



EXPERIENCES AND ONGOING CHALLENGES OF FOOD INSECURE HOUSEHOLDS IN MAINE AND VERMONT

MEREDITH T. NILES, PHD
PROFESSOR

NUTRITION & FOOD SYSTEMS
UNIVERSITY OF VERMONT
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OUR TEAM

Vermont

- Meredith Niles, PhD- Professor
- Farryl Bertmann, PhD, RDN- Clinical Associate Professor
- Emily Belarmino, PhD- Assistant Professor
- Sam Bliss, PhD- Postdoctoral Researcher
- Jennifer Laurent, PhD, FNP-BC, APRN- Professor
- Ashley McCarthy, PhD- Research Social Scientist
- Scott Merrill, PhD- Research Associate Professor
- Becca Mitchell, MFALP- Project Coordinator
- Sarah Nowak, PhD- Associate Professor

Maine

- Rachel Schattman, PhD- Assistant Professor
- Janica Anderzén, PhD- Postdoctoral Researcher
- Jonathan Malacarne, PhD- Assistant Professor
- Kate Yerxa, MS, RD- Extension Professor



University
of Vermont



SURVEY DETAILS AND RESPONDENTS

- Summer 2024
- Recruited through Qualtrics on state statistics for race, ethnicity
 - Oversampled for low-income respondents
- Key components:
 - Food sourcing
 - Federal program use and benefit satisfaction
 - Inflation and financial challenges
 - Healthcare and disease
 - Diet and nutrition

1,438 total respondents

Maine: 720



Vermont: 718

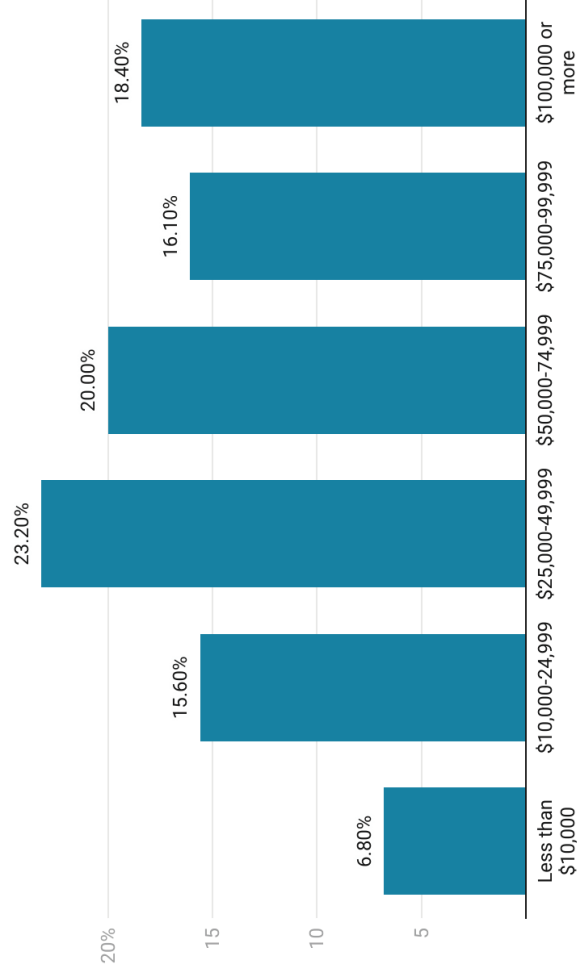


RESPONDENT CHARACTERISTICS

- 45% of respondents make less than \$50k annually
- 37% on SNAP (3x state rate); 7% on WIC
- 52% food insecure/ 48% food secure
- Goal: To quantify and understand the lived experiences of food insecure households as compared to food secure households with a large sample

- Will present data broken out by Food Secure (FS) and Food Insecure (FI) households

Household Income (2023)



WHO ARE FOOD INSECURE HOUSEHOLDS?

- More likely to be:
 - Younger
 - Women respondents
 - LGBTQ+
 - Lower-income
 - Households with children
 - Household with a person with a disability
 - Without their own car
- The majority are working
- **62%** have at least one full-time person working outside the home
- **73%** have at least one full or part-time person working outside the home
- **12%** are seeking additional employment, significantly more than food secure households (3%)

Connecting the Complexity

"I pay \$140 a week out of my paycheck for myself and my partner and we still have copay and things that are not covered. I work on average 40 hours. My take home pay was \$136 last week. For 2 people to live on and pay bills and buy food and to afford medical care..its impossible!!"

