**ABSTRACT**

Food insecurity describes the inability to access enough food at all times to lead an active, healthy life. While food insecurity is associated with several negative health outcomes, screening for food insecurity in the clinical setting is not consistently performed. The goals of this pilot study were to: explore the prevalence of food insecurity among patients attending St. Elizabeth's Wellness Center in Lower North Philadelphia, explore the impact of food insecurity on health and disease management, and assess how to better address food insecurity in the primary care setting.

**INTRODUCTION**

- US in 2011: 14.9% of households experienced food insecurity during the previous 12 months (50 million individuals, 16 million children)1
  - Philadelphia: 22%
- Health effects associated with food insecurity3, 4:
  - Diet-sensitive chronic disease
  - Poorer self-reported health status and physical and mental health scores
  - Delayed physical and academic development, learning difficulties, and chronic disease in children
- Currently no standardized guidelines for food security screening in the healthcare setting

**METHODS**

- Convenience sample of 30 adult patients (ages 18 and older) who receive medical care at St. Elizabeth’s were screened for food insecurity
- Food security assessed using the USDA’s 10 question US Adult Household Food Security Survey Module, a validated survey instrument
- Food insecure patients were asked open-ended questions and medical charts were reviewed

**RESULTS**

Of the 30 patients screened for food insecurity, 14 (47%) screened positive. When the patients were further grouped by age, food insecurity appeared to disproportionately affect the older adult patients attending St. Elizabeth’s for healthcare services.

**CONCLUSION**

It is critical to explore how an assessment of food security can be included in frameworks for chronic disease prevention and management. Recommendations to address food insecurity in the clinical setting include:

- Educating healthcare professionals about the issue
- Increasing identification of food insecurity through systematic screening
- Connecting food insecure patients with local and federal nutrition assistance resources
- Working to build more direct links between healthcare centers and community resources

**REFERENCES**


---

*An Assessment of Food Insecurity in a Lower North Philadelphia Community Health Center*

Carly Sedlock, James Plumb MD, MPH, and Rickie Brawer PhD, MPH

Center for Urban Health, Jefferson Medical College, Thomas Jefferson University, Philadelphia, PA

---

“People need to know where to go for food.” (survey participant)

“I ate more fruits and vegetables when the farmer’s market was there [near St. Elizabeth’s]...the farmer’s market was an asset to the community.” (survey participant)

“I can’t eat the diet I need to be healthy.” (survey participant)