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*Center for Public Affairs
Policy Snapshot Report*

**Food Insecurity,
Barriers, and Possible
Solutions**

**Survey of Brown County
At-Risk Households**

2016

**UW
Extension**
Brown County

 **UNIVERSITY of WISCONSIN
GREEN BAY**

**CENTER FOR PUBLIC AFFAIRS
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Paul's Pantry

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A Letter From Karen Early, Founder of this Research Series

This Food Security study was implemented by the University of Wisconsin-Extension Nutrition Education Program in Brown County (WNEP), beginning in 1998, in collaboration with the UW-Green Bay Professional Social Work Program. Its purpose has been to monitor food security trends and to provide the community with information from which to make change that benefits the population most at risk for food insecurity. It does this by addressing barriers to food security, strategies currently used to obtain food, suggestions for actions that would most help and by addressing educational interests. WNEP has existed in Brown County for nearly 30 years, providing nutrition education to low income populations. In addition, the program has developed and collaborated with many food security initiatives throughout the county to provide education from which to build a supportive environment for improved food security. This report compiles cross-sectional studies implemented every 5 years since 1998.

Many of the findings in this report have followed similar trends over the past 15 years with small variations, confirming that responses given are rooted in the issue of food insecurity. Other findings have changed with the economic climate at the time of the survey. Positive changes seen appear to parallel local and federal initiatives to improve food security. Unlike other areas in the United States, Brown County shows a substantial improvement in food security among low income populations, indicating that our community is working together to make a difference. The reported food insecurity rate of food pantry households reported over a two week time period in November has decreased from 82% in 1999 to 45% in 2014. In addition, the 2015 Gallup Healthways Well-Being Index has rated Green Bay as the second most food secure community with a food insecure rate of 8.5%, second only to Boulder, Colorado. A food secure community has been our goal however, it is important to note that our work is not done, because food security still exists and impairs the mental, physical and emotional functioning of those affected.

The Wisconsin Nutrition Education Program is now funded as an obesity prevention program as well. Although once considered counterintuitive and paradoxical, research on the relationship between food insecurity and obesity has grown and although there is much yet to understand, the scientific community now agrees that the strongest correlation between food insecurity and obesity is in women. Due to the burden and impact of food insecurity on children, we examine data in this report not only by long term trends but also by households with children and those with adults only.

There is hope that the Brown County community will continue to engage and apply this data to reduce health disparities and improve health outcomes associated with food security within the context of all social determinants of health. As the amount of food available becomes less of an issue and diet related health issues are more of a concern, the need to address food quality in all food outlets and meal services rises as a public health priority.

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EXECUTIVE SUMMARY AND KEY FINDINGS

The United States Department of Agriculture (USDA) has defined food security as “access ... at all times to enough food for an active, healthy life.”¹ Food secure people have few problems accessing nutritious food, while those identified as food-insecure report poor nutrition and reduced food intake. According to the USDA, nationally, 14% of all households were food insecure in 2014 and 42% of those living in poverty were food insecure.² Severe food insecurity has serious consequences for the long-term health and well-being of adults and children.

To prevent hunger, there are a number of supplemental food programs addressing food security in our community; all show increased use in recent years. In Brown County, the average number of FoodShare Wisconsin recipients (previously called food stamps) rose from 22,000 in 2009 to almost 30,000 in 2015. In 2014-2015, 40% of Brown County public school children received free or reduced lunch compared to 36% in 2009-2010 (with Green Bay Area Public School District the highest at 58 percent). The number of households that used Brown County food pantries increased by 43% between 2009 (34,271 visits) and 2015 (49,030 visits) (not including data from one of the largest, Paul’s Pantry).

The purpose of this study was to gather current data on the nature of food insecurity in Brown County among persons who visit area food pantries and to monitor the longer-term trends that have occurred since this survey was first conducted in 1999. Our goal has been to understand the issue of food insecurity more clearly to enable community stakeholders to address the issue locally. This research has taken place every five years since 1999 through a collaborative research partnership of University of Wisconsin Brown County Extension Nutrition Education Program and the University of Wisconsin-Green Bay.

In late 2014, UW-Green Bay Social Work students met one-on-one to interview over four hundred food pantry consumers to learn about their household food situations. Many of those with whom they spoke had children along and many were elderly. Many had visited the pantry traveling via public transportation and most faced challenges getting there during open hours. Quite a few of the visitors experienced physical disabilities. Two-thirds were female, and two-thirds were white.

The make up of pantry consumers that participated in our study changed somewhat between 2009 and 2014. Almost one-third of 2014 respondents received disability income, up from 11% in 2009. Thirty-eight percent were employed in 2014, down from 54% in 2009 and 59% in 2004. Forty percent of 2014 respondents were currently unemployed, others not), yet half as many unemployed respondents received unemployment benefits in 2014 (10%) as in 2009 (19%). In 2014, 83% of respondents had attained high school diploma or higher, compared to 67% in 2009. In 2014, 61% of respondents were enrolled in FoodShare compared to 50% in 2009 and 43% in 2004. Three in four households with children in 2014 received free or reduced cost meals at school, while community meal sites were used by 41% of respondents in 2014, up from 24% in 2009.

There is some good news in this year’s results. Only 45% of respondents reported being food insecure in 2014, compared to 89% in 2009, a 44 percentage point improvement. In 2014, only 13% of pantry consumers had *very low* food security compared to 38% in 2009, a 25 point improvement. In 2014, 50% of households with children were food insecure compared to 82% in 2009, a 32 percentage point improvement. In spite of these improvements, well over half of respondents with children reported feeding kids low-cost foods and not providing balanced meals for them. The majority of respondents reported worries about food running out, not eating balanced meals, and eating less. Although fewer reported hunger, pantry consumers may have poor nutritional intake, especially those with special dietary needs.

¹ “Food Security in the U.S.: Measurement.” United States Department of Agriculture Economic Research Service. U.S. Dept. of Agriculture, 8 Sept. 2015. Web. 9 Nov. 2015. <http://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us/measurement.aspx#security>

² Coleman-Jensen, Alisha, Christian Gregory, and Anita Singh. Household Food Security in the United States in 2013, ERR-173, U.S. Department of Agriculture, Economic Research Service, September 2014.

Consistent with previous years, most people interviewed indicated that lack of money was the main barrier to food security, with others lacking transportation (especially adult-only households) time to get to the store. Most consumers had trouble affording housing and utilities as well and had often deferred these payments in order to obtain money for food. Many had neglected healthcare to have enough money for food and faced the difficult choice of using their limited money for food rather than for medical needs. Individuals supplemented income by borrowing from family and friends, using payday loans, and/or working several jobs.

The analysis yielded a number of key findings summarized here:

- ★ **The rate of food insecurity among pantry consumers was about half of what it was in 2009 (45% in 2014 vs. 89% in 2009).** As a reminder, this research reflects pantry consumers only; it does not estimate the rate of food insecurity prevalent in the local community. There are a number of possible explanations for this difference. First, the rate was exceptionally high in 2009, during the depth of the recession that occurred nationwide. There were some differences in sampling and data collection: the 2014 sample contained fewer households with children (who are likely to have higher food insecurity), more middle-aged adults with no children, and a greater number of educated individuals. But these differences cannot account for the magnitude of the improvement in food security. Another likely reason for the improvement may be the success of local efforts to improve access to food (including healthy food). Local food assistance programs (public benefits, meal sites, pantry visits) show much higher use in 2014 than in 2009, possibly lifting many at-risk households out of severe food insecurity. Finally, the make-up and habits of pantry consumers may have changed. It's also possible that the severity of need across the community may have declined. More research is needed to clarify the reasons for the change we observed.
- ★ **A higher proportion of households with children were food insecure than adult-only households.** In the 2014 study, 51% of households with children were food insecure in contrast to 43% of adult-only households. The large majority of households were feeding children a few kinds of low-cost foods and could not afford to feed them balanced meals. Two in five households with children reported that their children were not eating enough.
- ★ **Employed pantry consumers worked 40+ hours a week at multiple jobs yet had high rates of food insecurity.** In 2014, two in five pantry consumers were employed and two in five were unemployed (the rest received income from sources other than employment). In 2014, one third of employed pantry consumers worked 41 hours or more a week (a number that had doubled since 2009). Yet 48% of employed consumers were food insecure compared to 43% of unemployed/not seeking a job and 35% of unemployed/job seeking. This supports the USDA research related to reduced food security among those holding multiple jobs. In our local study, next to lack of money, the two most-cited barriers to food security among households with children were lack of time and difficulty getting to a store, perhaps related to the excessive work hours undertaken by many pantry consumers.
- ★ **The number of consumers with education beyond high school has tripled since 2004.** This is not the expected profile for food-insecure individuals. In 2004, 13% of food pantry consumers had obtained education beyond high school compared to 45% of consumers in 2014.
- ★ **While members of all racial and ethnic groups visited Brown County food pantries, the distribution of food insecurity by race/ethnicity is unclear.** In this study, almost two-thirds of pantry consumers who were surveyed in 2014 were white and one-third were non-white. Latino and Asian households, especially, were under-represented in 2014.
- ★ **Food insecurity puts peoples' housing and health at risk.** Difficult financial choices are being made to obtain enough food for the household. Many respondents were delaying utility and housing payments in order to have enough money for food (59% of households with children had deferred utility payments and 38% of had delayed paying for housing). One-third of adult-only households reported "neglecting healthcare" to have funds to purchase food.

- ★ **Eating nutritional diets, fresh fruits, and vegetables is still a challenge for pantry consumers.** Despite expanded access to farmers' markets and innovative local programs, most respondents reported that fruits and vegetables cost too much and spoil too quickly, reducing intake of these kinds of nutritional foods. Three-fourths of households with children reported, "I relied on only a few kinds of low-cost foods because I was running out of money to buy food," and two-thirds reported "I couldn't feed my child a balanced meal because I couldn't afford it."
- ★ **Utilization of food assistance programs has increased dramatically.** Two in five 2014 respondents were using community meal sites, a rate that had doubled since 2009. The number of pantry consumers receiving FoodShare has steadily increased since 2004. Of those not using FoodShare, many reported that they were not financially eligible or didn't need the benefit, and half of individuals not using FoodShare did not know about the program or how to apply for it. Access to FoodShare may change in the future, as legislative changes to FoodShare in 2015 will reduce access to the program (for able-bodied adults without children). This may lead more low-income households to depend upon local pantry services. Finally, a large portion of pantry consumers visited two or three pantries a month, and more than half had first visited a pantry more than two years ago. Those visiting food pantries more often had similar rates of food insecurity as those who had first visited a pantry in recent months.
- ★ **Pantry consumers experience many health conditions.** In 2014, almost half of those surveyed reported having a health condition with special dietary needs; a majority of them indicated that finding the suitable food was very difficult or somewhat difficult to obtain at a pantry. The number of respondents who received disability benefits had almost tripled in 2014 (36%) compared to 2009 (13%).
- ★ **Adults with children are keenly interested in education to help their situations.** While respondents both with and without children are interested in education to help them with their food insecure situation, three quarters of adults with children wanted help to deal with stress and almost as many wanted to learn how to improve their sleep. Education on selecting healthy foods and getting physically active were important to them, and many were interested in community garden options.

This longitudinal research enables the Brown County community to understand what individuals and families who are using food pantries go through to secure food resources. In 2014, we found a lower overall rate of food insecurity among pantry users. It is important to note that this finding does not indicate that fewer people in Brown County are hungry -- an unlikely occurrence, since the poverty rate has increased locally. This research did not sample the community at large to determine prevalence of hunger overall. The research *does* show that people are using a variety of supplemental food programs and new approaches (i.e., getting fresh vegetables at farmers markets) to provide for their nutritional needs. In 2014, a much higher proportion of pantry consumers received assistance from other food assistance programs than in the past.

Most individuals that visit food pantries face many challenges in life – among them, obstacles related to income, housing, childcare, transportation, disability or health conditions, and lack of knowledge on how to prepare food. This study demonstrates that pantries play an essential role locally: there are dramatic and real impacts from any degree of food insecurity, including the nutrition of children and individuals with disabilities along with risks to secure housing and health. It is possible that the role of food pantries is changing. It may be that the make-up of persons who access pantries has changed. It is essential to continue to explore ways that the pantries can best reach community members who need them the most.

INTRODUCTION

This report examines the experiences and situations of community members who are challenged to provide sufficient food for their household. By surveying persons who have utilized food pantry resources, insight was gained into ways to enable these households to become more food secure. We have learned about the characteristics of households using food pantries: their age, gender, employment status, income sources, education, special dietary needs, and food security status. We have also learned about barriers to food security, strategies households use to gain better access to food, educational interests that they have, and other things that would help them.

A partnership between University of Wisconsin Brown County Extension Nutrition Education Program and the University of Wisconsin-Green Bay Social Work Professional Program undertook the Household Food Security Survey in 1999 and repeated it in 2004, 2009, and 2014, when budgetary concerns delayed the analysis and reporting of data. University of Wisconsin-Green Bay's Center for Public Affairs joined the collaboration in 2015 to analyze and report on the findings from the 2014 survey. In this way, numerous college students have worked on the project, having the opportunity to acquire investigative and analytical skills while developing an acute awareness of this challenging issue in our local community.

The purpose of this study was to gather current data on the nature of food insecurity in Brown County among persons who visited area food pantries in the fall of 2014. We monitor the longer-term trends that have occurred since this survey was first conducted in 1999 and every five years thereafter. We present our findings in order to understand the issue of food insecurity more clearly and to enable community stakeholders, including policymakers, to better address the issue locally.

WHAT IS FOOD SECURITY?

The United States Department of Agriculture (USDA) has defined food security as, “access by all members at all times to [have] enough food for an active, healthy life.”³ Food secure households experience little or no problems accessing nutritious food. Conversely, food insecure households report reduced quality of nutrition and even, at times, reduced food intake. The USDA has broken down food security status into four categories (Table 1). Each category represents the quality and accessibility of food by a household: high food security, marginal food security, low food security, and very low food security. In our analysis to follow, we have employed both the broad and more focused category systems.

Table 1: Levels of Food Security

Broad category	USDA Category	Description
Food secure	High food security	No reported indications of food access problems or limitations.
	Marginal food security	One or two reported indications—typically of anxiety over food sufficiency or shortage of food in the house. Little or no indication of changes in diets or food intake.
Food insecure	Low food security	Reports of reduced quality, variety, or desirability of diet. Little or no indication of reduced food intake.
	Very low food security	Reports of multiple indications of disrupted eating patterns and reduced food intake.

