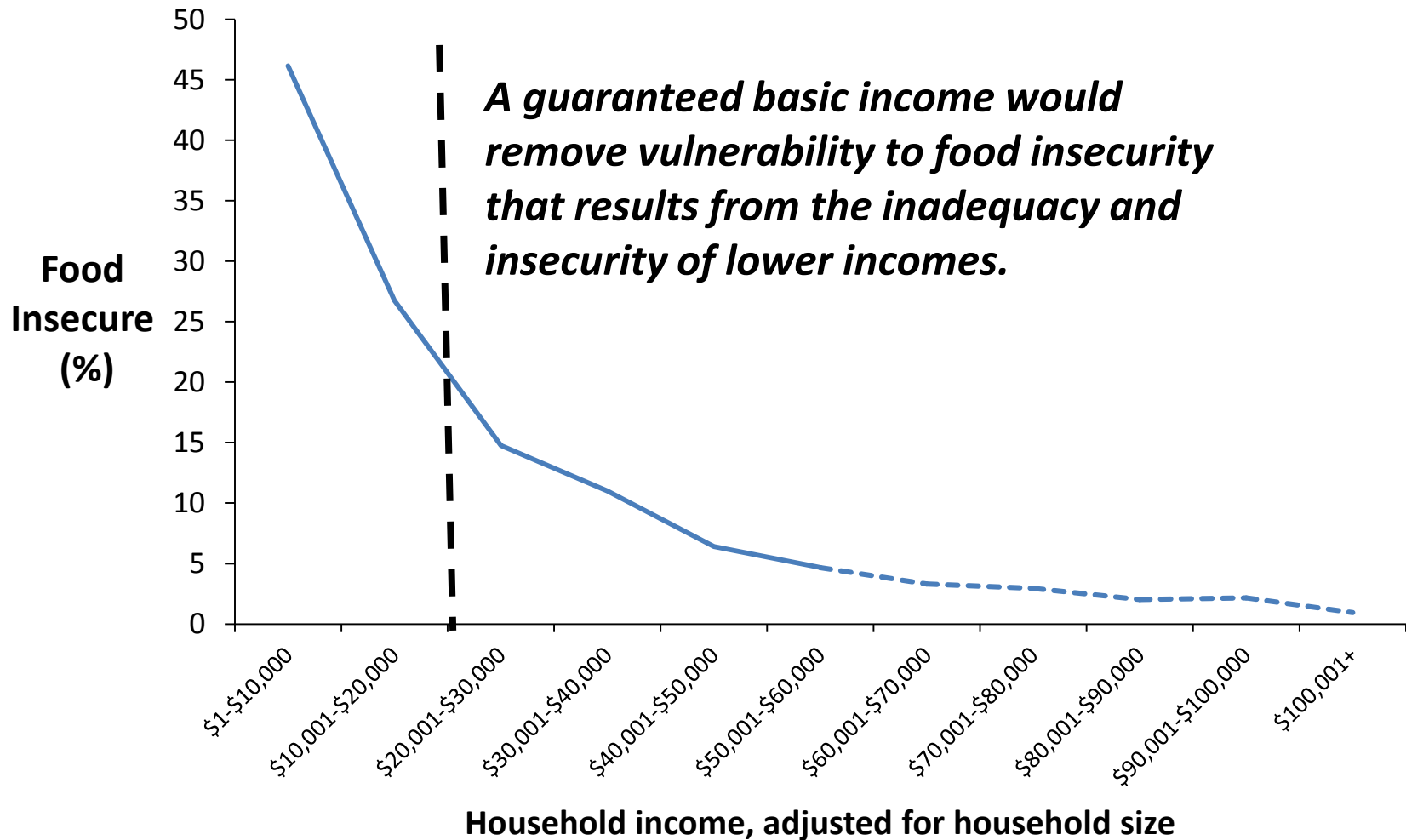


- low-waged jobs
- 'precarious' work
- multi-person households reliant on one earner.

# The bottom line....

Food insecurity is reduced by interventions that improve the financial circumstances of vulnerable households.

