Food Insufficiency Among Ohio’s Children, 2016-2017

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Children’s experiences with food insufficiency is a critical and growing problem generating further inequities in children’s well-being. Research consistently shows that when children do not have enough food, their health and well-being suffer (Gundersen and Ziliak, 2015). In this issue, we investigate the association the lack of food has with several health and behavioral outcomes for children in Ohio. We utilize two indicators: food insecurity and food insufficiency. Food insecurity measures a household’s limited availability or uncertainty about the availability of food, whereas food insufficiency refers to limited access of food or insufficient intake of food (Balistreri, 2019). We present a rate indicating the level of food insecurity per 100 children in our first figure, we then present food insufficiency with a range of outcomes in the rest of the report. Estimates for child food insecurity rates were from model-based estimates drawing on Current Population Survey (CPS) data, the Bureau of Labor Statistics (BLS), and the American Community Survey (ACS) (Feeding America, 2018). We also use estimates of food insufficiency from the National Survey of Children’s Health (NSCH). The NSCH is designed to produce national and state-level estimates of physical and emotional well-being among children ages 0 to 17. Those who “experience food insufficiency” indicated that “sometimes” or “often” they did not get enough food to eat. A family is at risk for food insufficiency if they indicated being able to afford food but not always the kinds of food they should eat.

Geographic Variation in Child Food Insecurity

In 2017, Ohio’s average child food insecurity rate was 19.6%, meaning approximately one in five children is food insecure. This level is higher than the national child food insecurity rate of 17.0%. The highest child food insecurity rate is in Monroe County, 27.2%, and the lowest child food insecurity rate, 13.2%, is in Delaware County. Children residing in Appalachian counties experience the highest levels of food insecurity.

A strong association exists between unemployment rates and food insecurity rates. The county with the lowest unemployment rate, Mercer County (3.1%), has one of the lowest food insecurity rates, 15.1%. The county with the highest unemployment rate, Monroe County (8.3%), has the highest level of food insecurity, as shown in figure 1. A large cluster of counties with high child food insecurity rates are in southern and eastern Ohio, and these counties also experience some of the highest unemployment rates. Counties in the north and west of the state have lower rates of child food insecurity as well as unemployment rates.

Figure 1. Child Food Insecurity Rate and Unemployment Rate, 2017

Sources: Feeding America Map the Meal Gap, 2017; Ohio Department of Job and Family Services, Ohio Labor Market Information, 2017; ArcGIS and ArcMap are the intellectual property of Esri and are used herein under license. Copyright © Esri. All rights reserved.
Food Insufficiency and Race/Ethnicity

In Ohio, one-third (33.7%) of children experience or are at risk of food insufficiency, and this level is higher than the nation, 25.8%. Food insufficiency varies by race/ethnicity with Hispanic and Black children in Ohio faring worse than minority children in the nation. About one in five minority children in Ohio, 18% of Hispanic and 22% of Black children, experience food insufficiency. In contrast, only 5% of White children experience food insufficiency. An important category are children who are at risk of food insufficiency. Hispanic children are at the greatest risk of food insufficiency (44%) followed by Black children (26%), and White children (25%). Taken together, two in five Hispanic children, half of Black children, and the majority (71%) of White children did not experience or were not at risk of food insufficiency.

Food Insufficiency and Poverty

Family poverty levels are associated with food insufficiency, but a substantial share of children living above the poverty line experience food insufficiency. About half (52%) of children living in families at 0-199% of the federal poverty level experience or were at risk of food insufficiency. To put this in context, the poverty threshold for a family of four (two parents and two children) in 2017 was $24,858. This figure shows that a sizeable share of children living in families well above the poverty level were at risk of food insufficiency.

It is also important to note that not all families that are food insecure are eligible for food assistance. In Ohio, the gross income guideline for SNAP is 130% of the federal poverty level, and the guideline for WIC is 185% of the federal poverty level meaning that a substantial share of children who experience food insufficiency are in households ineligible for SNAP and WIC programs. Feeding America (2019) estimates that just over a third of the children in Ohio (34%; ~177,410 children) that are living in homes experiencing food insufficiency are ineligible for nutrition assistance programs such as the Supplemental Nutrition Assistance Program (SNAP) or the Special Supplemental Nutrition Program for Women, Infants and Children (WIC).

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In Ohio, food insufficiency is associated with poor child well-being. Over two-fifths (44%) of children in less than excellent health experience or are at risk of food insufficiency compared to over one-fourth (28%) of children in excellent health. The NSCH identifies children with special mental health conditions as those who have any kind of emotional, developmental, or behavioral problem that has lasted or is expected to last at least 12 months, and requires treatment or counseling. About half (54%) of children in Ohio with mental health care needs have some level of food insufficiency, and 18% have severe food insufficiency. The majority of children with behavior problems experienced or were at risk of food insufficiency (60%), and 28% had severe food insufficiency. These levels are higher than for children without behavior problems (31%). About half (52%) of children who were bullied were at risk or had experienced food insufficiency. Bullied children have twice the level of severe food insufficiency (13%) than children who are not bullied (6%).

**Figure 4. Food Insufficiency and Physical Health, Mental Health CSHCN, Behavior Problems, and Bullied Status of Child, Ohio 2016-2017**

<table>
<thead>
<tr>
<th></th>
<th>Not Food Insufficient</th>
<th>At Risk for Food Insufficiency</th>
<th>Experience Food Insufficiency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than Optimal Health</td>
<td>56%</td>
<td>34%</td>
<td>10%</td>
</tr>
<tr>
<td>Optimal Health</td>
<td>72%</td>
<td>21%</td>
<td>7%</td>
</tr>
<tr>
<td>Mental Health CSHCN</td>
<td>45%</td>
<td>36%</td>
<td>18%</td>
</tr>
<tr>
<td>Not CSHCN</td>
<td>68%</td>
<td>25%</td>
<td>7%</td>
</tr>
<tr>
<td>Behavior Problems</td>
<td>39%</td>
<td>32%</td>
<td>28%</td>
</tr>
<tr>
<td>No Behavior Problems</td>
<td>69%</td>
<td>25%</td>
<td>6%</td>
</tr>
<tr>
<td>Bullied</td>
<td>48%</td>
<td>39%</td>
<td>13%</td>
</tr>
<tr>
<td>Not Bullied</td>
<td>71%</td>
<td>23%</td>
<td>5%</td>
</tr>
</tbody>
</table>


**References:**

**Suggested Citation:**