

A REPORT BY THE GREATER CHICAGO FOOD DEPOSITORY



EXECUTIVE SUMMARY

FOOD INSECURITY AMONG ADULTS WITH DISABILITIES IN COOK COUNTY: **REALITIES AND REMEDIES**



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DEFINITIONS

The USDA defines food insecurity as a household-level economic and social condition of limited or uncertain access to adequate food. Disability is any physical or mental impairment that substantially limits one or more major life activities. All disabilities referenced are self-reported.

METHODOLOGY

Using both quantitative and qualitative methods, as well as the voices of adults with disabilities and service providers, this report identifies geographic gaps in service, barriers to food access and strategies to address them. These insights helped inform relevant public policy, program, partnership and funding recommendations with the potential to dramatically improve food and nutrition access.

For low-income adults with disabilities, simply getting enough nutritious food can be anywhere from challenging to impossible. Nearly a third of all food insecure households in the United States include an adult age 18-64 with a disability. Living with a disability is one of the strongest known factors that affect a household's food security, according to the US Department of Agriculture's Economic Research Service.

The Americans with Disabilities Act of 1990 and the U.S. Supreme Court's 1999 Olmstead decision protect the right of people with disabilities to live and receive services in the community when institutionalization is not justified or desired. But that right is undermined when many adults with disabilities find that purchasing quality food must compete—often unsuccessfully—with the costs of medical care, medications, accessible housing, mobility devices and transportation. Inadequate diets and the economic tradeoff decisions necessary to make ends meet exacerbate existing health challenges, trapping low-income adults with disabilities in a steeper cycle of nutritional instability.

This summary report provides an overview of our detailed research, "Food Insecurity Among Low-Income Adults with Disabilities in Cook County." Focusing on working-age adults, the full report explores in great depth the extent of food insecurity among adults with disabilities in Cook County, the factors that contribute to the problem, and ways that all readers can join us in remedying it. Please find the complete report at chicagosfoodbank.org/disabilities.*

* Please see the complete report for full citations of all data and information sources mentioned in this summary.

"The pantry near me is on the second floor. I spend an hour and a half making my way here, but I'm on a special diet. So now I have nothing but an apple I can take home."

"About half our clients experience prolonged food insecurity, and many of them have disabling conditions. It's not just poverty."

"Getting to and from a food pantry or a grocery store regularly is far more than just financially challenging, it is physically challenging, putting it mildly."

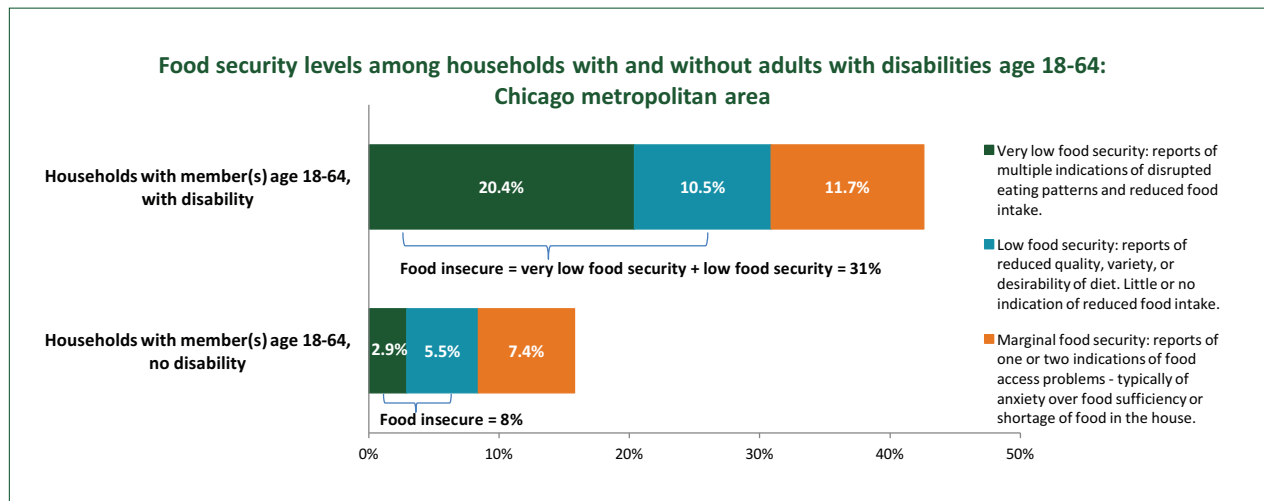
KEY FINDINGS

In many Cook County households, a clear link between living with a disability and food insecurity