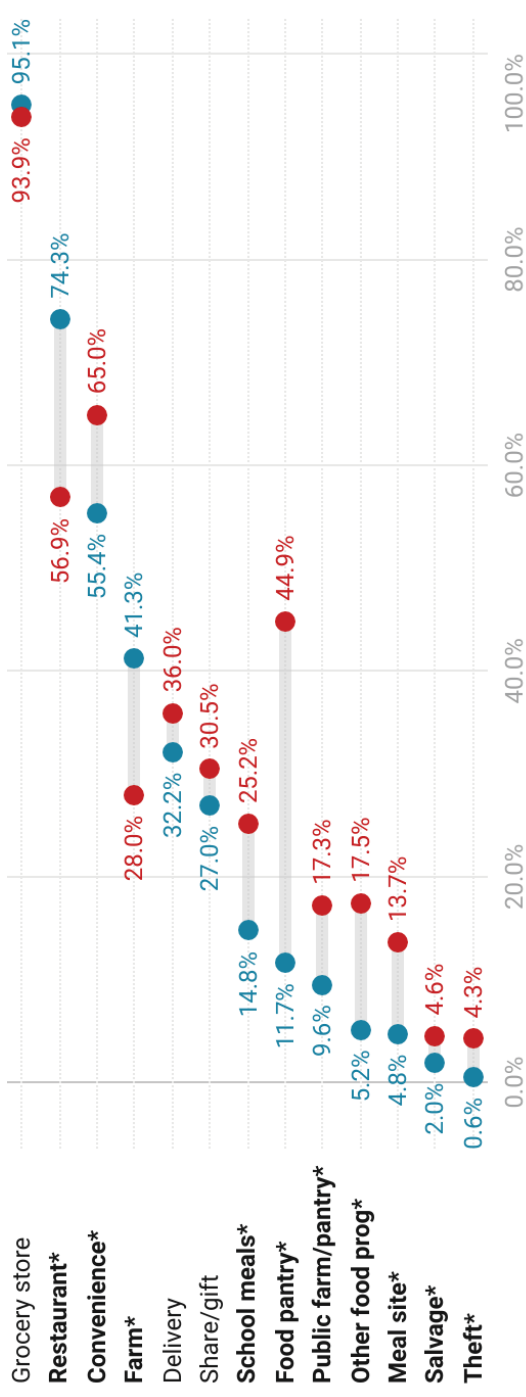


FOOD
SOURCING

FOOD SOURCES

- FI households significantly more likely to rely on convenience stores, as well as food assistance programs (e.g., school meals, food pantries, meal sites), and less likely to use restaurants or farms

Food Sources



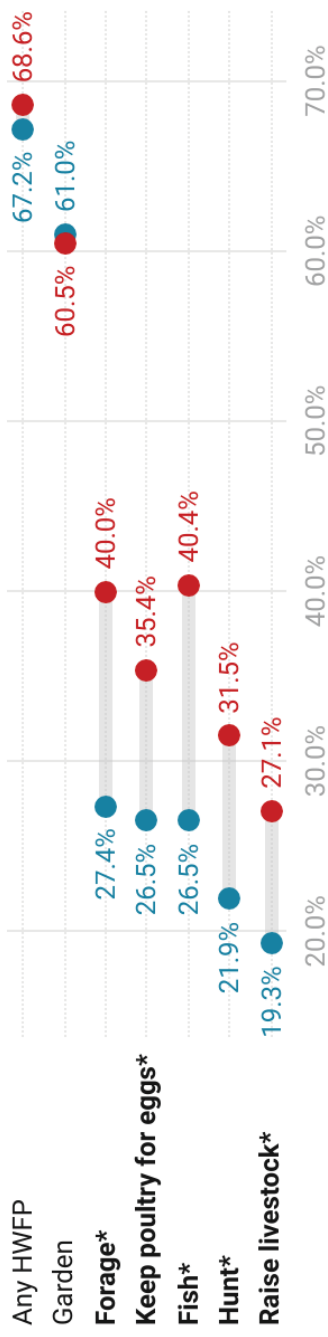
"Time constraints make it more convenient to shop at supermarkets or convenience stores, and also make it easier to get what I want."

* indicates a statistically significant difference ($p < 0.05$)

HOME AND WILD FOOD PROCUREMENT

- 2/3 of all household engaged in home and wild food procurement (HWFP)
- FI households more likely to engage in HWFP (except gardening) and more likely to indicate new or increasing HWFP engagement

Home and Wild Food Procurement



* indicates a statistically significant difference ($p < 0.05$)

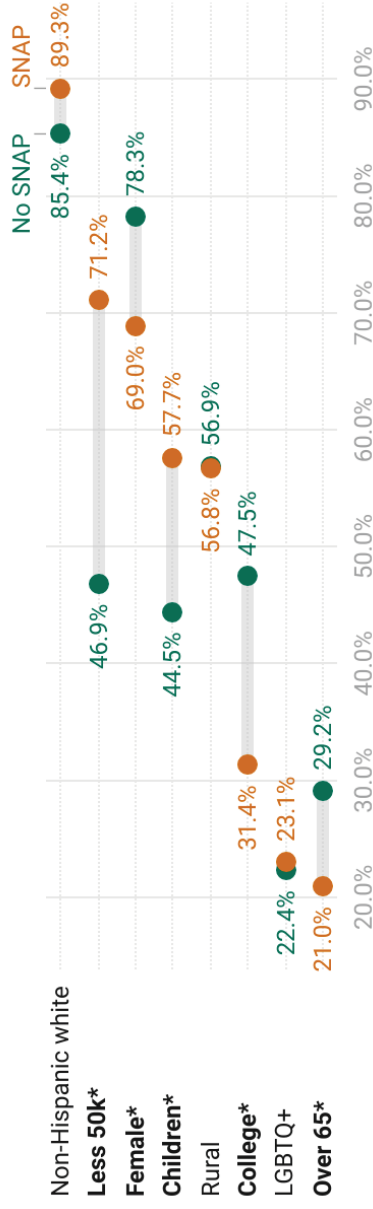
"My wife and I were layed off temp while the pandemic, bills took everything, I fish n I go with a friend to shell, but its a trip n not close and convenient like fishing"

