



CONSEQUENCES • FOOD

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IMPACT ON ALICE

What do families do when they cannot afford food?

Finding enough affordable, high-quality, healthy food is continually or periodically a challenge for many families. No community is immune to this problem. There are several common strategies that families try when they can't afford food, but those strategies don't always succeed, and can sometimes even cause new problems.

▼ Cut Back on Food Spending

When ALICE and poverty-level households do not have enough money for food, they often have no alternative but to buy less food or, less healthy food. Almost 80 percent of food-insecure families reported purchasing inexpensive, unhealthy food; more than half ate food that was past its expiration date; half purchased food in dented or damaged packages; and 40 percent watered down their food or drinks.⁸



Consequences

Poorer health: Food insecurity affects health, which impacts school performance, work productivity, and levels of chronic stress. Numerous studies have shown that food insecurity is associated with low energy and poor nutrition, as well as specific adverse health outcomes such as coronary heart disease, cancer, stroke, diabetes, hypertension, and osteoporosis. These effects are especially pronounced for children, seniors, and those with existing health problems.

For children, food insecurity can have a negative impact across a variety of areas, including:

- Health: Children who are not getting adequate nutrition get sick more often and are more likely to suffer physical, intellectual, and emotional impairments.⁹
- Education: Young children (ages 0-3) who are hungry learn at a slower rate because malnutrition impacts cognitive development during this critical period of brain growth. Food-insecure children tend to have lower academic achievement, more difficulty concentrating, and increased social and behavioral problems.¹⁰

ADDITIONAL COSTS OF FOOD INSECURITY

Food-insecure households spend an average of 45 percent more on medical care than households that are food secure.¹⁵

- Job readiness: Workers who were food insecure as children are less prepared physically, socially, and emotionally for entering the workforce.¹¹

For seniors, lack of sufficient and nutritious food can accelerate declines in health and cognitive function and exacerbate chronic diseases.¹²

For working-age adults, lack of sufficient and nutritious food can lead to development of chronic diseases (such as diabetes and heart disease) and contribute to mental health issues (such as depression). Food-insecure adults in the workforce may be less productive and have higher rates of absenteeism.¹³

Increased health care spending: The myriad health consequences of food insecurity — poor nutrition, stunted growth, chemical imbalances — lead to poor health and chronic disease, which result in significantly higher health care spending.¹⁴

Limited Access to Healthy Foods: ALICE and poverty-level families often work long hours, which limits the time available to shop for and prepare healthier, lower-cost meals at home; and eating out on a budget often means eating less healthy food. The USDA acknowledges that the Thrifty Food Plan requires skill in buying and cooking foods that need a lot of home preparation time with little waste.¹⁶

In addition, many low-income neighborhoods have minimal access to fresh food. Nationally in 2015, only 9.3 percent of adults ate the recommended amount of vegetables each day, and the percentage was significantly lower for states with more households living in poverty.¹⁷ This may be explained, in part, by the fact that about 30 percent of U.S. neighborhoods do not have healthy food retailers, such as full-service supermarkets, within a half mile. Limited access to such retailers, or the transportation needed to get to them, is more common in communities with higher numbers of low-income residents and people of color.¹⁸

▼ Seek Food Assistance

Overall, the use of government food programs, as well as soup kitchens, food pantries, and food banks, has increased steadily from the Great Recession to the present. Supplemental Nutrition Assistance Program (SNAP, formerly food stamps) benefits have proven to be effective in combating hunger and poverty; SNAP beneficiaries experience less food insecurity, fewer sick days, and fewer hospital and doctor visits. Eighty-four percent of SNAP benefits go to households with children, seniors, or people with disabilities.¹⁹ SNAP and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) together improve short-term and long-term maternal and child health outcomes and bolster children's academic achievement.²⁰

With these benefits, 85 percent of those eligible for SNAP participated in 2016.²¹ Barriers to participation include lack of access to assistance, the stigma of receiving assistance, eligibility limits, and insufficient federal food benefits.²²



Consequences



Difficulties accessing assistance: Many ALICE families are entering the world of public assistance for the first time, and navigating that world can be complicated. It is challenging to find information about what is available and what families need to do to qualify for programs. Because of these barriers, many families instead turn to soup kitchens, food banks, and food pantries, which do not have income-based eligibility requirements. But lack of reliable transportation, and conflicts between work hours and the days/times when these resources are available make them difficult to access.²³



Dealing with stigma: For many families, using public food assistance also takes an emotional toll. Some of the reasons they may avoid assistance include pride, embarrassment, racial stereotyping, and invasive questions about proof of eligibility.²⁴ SNAP attempts to reduce this issue by providing electronic benefit cards that look and function like bank cards.²⁵

Eligibility limits: Not all hungry families can access federal food benefits. As a result, there are many food-insecure households — especially those without children — that are often not eligible for public assistance.²⁶

Benefits do not help enough: SNAP benefits are based on the USDA Thrifty Food Plan, which makes unrealistic assumptions about the cost of food, preparation time, access to grocery stores, and food variety.²⁷ A vast majority of SNAP benefits run out by the end of the second or third week of every month, leaving households without enough food. In fact, Feeding America reports that more than half of their clients (55 percent) were receiving SNAP benefits in 2014.²⁸

ELIGIBILITY FOR ASSISTANCE

Eligibility limits for SNAP or WIC benefits are 130 to 200 percent of the FPL for families, which is below the ALICE Threshold in most areas.²⁹

▼ Put Aside Other Needs

ALICE and poverty-level households put aside other needs, such as medical care, in order to afford food. As an ALICE family's food costs rise, other current needs are compromised, including doctor visits and medicine, child care, heat and other utilities, or housing itself. These deprivations, as well as the stress they cause, can actually increase the need for health care, which becomes yet another expense.³⁰

Food-insecure families are more likely than other households to put off health care and buying or taking medications, yet more likely to need it. Children in food-insecure households are less likely to go to recommended well-child visits.³¹ Dental care is even more likely to be sacrificed, with many food-insecure households reporting that they had not visited a dentist in the last five years.³²



Consequences



Reduced health: Studies definitively link the lack of a nutritious diet to poor health. People who consume less healthy foods are at a higher risk for diseases and conditions including Type 2 diabetes, obesity, cancer, osteoporosis, and cardiovascular disease.³³



Less stable housing: The other key budget item that competes with paying for food is paying for housing. In a survey commissioned by Feeding America, 57 percent of respondents reported choosing between food and rent or mortgage payments. Up to 69 percent could not cover the costs of both food and utility bills in the previous year, and 34 percent faced that dilemma every month.³⁴

Less money for savings: Paying for food with insufficient income also means that less money is available to save for an emergency, let alone future expenses like higher education or retirement. That lack of savings creates a vicious cycle of financial instability and it increases the risk of higher costs for health care and social services over the longer term.³⁵

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