Disability is a common part of life in our families and communities. More than 12% of Cook County's current adult population has a disability, and the Social Security Administration predicts that more than 1 in 4 of 20-year-olds that are insured for disability benefits today will become disabled before reaching retirement age. A rapidly aging population and advances in health care point to an increasing number of adults living with disabilities in Cook County in the years to come.

While food insecurity exists in every community in Cook County across the general population, the threat of hunger is particularly great among households with an adult member with a disability.

- An estimated 31% of Chicago metropolitan area households that include a working-age adult with a disability are food insecure, compared with 8% for households where there is no working age member with a disability.
- Food insecure adults with disabilities are more likely to experience very low food security, signifying multiple indications of disrupted eating patterns and reduced food intake.
- Adults with disabilities in Cook County are also more likely to live in poverty, to face unemployment, and to earn less per year than adults without a disability.

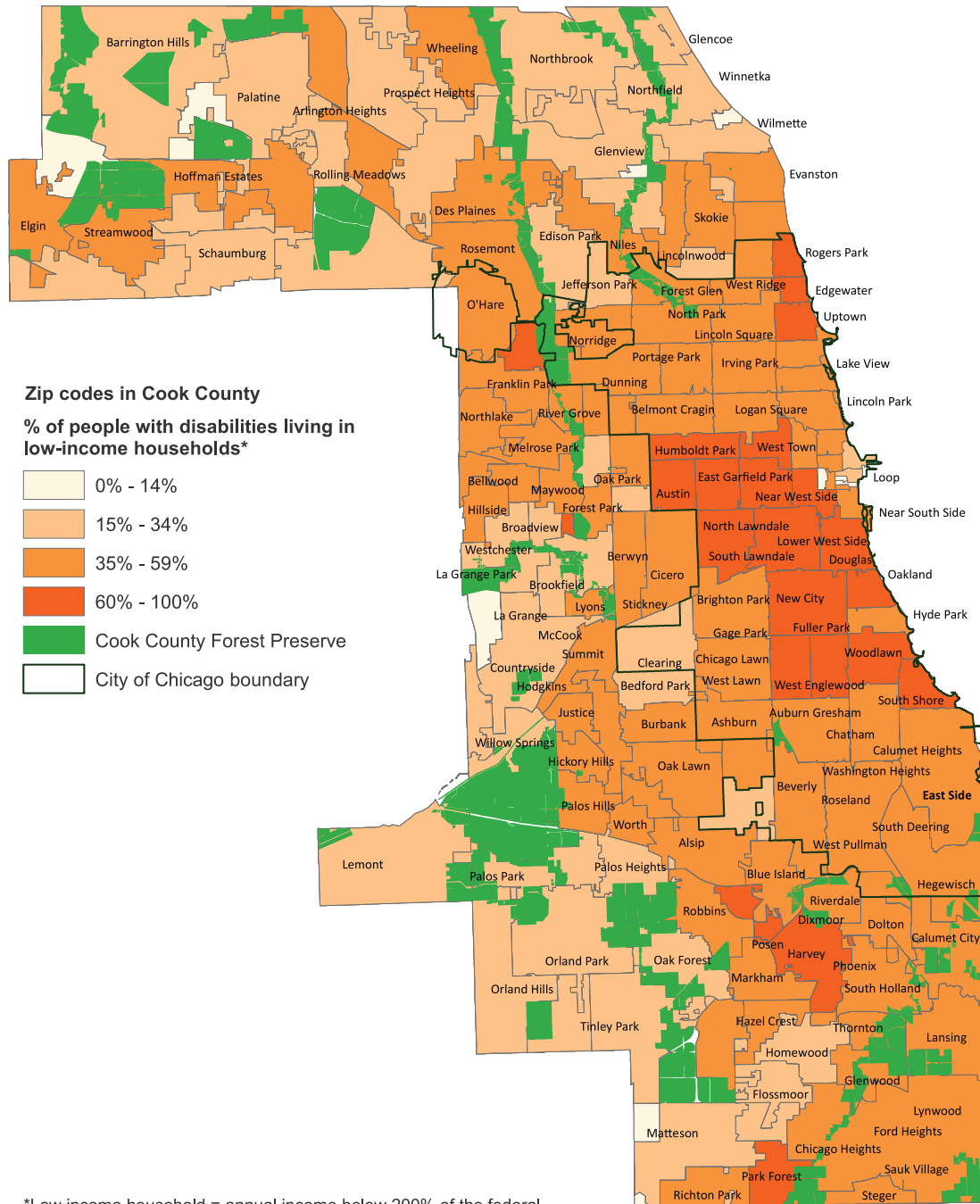


“When I can’t get up due to my symptoms, I simply don’t eat.”

“Disabled people may receive adequate income on paper. However, that money is used for meds, therapy, transportation, frequent doctor trips and copays. This leaves little for healthy foods.”

“I’m 45 years old and have a disability. I’m not old enough to get certain services, so where does that leave me?”

Percent of people with disabilities living in low-income households by Cook County zip code, 2015



0 2.5 5 Miles

A high proportion of people with disabilities live in low-income households throughout the suburbs of Cook County as well as the City of Chicago. Services in many of these areas are inadequate.

Visit chicagosfoodbank.org/disabilities for our full report with a ZIP code-level analysis of the current reach of food assistance programs and hotspots of unmet need.

Low-income adults with disabilities face many obstacles in getting healthy diets

The reality is, current supports for adults with disabilities are not enough to provide for good nutrition. Disability benefits often are not enough to cover costs of living. Program eligibility guidelines, based on age and severity of disability, do not capture everyone in need. And, food providers are often inaccessible to those with disabilities. These are just a few of the factors working against this population.