Male respondent, family of four in Aroostook County Maine

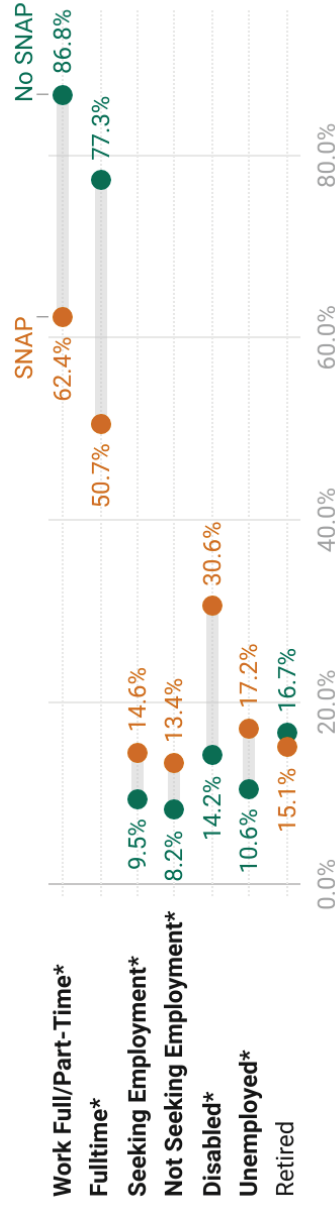
FOOD INSECURE HOUSEHOLDS AND SNAP USE

- 57% of food insecure households enrolled in SNAP; 43% did not
- Major demographic, employment and household differences by SNAP enrollment

Demographic Differences



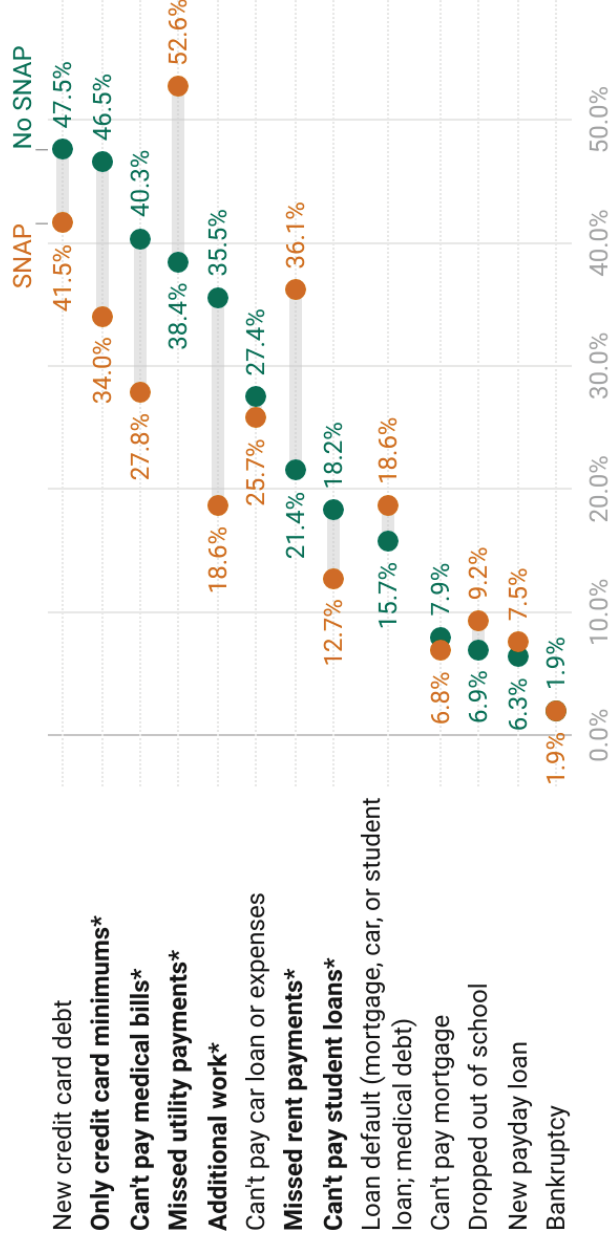
Employment Status



* indicates a statistically significant difference (p<0.05)

FOOD INSECURE HOUSEHOLDS AND SNAP USE

Adverse Financial Impacts



- Food insecure households not enrolled in SNAP are more likely to:
 - Have taken on additional work
 - Be struggling with medical bills, loans
 - Only paying credit card minimums
- Our estimates suggest 59% of food insecure not on SNAP would be eligible
- Others may be ALICE" - Asset Limited, Income Constrained, Employed

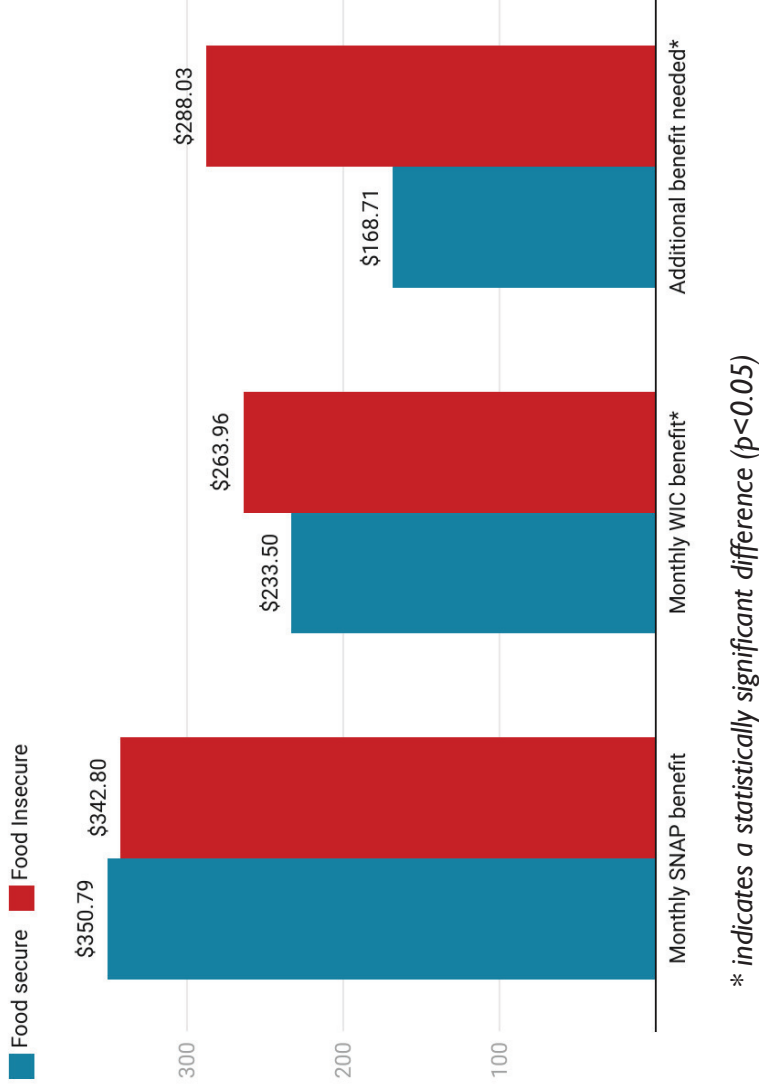
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FEDERAL FOOD ASSISTANCE PROGRAM BENEFITS

