

Food Insecurity and Use of Food-Assistance Programs and Food Pantries of Maine Adults as a Result of COVID-19

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Introduction

Food insecurity rates are projected to continue to increase as a result of COVID-19.1 The definition of food insecurity encompasses different ranges of food security and food insecurity.² Food-insecure individuals can experience low food security when they report "reduced quality, variety, or desirability of diet" and report "little or no indication of reduced food intake."2 Very low food security is experienced when there are "multiple indications of disrupted eating patterns and intake."2 The 2017-2019 food three-year-average food-insecurity rate (including low and very low food security) in Maine was 12% of the population, which is higher than the national 2017-2019 three-year food-insecurity rate of 11.1%.3 While the overall food-insecurity rate for Maine was not statistically significantly higher than the national average, Maine's percentage of the population experiencing very low food insecurity (6.2%) was significantly higher than the national average (4.3%).3

Food insecurity and poverty are sometimes used interchangeably, but not all food-insecure individuals and households live in poverty. Thirty-nine percent of Maine's food-insecure population have incomes high enough to disqualify them for federal food-assistance programs and have incomes above the defined federal poverty level (FPL).⁴ This population must rely on the charity food-assistance network, such as food pantries, to help meet household food-security needs.⁴

We investigated the food-security status and use of food assistance programs and food pantries of Maine adults before COVID-19 (prior to March 2020) and during COVID-19 (August to September 2020).

Data were collected through an online survey administered to 618 Maine adults aged 18 years and older between August and September 2020. The survey was part of a larger study to assess food security, access, and food systems during COVID-19.⁵

Key Findings

- 1. COVID-19 has increased the incidence of food security for survey respondents of all ages, but younger respondents (18 to 34 years) were the most likely age group to skip meals, eat less, or go hungry when food was scarce.
- 2. Adults 35 to 54 years were more likely to be current and new users of food assistance programs such as SNAP, free/reduced price school meals, and food pantries.
- 3. The majority of respondents in all age groups who used emergency food assistance agreed that the food provided through food pantries has been helpful during COVID-19.
- 4. Adults 35 to 54 years were more likely to report
- (a) travel to food pantries or federal food-assistance program offices and
- (b) a loss of independence as the top reasons to not participate in food-assistance programs or use charitable food assistance.

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Food Insecurity

Low-income older adults over the age of 60 are at increased risk of food insecurity.⁶ In the present study, respondents were asked if the food they purchased didn't last and they didn't have money to get more, and about their ability to afford food to eat balanced meals. Respondents were asked to assess if this was true in the past year and since the onset of COVID-19 restriction in March 2020. Respondents in both the 18- to 34-year-old and 35- to 54-year-old groups had reported that it was more often true or sometimes true that they couldn't afford to eat balanced meals or that their household food would not last since COVID-19, compared to the year before.

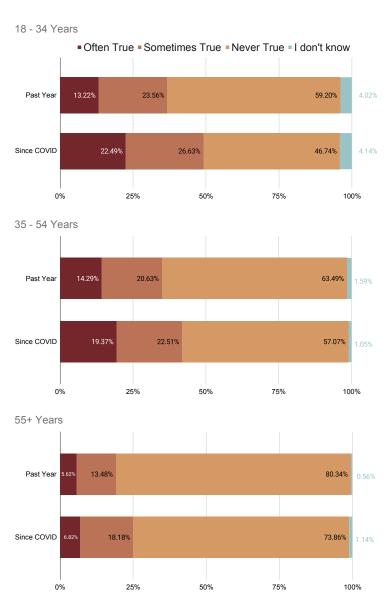


Figure 1. I/we couldn't afford to eat balanced meals in the past year and since COVID.

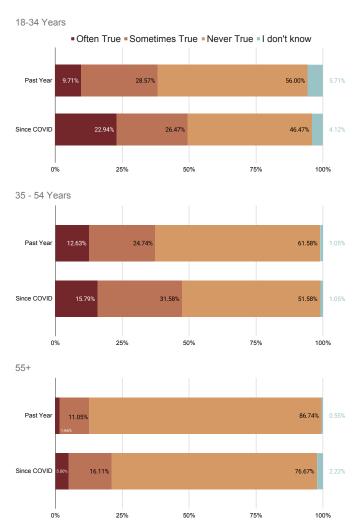


Figure 2. The food that my household bought just didn't last, and I/we didn't have money to get more in the past year and since COVID.

