

Household Food Insecurity and U.S. Department of Housing and Urban Development Federal Housing Assistance

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What Is the Issue?

Most U.S. households have consistent, dependable access to enough food for active, healthy living—they are food secure. Some households experience food insecurity at times during the year, meaning that due to a lack of money or other resources, they had difficulty providing adequate food for all household members. As low-income families juggle competing economic demands, public assistance programs that do not explicitly target food insecurity may improve household food security by reducing overall household financial burden. The U.S. Department of Housing and Urban Development (HUD) serves more than 4.5 million low-income households via three assistance programs that help families obtain affordable housing. However, because housing assistance is targeted to very low-income households, even with assistance, these households may remain food insecure.

This study sought to answer the following research question: “What is the prevalence of household food insecurity among individuals receiving housing assistance from HUD and how does household food insecurity vary by housing assistance program type?” To answer this research question, this report describes household food insecurity among National Health Interview Survey (NHIS) adult participants, who received HUD assistance at the time of their health interview, examining household food insecurity among HUD-assisted households overall, and focusing on food insecurity in households that receive assistance from each of the three housing assistance programs: the Housing Choice Voucher program, the Multifamily Housing program, and the Public Housing program. This study provides information on the prevalence of food insecurity of participants in each of these HUD program types.

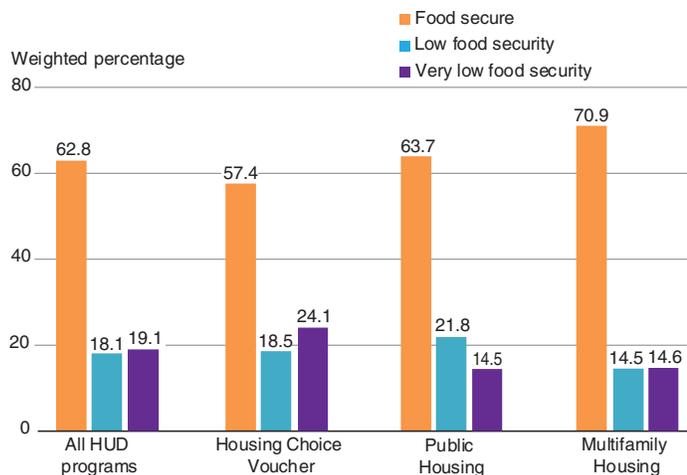
What Did the Study Find?

Among NHIS adult participants receiving HUD assistance in 2011 and 2012, 37.2 percent reported household food insecurity (including low and very low food security) in the 30 days before the survey interview. For context, in 2018, an estimated 11.1 percent of households in the general population were food insecure at least once during the prior year; among low-income households with incomes below 185 percent of the poverty threshold, the prevalence was 29.1 percent. In 2012, 14.5 percent of all U.S. households were food insecure during the year and 34.3 percent of low-income households with incomes below 185 percent of the poverty threshold were food insecure during the year.

ERS is a primary source of economic research and analysis from the U.S. Department of Agriculture, providing timely information on economic and policy issues related to agriculture, food, the environment, and rural America.

- An estimated 19.1 percent of HUD-assisted adults were in households with very low food security, the more severe range of food insecurity characterized by disrupted eating patterns and reduced food intake.
- The prevalence of food insecurity varied across HUD program type, with the highest prevalence of both food insecurity and very low food security among those in the Housing Choice Voucher program (42.6 percent and 24.1 percent, respectively). The lowest rate of food insecurity was among those in Multifamily Housing (29.1 percent).

Prevalence of food security, low food security, and very low food security by HUD program type, 2011–2012 NHIS linked with HUD administrative data



The differences in the prevalence of food insecurity across HUD program type were not explained by the characteristics of the households in the programs. Even after accounting for differences in individual- and household-level characteristics across HUD programs (for example, age, race, poverty, household structure, and health status), adult recipients of Housing Choice Vouchers and adult residents of Public Housing were more likely to be food insecure than were adults in Multifamily Housing.

- When controlling for individual and household characteristics, an estimated 41 percent of adults with Housing Choice Vouchers, 37 percent of adults in Public Housing, and 31 percent of adults in Multifamily Housing reported food insecurity.

When comparing NHIS adult participants receiving HUD assistance who were food insecure with those who were food secure, certain demographic and economic characteristics of HUD-assisted households were related to a higher likelihood of food insecurity, including adults aged 45 to 61, individuals who are part of racial and ethnic minority groups, individuals living below the Federal poverty threshold, individuals with disabilities, individuals living in households with no children, and individuals living in households where at least one family member had fair or poor health.

Observed differences in the likelihood of food insecurity across HUD program type may be attributable to key economic and social components that vary across program type, including whether a unit is assigned or is independently selected by members of the household, and differences in characteristics of neighborhoods. Additionally, HUD program types also differ in terms of subsidy type, payment standards, and methods of paying utility bills—factors that influence housing-cost burden and that potentially contribute to food insecurity. When compared with adults who are in Public Housing and Multifamily Housing programs, adults in the Housing Choice Voucher program had the highest rates of poverty and the highest percentage reporting difficulty paying family medical bills during the past year.

How Was the Study Conducted?

The National Health Interview Survey (NHIS) is an annual cross-sectional population-based health survey designed to monitor the health of the U.S. civilian, non-institutionalized population. NHIS data from 2011 and 2012 were linked to HUD administrative data to examine the relationship between household food insecurity and HUD program type. Analyses focused on the prevalence of household food insecurity among NHIS adult participants receiving HUD assistance, and characteristics associated with food insecurity. To adjust for differences in the populations served by the different HUD programs, regression analyses were used to examine household food insecurity across HUD program type while accounting for sociodemographic characteristics at the individual and household levels.