At the same time, federal and state resources for disability service providers and individuals with disabilities have been declining for years in Illinois. Specifically, the Illinois state budget crisis severely undercuts the ability of these providers to continue services. Legislation targeting access to health care and in-home assistants also magnifies the economic tradeoffs adults with disabilities are forced to make, directly limiting their access to and consumption of nutritious foods.

Each research participant's experience with food insecurity is unique. Certain factors impact some, more than others. Adults with disabilities and service providers describe many barriers to a nourishing diet.

Access barriers

- Inadequate financial resources for full cost of living.
- Lack of reliable and affordable transportation, especially in adverse weather conditions and on holidays.
- Long wait times, limited seating and no elevators or ramps at provider locations.
- Lack of appropriate foods for special diets at food assistance programs.
- Low awareness of existing food assistance programs, and/or a perceived stigma that inhibits many from asking for help.

Process barriers

- Difficulty preparing the foods and meals due to hard-to-open containers or need for additional cooking appliances.
- Lack of coordination between healthcare, disability service providers and food programs often leads to extensive travel for clients and missed opportunities to provide wrap-around social services.
- Lack of strong nutrition and food safety knowledge among family, friends, and in-home assistants limits the effectiveness of support networks.

“The food pantry I go to, you can get into the building but you can’t actually get to the food. I have a volunteer go for me and, with food allergies, if someone doesn’t take the time to read the ingredients, I actually get nothing.”

“Other than the expense of a typical average grocery store, just carrying the groceries themselves is difficult.”

“My concern is not only enough food but healthy food.”

Food Insecurity: A Costly Public Health Threat

The link is clear. Proper nutrition is critical to health and wellness, both in terms of prevention and healing. Food insecure adults are more likely to have lower nutrient intakes and to face mental health problems, long-term physical health problems, and chronic disease. Food insecurity also carries financial burdens for society and for individuals, with higher health care costs and lost economic productivity.