Respondents in all age groups reported increased food insecurity as a result of not being able to afford food since COVID. Surprisingly, respondents who were over the age of 55 years reported a lower incidence of food insecurity compared to the other age groups. In the past year and since COVID-19, younger respondents from ages 18 to 34 were the most likely to

- 1) Cut the size of, or skip meals (23.1% and 35.7%)
- 2) Eat less than they felt they should (27.1% and 41.3%)
- 3) Went hungry because there wasn't enough money for food (28.9% and 39.5%).

Food Assistance Programs

Federal food-assistance programs such as school meals programs (free and reduced-priced meals), Supplemental Nutrition Assistance Program (SNAP), and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) provide supplemental foods and improve food security of income-eligible individuals and families.

In this study, respondents who were between the age of 35 and 54 years were more likely to be current and new users of SNAP, school meals programs, and food pantries while respondents age 18 to 34 years were more likely to be current and new users of WIC. Respondents over 55 years were less likely to utilize any food assistance programs compared to the other two age groups.

Food Pantries

Food pantries frequently rely on a network of volunteers acquire and distribute emergency food communities. Larger food pantries may be able to purchase food through food banks and federal distribution programs, while smaller pantries may rely more heavily on donated foods. Because food pantries run as independent organizations, there is a great deal of variability among them when it comes to hours of operation, staffing, the types of food offered, and other operational factors. The number of volunteers and limited paid positions can reduce hours of operation and the ability to stock adequate food. Of the survey respondents who responded to using food pantries in the past year, those who were 55 years and older were more likely to report that the food offered at food pantries had been very helpful and tended to disagree with the statement that "the food pantry does not have food my household likes to eat" or that the food pantry provided poor quality food.

Respondents in the 35- to 54-year-old age group were the most likely age group to report that food pantries had hours that didn't work with their schedule and 25% of this age group agreed or strongly agreed that the food pantry provided foods that they could not prepare. Adults over the age of 55 were also least likely to report long lines or wait times when they used a food pantry, or that the food pantry would often run out of time. The majority of all age groups were more likely to report that there were limits on how often they could visit the food pantry, but all age groups strongly agreed that food pantries had been very helpful for their household since COVID-19.

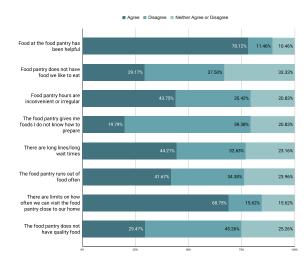


Figure 3. Perceptions of Using a Food Pantry During COVID-19.

Barriers to Using Food Assistance Programs and Food Pantries

Barriers to using federal food assistance programs and/or food pantries include perceived stigma associated with welfare and completing complex paperwork. Adult respondents over the age of 55 years were less likely to report that paperwork was a barrier to using income-based food programs and food pantries. This age group was also somewhat less likely to report that reporting or having personal assets and travel were barriers to accessing food programs or pantries. While respondents over the age of 55 years were also somewhat more likely to disagree that stigma was a barrier to participating in programs, younger respondents between 18 and 34 years were most likely to disagree/strongly disagree that independence and stigma were barriers to program participation. Travel to food programs or food pantries or program offices to apply or recertify for federal programs was a barrier for more 35- to 54-year-old respondents.

Conclusions

Changes in food-security status during COVID-19 was experienced by all age groups in Maine. Older adults (over the age of 55 years) were less likely to experience food insecurity since COVID-19 began, while younger respondents (18 to 34 years) experienced the greatest increase in food insecurity. Barriers to using foods from food pantries, such as not being able to prepare the food, foods not liked by household members, poor food quality, and inconvenient or irregular hours, were common among respondents 35 to 54 years of age.

Identifying opportunities to expand food-pantry hours to accommodate working individuals or families and education about how to use available pantry food items may increase accessibility of emergency foods and increase the incidence of choosing healthy, unfamiliar foods by food pantry users.

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About NFACT

This research is conducted as part of the National Food Access and COVID Research Team (NFACT). NFACT is a national collaboration of researchers committed to rigorous, comparative, and timely food access research during the time of COVID-19. We do this through collaborative, open access research that prioritizes communication to key decision-makers while building our scientific understanding of food system behaviors and policies. To learn more visit www.nfactresearch.org.

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