

PHILADELPHIA HUNGER INCREASES

OVERVIEW

Research from Children's HealthWatch-Philadelphia shows that food insecurity, or lack of access to enough food for an active and healthy life, is increasing at the household and child level for families of children under age 4. In families with a caregiver working at least 20 hours per week, food insecurity is rising even faster.

FOOD INSECURITY IS ON THE RISE IN PHILADELPHIA

Food insecurity hurts child health and well-being

Food insecurity, the lack of access to enough food for a health and active life, affects children and families through out America, with over 41 million people living in households facing food insecurity. Nationally, 16.5% of households with children reported food insecurity and 8% reported the children missed meals or were not able to eat when they were hungry.¹ The impact of hunger is felt all over this country.

Children's HealthWatch research has shown that compared to their food insecure peers, children in households with even the most mild levels of food insecurity are more likely to be:

- in fair to poor health
- hospitalized
- at risk for developmental delays

It is in our nation's best interest to ensure families have food on their table and kids have the nutrition they need in order to grow and thrive.

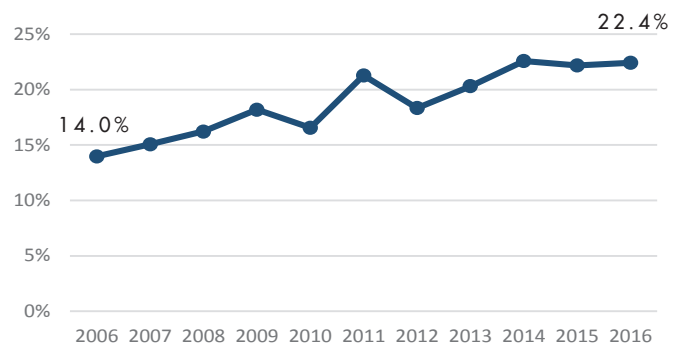
Food insecurity increases in Philadelphia as it decreases nationally

Although national food insecurity rates have been declining since the height of the recession, food insecurity has been on the rise for Philadelphia families at St. Christopher's Hospital for Children.

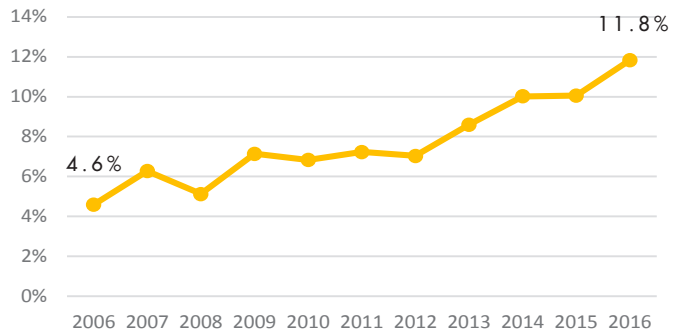
Children's HealthWatch has tracked food insecurity for Philadelphia families since 2005. Among families interviewed by Children's HealthWatch, over one in four (22.4%) reported household food insecurity, well above the national average of 16.5% for all households with children.

For children in these Philadelphia households, the rates are even starker. In 2016, 11.8% of Children's HealthWatch caregivers reported that their children were food insecure, compared to 8% of children nationally. Even more alarming, both household and child food insecurity rates have been increasing in Philadelphia in the last 10 years, in the opposite direction of the national trend.

PHILADELPHIA HOUSEHOLD FOOD INSECURITY
NEARLY DOUBLES



PHILADELPHIA CHILD FOOD INSECURITY RATE
NEARLY TRIPLES



Household and Child Food Insecurity. Children's HealthWatch measures food insecurity using the 18-question USDA Food Security Scale. This scale assesses household food insecurity, which may or may not affect children, and child food insecurity, where parents are no longer able to buffer children from experiencing food insecurity. Both forms of food insecurity negatively affect children's health. Child food insecurity is an especially severe form of food insecurity that worsens child health outcomes.

¹Coleman-Jensen A, Rabbitt MP, Gregory CA, Singh A. (2017). *Household Food Security in the United States in 2016*. ERR-237, U.S. Department of Agriculture, Economic Research Service.

Children's HealthWatch is a pediatric research study that monitors the health and well-being of young children under age 4 and their families. The Center for Hunger-Free Communities operates the Children's HealthWatch site in Philadelphia at St. Christopher's Hospital for Children in North Philadelphia, and has interviewed over 10,000 families since 2005. Research from Children's HealthWatch shows how public policies and economic instability affect children during critical periods of growth and development.

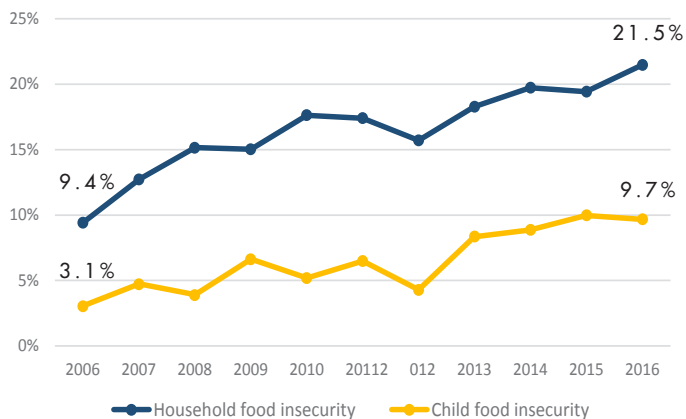
LOW WAGE WORK DOES NOT PROTECT AGAINST FOOD INSECURITY

Results from Children's HealthWatch show that working, particularly in low-wage jobs, is not always enough to protect families and children from food insecurity. Among families where a caregiver was employed more than 20 hours a week, more than one in five reported food insecurity in 2016. Household and child food insecurity among working families is increasing.

Median hourly wages for working caregivers interviewed by Children's HealthWatch have only increased 20 cents since 2005. In 2016, the median hourly wage for caregivers was only \$10.20 — not enough to keep up with inflation, and certainly not enough for families to make ends meet.

These wages must be raised, and if wages are not enough to support working families, then national, state, and local programs must make up the difference in order for children to thrive.

Among families with a caregiver working at least 20 hours per week, household food insecurity more than doubled and child food insecurity more than tripled



"I think people would be surprised that there are **kids in the city not getting enough to eat**," said Stephanie Sakho, 28, who makes \$13 an hour, near the poverty line for a family of three. "I'm **working**, but people who see me don't know the **refrigerator is empty**."

See the [Philadelphia Inquirer](#) for more about Stephanie's experience.

NATIONAL POLICY RECOMMENDATIONS

Ensure that jobs pay living, family-sustaining wages.

More than 80% of families with children who receive SNAP include an adult who is working or has recently worked. When wages are low, no job will be enough to move families to self-sufficiency.

Keep SNAP strong. The existing structure of SNAP is one of its key strengths, allowing it to respond when disaster strikes or need increases. Although this structure works well to support families, recalculating benefits to better reflect food costs would allow families to purchase health-sustaining foods.

Increase access to Child Nutrition Programs. Child Nutrition Programs keep millions of children healthy. No child should be denied lunch at school because their family struggled with the application. Child nutrition programs should be more accessible and robust.

Identify and support food insecure families. Pediatricians and other health providers can play a critical role in ending child food insecurity. By screening all families for food insecurity, pediatric practices can identify and address risks to child health and connect families to needed resources.

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