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Food Insecurity and Chronic Health Conditions

A July 2017 report from the Economic Research Service (ERS) of the U.S. Department of Agriculture found that “Food insecurity status is more strongly predictive of chronic illness in some cases even than income. Income is significantly associated with just three of 10 chronic diseases examined in the report, while food insecurity is associated with all 10.”ⁱ

Chronic health conditions are defined as those that last for a year or more, result in limitations to mobility or functioning, and require ongoing medical treatment. The 10 chronic diseases covered in the report are hypertension, coronary heart disease, hepatitis, stroke, cancer, asthma, diabetes, arthritis, chronic obstructive pulmonary disease (COPD), and kidney disease. Income is significantly associated with (lower-income people are more likely to develop) only three of these: hepatitis, arthritis, and COPD.

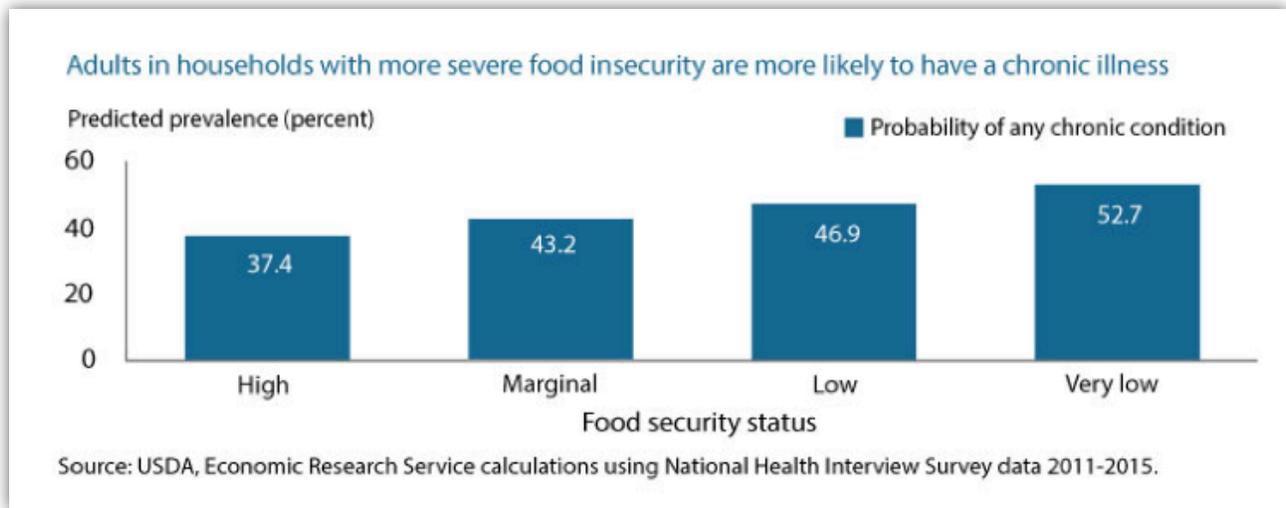


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The findings in the report, “Food Insecurity, Chronic Disease, and Health Among Working-Age Adults,” are based on five years of data (2011-2015) from the National Health Interview Survey, conducted by the National Center for Health Statistics in the Centers for Disease Control and Prevention (CDC). The report looks at health outcomes over the full range of food security status – high, marginal, low and very low, food security. It covers adults ages 19-64 in households with incomes below 200 percent of the federal poverty line (200 percent would be approximately \$24,000 for a single adult and \$50,000 for a family of four). Thus, all participants were living on modest incomes.

Defining Food Security Status			
Food Secure		Food Insecure	
High Food Security Households had no problems or anxiety about consistently accessing adequate food.	Marginal Food Security Households had problems, at times, or anxiety about acquiring adequate food, but the quality, variety, and quantity of their food intake were not substantially reduced.	Low Food Security At times during the year, households reduced the quality, variety, and desirability of their diets due to a lack of resources for food, but the quantity of food intake and normal eating patterns were not substantially disrupted.	Very Low Food Security At times during the year, eating patterns of one or more household members were disrupted and food intake reduced because the household lacked money and other resources for food.
Less severe food insecurity to more severe food insecurity			➔
<i>Source: USDA, Economic Research Service</i>			

The report confirms that food security status is strongly related to the likelihood of chronic disease in general, and to the number of chronic conditions an individual may have. Overall, adults with very low food security are 40 percent more likely to have a chronic illness than adults in households with high food security. On average, the number of chronic conditions for adults in households with low food security is 18 percent higher than for those in households with high food security. Even adults in households with marginal food security were nine percent less likely to report excellent health than those in households with high food security.



Chronic conditions are costly both in terms of human life and in financial terms. Chronic conditions often pose barriers to employment and other life activities and can also hasten death. In 2010, 86 percent of U.S. healthcare spending (\$2.7 trillion altogether) was for adults with one or more chronic conditions.ⁱⁱ In 2015, lost productivity due to cardiovascular disease alone was estimated to have cost the economy \$237 billion.ⁱⁱⁱ A study cited in Bread for the World Institute’s 2016 Hunger Report, *The Nourishing Effect*, estimated the cost of food insecurity to the U.S. healthcare system at a conservative \$160 billion in 2014.

The ERS report demonstrates the strong link between hunger and poor health outcomes. In September 2015, the United States endorsed the Sustainable Development Goals (SDGs). The SDGs provide a country roadmap on the integration of health and development programs in order to have the greatest impact. By using this integrated approach, the United States will not only be able to reduce hunger, but also improve health, eliminate severe poverty, address inequality, create jobs, and respond effectively to other problems for our people, our prosperity, and our planet.

Endnotes

ⁱ *Food Insecurity, Chronic Disease, and Health Among Working Age Adults*, ERR-235, United States Department of Agriculture, Economic Research Service, July 2017.

ⁱⁱ Centers for Disease Control and Prevention, Chronic Disease Prevention and Health Promotion, Chronic Disease Overview: <https://www.cdc.gov/chronic-disease/overview/index.htm>.

ⁱⁱⁱ Projections of Cardiovascular Disease Prevalence and Costs: 2015-2035, Technical Report, RTI International for the American Heart Association, November 2016: https://www.heart.org/idc/groups/heart-public/@wcm/@adv/documents/downloadable/ucm_491513.pdf.