Our study reinforces the ever-increasing body of evidence showing the destructive consequences of food insecurity on the ability to learn, work and lead healthy lives. Many describe the myriad ways they experience great distress when they can't afford or access food that fits with diets required by their medical conditions and allergies.

For those vulnerable to food insecurity and for our communities, improving stable access to appropriate nutrition must be a top priority.



What lies between Danita Bowie and a nutritious diet?

Plenty.

At 59, diabetes, a series of strokes and other health issues require Danita to use a walker and other assistance. Relying on income from Social Security and SNAP,* she stretches financial and physical resources to access healthy food. Danita's local food pantry provides home deliveries to fill the gap. Unfortunately, this is not the reality for many individuals with disabilities who struggle to connect with healthy food resources.

* Supplemental Nutrition Assistance Program

"Sometimes, I don't have food because I have to pay my electrical bills. You have to make a sacrifice somewhere." —Danita Bowie

CALL TO ACTION

Together, we can improve program and policy responses to food insecurity in our communities. The work starts here:

Through advocacy

- **Pass a state budget that adequately funds human services.** Many providing necessary services to people with disabilities have been forced to lay off staff and cut back services due to the State of Illinois' backlog of unpaid bills. We need a viable budget to stabilize these vital services.
- **Protect access to government nutrition assistance programs, particularly the Supplemental Nutrition Assistance Program (SNAP).** Federal or state eligibility changes can jeopardize nutrition support and the charitable emergency food assistance programs can't absorb the impact of deep cuts.
- **Align diverse stakeholders behind policies that support food security among people with disabilities.** One strong voice, based on sound research in this report and others, will most effectively leverage the power of our communities and the full spectrum of social services.

Through services

- **Improve accessibility of food assistance programs.** Help the Food Depository network of pantries, soup kitchens, shelters, and programs minimize long, outdoor wait times and eliminate physical barriers. Improve the experience of all food assistance participants through effective communication.
- **Increase capacity of food assistance programs to accommodate allergies and special dietary needs.** Continually improving the quality and diversity of subsidized food items and nutrition education available across the Food Depository network will support all clients in obtaining the nourishments necessary for their health.
- **Expand access to affordable, medically-tailored home delivery meal and grocery programs.** This would improve nutrition for adults who have difficulty leaving home. Low- and no-cost services currently fall far short of need for those with such medical conditions as diabetes, renal failure, or severe allergies.



- **Partner with local and state agencies that oversee and provide services to low-income adults with disabilities.** Combining nutrition support with existing agency visits will replace silos between service providers, adding efficiency and cost savings. It will also establish food insecurity as a prominent health concern for clients.
- **Raise awareness of existing food assistance programs.** Providing more thorough information on the accessibility of food assistance programs and targeted community outreach will connect more food insecure individuals and service providers.

“I know people with problems chewing who require special, liquid-based diets. They have a hard time finding nutritious foods.”

The Greater Chicago Food Depository's mission is providing food for hungry people while striving to end hunger in our community.



For more information, please visit
www.chicagosfoodbank.org/disabilities

We wish to thank the many organizations and individuals who provided invaluable assistance and feedback in the development of the report, including:

- The Chicago Community Trust
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- Access Living (special acknowledgement to Tom Wilson, Community Organizer, Health Care)
- AgeOptions
- Anixter Center
- Feeding America
- The Heartland Alliance's Social Impact Research Center
- The Mayor's Office for People with Disabilities
- Progress Center for Independent Living

The full report, "Food Insecurity Among Low-Income Adults with Disabilities in Cook County, Illinois," prepared by Taryn McCook, Research & Evaluation Manager at the Greater Chicago Food Depository and published in May 2017, can be found at chicagosfoodbank.org/disabilities.

Quotes from adults with disabilities and service providers highlighted throughout this report were derived from focus groups and surveys conducted during the course of our research.



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