³ “Food Security in the U.S.: Measurement.” *United States Department of Agriculture Economic Research Service*. U.S. Dept. of Agriculture, 8 Sept. 2015. Web. 9 Nov. 2015. <http://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us/measurement.aspx#security>

The U.S. government began to address the high rate of food insecurity in 1995 when the Food Security Initiative was started by the U.S. Department of Agriculture (USDA) amidst a changing political climate regarding welfare policy.⁴ The purpose of the national initiative was to cut domestic hunger in half by 2015, with a focus on seven goals:

- Creating and expanding local infrastructures that boost food security
- Improving job and economic security
- Improving food and nutrition assistance
- Improving community food production and marketing
- Increasing education and awareness of food insecurity
- Improving research, monitoring, and evaluation
- Increasing the federal nutrition assistance safety net

Initiated in 1999, and modeled after the USDA's initiative, Brown County's Food Security Initiative embraced a multidisciplinary systems approach. It continues to this day, with a variety of stakeholders, such as the Brown County Food and Hunger Network and the Brown County Health Improvement Plan, using an array of strategies to combat food insecurity locally, from building partnerships to implementing projects to influence public policy.

The mission of the Brown County Food and Hunger Network is: *'Through collaboration, cooperation and information-sharing, the Brown County Food and Hunger Network works to prevent hunger and food insecurity, provide information and education on nutritional issues, and promote social policies that achieve food security while honoring the dignity of those we serve.'*⁵ The Brown County collaborative group has served as a vehicle for partners to share resources and establish procedures for providing emergency food.



As a state public health initiative, the Community Health Improvement Assessment and Plan (CHIP), known as "Beyond Health", is another component of Brown County's efforts to fight food insecurity. The CHIP process, active in Wisconsin since 1993, requires local communities to address identified health issues impacting residents. Local health departments are required by the state to regularly "collect, assemble, analyze, and make available information on the health of the community."⁶ Through the collection and sharing of data, public health policies are developed to address identified areas in need of improvement. CHIP uses Wisconsin's state health plan, *Healthiest Wisconsin 2020*, to guide its areas of focus. One major goal of

Healthiest Wisconsin 2020 is that residents have "Adequate, Appropriate, and Safe Food and Nutrition," with the following objective: "By 2020, all people in Wisconsin will have ready access to sufficient nutritious, high-quality, affordable foods and beverages."⁷ An important indicator of this objective is the proportion of households with low and very low food

⁴ United States Department of Agriculture. *Agriculture Fact Book 1999*. Washington DC: U.S. Department of Agriculture Office of Communications, 2000. Web. 9 Nov. 2015.

⁵ "Who is the Brown County Food and Hunger Network?" Brown County Food & Hunger Network. Brown County Food & Hunger Network, n.d. Web. 9 Nov. 2015.

⁶ "Community Health Improvement Assessment and Plans." *Wisconsin Department of Health Services*. Wisconsin Department of Health Services, 14 Oct. 2015. Web. 9 Nov. 2015. <https://www.dhs.wisconsin.gov/chip/index.htm>

⁷ Wisconsin Department of Health Services, Division of Public Health, Office of Policy and Practice Alignment. *Healthiest Wisconsin 2020: Everyone Living Better, Longer. A State Health Plan to Improve Health Across the Life Span, and Eliminate Health Disparities and Achieve Health Equity*. P-00187. July 2010.

security. As this goal is pursued, the belief is that public health will be improved by reducing the number of persons facing food insecurity.

WHAT ARE THE CONTRIBUTORS TO FOOD INSECURITY?

Food insecurity is the result of numerous obstacles that people face. Food-insecure individuals often live in poverty, are unemployed, have low paying jobs, face unstable housing, or have obtained low levels of education.⁸ National Census data found 15% of U.S. residents living below the poverty level between 2009 and 2013.⁹ Locally, in 2014, the U.S. Census reported that 12% of Brown County residents lived in poverty (29,211 individuals), up from 10% in 2007.¹⁰

According to the USDA, in 2013, 42% of households with incomes below the poverty line were food insecure. In contrast, only 7% of those with incomes above 185% of the poverty line were food insecure.¹¹ According to the USDA, “employment is a key determinant of food insecurity in households with children.”¹² The 2013 USDA annual report on the Food Assistance Landscape found that households with children headed by an unemployed adult were three and a half times more likely to be food insecure than households with an adult employed full time.¹³



However, merely having employment and earning wages cannot prevent food insecurity. Three-quarters of U.S. households with food-insecure children had employed adults, the majority of them (60%) employed full time.¹⁴ Likewise, households where adults have multiple part time jobs cannot escape a high rate of food insecurity. A study used 2003-2005 data from the Current Population Survey to compare the food insecurity rates of full-time employed adults to adults holding several part time jobs. Despite the fact that the households had similar incomes, those with members in nonstandard work arrangements were 43% more likely to experience food insecurity. The authors postulate that “instability in income and work schedules may affect a household's ability to budget money and time for obtaining food.”¹⁵

People with low incomes face challenges in maintaining affordable, stable housing, a challenge that intersects with concerns about food insecurity. The U.S. Department of Housing and Urban Development (HUD) classifies those who pay more than 30% of their household incomes for housing as “cost burdened.”¹⁶ High housing cost burdens prevent such households

⁸ Food Research & Action Center. “Reflections on Household Food Insecurity with Dr. Mark Nord.” Food Insecurity & Hunger in the U.S.: New Research July 2014: 1-8. Web. 9 Nov. 2015. http://frac.org/pdf/frac-chw_household_food_insecurity_mark_nord_july2014.pdf

⁹ “State and County QuickFacts: Wisconsin.” United States Census Bureau. U.S. Dept. of Commerce, 14 Oct. 2015. Web. 9 Nov. 2015. <http://quickfacts.census.gov/qfd/states/55000.html>. The Federal Poverty Level (FPL) is established by the Department of Health and Human Services each year and it is used to determine eligibility for certain programs such as Head Start, the Supplemental Nutrition Assistance Program (SNAP), and the National School Lunch Program.

¹⁰ “Poverty in Brown County: Progress Report 2015.” Bay Area Community Council. Bay Area Community Council, 2005. Web. 9 Nov. 2015. <http://www.bayareacommunitycouncil.org/media/75555/poverty%20in%20brown%20county%202015.pdf>

¹¹ Coleman-Jensen, Alisha, Christian Gregory, and Anita Singh. Household Food Security in the United States in 2013, ERR-173, U.S. Department of Agriculture, Economic Research Service, September 2014.

¹² Oliveira, Victor. Food Assistance Landscape: FY 2013 Annual Report, EIB-120. U.S. Department of Agriculture, Economic Research Service, February 2014.

¹³ Ibid.

¹⁴ Ibid.

¹⁵ Ibid.

¹⁶ “Affordable Housing.” U.S. Dept. of Housing and Urban Development. U.S. Dept. of Housing and Urban Development, n.d. Web. 9 Nov. 2015. http://portal.hud.gov/hudportal/HUD?src=/program_offices/comm_planning/affordablehousing/

from affording items such as food, clothing, and medical care.¹⁷ HUD estimates there are currently 12 million households in the United States paying more than half of their annual incomes for housing. Many individuals in Brown County face the same challenge. In 2009-2013, 43% of renter households and 28% of mortgage-holding households in Brown County were reported to be cost burdened.¹⁸

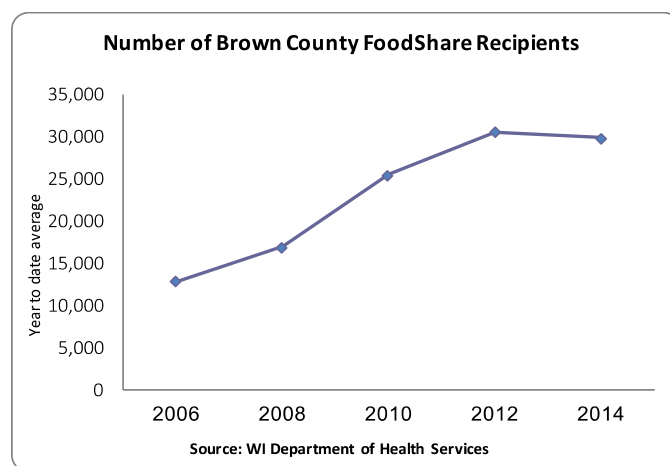
Another important local resource indicates the financial pressure facing Brown County's low-income families. The 2-1-1 program is a 24-hour call center connecting those in need with resources in the community. To track community needs, the program also tracks the purpose of the call and whether the caller obtained the needed resources. According to the program's 2014 report, two of the top caller requests in Brown County were the inability to pay for utilities and requests for rent payment assistance.¹⁹

HOW COMMON IS FOOD INSECURITY?

The USDA conducts an annual survey to estimate the prevalence of food insecurity nationally. In 2013, 14.3% (17.5 million) of U.S. households met the criteria for food insecurity.²⁰ Of those food insecure households, nearly half had very low food security. The USDA reported that 19.5% (8.6 million) of households with children under the age of 18 were food insecure. In 10% of households, *both* the adults and children experienced food insecurity, despite the attempts by adults to shield children from the effects of food insecurity by reducing their own intake.

Eligibility for and utilization of two federal programs are direct indicators of food insecurity locally. The Supplemental Nutrition Assistance Program (SNAP) is a federal program implemented by each state to assist low-income individuals in purchasing approved food items.²¹ Wisconsin's SNAP program, FoodShare Wisconsin, is accepted at most grocery stores and other food retailers. In Brown County, the program can be accessed at most grocery stores, other food retailers, and selected Green Bay farmers markets. In addition to making it possible to use FoodShare benefits at farmers' markets, community partners have established incentive programs to encourage FoodShare recipients to purchase locally grown fruits and vegetables.

Figure 1



The average number of Brown County FoodShare recipients more than doubled between 2006 and 2014, from 12,850 in 2006 to 29,806 in 2014, shown in Figure 1.²² Many eligible individuals do not receive this benefit because they do not know about the program, think that they aren't eligible, or don't know how to apply. In 2015, the state of Wisconsin made a number of changes to program requirements that may reduce access. For instance, in April, able-bodied adult program

¹⁷ Ibid.

¹⁸ "State & County QuickFacts: Brown County, Wisconsin, 2009-2013 Five Year Estimates." United States Census Bureau. United States Census Bureau, 14 Oct. 2015. Web. 9 Nov. 2015. <http://quickfacts.census.gov/qfd/states/55/55009.html>

¹⁹ "2014 Snapshot: Brown County." Brown County United Way. Brown County United Way, n.d. Web. 9 Nov. 2015. <http://www.browncountyunitedway.org/wp-content/uploads/2014-Annual-Snapshot.pdf>

²⁰ Coleman-Jensen, Alisha, Christian Gregory, and Anita Singh. Household Food Security in the United States in 2013, ERR-173, U.S. Department of Agriculture, Economic Research Service, September 2014.

²¹ "How to Get Foodshare Benefits." Wisconsin Department of Health Services. Wisconsin Department of Health Services, 17 Nov 2014. Web. 11 Nov 2015 <https://www.dhs.wisconsin.gov/foodshare/eligibility.htm>

²² FoodShare Caseload Recipients by Calander Year. Wisconsin Department of Health Services. Wisconsin Dept. of Health Services, 2014. Web. 30 Nov. 2015. <https://www.dhs.wisconsin.gov/foodshare/rsdata.htm>

recipients (who had no children) were required to work at least 80 hours a month or lose FoodShare benefits.²³ In November, the Department of Human Services reported that 15,000 such participants had been dropped from FoodShare. In November, the Wisconsin Legislature passed three bills that would require photo identification on FoodShare benefit cards, seizure of benefits if the account has not been accessed in six months or more, and fraud investigation into FoodShare accounts that requested more than three replacement debit cards in a year.

Another program for those with low food security is the National School Lunch and Breakfast (NSLP), which offers balanced meals to low-income children. Children of families with incomes at or below 185% of the poverty level are eligible for free or reduced cost lunches.²⁴ The program is offered at all Brown County public schools as well as all after school programs. In recent years, the Wisconsin Department of Public Instruction (DPI) reported steady increases in enrollment in free or reduced meal programs across the state, with 37% of Wisconsin students qualifying in 2014. Across Wisconsin, 117 school districts had 50% or more of the student population eligible for free or reduced price meals.

Table 2: Percent of Students Eligible for Free and Reduced-Price Meals in Brown County School Districts

School District	2009-2010	2014-2015
Ashwaubenon	23%	30%
De Pere	18%	19%
Denmark	16%	18%
Green Bay Area	53%	58%
Howard-Suamico	17%	21%
Pulaski Community	21%	24%
West De Pere	25%	26%
Wrightstown Community	18%	20%
Brown County Wt. Average	36%	40%

Table 2 shows the percentage of students enrolled in the program in local school districts for 2009-2010 and 2014-2015. Fifty-eight percent of Green Bay Public School District students were enrolled, the highest rate seen locally.²⁵ Every Brown County district saw increases in enrollment since 2009-2010, at the peak of the recession. When district data are weighted and aggregated at the county level, Brown County averaged 40% of K-12 students eligible for free or reduced lunch during the 2014-2015 school year.

As of this writing, there were two sites that offer free meals daily to adults, with several other meal programs that offered meals once or twice a month.²⁶ Eight additional meal sites and a Homebound Meal Program are provided by Aging and Disability Resource Center for seniors at low cost. The Green Bay Boys and Girls Club offers afternoon snacks and dinner throughout the school year, and during the summer, offers breakfast, lunch, and snacks to children that participate in the program.



²³ Associated Press. "Nearly 15,000 Wisconsin residents lost food stamps after restrictions." Web. 29 Nov. 2015.