- 80% of SNAP recipients were classified as food insecure; 20% food secure
- Food insecure SNAP recipients indicated significantly more additional benefits to meet their food needs

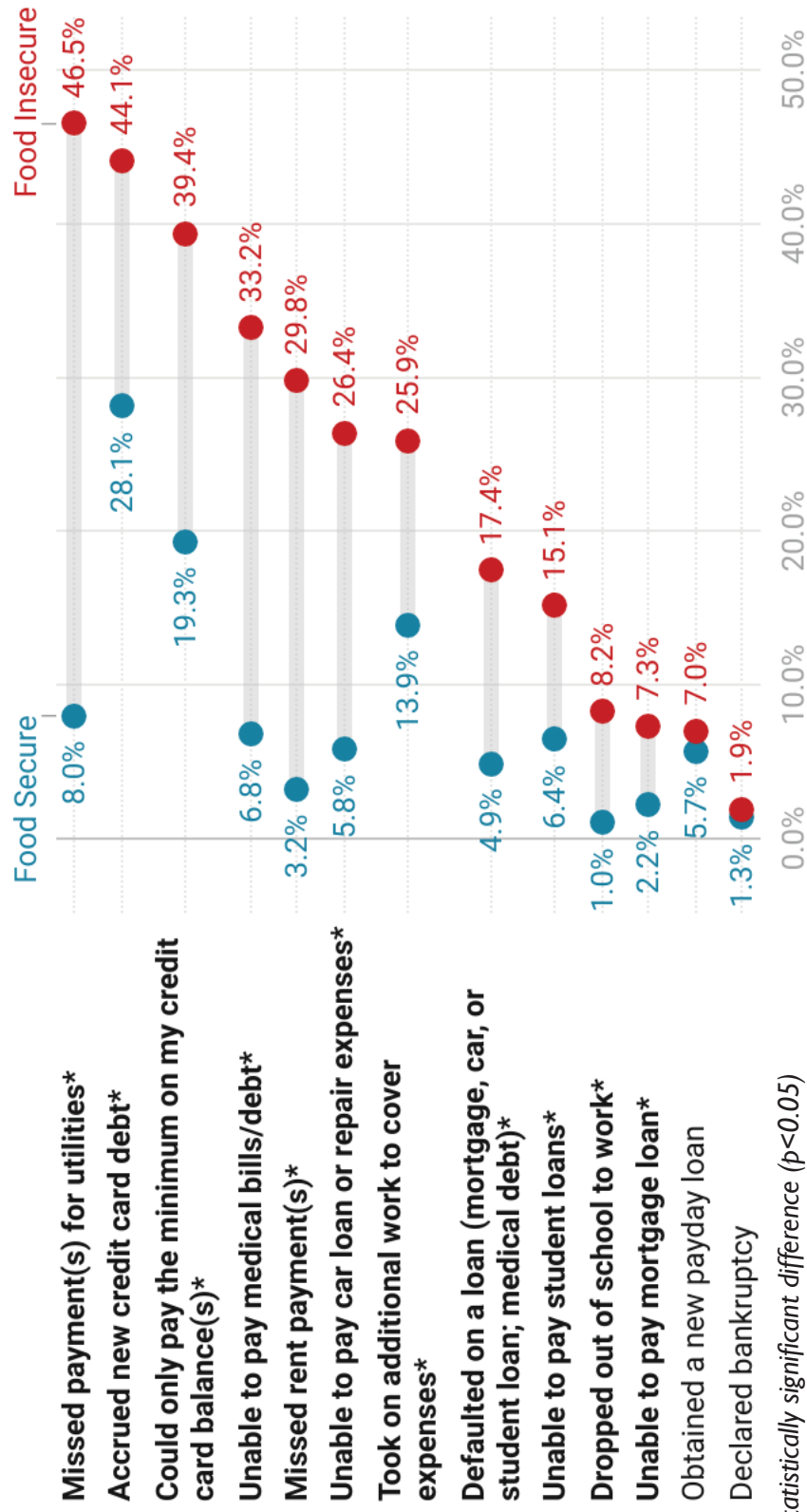
\$288

the average additional benefit needed by food insecure households a month



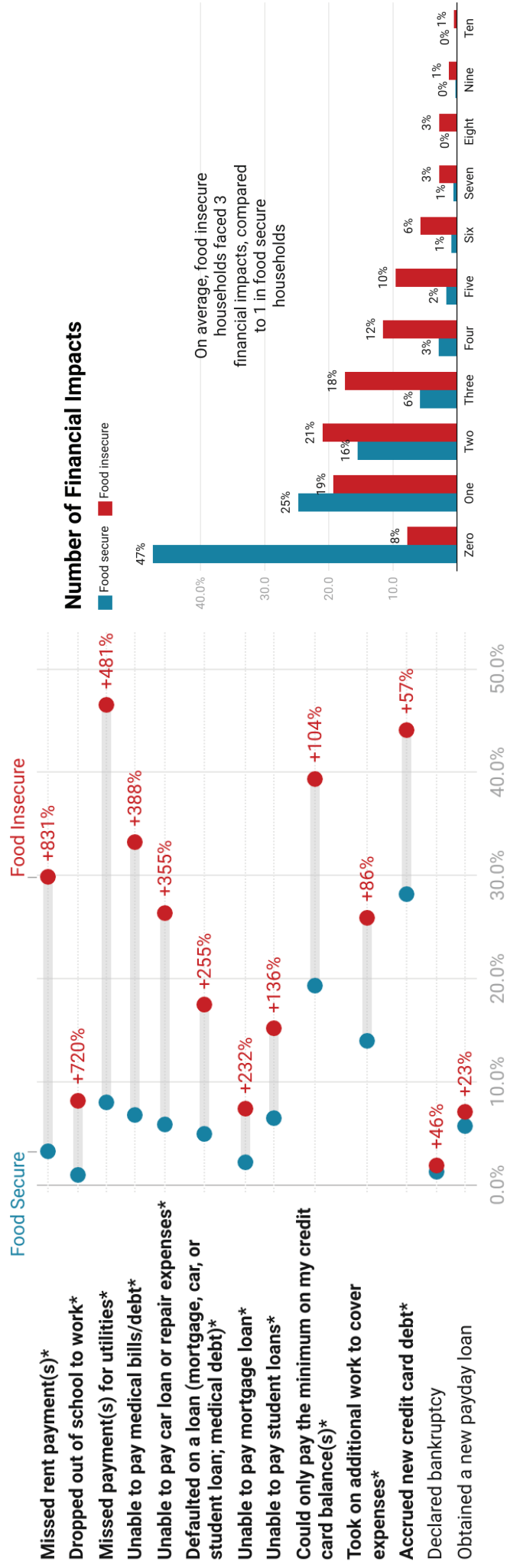
**ADVERSE
FINANCIAL
EVENTS**

ADVERSE FINANCIAL EVENTS



* indicates a statistically significant difference ($p < 0.05$)

GREATEST DIFFERENCES IN ADVERSE FINANCIAL EVENTS



* indicates a statistically significant difference (p<0.05)

"I will skip bills to make sure my family eats. But this puts us financially behind on bills"

