Struggling to eat: Food insecurity and use of mental health services

What is this research about?
Food insecurity happens when people don’t have reliable and sufficient income to buy the food they need. In Canada, around one in eight households are considered food insecure. This can result in poor outcomes for adults (such as chronic disease and poor health) and for children (such as asthma and depression). Canadians who are food insecure also have higher rates of mood and anxiety disorders and suicidal ideation. Ontario researchers conducted a study to determine if food insecurity is related to the use of publically-funded mental health services.

What did the researchers do?
Researchers looked at data from the Canadian Community Health Survey from 2005 to 2012 and publically-funded healthcare services used for mental health reasons for adults aged 18-64 in Ontario. The researchers compared the level of food insecurity and the rate of healthcare service use in the previous 12 months. Over 80,000 people made up the final sample.

Experiences that classified someone as having food insecurity ranged from being anxious that food might run out to going days without eating. Food insecurity was rated from marginal to severe. Mental health service use included visits to a psychiatrist, primary care doctor, hospital, and emergency department.

What did the researchers find?
Out of the entire sample, 12% had some degree of food insecurity, and 3% were considered to have severe food insecurity. Adults who experienced severe food insecurity were much more likely to have received mental health treatment than food secure adults over the past year (40.4% compared to 15.6%). Even though only 3% of the sample was severely food insecure, this group made up one in five adults hospitalized for mental health reasons.

Food insecure adults overall accounted for 37.9% of those admitted to hospital, 34.9% of those treated in emergency departments, 27.2% of...
Evidence Exchange Network (EENet) helps create and share evidence to build a better mental health and substance use system in Ontario. We connect mental health and addictions system stakeholders with each other and with relevant, actionable evidence to inform decision-making. Part of the Provincial System Support Program (PSSP) at the Centre for Addiction and Mental Health (CAMH), the network includes researchers, clinicians, service providers, system planners, policymakers, persons with lived experience, and families.

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those who saw psychiatrists, and 20% of those who visited primary care doctors for mental health reasons. Food insecurity was a strong predictor of mental health service use, with higher levels of food insecurity being associated with higher use of services.

**How can you use this research?**

This research helps policymakers and service providers better understand the relationship between food insecurity and mental health service use. It also supports development of interventions that address the needs of those most at risk of food insecurity. Service providers can use this information when screening clients for poverty to identify those who would benefit from income supports.

**Limitations and next steps**

More research is needed to understand the impact of food insecurity on children living in food insecure households and to identify the changes to policies, programs, and services needed to support this population.

**About the researchers**

Valerie Tarasuk¹, Joyce Cheng²,³, Craig Gundersen⁴, Claire de Oliveria³,⁴,⁵, Paul Kurdyak²,³,⁶

¹ Department of Nutritional Sciences, University of Toronto, Toronto, ON
² Centre for Addiction and Mental Health, Toronto, ON
³ Institute for Clinical Evaluative Sciences, Toronto, ON
⁴ Department of Agricultural and Consumer Economics, University of Illinois at Urbana-Champaign, Illinois
⁵ Institute for Health Policy, Management and Evaluation, University of Toronto, Toronto, ON
⁶ Department of Psychiatry and Institute for Health Policy, Management and Evaluation, University of Toronto, Toronto, ON

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**Keywords**

Food insecurity, mental health, service utilization

This Research Snapshot responds to the need for evidence related to “coordinated mental health, substance use, and addictions prevention and promotion strategies, across the lifespan.” This need was identified during dialogues for EENet’s Sharing Together initiative and falls under Evidence Priority 8: “Prevention and promotion, including suicide prevention.” To learn more about Sharing Together, which resulted in an evidence priority agenda for Ontario’s mental health, substance use, and addictions system, visit eenet.ca/initiatives/Sharing. This summary was written by Rebecca Phillips Konigs.