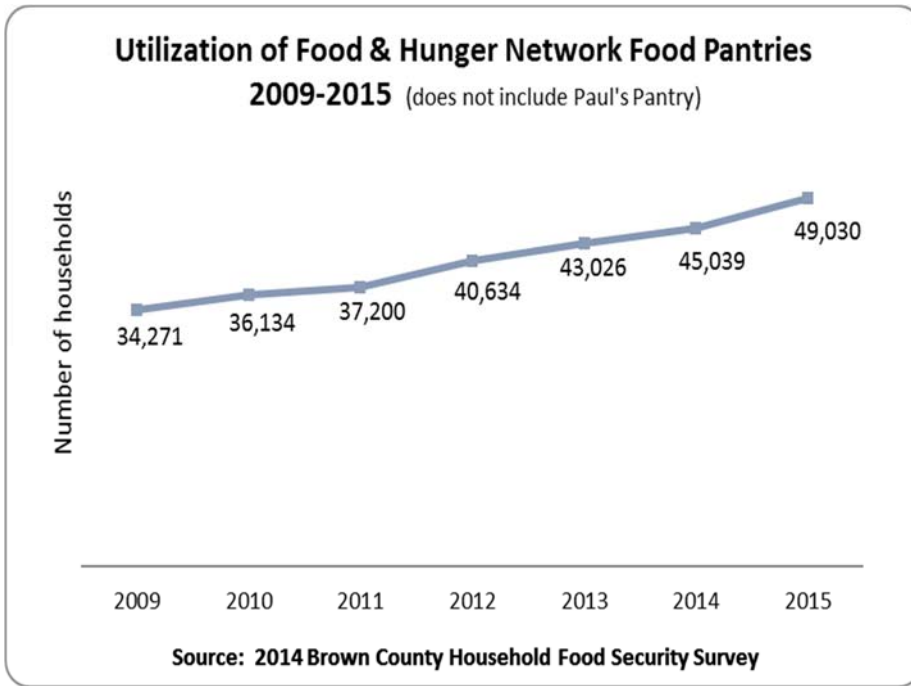
²⁴ "National School Lunch Program." United States Department of Agriculture Food and Nutrition Services. United States Department of Agriculture, Sept. 2013. Web. 11 Nov. 2015. <http://www.fns.usda.gov/sites/default/files/NSLPFactSheet.pdf>

²⁵ Wisconsin Department of Public Instruction. Student Poverty Rate Continues to Climb. 28 May 2014. Web. 11 Nov. 2015. https://dpi.wi.gov/sites/default/files/news-release/dpinr2014_54.pdf

²⁶ Brown County UW-Extension, Community Resource Handbook, 2015.

The Brown County Food and Hunger Network is comprised of 23 food pantries that distribute food to those in need.²⁷ Brown County UW-Extension tracks pantry utilization by household with data provided by the Network pantries. Between 2009-2015, the number of households visiting emergency Network food pantries grew 43% overall, with a steady increase every year. In 2015, participating pantries reported 49,030 visits to obtain food, up from 34,271 visits in 2009.²⁸ The actual number of local visits is higher, because these numbers do not include visits to Paul’s Pantry, one of the largest area pantries.

Figure 2



These statistics of program use show that many households qualify for food assistance programs, indicating the presence of significant food insecurity in our community. This report does not estimate prevalence of people experiencing hunger locally. Rather, it focuses on learning more from persons in Brown County who are likely to be among our most food insecure residents: those individuals seeking assistance from local food pantries. We describe our research and its findings in the coming sections.

²⁷ "Pantry Listing." *Brown County Food and Hunger Network*. Brown County Food and Hunger Network, n.d. Web. 9 Nov. 2015. <http://www.browncountyfoodandhungernetwork.com/pantries.html>

²⁸ Brown County UW-Extension: 2009-2014 Annual Usage and Percent Increase in Utilization of Brown County Food and Hunger Network Pantries. http://www.co.brown.wi.us/departments/page_e4e3ec5de47f/?department=68d3c3d55278&subdepartment=f8e83b4ab08c

HOW DOES FOOD INSECURITY IMPACT INDIVIDUALS?

Chronic or long-term food insecurity leads to declines in health of the individuals experiencing it. Adults with food insecurity are more likely to be low income and to experience obesity, high blood pressure, depression, gum disease, and cognitive decline.²⁹ The 2007 National Health Interview Survey, displayed in Table 3, showed that disease rates among the low income population were more than twice as high as for the entire population.³⁰

Table 3: Disease Rates Higher for Low Income Population

Chronic disease	Disease Rate Entire Population	Disease Rate Low Income Population (200% Poverty)	Difference
Diabetes	8%	22%	2.8 x more prevalent
Obesity	26%	59%	2.3 x more prevalent
Hypertension	24%	53%	2.2 x more prevalent
Coronary heart disease	6%	18%	3.0 x more prevalent

Moreover, one study showed food insecure individuals with diabetes have reduced ability to manage their medical conditions and exhibit lower self-confidence in taking care of their own health.³¹ Pregnant women who encounter food insecurity may have reduced intake of nutrients (such as calcium and iron) vital to their own health and the health of their babies. This condition increases the risk of stunted fetal growth, preterm birth, and low birth weight. These risks can pose a problem not only for the developing child, but they can place a financial strain on the parents. On average, the estimated cost of caring for an infant with a very low birth weight for the first year is \$60,000.³²

Food insecurity can harm children as well in terms of physical and psychological health, leading to longer-term delays in overall development. While the poor nutrition of such children poses a concern, research has shown the psychological stress on children could be of greater importance. Parents *and* children in food insecure households face a great deal of stress, leading to mental health impacts in both.³³ Early childhood food insecurity can adversely affect cognitive and socio-emotional development. Recent research found kindergarteners of food insecure households not only entered school with lower assessment scores, but progressed less over the course of the year than their peers.³⁴ In adolescence, children who experience food insecurity are at a heightened risk for mood, anxiety, and behavior disorders. They also have an increased likelihood of substance abuse.³⁵

²⁹ Current and Prospective Scope of Hunger and Food Security in America: A Review of Current Research. Research Triangle Park: RTI International, 2014. RTI International. Web. 30 Nov. 2015. <http://www.rti.org/pubs/full_hunger_report_final_07-24-14.pdf>.

³⁰ National Health Interview Survey, 2007

³¹ Ibid.

³² Ibid.

³³ Nord, Mark. "What Have We Learned from Two Decades of Research on Household Food Security?" Public Health Nutrition 17.1 (2014): 2-4. Web. 11 Nov. 2015. http://journals.cambridge.org/article_S1368980013003091

³⁴ Child Food Insecurity: The Economic Impact on our Nation. Chicago: Feeding America, 2009. No Kid Hungry. Web. 30 Nov. 2015. <https://www.nokidhungry.org/sites/default/files/child-economy-study.pdf>

³⁵ Current and Prospective Scope of Hunger and Food Security in America: A Review of Current Research. Research Triangle Park: RTI International, 2014. RTI International. Web. 30 Nov. 2015. http://www.rti.org/pubs/full_hunger_report_final_07-24-14.pdf

METHODS

In order to improve food security in Brown County, an important first step was to understand the issue locally. While no recent study has been conducted on the countywide prevalence of food insecurity, since 1999, much work has been done to understand the experiences of households utilizing local food pantries who self-identify as food insecure. This report builds on a longitudinal study of the food pantry consumer subset of people in our community who are likely to be among the most food insecure.

PURPOSE OF OUR RESEARCH

Under the leadership of Brown County UW-Extension, with input from the Community Advisory Committee and assistance from UW-Green Bay, this project replicates and expands upon a continuing series of community studies on food insecurity occurring every five years since 1999. Broadly, it investigated the extent of food insecurity among food pantry consumers in the Green Bay area. We learned about the nature of their experiences, the reasons they became food insecure, and possible ways to help them gain security. The following questions guided our research:

- Who is using Green Bay area pantries?
- What food security trends exist among at-risk households?
- Which households experience the highest levels of food insecurity?
- What are the barriers that contribute to people becoming food insecure?
- What strategies are pantry consumers employing to gain better access to food?
- What are the health and nutrition considerations of pantry consumers?

THE BROWN COUNTY SURVEY

Brown County UW-Extension, in partnership with UW-Green Bay Social Work Professional Program and local food pantries, developed a survey tool that incorporated the USDA's survey approach to measuring food insecurity while adding questions to offer a broader view of respondents' experiences locally. A series of standard questions developed by the U.S. Department of Agriculture (USDA) formed the core of our instrument. It is important to note that the Brown County survey is administered only to households utilizing pantries, in contrast to the population samples used by the USDA.

For the past 20 years, the USDA has annually assessed the prevalence of food insecurity among random samples of U.S. households. The eighteen-item core module has been shown to be stable, robust and reliable as measurement tool.³⁶ These items, shown in Appendix 1, ask individuals about how often they ate less than they wanted to eat, how often they went hungry, and the like. One subset of the items addressed the same issues for children in the household. These core USDA items are appropriate and feasible to use in locally designed food-security surveys. Survey participants responded to our own questions (Appendix 2) related to barriers to obtaining enough food, strategies used to obtain food, as well as housing, transportation, and health experiences. Incorporating USDA survey items into our local effort enables our team to collect meaningful and reliable data on food insecurity over time in Brown County.

³⁶ Bickel, Gary, Mark Nord, Cristofer Price, William Hamilton, and John Cook: *Guide to Measuring Household Food Security, Revised 2000*. U.S. Department of Agriculture, Food and Nutrition Service, Alexandria VA. March, 2000. <http://www.fns.usda.gov/sites/default/files/FSGuide.pdf>

HOW WAS THE SURVEY CONDUCTED?

Trained upper-level undergraduate students in the UW-Green Bay Social Work program used the local survey to conduct private interviews with pantry consumers who visited local pantry sites during a four-week period in the fall of 2014. We interviewed participants as they waited to obtain food. They were informed about the research and agreed to participate according to established guidelines of the Institutional Review Board of UW-Green Bay. Participants responded to questions on behalf of their households. Each interview lasted approximately 10-15 minutes. Every attempt was made to interview all of the food pantry consumers who arrived during the time period in which the survey was being conducted. Additionally, pantry consumers who had been surveyed already were asked not to participate for a second time. The study did not provide financial incentives for those who participated. Volunteers provided language translation during the times when greater numbers of non-English speaking populations were expected at certain food pantry locations, but not at all times. This limited availability of translation services may have led to an under-representation of non-English speaking consumers. Appendix 3 shows the respondent distribution by pantry location, along with comparisons to the 2009 study.

HOW WERE DATA ANALYZED?

The UW-Green Bay Center for Public Affairs team analyzed the data in late 2015. First, preparation of frequency histograms enabled us to examine the distribution of each item and to look for possible miscoded responses to selected items, which were then deleted item by item. One area of significant cross-checking involved the presence of children in the household. Not only were respondents asked at the outset of the interview whether and how many children were present in the home, but later in the survey they were asked about the hunger of children present in the household. We were able to verify the consistency of their responses and ensure that they categorized them appropriately. In this way, the dataset was cleaned and verified. A number of respondents were unable to complete the entire survey. Their partially completed surveys were retained in the analysis with missing values for items that had appeared later in the survey. Some items were recoded into a smaller and more meaningful set of categories for use in cross-tabulations.

A food security category was assigned to each respondent according to the detailed guidelines provided by the USDA.³⁷ On the survey, all respondents were asked questions about whether adults in the household had experienced certain challenges in obtaining sufficient food to eat over the past month. Response options for some items included “often,” “sometimes,” “never,” or “don’t know.” We recoded all of these items into a dichotomous value of Affirmative = 1 and Negative = 0. A score of “1” was assigned to that item when the respondent answered affirmatively, i.e., “often” or “sometimes,” and a “0” was assigned for “never” and “don’t know.” Response options for several other items included “yes,” “no,” or “don’t know.” A score of “1” was assigned to “yes” responses while all other responses were assigned a “0.” Likewise, households with children present were asked an additional series of similar items reflecting the kinds of challenges that the *children* in the household had experienced relative to having enough food to eat in the past month. These items were also coded as “1” when the respondent answered in the affirmative and “0” in the negative.

³⁷ Coleman-Jensen, Alisha, Christian Gregory, and Anita Singh. *Household Food Security in the United States in 2013*, ERR-173, U.S. Department of Agriculture, Economic Research Service, September 2014.

To obtain the overall score indicating the severity of food security of adults and children in the household, we summed each set of items, respectively. This resulted in a summed ordinal-level scale score ranging from 0 to 9 for adult-only households and 0 to 7 for households with children. Finally, we assigned the USDA food security category labels to given ranges of the score according to USDA guidelines.

Our analysis then provided simple frequencies and cross-tabulations showing descriptive data related to the research questions presented earlier. We calculated the frequencies for demographic survey items (e.g., age, gender, racial or ethnic categories) using the entire sample of respondents to analyze use of Green Bay area pantries. Comparing 2009 survey responses by the entire sample to the current survey enabled us to analyze food security trends that may exist among at-risk households. We selected respondents who were classified as “food insecure” and again tabulated demographic variables in order to examine characteristics of those individuals who experience the highest levels of food insecurity. Simple frequency analyses of items related to barriers, strategies, and nutritional considerations that food pantry consumers experience rounded out the analysis for the survey.

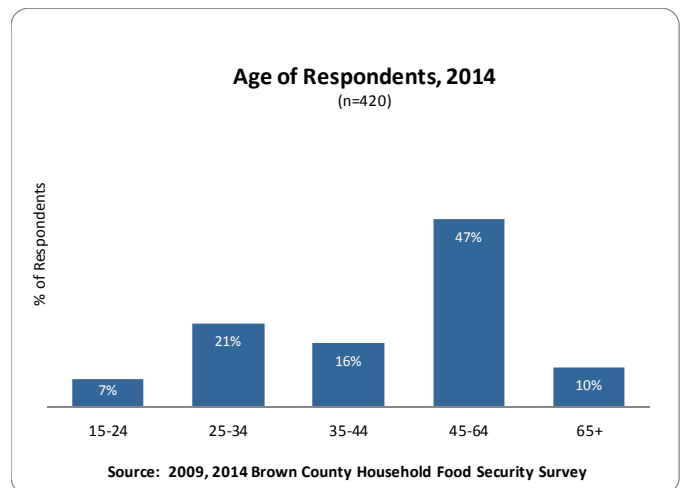


CHARACTERISTICS OF PANTRY CONSUMERS AND THEIR HOUSEHOLDS

We describe our survey participants first: who’s using local pantries? Next, the section that follows explores the level of food insecurity that they experience, followed by data describing their common challenges and things that would help them be more food secure. Four-hundred twenty households responded to all or a portion of the survey. A total of 306 households completed the survey in its entirety. The following statements describe the demographic characteristics of respondents in 2014:

- Forty-seven percent (199 households) had children present in the home – and almost half of these households had children under 5 years of age.
- Eleven percent of respondents were veterans (44 households).
- Two-thirds (67%) of responding consumers were female. This gender split compares to 2009 (69% female).
- Almost half of respondents (47%) were between the ages of 45-64. Smaller proportions of respondents came from younger (age 15-24, 7%) and older households (age 65+, 9%) (See Figure 3). This age distribution is similar to 2009, however different age categories were used in the 2009 survey, preventing direct comparison.³⁸
- Finally, almost two-thirds (64%) of respondents were white. Table 4 shows the sample distribution by race.