- Female respondent, family of four in Bennington County Vermont

"It made it so I had to choose either pay my bills or do not eat I can't live like this anymore"

- Female respondent, single household in Orleans County Vermont

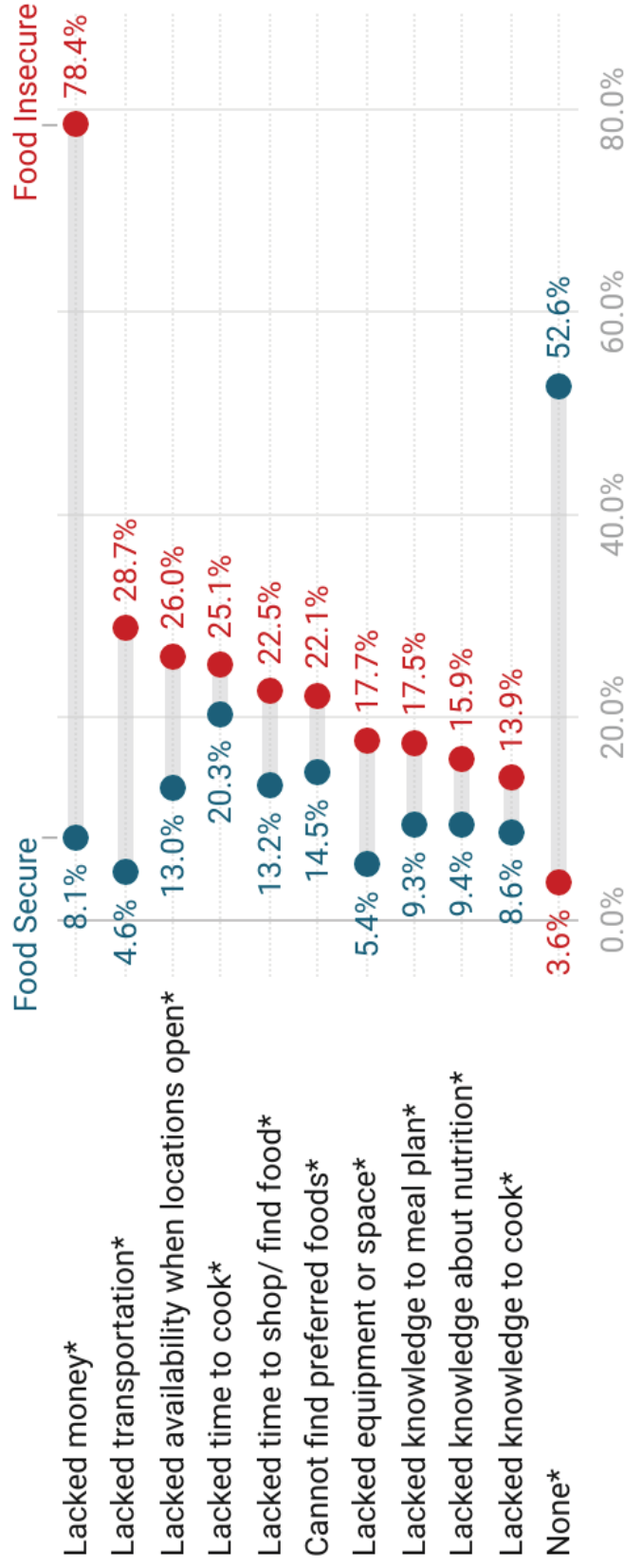
"I lost my pandemic medicaid and now I am have insurance through work. I need to see a physical therapist because of a new mobility and pain issue in my leg and can't because the copay is \$50 and all I have left after my half of bills, rent, and (not enough) money allocated to groceries and household needs is around \$60 if I managed to make a commission on sales that week."

