Priority Health Equity Indicators for British Columbia:

Household Food Insecurity

Update Report | October 2023



The British Columbia Centre for Disease Control provides services to communities across British Columbia, on the territories of many distinct First Nations. We are grateful to all the First Nations who have cared for and nurtured the lands and waters around us for all time, including the xwməθkwəy'əm (Musqueam), Skwx_wú7mesh Úxwumixw (Squamish Nation), and səl'ílwəta? (Tsleil-Waututh Nation) on whose unceded and ancestral territory our head office is located.

Prepared for the BC Centre for Disease Control (BCCDC)

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Executive Summary

Introduction

Household food insecurity (HFI) is when a household worries about or lacks the financial means to buy nutritious, safe, personally acceptable foods. Monitoring household food insecurity is a priority for the BC regional health authorities and the Population and Public Health (PPH) program at the BC Centre for Disease Control (BCCDC). Household food insecurity prevalence is one of the 52 provincial health equity indicators developed by PHSA and one of 13 preliminary indicators identified by the BC health authorities in the first phase of a process to prioritize indicators to monitor food security in BC.

This report is an update to the August 2016 *Priority health equity indicators for British Columbia:*Household food insecurity indicator report, published by the Provincial Health Services Authority (PHSA) in collaboration with the PROOF research centre at the University of Toronto.

This report:

- Shares literature on household food insecurity, health and evidence-based responses
- Monitors trends in the prevalence of people who live in households experiencing household food insecurity in BC
- Reports on two indicator areas prioritized in a preliminary phase of a project to refine
 evidence-based indicators for food security monitoring in BC: household food insecurity and
 income and household food insecurity and mental health
- Summarizes data on concern for food security during the COVID-19 pandemic

The data in this report helps monitor household food insecurity in the province and can inform planning and policy development to address household food insecurity. This report focuses on household food insecurity, which is distinct from the broader issue of food insecurity, and it should be interpreted alongside monitoring and surveillance of other food insecurity indicators.

Household food insecurity refers to the inadequate or insecure access to food due to financial constraints.

Food insecurity exists when factors outside an individual's control negatively impact their access to enough foods that promote wellbeing. Economic, social, environmental, and geographical factors influence this access. Food insecurity is most acutely felt by those who experience the negative impacts of structural inequities, such as discrimination and on-going colonial practices.

Review of Evidence on Household Food Insecurity

The negative impacts of food insecurity on people's physical and social wellbeing have been well documented. Systematic reviews and meta-analyses further demonstrate the associations between food insecurity and adverse health and wellbeing outcomes in child, youth, adult and senior populations. Children who live in food insecure households have increased likelihood of various adverse physical health, development, social and academic outcomes. Among adults and seniors, household food insecurity is linked with poorer dietary intake, diabetes management, cognitive health and mental health outcomes.

Household food insecurity is primarily an income-based issue that requires income-based solutions. Household income is a robust predictor of food insecurity in Canada and is tightly linked to other forms of material deprivation, as illustrated by data from several socioeconomic indicators, such as income source, housing/homeownership and employment. Sociodemographic factors, such as place of residence, education, employment status, Indigenous identity, race/cultural group, immigration status and household composition, are also tightly linked to household food insecurity prevalence and severity, as well as poverty. People with these social identities disproportionately experience food insecurity and poverty due to structural factors such as racist and colonial policies, practices and norms that have restricted access to opportunity and upward mobility; thus addressing food insecurity requires addressing the structural drivers of health and its determinants. Evidence for the relationship between household insecurity and health provides a compelling case for interventions that improve household incomes and economic security.

Indigenous Context and Data

Understanding key challenges around food insecurity among Indigenous Peoples requires centering Indigenous contexts and lived experiences. While the analyses in this report do not include data on household food insecurity among Indigenous Peoples, the report provides historical and current context and complexities of food security and food insecurity among Indigenous Peoples, shares available data, acknowledges the importance of broader, more holistic approaches in Indigenous contexts, and identifies the need for further work to find respectful ways to include Indigenous data and ensure interventions and policies address the needs of those experiencing the highest rates of food insecurity.

Methods

The prevalence of household food insecurity in BC was assessed using data from the 2017-2018 Canadian Community Health Survey (CCHS), a cross-sectional survey administered by Statistics Canada. The relationships between household food insecurity and various economic and sociodemographic factors were examined using bivariate analyses.