Figure 3



³⁸ 2009 age distribution of the sample: Under age 30 (20%), ages 31 to 50 (54%), ages 51 to 70 (24%), over age 71 (2%).

Table 4: Race and Ethnicity of Respondents, 2009 and 2014

	2009 (n=713)	2014 (n=420)
Native American	8.6%	9.2%
Asian or Asian American	0.3%	0.3%
Black or African American	7.7%	10.3%
Native Hawaiian or other Pacific Islander	0.4%	0.3%
White	60.3%	64.6%
Hispanic or Latino	20.5%	10%
Hmong	3.9%	0.3%
Russian	0.4%	0.8%
Somalian	0.1%	0%
Other	2.7%	2.7%

Table 4 shows that, following white respondents, the largest subgroups included African American (10%), Hispanic (10%), and Native American (9%). There were only two Asian respondents. The lower participation by Hispanic consumers in 2014 may be due to the limited availability of funds to hire translators. In 2014, translators were available during peak interview times on a volunteer basis, likely limiting participation by non-English speaking households. We are not able to determine whether the composition of our sample reflects the actual composition of pantry consumers.

EMPLOYMENT AND INCOME SOURCES

Figure 4 shows that in 2014, 38% of pantry consumers were currently employed, 22% were unemployed and not looking for work, 18% were unemployed but were seeking a job, and 22% received income from another source. The proportion of employed respondents has declined steadily since 2009, when 54% of individuals were employed and 2004, when 59% reported being employed. In the next section we examine whether being employed is associated with food security. In 2014, 22% of employed respondents worked two or more jobs, the same rate as reported in 2009, and up from 17% in 2004.

Figure 4

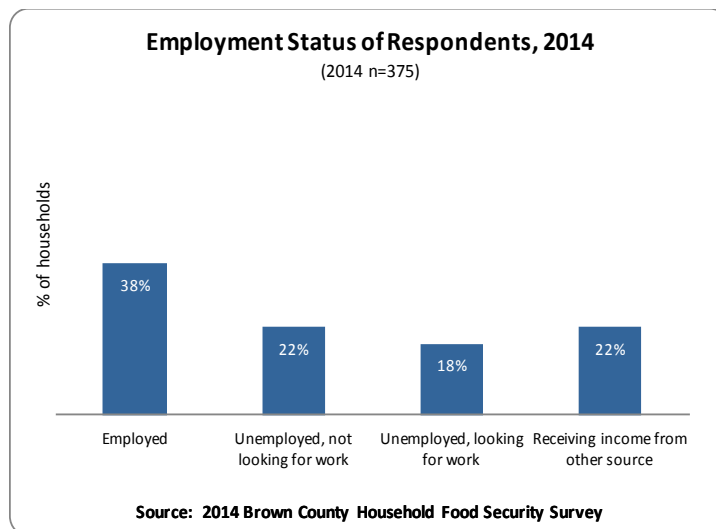
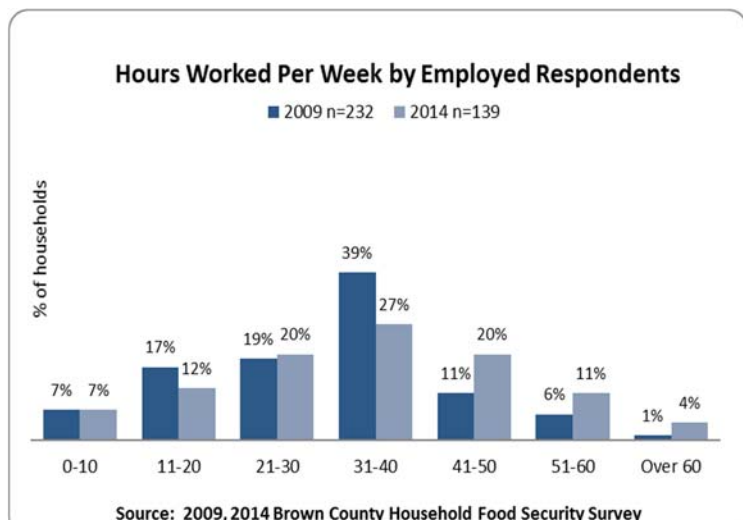


Figure 5



Employed respondents worked more hours per week in 2014 than in previous years. The portion of employed persons working more than 40 hours a week has doubled since 2009. Figure 5 shows that in 2014, the combined total of those working 41 or more hours a week was 35% (20%, 11%, 4%). This was much higher than the rate found in 2009, when the combined total of those working 41 or more hours a week was 18% (11%, 6%, 1%).

Figure 6

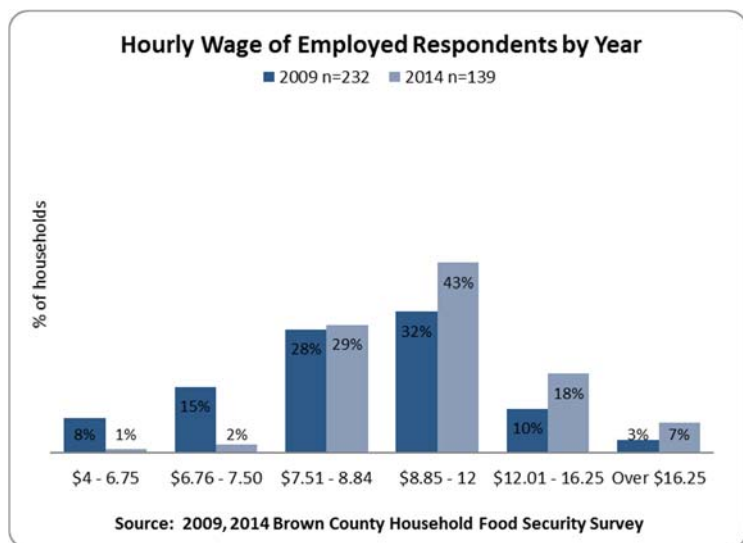


Figure 6 shows that in 2014, employed pantry consumers earned higher hourly wages than employed consumers did in 2009. In 2014, combining the top two hourly wage rates, 25% reported earnings above \$12 per hour, up from 13% in 2009. In 2014, only 3% of respondents earned minimum wages or less, \$4-7.50/hour (the two lowest wage categories) compared to 23% in 2009.³⁹

³⁹ In 2014, the minimum wage was \$7.25 per hour. "Minimum Wage Laws in the States." *United States Department of Labor*. United States Department of Labor, 1 Jan. 2015. Web. 11 Nov. 2015. <http://www.dol.gov/whd/minwage/america.htm#Wisconsin>.

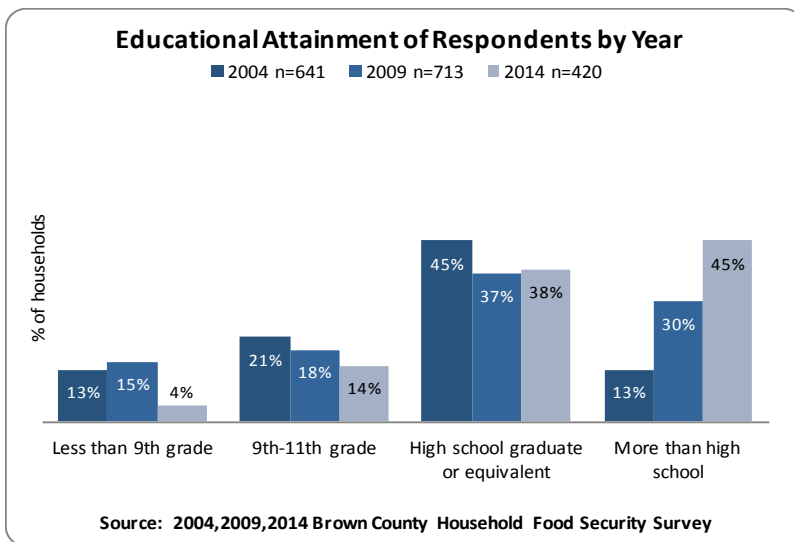
Table 5 shows that survey respondents reported multiple sources of income for their households (for any adult in the household who received that income).⁴⁰ In 2014, 55% of pantry households received income from employment compared to 53% in 2009. (Note: earlier we reported the employment status of individual respondents, not household income from employment). Thirty-six percent of households received income from Disability in 2014 compared to only 13% in 2009. Fewer households received unemployment income in 2014 (10%) than in 2009, when 19% reported this source. Household income reflects the older age of the 2014 sample, with increases in pension and Social Security income sources.

Table 5: Sources of Household Income

	2009 (n=713)	2014 (n=420)
Employment	53%	55%
Pension/Retirement	6%	11%
Unemployment	19%	10%
Disability	13%	36%
Social Security	28%	34%
Child Support	12%	12%
W2 Program	5%	8%
SSI	22%	23%
Earned Income Tax Credit	8%	10%
Housing Assistance	16%	20%
Other Support	7%	14%

EDUCATIONAL ATTAINMENT

Figure 7



A surprisingly large proportion of consumers with high educational levels was observed in 2014, shown in Figure 7. In 2014, 38% of pantry consumers reported being a high school graduate or receiving an equivalent, similar to rates seen in 2009. However, in 2014, 45% of respondents received education beyond high school, compared to only 30% in 2009 and 13% in 2004. At the other end of the education spectrum, in 2014, adding the two lowest educational attainment categories, a combined 18% of respondents had attained less than high school degree compared to the combined total of 33% in 2009.

⁴⁰ This survey question asked about income source for “you or anyone else in your household.”

SUMMARY OF RESPONDENT CHARACTERISTICS

Table 6: Comparison of 2009 and 2014 Respondent Characteristics

	2009 (n=713)	2014 (n=420)
Female	69%	67%
No Children	20%	53%
Race/Ethnicity - Minority	42%	35%
Education Beyond High School	30%	45%
Veteran	12%	12%
FoodShare Wisconsin	50%	61%
Disability Household Income	13%	36%
Currently Employed	54%	38%
Unemployment Income	19%	10%
Two or More Jobs (employed only)	22%	22%
Food from >1 pantry	41%	50%

Table 6 compares some of the key behavioral and demographic characteristics of the 2009 and 2014 samples. Compared to 2009, the 2014 sample contained many more adult-only households (with no children), a lower proportion of non-white individuals, higher percent of persons with education beyond high school, a higher percent of people with FoodShare Wisconsin resources, higher proportion of households with income from Disability, a lower rate of employment (but fewer with unemployment benefits), and relatively higher percent of individuals getting food from two or more pantries.

FOOD INSECURITY AMONG PANTRY CONSUMERS

Now we turn to examining the food security levels among our responding households. As illustrated in Figure 8, the percentage of pantry consumers who reported food insecurity (broad category that includes respondents classified as having 'very low' or 'low' food security) has fluctuated since the first survey was conducted in 1999, peaking at 89% in 2009. In 2014, the rate of food insecurity reported decreased by half to 45% of pantry consumers. This is a 44 percentage point drop in the rate of food insecurity found among consumers at local pantries since 2009.

There are many possible reasons to explain this reduction, including expanded outreach, increases in benefits (e.g., FoodShare), and additional programming for food insecure persons. There is no doubt that a combination of factors has led to the improved food security situation at pantries. The local community has made many positive changes to expand access to food locally. Improved food security may have occurred because the type of person likely to visit a pantry to obtain food has changed. As we have just discussed, the make-up of our responding consumers has changed, with many more households not having children, having more education, and having other sources of income. However, we remind the reader that this survey took place at local food pantries and was not a representative sample of local residents.

Figure 8

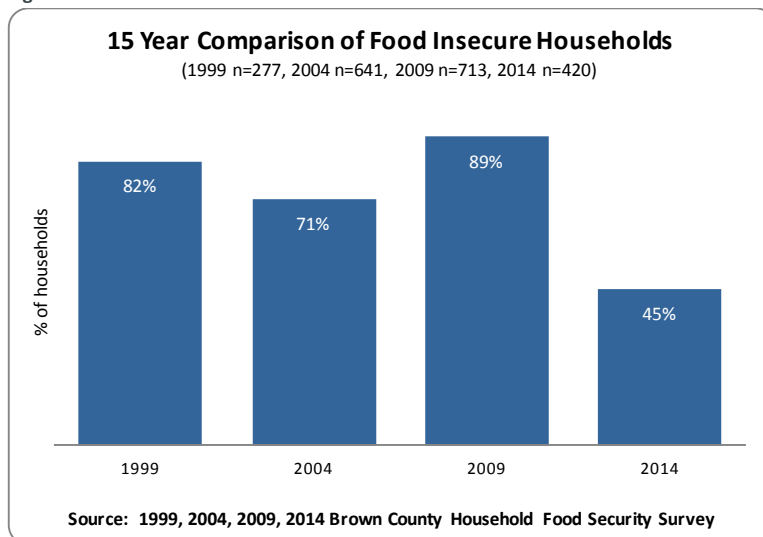
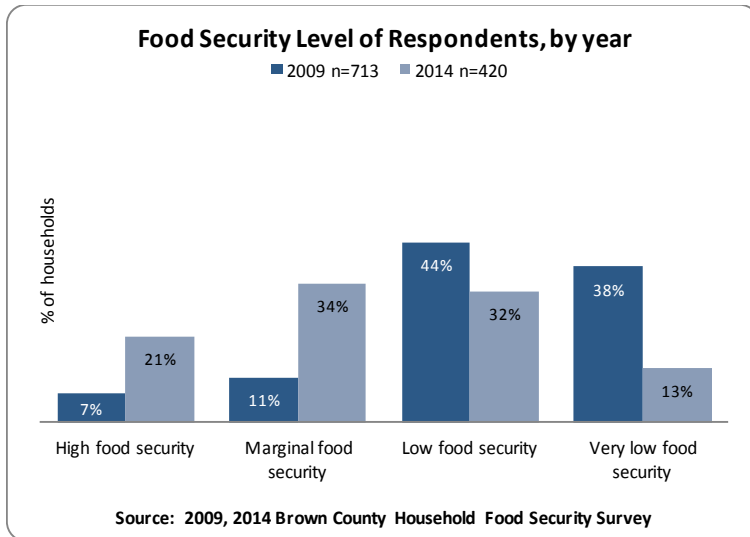


Figure 9



Looking more closely at the four specific levels of food security described earlier (see Table 1), Figure 9 shows that 21% of pantry consumers reported high food security in 2014 compared to only 7% in 2009. Marginal food security was reported by 34% in 2014 compared to 11% in 2009. It is important to note the rates of low and very low food security among pantry consumers have decreased considerably since 2009. The portion of respondents with *low* food security dropped from 44% to 32%, and those with *very low* food security decreased from 38 to 13% between 2009 and 2014.