- Female respondent, family of three in Addison County, Vermont

FOOD ACCESS CHALLENGES

BARRIERS AND FOOD ACCESS CHALLENGES

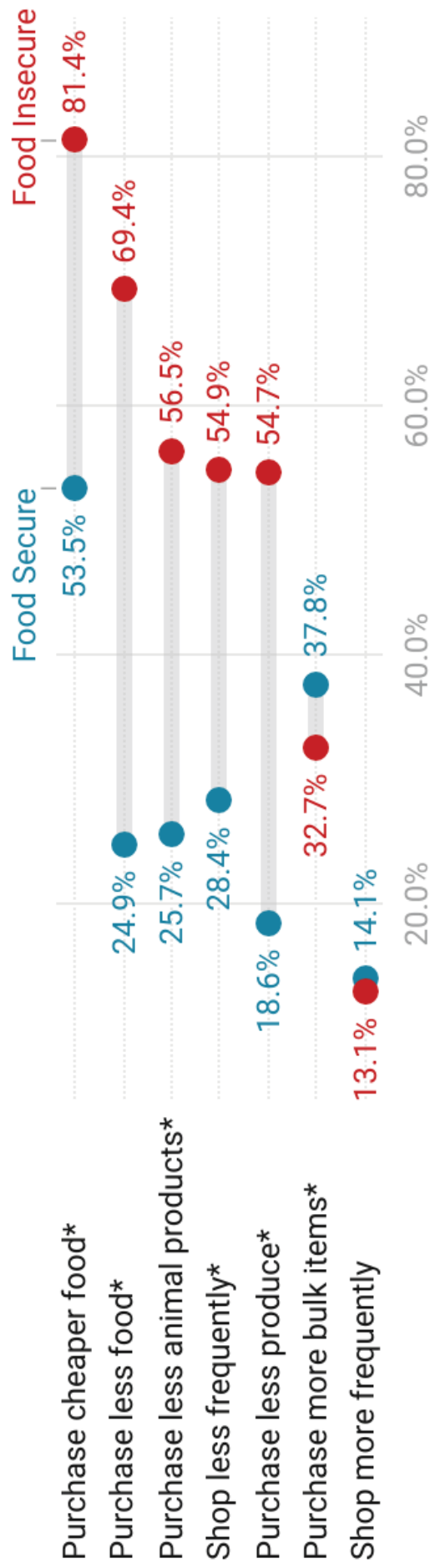
- FI households were significantly more likely to experience all barriers and challenges, especially money, transportation and time poverty



* indicates a statistically significant difference ($p < 0.05$)

RESPONSES TO INCREASED FOOD PRICES

- FI households were significantly more likely to employ inflation mitigation strategies that could affect food and nutritional security



* indicates a statistically significant difference ($p < 0.05$)

"Have to rely on others for transportation and have little money to even partially compensate them!"

Male respondent, family of two in Somerset County Maine

(Inflation) "Makes it extremely hard to keep food in the house for my kids. We try to do cheap budget meals when it's very hard times but we can't even do that with prices of the cheaper things either! It's insane."

Female respondent, family of five in Windham County Vermont

"Not buying the foods I like and prefer to eat. Lifelong history of an eating disorder and currently have chronic health conditions , including missing teeth and severe TMJ. If the food I prefer to eat is too expensive or too difficult for me to prepare, I either don't eat or choose easy but not as nutritious substitutes."

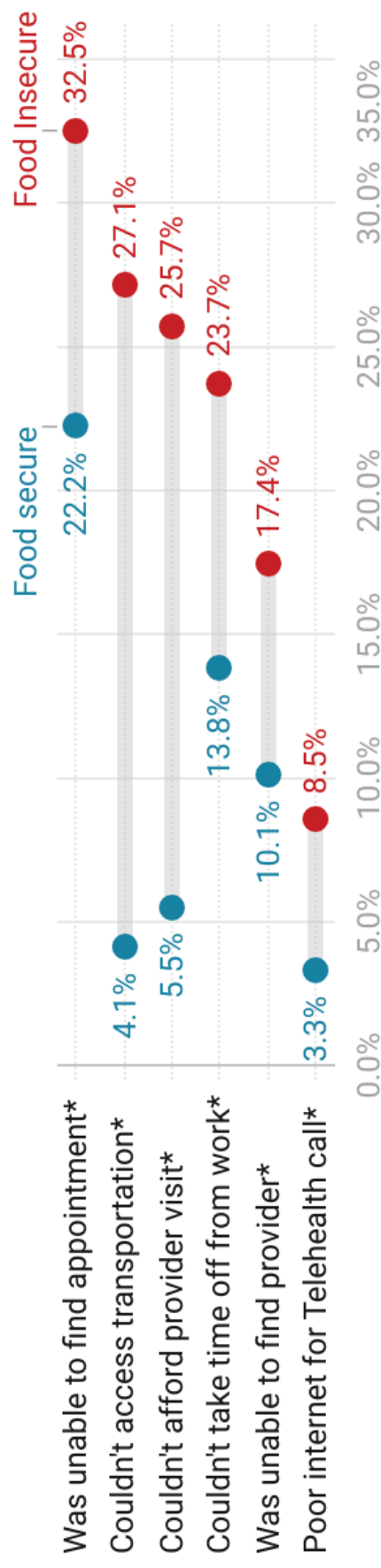
Female respondent, single household in Chittenden County Vermont



HEALTH AND WELLBEING

HEALTHCARE ACCESS BARRIERS AND CHALLENGES

- FI households were significantly more likely to experience barriers to accessing healthcare in the previous 12 months



* indicates a statistically significant difference ($p < 0.05$)

"I finally went to the doctor after roughly 10 years. Even having routing tests done with my employer provided insurance cost me over \$600 and I have the middle level insurance. I can't afford to do that again. It's horrifying. I am my children's sole provider, yet I can't provide for myself to help me make sure I am there for them. It's a constant worry."

