MOTION BY SUPERVISOR HILDA L. SOLIS AND CHAIR SHEILA KUEHL

Food Insecurity Screening in Clinics

Many low-income families face barriers to purchasing healthy foods such as fruits, vegetables, lean meats, and food high in fiber. Food insecurity is a complex social condition that affects health. Because poverty and food insecurity frequently go hand in hand, families often have to choose between affordable housing, health care, and healthy foods for their families.

On September 28, 2017, the Department of Public Health released a report on the state of food insecurity in the County. According to the report, more than half a million households earning less than 300% of the federal poverty level (FPL) are food insecure and face barriers purchasing nutritious foods during the year. Additionally, 11.3% of these households suffer very low food security, experiencing disrupted eating patterns and reduced food intake. Latinos are affected the most, 67.4%, followed by 14.7% of whites, 10.6% of African Americans, and 6.6% of Asians, respectively. The 2015 survey
data also showed that the proportion of adults with chronic conditions, such as obesity, diabetes, hypertension, and high cholesterol was higher for each condition among those living in food insecure households, when compared to those living in households with ample food. The report also included recommendations for multi-sector partnerships and innovations, including screening at health visits for food insecurity, increasing nutrition education dedicated to food resource management, and reducing food waste by feeding hungry people.

Increasing opportunities for eligible, low-income residents to access food assistance benefits when the County provides other services is an important strategy to pursue. Given the intersection between food insecurity and chronic disease, involving healthcare providers in our County health system to screen and intervene when they observe potential food insecurity can lead to better identification of people who are food insecure that can be referred to appropriate resources such as CalFresh, WIC, and to classes that focus on food resource management.

WE, THEREFORE, MOVE that the Board of Supervisors direct the Department of Public Health, the Department of Health Services, and the Department of Public Social Services to:

1) Describe current efforts to screen for food insecurity in County health clinics, as well as best practices, challenges, and lessons learned from other jurisdictions;

2) Report back in 90 days regarding the feasibility and costs of:

   a) including a screening questionnaire in the County’s electronic health records system(s) and training staff to use the tool,
b) implementing an action plan for establishing a referral process to onsite
   enrollment for CalFresh by County Health Clinic staff via the County’s Your
   Benefits Now online application, WIC, and other food assistance resources, and,

c) conducting nutrition education classes that focus on healthy eating and food
   resource management.

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