Figure 10

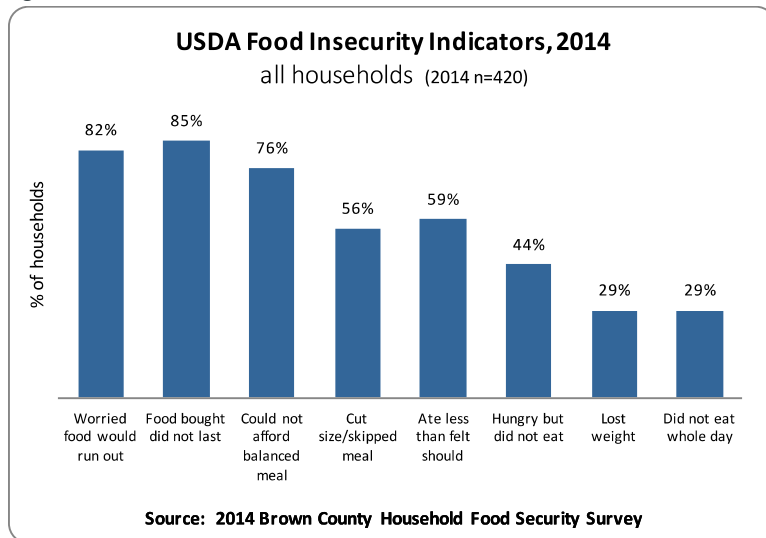


Figure 10 shows the specific responses to the eight items that make up the USDA measure of food security. Individuals that answered “yes” to three or more of these items were identified as food insecure. Each question refers to the situation occurring within the last 12 months. Among all respondents to the 2014 survey, the most widely-cited indicator of food insecurity was the following: “the food we bought just didn’t last and we didn’t have money to get more,” which was identified by 85% of respondents. Eighty-two percent of respondents stated “we worried whether our food would run out before we got money to buy more,” and three quarters said, “we couldn’t afford to eat

balanced meals.” Fifty-nine percent of respondents answered “yes” to “did you ever eat less than you felt you should because there wasn’t enough money for food?” Additionally, over half of respondents (56%) had cut the size of meals or skipped them altogether because there wasn’t enough money for food.

Figure 11

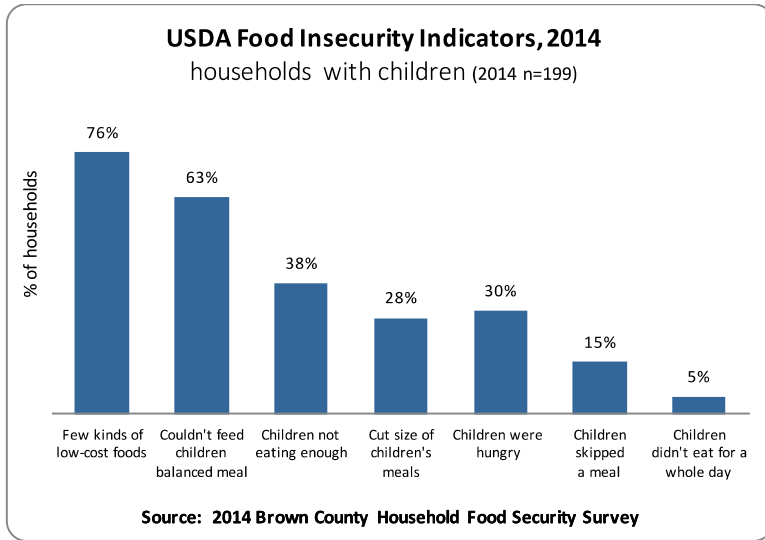


Figure 11 shows the responses to USDA food security questions for households with children. Respondents were classified as food insecure when they replied in the affirmative to two or more of these items occurring within the last 12 months. As shown, three quarters (76%) of households with children relied on a few kinds of low cost foods to feed their children because they were running out of money to buy food. Sixty-three percent said they could not afford to feed children a balanced meal. Thirty-eight percent indicated that children were not eating enough because the adults could not afford food, and 30% indicated their children were hungry but they could not afford to buy more food.

WHAT ARE THE CHARACTERISTICS OF FOOD INSECURE RESPONDENTS?

In this section we focus on the relationship between household food security and a variety of demographic and behavioral characteristics, including gender, presence of children, receipt of benefits, age, employment status, race/ethnicity, and sources of income.

Figure12

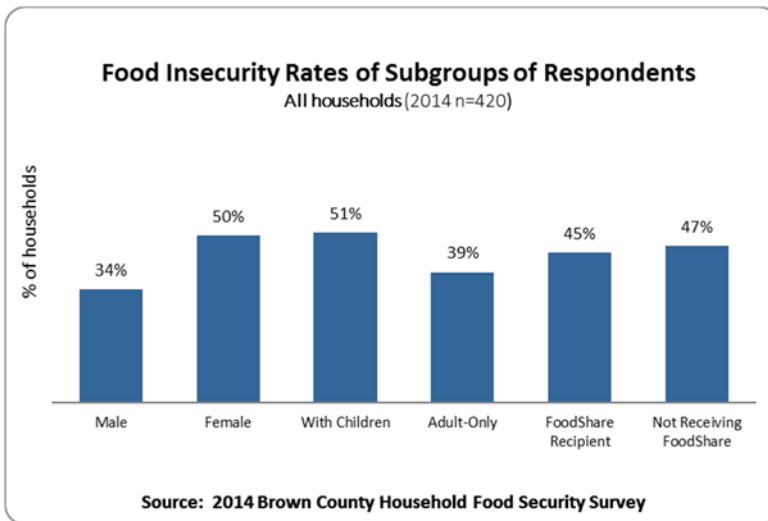


Figure 12 shows the rate of food insecurity for key subgroups of respondents. As shown, 50% of females reported food insecurity compared to about one-third of males. About half of households with children were food insecure compared to about one-third of adult-only households. Any degree of food insecurity for children means they are not receiving adequate nutrition, which could lead to delayed growth and development as discussed earlier. Interestingly, 45% of FoodShare Wisconsin recipients were food insecure compared to 47% of those without FoodShare benefits.

Figure 13

Figure 13 shows food security status by age. More than half of respondents age 15 to 24 experienced food insecurity (more often, these are households with children). Similar rates of food insecurity was found among the middle two age categories: 48% of adults age 25-44 and 47% of adults age 45-64 reported food insecurity. Individuals ages 65 and up were most secure: 18% indicated food insecurity.

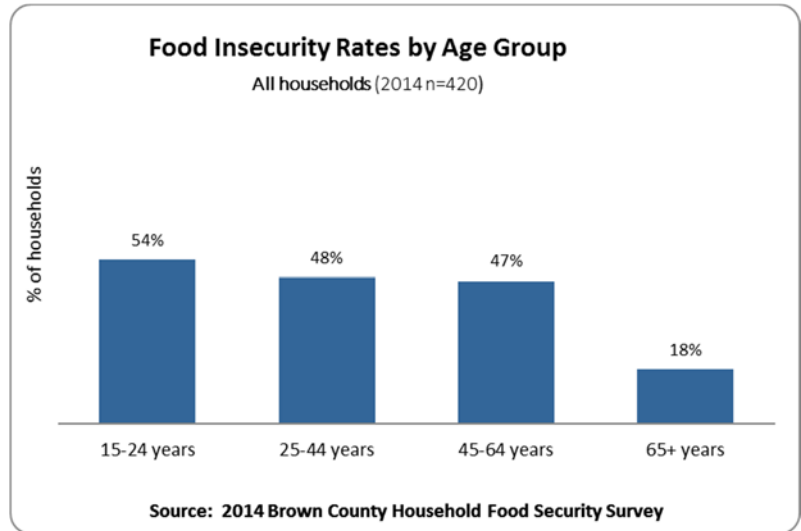
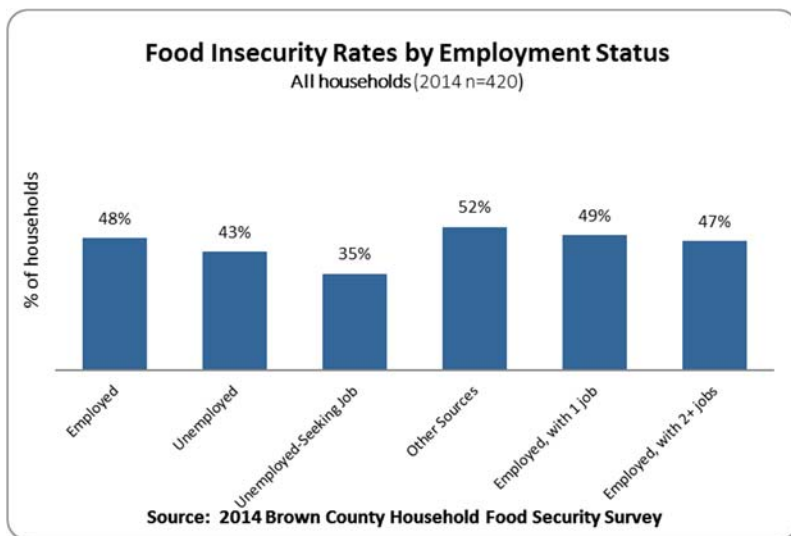
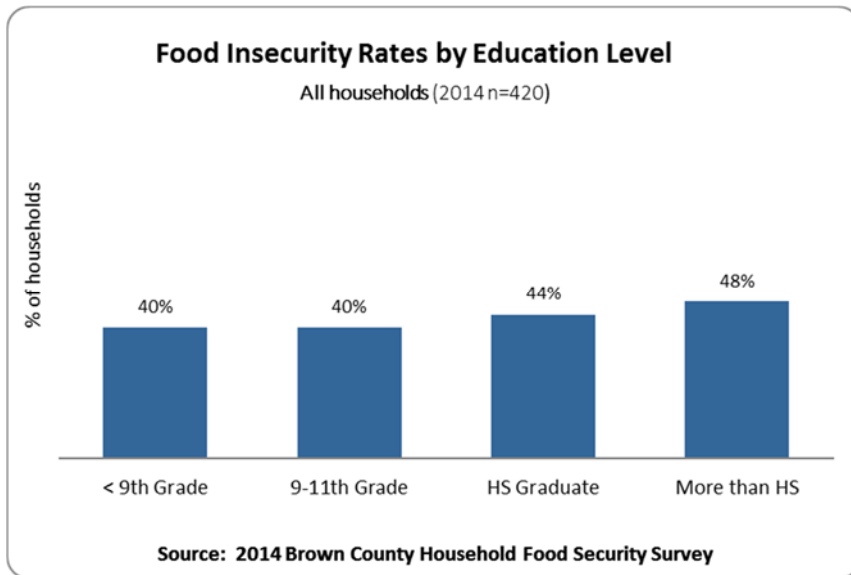


Figure 14



Another interesting factor in food insecurity is employment status. Figure 14 shows that about half (48%) of employed respondents were food insecure. Forty-nine percent of employed respondents with only one job were food insecure, compared to 47% of individuals with two or more jobs. It appears that having a job, even having two jobs, does not correlate with better food security. Employed respondents had higher rates of food insecurity than the unemployed: of those not seeking a job, 43% were food insecure, while 35% of unemployed-currently job-seeking were food insecure. Fifty-two percent of persons who received some other primary source of income reported food insecurity.

Figure 15



What about the food insecurity rates for people of different educational attainment levels? Figure 15 shows a surprising finding: the most educated respondents reported the highest rates of food insecurity. Forty-eight percent of persons that had pursued some higher education (gone beyond high school) and 44% of high school graduates reported food insecurity, compared to only 40% of those who had not completed high school.

Figure 16

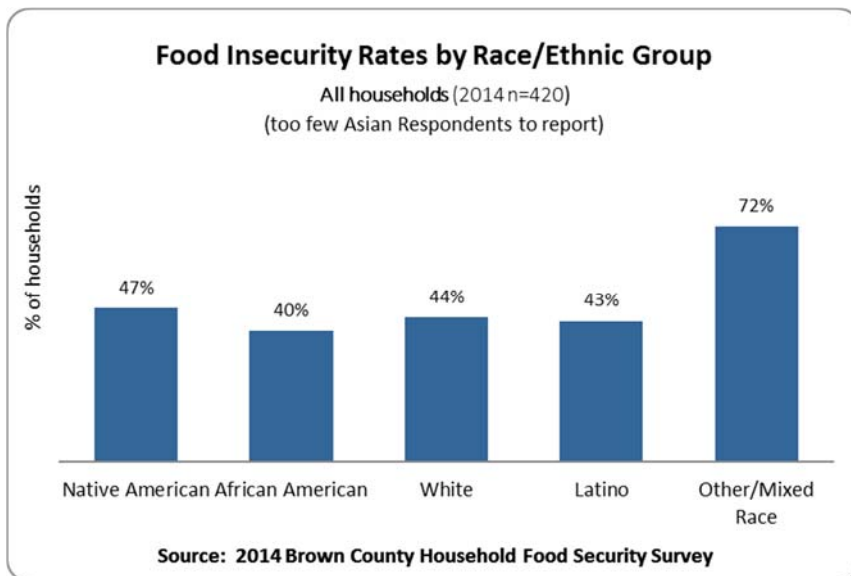


Figure 16 illustrates that there is not a major difference in the rate of food insecurity by race or ethnic group. Forty-seven percent of Native American respondents reported food insecurity, followed by 44% of white respondents, 43% of Latino respondents, and 40% of African American respondents. However, 72% of persons from other or mixed race status reported food insecurity. We note that only two individuals of Asian heritage completed an interview, and interpreters were not available to interview Latino individuals, although 37 participated in an interview.