Female respondent, family of five in Windsor County
Vermont

"No money to pay someone to give me a ride so If I can't do it over the phone it doesn't happen"

Female respondent, family of three in
Cumberland County Maine

"Currently dealing with bills from vision and dental care that are more than medical care."

- Female respondent, family of four in Chittenden County Vermont

"Dental insurance is non-existent. Oral health is very important and should be included in the traditional Medicare plan."

- Female respondent, single household in Addison County Vermont

"There are hardly any doctors and dentists in VT who take new patients, especially not ones who will take medicaid/dr dinosaur."

- Female respondent, family of five in Orange County Vermont

"Shortage of doctors in my area. Must travel about 2 hrs. to specialists."

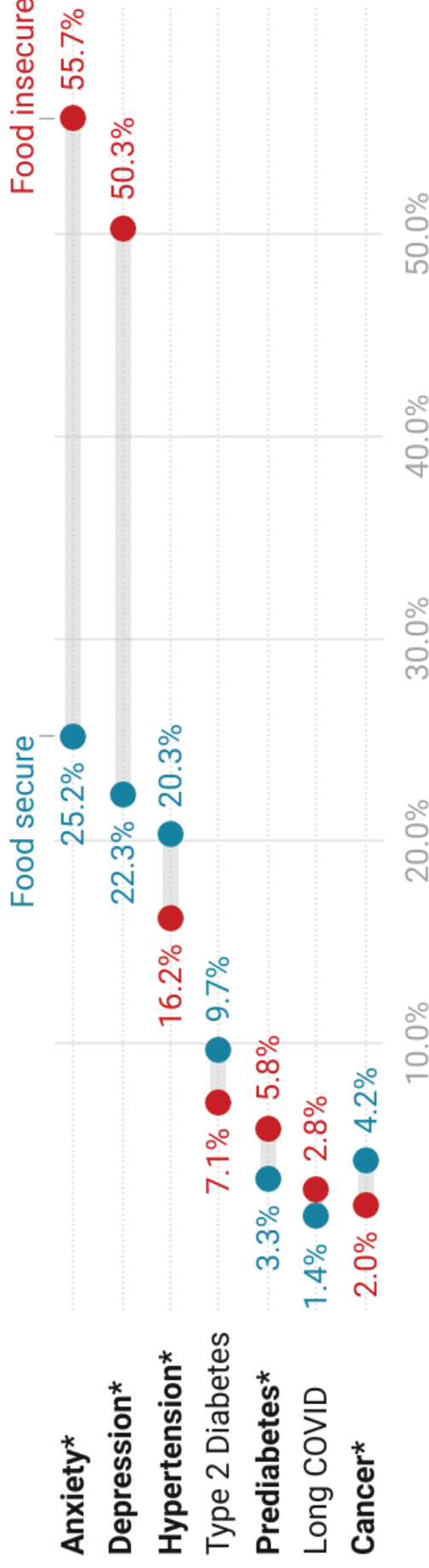
- Female respondent, family of three in Orleans County Vermont

CURRENT DIAGNOSES

- FI household respondents had **twice the rate** of diagnosed anxiety and/or depression
- 1/3 of FI household respondents received mental health therapy in the last 12 months

"We pay so much for the insurance and then it doesn't cover anything beyond a physical so we have to pay more for care. It's too much. And no mental health care coverage."

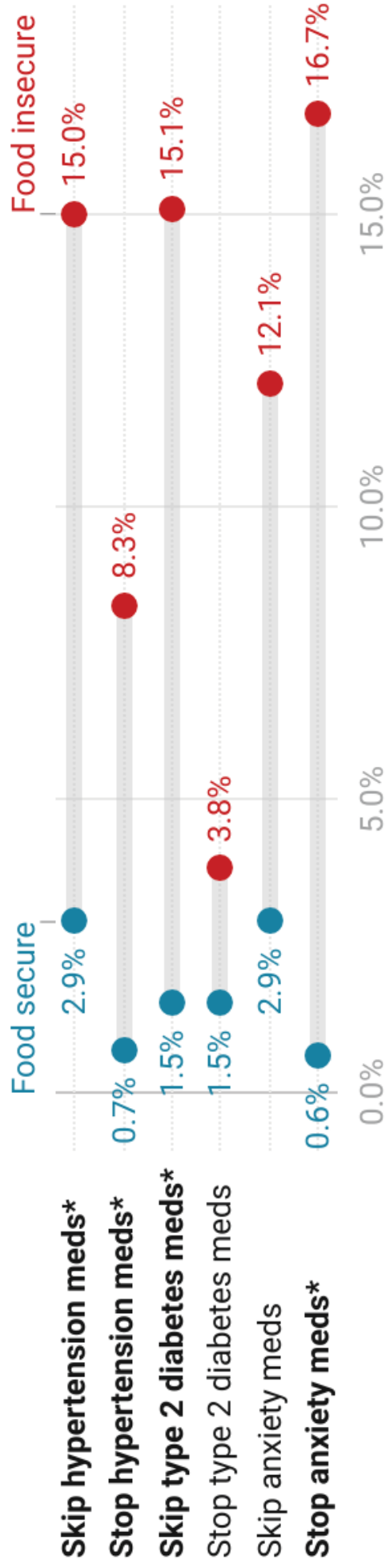
- Female respondent, family of four in Windham County Vermont