# The case for a basic income:

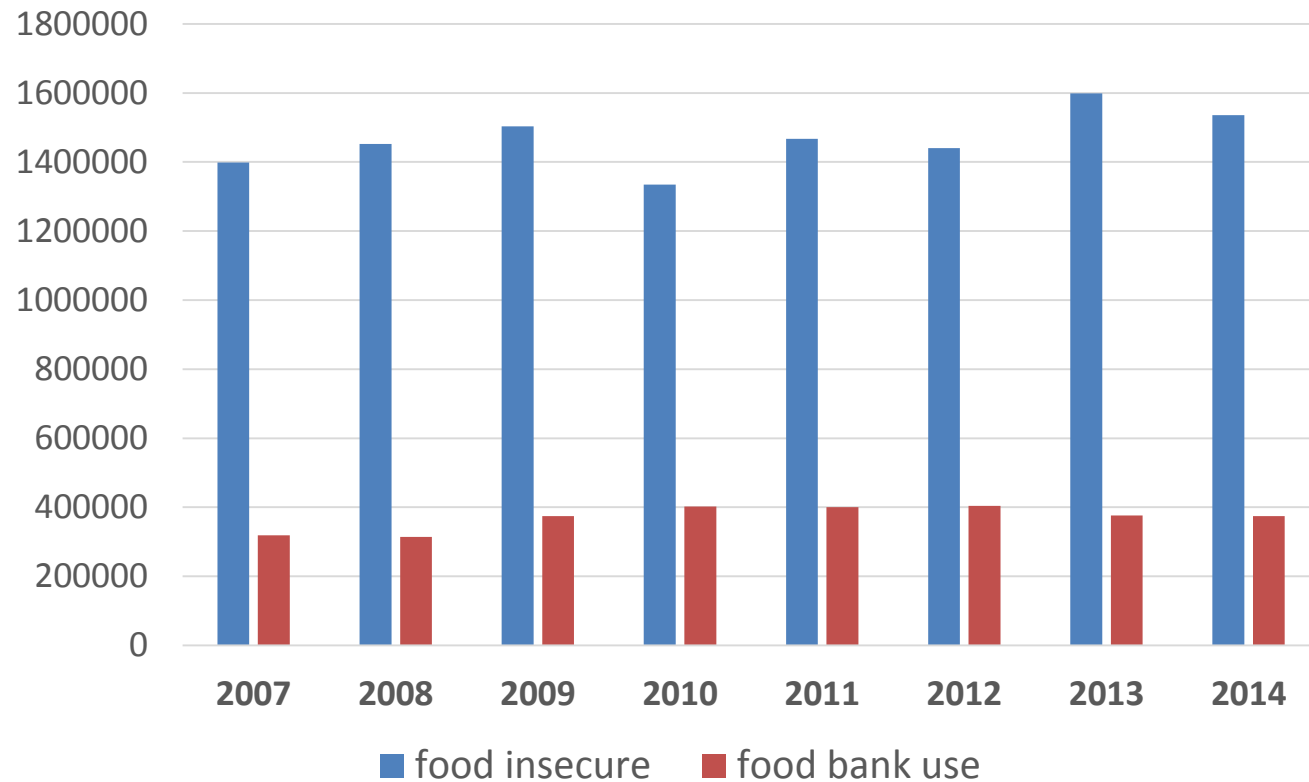


# WHAT CAN COMMUNITIES DO?

# Community responses:

- Charitable food assistance – “doing something in the meantime”
  - i.e., Food banks, soup kitchens, charitable meal and snack programs
- Programs intended to, among other goals, increase access to nutritious foods and foster healthy eating among low-income groups
  - e.g., nutrition education programs, community kitchens, community gardens, communal meal programs, community food centres, ‘Good Food Boxes’, vouchers for farmers’ markets, etc.
- Other programs providing direct to support vulnerable groups
  - e.g., emergency funds, employment support programs, community economic development initiatives, etc, etc.

## Number of Ontarians living in food insecure households vs number reported to be helped by food banks, March 2007-2014.



(Sources: Statistics Canada, Canadian Community Health Survey 2007-14; Food Banks Canada, HungerCounts 2007-14)



# Effectiveness of food charity?

- People who are severely food insecure are most likely to use food banks and charitable meal programs, but the assistance they receive is often insufficient prevent them from going hungry.
- Charitable food programs have limited potential to increase the assistance they provide because their services are contingent on donations.
- BUT, food charity is all there is.

# Potential for community food programs to impact food insecurity?

## Defining features:

- Participatory programming
- Emphasis on healthy eating, increasing access to fresh/local produce.

## Relation to household food insecurity?

- No evidence of impact on household food insecurity status.
  - Disconnect with perceived/immediate needs of food-insecure households impacts participation by those most affected.
  - By design, limited potential to alleviate profound material deprivation.
- Potential benefits lie elsewhere (e.g., community building, support for local agriculture, etc).

# Community-based advocacy for policy reforms to address the root causes of food insecurity is vital.



centsless

## *Reducing Household Food Insecurity*



Food or school supplies? Bus fare or winter boots? Imagine month after month not having enough money to put healthy food on your family's table and to pay for rent and other basics like clothing, school supplies, transportation and phone bills. This situation is known as "food insecurity" or "food poverty"—not enough money for healthy food. It hits hard close to home—about 1 in 8 Simcoe Muskoka households experience some degree of food insecurity, from worrying about enough money for the next meal to going without food for the whole day.

Why should we be concerned? Food insecurity can have a serious impact on physical, mental and social health from childhood up—and this leads to greater health care use and higher health-care costs.

Why are so many people still struggling to put healthy food on the table? No money for food is Cent\$less. What can be done to make sure once and for all that everyone can afford to feed themselves and their families? Income solutions like a basic income guarantee, living wage, social assistance rates geared to the real cost of living are needed so that everyone has the means to afford their basic needs, including food.

<http://www.simcoemuskokahealth.org/Promos/poverty=hunger>