WHAT ARE THE BARRIERS TO FOOD SECURITY?

Individuals that we interviewed were given a list of possible reasons “why people don’t always have enough to eat.” Figure 17 shows that since 2004, lack of money has consistently been a major reason for not having enough to eat: 95% reported lack of money in 2014, a similar rate to previous years’ findings. Thirty-three percent of households faced difficulty getting to the store, an increase over 22% found in 2009 but similar to the 2004 findings of 32%. (The next section will explore specific reasons why these persons reported having a difficult time getting to the store). The percent of respondents with lack of time as a barrier grew to 25% in 2014, up from 15% in 2009. Twenty-eight percent of households with children reported a lack of time, compared to 22% of adult-only households. This perhaps relates to the increase in the number of households where adults work multiple jobs and more hours. Just over 10% of persons reported not knowing how to prepare food, while 7% of households reported not having a working refrigerator or no working stove (a surprising hurdle in the Brown County community).

Figure 17

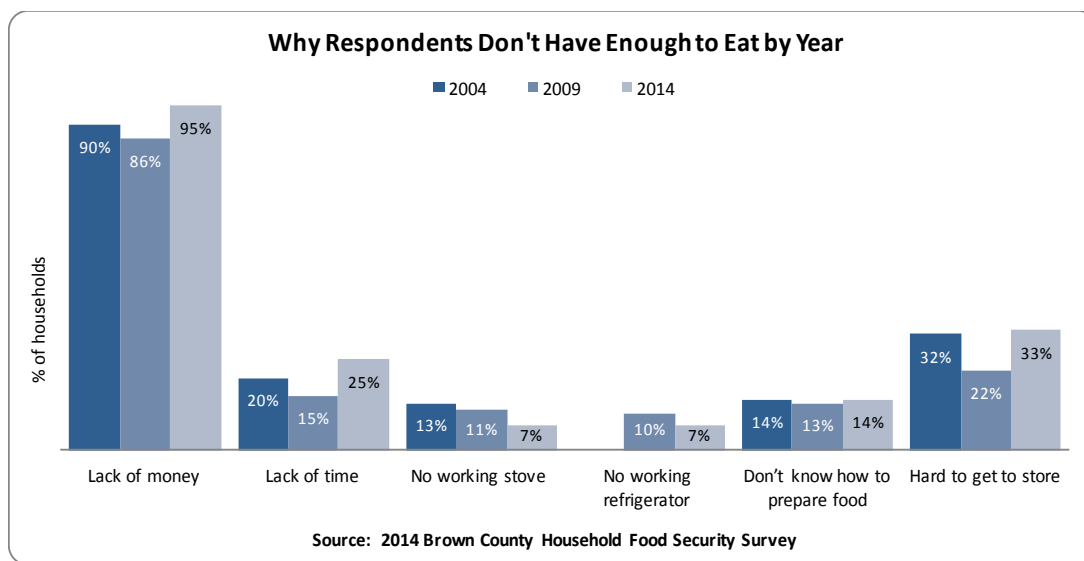
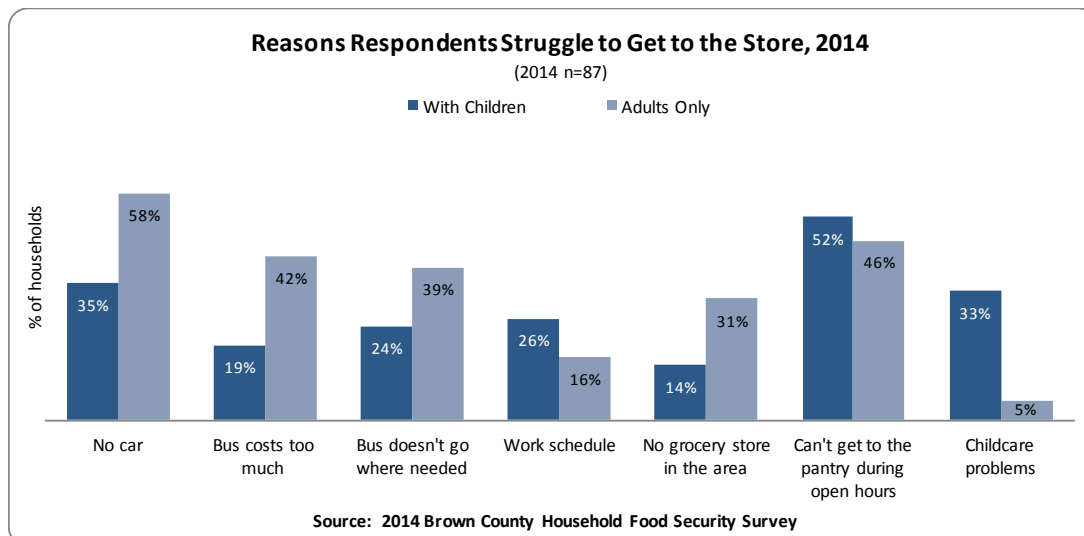


Figure 18 illustrates the differences between adult-only households and those with children who have trouble getting to a grocery store. Inability to get to a food pantry during open hours impacted approximately half of each group. However, the

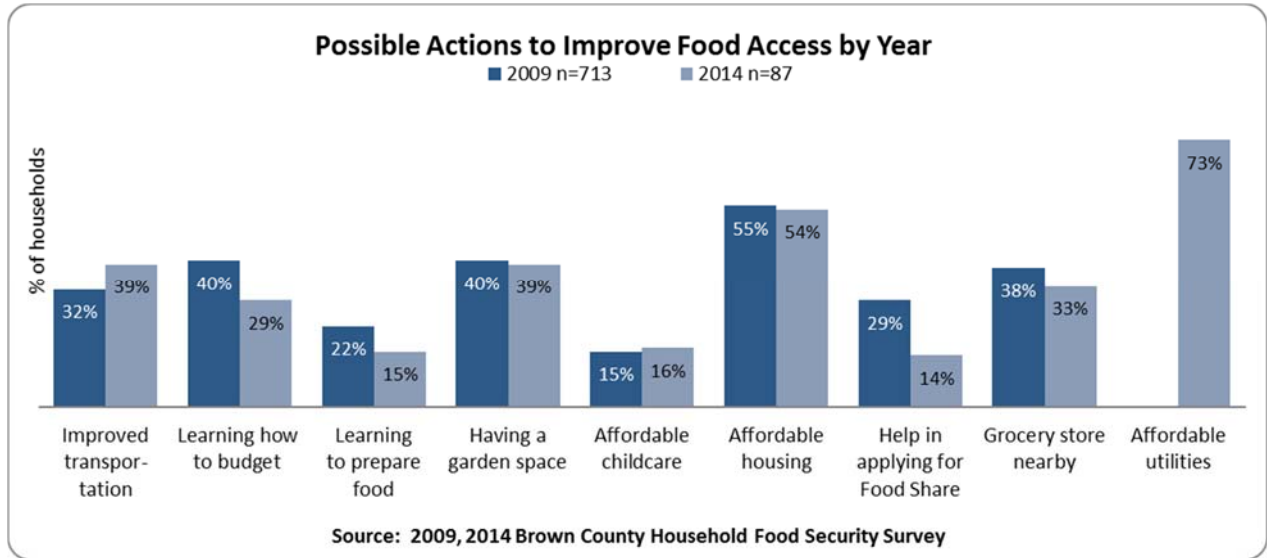
Figure 18



top barriers in getting to a grocery store for adult-only households concerned transportation challenges (58% had no car, 42% cited bus costs, and 39% said the bus did not go where needed, and 31% had no grocery store closeby. Aside from pantry hours, one-third of households with children had no access to a car and another one-third reported problems with childcare as barriers that prevented them from getting to a store. Twenty-six percent of individuals with children cited work schedule issues.

For the past two surveys, we have asked pantry consumers whether a series of potential actions by the community might help them to overcome the barriers they faced, with the results shown in Figure 19. Typically, the largest expenses households face are rent and utilities, and this proved true locally.

Figure 19



In 2014, three-fourths of respondents (73%) reported that having more affordable utilities would help them access food more readily (this question was not asked in prior years). Comparing 2009 and 2014, improving the affordability of housing was a highly rated course of action (housing has been the most frequent response since the survey was begun in 1999). Improved transportation was the only action that received increased interest in 2014 compared to 2009: 39% of 2014 respondents reported this interest compared to only 32% in 2009. All other potential actions saw reduced interest in 2014 compared to 2009. There was a good deal less interest in learning how to budget, learning to prepare food, help in applying for FoodShare, and having a grocery store nearby. It appears that access to grocery stores has improved in the community: since 2004, the proportion of respondents that indicated poor access to a grocery store has declined by 4-5 percentage points each survey year.

Table 7: Top Items That Would Improve Food Access by Household Type, 2014

	Households with children (n=199)	Adult-only households (n=221)
Improved transportation	36%	41%
Learning how to budget	36%	22%
Having a garden space	42%	36%
Affordable housing	63%	45%
Grocery store nearby	29%	38%
Affordable utilities	82%	64%

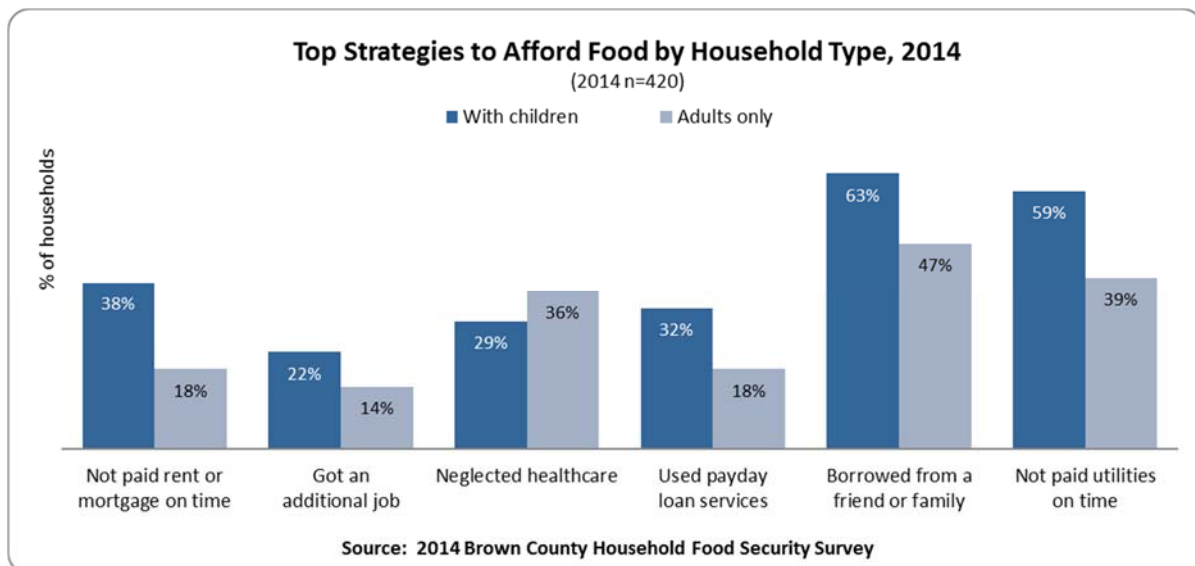
Table 7 shows that households with children reported much greater need for affordable utilities (82%), affordable housing (63%), gardening (42%), and budgeting (36%) compared to adult-only households. On the other hand, the proportion of adult-only households exceeded households with children in needing improved transportation (41%) and having a grocery store nearby (38%).

HOW ARE PANTRY CONSUMERS ATTEMPTING TO GAIN BETTER ACCESS TO FOOD?

Food insecure households employ a variety of strategies to overcome challenges obtaining enough to eat. Overall, the strategies relate to shifting spending patterns and to finding food from other sources. We asked food pantry consumers about the strategies their household utilized in order to have enough money for food in the past 12 months.

Figure 20 shows the frequency that consumers utilized various financial tactics to afford food in 2014, comparing households with children to adult-only households. Borrowing money from a friend or family member was the most frequent strategy for both subgroups, but especially for households with children (63%, compared to only 47% of adult-only households). Of households with children, 59% reported not having paid utility bills on time as a strategy to afford food costs compared to 39% of adult households. Thirty-eight percent of households with children had deferred rent or mortgage payments, compared to 18% of adult-only households. Finally, 32% of households with children had used payday loan services in order to afford food compared to 18% of adult-only households.

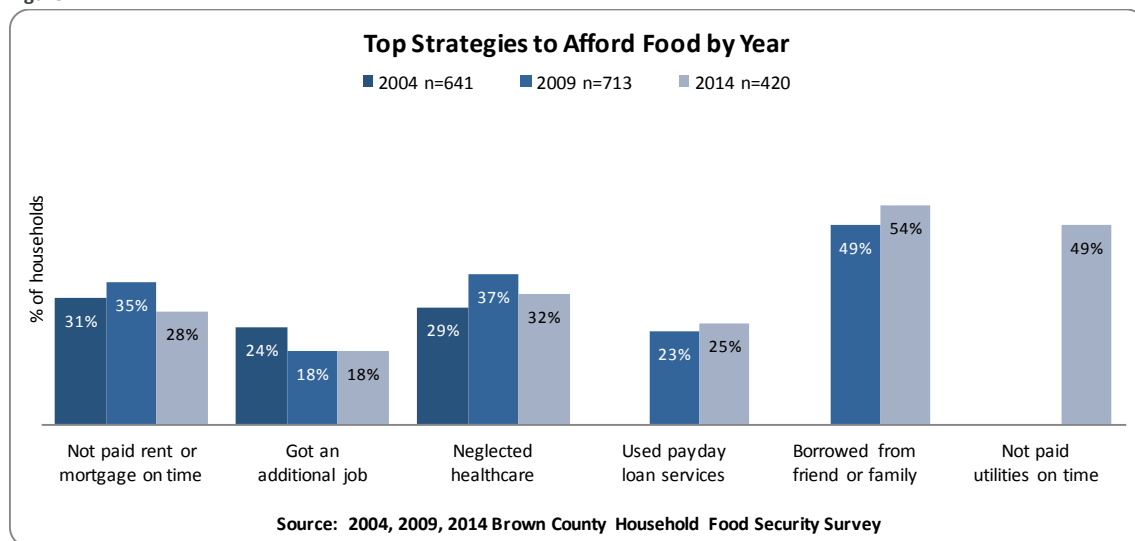
Figure 20



Adult-only households showed one noticeable difference: 36% of adult households reported neglecting health care costs in order to afford food compared to 29% of households with children. As noted previously in the report’s introduction, disease rates of low income individuals are higher than middle- or upper- income individuals. Perhaps this is at least in part due to the fact that at-risk families face the difficult decision of whether to forego spending money on medical care in order to purchase other basic necessities, including food.