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STOPPING OR SKIPPING MEDICATION DUE TO COST

- FI households were significantly more likely to stop or skip hypertension, diabetes, and/or anxiety medications because of the cost in the last 30 days



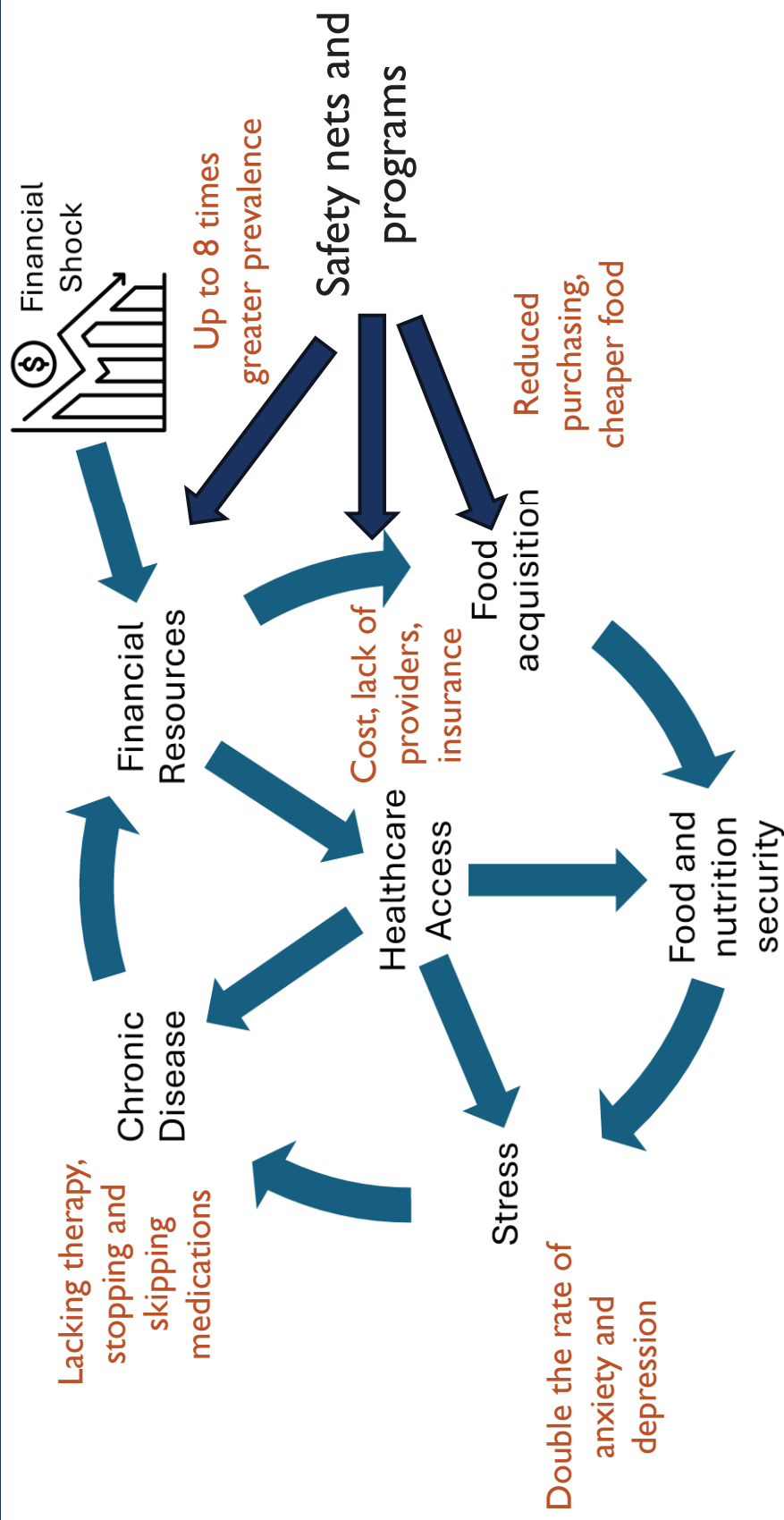
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"The only insurance I've ever had is through my work and comes out of my paycheck but when I do go to the doctors I get bills between \$160-500 every time. Plus I have to pay for any medicine prescribed which deters me from actually picking up meds or refilling prescriptions."

Female respondent, family of two in Cumberland County Maine

**KEY
TAKEAWAYS
AND NEXT
STEPS**

KEY TAKEAWAY: FOOD INSECURITY - AN INTERCONNECTED CYCLE



THREE KEY CHALLENGES FOR FOOD INSECURE HOUSEHOLDS



Money and financial
resources



Transportation



Time poverty

- These three issues span food and healthcare access- people are making tradeoffs
- Coupling of food and health access resources will likely target populations in tandem need
- Recovery from shocks may take years

NEXT STEPS

- Continuing analysis- lots of data!
 - Seeking feedback on additional analyses and questions that are relevant for policymaking
- Forthcoming new research efforts (to be announced) to continue this work and focus on home and wild food procurement
- Ongoing policy modelling and analysis
 - Assessing additional SNAP benefits and their potential impact

THANK YOU!

For more information, contact

Meredith T. Niles, PhD

Robert L. Bickford Endowed Professor
mtniles@uvm.edu

Becca Mitchell

Food Systems Research and Action Coordinator
rcmitche@uvm.edu

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