3 categories of Household Food Insecurity

Marginal food insecurity:

Worry about running out of food and/or limited food selection due to a 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

Key Findings

- In 2017-2018, 1 in 8 (12.5%) people 12 years of age and over in British Columbia lived in households that experienced some level of household food insecurity during the previous 12 months.
 - 2.8% of people lived in households classified as severely food insecure.
- The rate of household food insecurity varied within the province, from 10.4% in the Vancouver Coastal Health region to 16.6% in the Northern Health region.
- Household food insecurity rates in BC differ depending on different economic and sociodemographic characteristics.
 - Household food insecurity was most prevalent among people in households who were in the lowest quintile of income distribution at 26.9%, including 8.1% reporting severe food insecurity, compared to 3.5% in the highest quintile for income.
 - Among people living in food insecure households, more than three quarters (75.7%) reported their main sources of income were wages, salaries or self-employment.
 - People whose main source of household income is from social assistance had the highest rate of household food insecurity (57.9%), including 32.3% experiencing severe food insecurity.
 - Renters in BC experienced disproportionately high rates of household food insecurity (23.7%) compared to those who reported owning their home (7.9%).
- Household food insecurity is associated with adverse mental health outcomes in BC.
 - Compared to people living in food secure households, those living in food insecure households reported lower rates of positive perceived mental health (93.0% vs 79.1%).

Supplement: COVID-19 and concern for food security in BC

The COVID-19 pandemic has caused unprecedented changes to social and economic life, including job losses and reduced work hours, which have resulted in financial hardship. The BC COVID-19 Survey on Population Experiences, Action and Knowledge (SPEAK) collected information about BC residents' experiences and measure impacts on social, economic, physical and mental wellness during the COVID-19 pandemic, including concern for food security, or worry that food would run out before having money to buy more. Data from this survey show that concern for food security in BC in April/May 2021 was most prevalent among populations that faced inequities stemming from structural drivers of health and wellbeing prior to the pandemic.

- People living in remote communities reported the highest rate of concern for food security (16.9%).
- People who identified as Black had one of the highest rates of concern for food security (19.9%), compared to those who identified as white, who had the lowest rate (10.0%).
- Almost half (47.4%) of people with no legal immigration status or who are refugee claimants were worried that food would run out before they had money to buy more, followed by almost one third of those who are on work or study permits (32.3%).
- Single parents living with children aged under 18 (22.5%) and unattached people living with others (27.4%) reported higher rates of concern for food security compared to parents living with a spouse/partner and children (11.3%), people living with a spouse/partner (8.5%), and unattached people living alone (15%).
- Concern for food security was most prevalent among those aged 18-34 and 35-49 (18.4% and 14.0%), and rates decreased with increasing age, with those in the age groups 65-79 and 80 and over having the lowest rates of food insecurity (5.7% and 4.1%).
- 19.6% of people who did not complete high school and 14.8% of people for whom high school was the highest level of formal education completed reported concern for food security.
- Prevalence of concern for food security was highest among people reporting the lowest annual household incomes; 40.7% of those reporting annual household incomes less than \$20,000/year and 22.9% of those reporting household incomes between \$20,000-59,000/year worried that food would run out before they had money to buy more.
- People who experienced an employment change during the pandemic had higher rates of concern for food security compared to the overall rate in BC. Nearly a third (30.4%) of those who were reported being out of work for 7 months or longer reported concern for food security.

Discussion

When considered alongside other evidence on household food insecurity in Canada, our findings support conclusions made elsewhere that dominant responses to food insecurity, such as charitable food responses, do not address the structural drivers nor the symptoms and outcomes of the issue. It is broadly recognized that reducing household food insecurity at a population level requires policies that improve household incomes. Research is needed to examine the impact of income supports on household food insecurity, and ultimately, health, including relief measures that were implemented during the COVID-19 pandemic. The data reported here also highlight the need for accessible, consistent data on household food insecurity to monitor the extent of the issue and to evaluate health and social policy responses. There is also a need to better understand challenges around food security among Indigenous Peoples to inform policies and programs that centre Indigenous contexts and lived experiences.

Conclusion

This report is an update to the August 2016 *Priority health equity indicators* for *BC: Household food insecurity indicator report*. It includes household food insecurity data specific to the COVID-19 pandemic and is part of BCCDC's commitment to ongoing monitoring and surveillance of household food insecurity. The data demonstrates that household food insecurity continues to disproportionately affect people and households that are marginalized due to social, economic, geographic and structural inequities.

This report is intended to increase understanding of the drivers of household food insecurity and inform policy solutions that address the intersecting inequities at the root of household food insecurity.