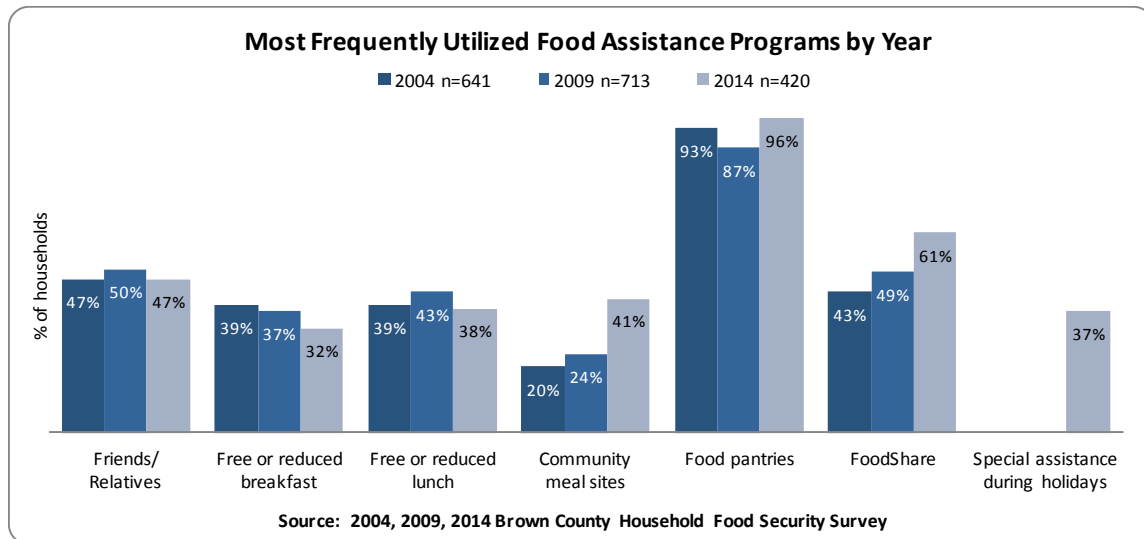
Figure 21 compares the same information over time and shows that the strategies to afford food have not changed dramatically. Borrowing money from a friend or family member was reported by about half of all households in 2009 and 2014, but had grown by five percentage points during that time span (this option was not presented in the 2004 survey). In 2014, the second most-used strategy (by half of all households) was to delay payment of utility bills (added as a response option in 2014). In 2014, about one-third of respondents indicated that they had neglected healthcare needs so that they could purchase food and 28% had not paid rent or mortgage bills on time. One in four had utilized “payday” lenders, and about one in five respondents reported getting an additional job to pay for food in 2014.

Figure 21



A second major approach to cope with food insecurity is to obtain food from a public food assistance program. Respondents were asked whether they had utilized any other assistance to obtain food in the past 12 months. Figure 22 breaks down the use of food assistance programs by respondents. Naturally, since the survey was conducted in food pantries, we would expect that 100% would report using pantries. The actual percentage was 96%, since the question asked about the sources used for food assistance in the “last 12 months.” If this was the consumer’s first pantry visit, he or she would have answered “no” to having utilized the pantry as a source in the past 12 months. The FoodShare Wisconsin program was the second most-utilized source of food assistance, with 61% of pantry consumers receiving benefits in 2014 compared to 49% in 2009 and 43% in 2004. This increase in enrollment has occurred county-wide (shown earlier in Figure 1), contrary to the national trend toward decreased enrollment. The local increase can be explained in-part by development of an online application process promoted in Brown County and by other efforts to enroll food pantry patrons in FoodShare. Figure 22 also shows relatively consistent rates of use of other assistance sources to obtain food, with two exceptions. In 2014, 38% of respondents used community meal sites compared to only 24% in 2009.

Figure 22



Additional questions were asked about number of pantries utilized and frequency of use. We then examined how pantry use correlated with food security.

- Half (50%) reported having gone to more than one pantry, and of these consumers, most (75%) had visited two or three pantries. Those who visited two or more pantries were more likely to be food insecure (47%) than those who had visited only one pantry (43%).
- While 22% of consumers had first visited a food pantry less than a year ago, almost half (46%) of respondents had visited a food pantry for the first time more than two years ago. Of these long-term pantry consumers, 45% were food insecure, compared to 49% of individuals who first visited a pantry less than a year ago.
- Fifty-five percent of consumers had visited a pantry one to three times a month—and 41% of these consumers reported being food insecure. Forty percent of consumers visited pantries four or more times a month, and of these, half (50%) were classified as food insecure.

Table 8: Wisconsin FoodShare Status of Pantry Consumers, 2009-2014

	2009	2014
Don't know about FoodShare	11%	19%
Don't think I'm eligible	43%	47%
Found not eligible	32%	38%
Don't know how to apply	25%	28%
Application too difficult	19%	15%

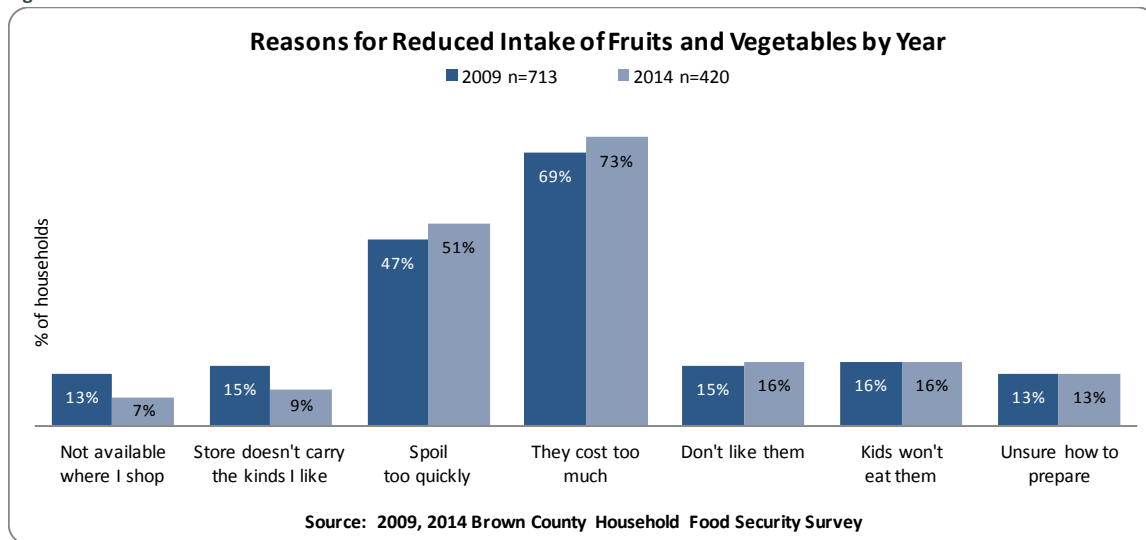
Table 8 compares the reasons that some consumers had not enrolled in the FoodShare Wisconsin program for 2009 and 2014. Respondents could indicate that any of the reasons listed in Table 8 held true for them. In 2014, a

surprising one in five households interviewed at local food pantries reported not knowing about FoodShare, up from 11% in 2009. About half of respondents did not think they were eligible (47% in 2014), and thirty eight percent reported having been determined not eligible, both slightly higher than the 2009 results. Another one-fourth of 2014 respondents reported not knowing how to apply for the program, up slightly since 2009. Finally, 15% of 2014 consumers found the application process too difficult, improved from 19% in 2009. In sum, a significant portion of food pantry consumers were likely to be or had already been found ineligible for FoodShare, while another significant portion of consumers was not using an important benefit program due to access issues (don't know about it, don't know how to apply, and application too difficult).

WHAT IS THE HEALTH AND NUTRITION OF PANTRY CONSUMERS?

Our interviewers asked individuals about intake of fruits and vegetables, often a concern for individuals who experience food insecurity. Fruit and vegetable consumption is an indicator of overall diet quality and can serve as a valuable tool in suggesting risk for health conditions such as obesity, heart disease and diabetes. Sixty-six percent of pantry consumers that we interviewed felt that they should eat more fruits and vegetables (down from 73% in 2009). Figure 23 displays the reasons for inadequate intake of fruits and vegetables. Rapid spoilage and high cost were the most common reasons cited in 2009, both increasing by four-five percentage points since 2009. Other reasons related to eating preferences and an inability to prepare them, with similar rates seen in 2009. Access to fresh vegetables at nearby grocery stores had improved for 2014 pantry respondents compared to 2009.

Figure 23



Having a health condition with special dietary restrictions can make it difficult to obtain food to meet one's health needs. Over half (55%) of consumers with health conditions indicated that finding the suitable food was very difficult or somewhat difficult at a pantry. As discussed earlier, individuals with low incomes are twice as likely than the general population to experience certain chronic conditions.

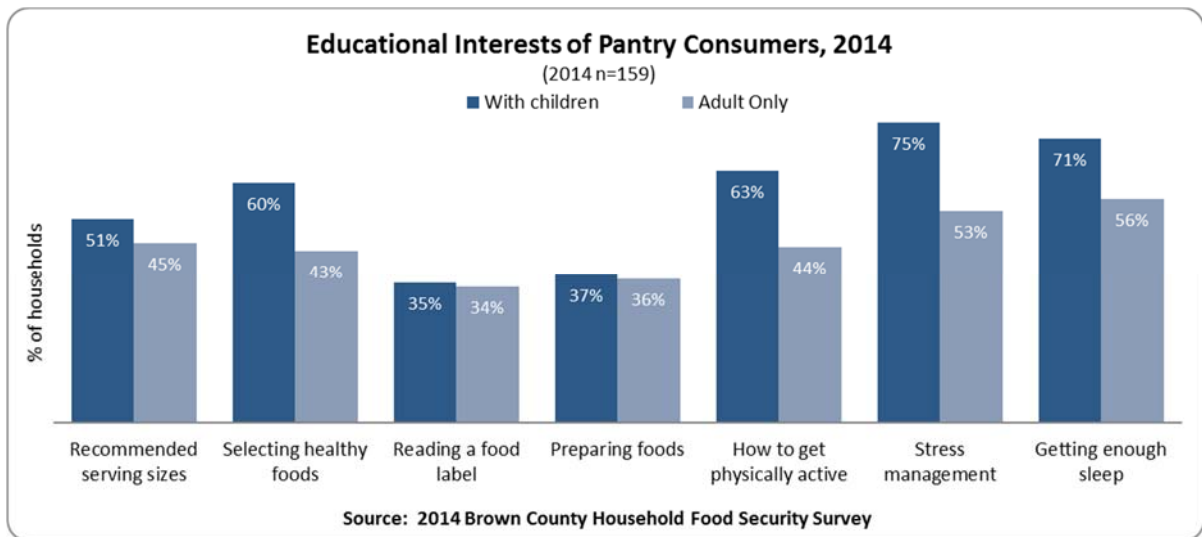
Table 9: Respondents with Special Dietary Needs Due to Health Condition

	2009 (n=713)	2014 (n=420)
Diabetes	25%	22%
Heart disease	15%	11%
High blood pressure	35%	32%
Digestive problems (gluten free, lactose free, fiber)	-	17%
Concerned about own weight	45%	41%
Concerned about child's weight (for those with children n=143)		18%

Large numbers of pantry consumers whom we surveyed reported chronic health conditions. Table 9 shows the health conditions reported by interviewees in 2009 and 2014. In 2014, 22% reported having been diagnosed with diabetes, 11% heart disease, 32% high blood pressure, and 17% digestive problems. In 2014, 41% of pantry consumers were concerned about their own weight and 18% of respondents from households with children were concerned about their child's weight.

In 2014, follow-up questions asked respondents with weight concerns about educational approaches that could help them to achieve or maintain a healthy weight, shown in Figure 24. There are major differences in response based on the type of household. In contrast to adult-only households, households with children expressed more interest in educational topics almost across the board. Among households with children where weight concerns were reported, the greatest interest was shown for educational programs that addressed managing stress, getting enough sleep, increasing physical activity, selecting healthy foods, and learning about recommended serving sizes. Adult-only households where weight was a concern were also interested in topics related to sleep, stress management, recommended serving sizes, getting active, and selection of healthy foods. A steady 36-37% of these respondents expressed interest in learning how to prepare foods, while one-third of both groups of respondents expressed interest in learning how to read a food label.

Figure 24



CONCLUSION

This longitudinal research enables the Brown County community to understand the dynamics of how families in the area attempt to avoid hunger. A major finding in 2014 was that the level of severe food insecurity among pantry consumers had lessened since 2009 at the same time that the USDA reported increased prevalence of food insecurity nationally. It is important to note that the results of this study do not indicate that the community's food insecurity rates have declined (an unlikely occurrence, since the local poverty rate has increased), just that consumers visiting food pantries seem to have greater food security than five years ago.

We believe that there are multiple reasons for this improved situation among pantry consumers, while acknowledging that some of the improvement might be due to variation in sampling (e.g., the days that students interviewed persons at pantries or fewer translation options). First, a variety of initiatives to expand access to food sources have occurred since 2009 for those with low incomes: many eligible individuals receive FoodShare Wisconsin (and this program can now be used at farmers' markets), more children receive free and reduced lunches, more households utilize food pantries, and more adults report receiving meals at community sites. Our research indicates the expanded and increasingly accepted role being played by local food pantries. While the need for help is great, the role of food supplement programs is growing and widespread. At the same time, the make-up of persons who access pantries may have changed. The demographics and reported experiences of pantry consumers in 2014 is quite different than in 2009. In 2014, more consumers were middle-aged adults without children, more had attained education beyond high school, and more received benefits from other food programs. Fewer consumers were employed in 2014 than in 2009, and while more were unemployed, fewer were receiving unemployment benefits. A much higher proportion worked more than 40 hours a week.

Equally if not more importantly, the research speaks to the dramatic and real impacts from food insecurity that cause poor nutritional intake and lead to risky decisions that threaten other fundamental aspects of a stable life, such as housing, utilities, and health care. Children are especially at risk to these disruptions. Households with children were much more likely to be food-insecure with three in four of these families feeding their children a few kinds of low-cost foods and low-nutrition meals. Many of the individuals we surveyed reported the precarious balance of their lives, having to decide whether to continue to pay rent and utility bills in order to pay for food. Perhaps one of the most significant findings is that about half of respondents reported having a disability and being unable to eat an appropriate diet to manage their conditions. This situation leads to poor health and major barriers in achieving a stable life situation, such as holding a job and growing in earnings and stability.

As the local poverty rate has increased, our study results paint a picture of individuals that often work multiple jobs with increased hours of work and difficulties with transportation, and in many cases, children to care for. Of the 38% of consumers with a job, more than half earned between \$7.50 and \$12 an hour (higher earnings per hour than in 2009), one in five had two or more jobs, and a third of employed adults worked more than 40 hours a week. Individuals working multiple jobs are among the most challenged with providing food for the family due to unpredictable work schedules. Pantry consumers with whom we spoke indicated that the high cost of fruits and vegetables posed a significant barrier to being able to eat more of them.

However, the majority of people we interviewed at local pantries was eager to learn about better nutrition, stress management, and healthier lifestyles including exercise and better sleep habits. Aside from increased education and providing food at pantries, the community must continue to find ways to reduce barriers to healthy and secure eating. The community must find ways to enable our members to be self sufficient through educational programs and creative solutions that make transportation easier, housing and utilities more affordable, and better-paying jobs more available.

APPENDICES

APPENDIX 1 THE USDA'S QUESTIONS TO ASSESS THE FOOD SECURITY OF HOUSEHOLDS

1. "We worried whether our food would run out before we got money to buy more." Was that often, sometimes, or never true for you in the last 12 months?
2. "The food that we bought just didn't last and we didn't have money to get more." Was that often, sometimes, or never true for you in the last 12 months?
3. "We couldn't afford to eat balanced meals." Was that often, sometimes, or never true for you in the last 12 months?
4. In the last 12 months, did you or other adults in the household ever cut the size of your meals or skip meals because there wasn't enough money for food? (Yes/No)
5. (If yes to question 4) How often did this happen--almost every month, some months but not every month, or only 1 or 2 months?
6. In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money for food? (Yes/No)
7. In the last 12 months, were you ever hungry, but didn't eat, because there wasn't enough money for food? (Yes/No)
8. In the last 12 months, did you lose weight because there wasn't enough money for food? (Yes/No)
9. In the last 12 months, did you or other adults in your household ever not eat for a whole day because there wasn't enough money for food? (Yes/No)
10. (if yes to question 9) How often did this happen—almost every month, some months but not every month, or in only 1 or 2 months?

Questions 11-18 were only asked if the Household included children age 0-17

11. "We relied on only a few kinds of low-cost food to feed our children because we were running out of money to buy food." Was that often, sometimes, or never true for you in the last 12 months?
12. "We couldn't feed our children a balanced meal, because we couldn't afford that." Was that often, sometimes, or never true for you in the last 12 months?
13. "The children were not eating enough because we just couldn't afford enough food." Was that often, sometimes, or never true for you in the last 12 months?
14. In the last 12 months, did you ever cut the size of any of the children's meals because there wasn't enough money for food? (Yes/No)
15. In the last 12 months, were the children ever hungry but you just couldn't afford more food? (Yes/No)
16. In the last 12 months, did any of the children ever skip a meal because there wasn't enough money for food? (Yes/No)
17. (If yes to question 16) How often did this happen—almost every month, some months but no every month, or in only 1 or 2 months?
18. In the last 12 months, did any of the children ever not eat for a whole day because there wasn't enough money for food? (Yes/No)

LOCAL SURVEY QUESTION MODULE

1. Which of these statements best describes the food eaten in your household in the last 12 months:

- 1 Enough of the kinds of food we want to eat SKIP 1a
- 2 Enough but not always the kinds of food we want SKIP 1a
- 3 Sometimes not enough to eat ASK 1a
- 4 Often not enough ASK 1a
- 9 DK or refused SKIP 1a

1a. IF OPTION 3 OR 4 SELECTED ABOVE, ASK Here are some reasons why people don't always have enough to eat. Please tell me YES, NO or DON'T KNOW to each of the following reasons why you don't always have enough to eat. READ ALL.

YES NO DK

- 1. Not enough money for food
- 2. Not enough time for shopping or cooking
- 3. On a diet
- 4. No working stove available
- 5. No working refrigerator available
- 6. Don't know how to prepare the foods given to me
- 7. Too hard to get to the store IF YES, PLEASE TELL ME YES, NO OR

DON'T KNOW TO EACH OF THE FOLLOWING REASONS WHY IT IS TOO HARD FOR YOU TO GET TO THE STORE

- a. no car
- b. bus costs too much
- c. bus doesn't go where I need it to go
- d. work schedule
- e. no grocery store in the area
- f. can't get to the pantry during open hours
- g. child care problems ASK ONLY IF CHILDREN IN HOUSEHOLD

17. Which of the following have you or anyone in your household used for food assistance in the last 12 months? Please tell me YES, NO OR DON'T KNOW to the following. READ ALL.

YES NO DK

- a. WIC
- b. Friends/relatives
- c. Home delivered meals
- d. Free or reduced school breakfast
- e. Free or reduced school lunch
- f. Shelters
- g. Summer lunches in the park
- h. Summer breakfast programs
- i. Community meal sites (Salvation Army, ADRC, etc.)
- j. Food pantries
- k. Food Share (food stamps, Quest card)
- l. Special food assistance during holidays (baskets, meals, etc.)

Ask 17a and 17b **ONLY** if food pantries were used in the last 12 months (That is, if they answered “yes” to “j” in Q17 above):

17a. When was the first time you got food from a food pantry? READ LIST

- 1 Today is the first time – If answer “yes” don’t ask 17b
- 2 Sometime in the last six months
- 3 Six months to a year ago
- 4 One to two years ago
- 6 More than two years ago
- 9 DK

17b. In the past 12 months, since November of last year, how many times per month (on average) did you receive food from a food pantry?

- 1 0 SKIP 17C
- 2 1-3
- 3 4-6
- 4 6-9
- 5 9-12

17c. Did you go to more than one pantry to receive your food?

0 YES

1 NO (If no, move to 17d)

If yes, how many pantries? _____

Ask 17d **ONLY** if they have not used food share in the last 12 months (That is, if they answered “no” to “k” in Q17 above):

17d. Here are some of the reasons people do not receive food share. After I read each statement, please tell me if this statement is TRUE OR NOT TRUE for you. READ ALL.

TRUE NOT TRUE DK

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | a. Don't know about food share |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | b. Don't think I am eligible |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | c. Applied for food share but not eligible |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | d. Don't know how to apply |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | e. Application process is too difficult |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | f. I don't need food share |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | g. I don't want food share |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | h. I would not receive enough to make it worth my while |

18. Which of the following would help you in getting enough food for you and your family? Please tell me YES, NO OR DON'T KNOW for each of the following. READ ALL.

YES NO DK

- | | | | |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | a. Improved transportation |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | b. Learning how to budget your money for food |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | c. Learning how to prepare food |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | d. Garden space to grow food |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | e. Affordable child care |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | f. Affordable housing |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | g. Help in applying for Food Share |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | h. Have grocery store nearby |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | i. Affordable utilities (water, electric, phone, etc.) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | j. Other _____ |

Now I am going to read a few questions about nutrition and health.

19. Do you think you eat the right amount of vegetables and fruit now; or do you think you should eat more?

1 Eat right amount

2 Should eat more

9 DK or refused

20. On average, how many times per day do you eat vegetables and fruits?

1 0

2 1-3

3 4-6

4 6-9

5 9-12

21. Here are some of the reasons people do not eat the right amount of fruits and vegetables. After I read each statement, please tell me if this statement is TRUE or NOT TRUE for you. READ ALL.

TRUE NOTTRUE DK

a. Not available in the store where I need to shop

b. The store doesn't carry the kinds I like

c. I feel they spoil too quickly and will go to waste

d. They cost too much

e. I don't care for the taste

f. My kids won't eat them

g. I don't know what to do with them (how to prepare them)

h. Other_____

22. Do you have concerns about your weight?

1 YES

2 NO (If no, move to 23)

22a. Do you have concerns about your child's weight?

0 YES

1 NO (If no, move to 23)

22b. If yes, what education would help you achieve or maintain a healthy weight for you or your child? Please tell me YES, NO OR DON'T KNOW for each of the following. READ ALL.

YES NO DK

- a. Recommended serving sizes
- b. Selecting healthy foods
- c. Reading a food label
- d. Preparing foods
- e. How to get physically active
- f. Stress management
- g. Getting enough sleep
- j. Other _____

The following questions have to do with finding foods for health conditions that have special dietary needs such as diabetes, heart disease, digestive problems, etc.

23. Do you have any special dietary needs due to the following health conditions? READ ALL.

YES NO DK

- a. Diabetes
- b. Heart Disease
- c. Blood Pressure
- d. Digestive Problems (gluten free, lactose free, fiber)
- e. Other _____

23a. ASK 23a ONLY IF RESPONDENT ANSWERED YES TO ONE OF THE ABOVE. How difficult is it to find foods at the food pantry for your special dietary needs?

- 1 Very difficult
- 2 Somewhat difficult
- 3 Easy
- 4 Very Easy

The last questions are about housing and employment. For these questions, please consider the last 12 months, since November of last year.

24. What is your current household status?

- 1 a. Rent
- 2 b. Own my home
- 3 c. Stay with friends or family
- 4 d. Stay in a shelter
- 5 e. Other _____

24a. Are you at immediate risk of losing your current housing? 1 YES 0 NO

25. In the last 12 months, since November of last year, have you done any of the following in order to have enough money for food? READ ALL.

YES NO DK

- a. Moved into a shelter
- b. Not paid rent or mortgage on time
- c. Living with another household
- d. Got an additional job
- e. Neglected healthcare needs
- f. Used payday loan services
- g. Used rent-to-own stores
- h. Borrowed from a friend or family
- i. Not paid utilities on time (water, electric, phone, etc.)
- j. Other _____

26. Are you:

- 1 Employed
- 2 Unemployed, not looking for work (SKIP TO #27)
- 3 Unemployed, looking for work (SKIP TO #27)
- 4 Receiving income from other sources (SKIP TO #27)

26a. How many different jobs do you work? _____

26b. On average, what is the total number of hours per week that you work?

DO NOT READ THE OPTIONS GIVEN BELOW OUT LOUD. WHEN PERSON STATES ANSWER MARK IN APPROPRIATE RANGE BELOW

- 1 __ 0-10
- 2 __ 11-20
- 3 __ 21-30
- 4 __ 31-40
- 5 __ 41-50
- 6 __ 51-60
- 7 __ Over 60

26c. How much are you paid per hour at the job where you work the most (including tips or commission)?

DO NOT READ THE OPTIONS GIVEN BELOW OUT LOUD. WHEN PERSON STATES ANSWER MARK IN APPROPRIATE RANGE BELOW

1 __\$4-\$6.75

2 __\$6.76-\$7.50

3 __\$7.51-\$8.84

4 __\$8.85-\$12.00

5 __\$12.01-\$16.25

6 __Over \$16.25

27. Aside of yourself, are there other adults living in your household? 1 YES 0 NO (SKIP TO #28)

Ask only if answered yes to #27, How many of the other adults living in your household are:

27a. Employed _____

27b. Unemployed, not looking for work _____

27c. Unemployed, looking for work _____

27d. Receiving income from other sources _____

28. Did you or anyone else in your household receive income last month from any of the following? READ LIST. MARK ALL THAT APPLY.

YES NO DK

- | | | | |
|--------------------------|--------------------------|--------------------------|-----------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | a. Employment |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | b. Pension/Retirement |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | c. Unemployment |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | d. Disability |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | e. Social Security |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | f. Child Support |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | g. W2 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | h. SSI |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | i. Earned Income Tax Credit |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | j. Housing Assistance |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | k. Other_____ |

29. Are you or is anyone in your household a military veteran?

1 Yes

0 No

30. How much school have you completed?

DO NOT READ THE OPTIONS GIVEN BELOW OUT LOUD. WHEN PERSON STATES ANSWER MARK IN APPROPRIATE RANGE BELOW

- 1 Less than 9th grade
- 2 9th – 11th grade
- 3 High school graduate or equivalent
- 4 More than high school

31. How do you describe your racial or ethnic background?

DO NOT READ THE OPTIONS GIVEN BELOW OUT LOUD. WHEN PERSON STATES ANSWER(S) MARK IN APPROPRIATE RANGE BELOW. MARK ALL THAT APPLY.

- 1 American Indian or Alaska Native
- 2 Asian or Asian American
- 3 Black or African American
- 4 Native Hawaiian or Other Pacific Islander
- 5 White
- 6 Hispanic or Latino
- 7 Hmong
- 8 Russian
- 9 Somalian
- 10 Other _____
- 11 No answer

32. What is your age? _____

Food Pantry Survey Participant Distribution by Year

Food Pantry Name	2009		2014	
	Number	Percent	Number	Percent
AIDS Resource Center	1	<1%	-	-
Calvary Lutheran Church	4	1%	4	1%
De Pere Christian Outreach	8	1%	13	3%
Denmark Food Pantry	8	1%	-	-
First Presbyterian Church	16	2%	6	2%
First United Methodist Church	26	4%	25	6%
Giving Tree	9	1%	1	1%
Grace Lutheran Church	6	1%	25	6%
Manna for Life	122	17%	54	13%
Paul's Pantry	415	58%	219	52%
Pulaski Community Center	14	2%	15	4%
Resurrection Lutheran Church	16	2%	-	-
St. Bernard's Church	1	<1%	-	-
St. Patrick Catholic Church	38	5%	38	9%
St. Willebrord Parish	7	1%	-	-
The Salvation Army	7	1%	-	-
Trinity Lutheran Church	10	1%	-	-
Pantry not specified	0	0	20	5%
TOTAL	713	100%	420	101%*

*total exceeds 100% due to rounding