



Food Insecurity

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Testimony by:

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Testimony:

Good morning Senator Muth, Senator Schwank, Senator Tartaglione and Senator Street. My name is Dixie James, and I am President and Chief Operating Officer for Einstein Medical Center Philadelphia. For those of you who are not familiar with Einstein, we are a safety net provider of care serving some of the most disadvantaged populations in the Commonwealth. I am also a board member of the hunger relief organization Philabundance and have a particular passion for ending hunger. I want to thank you for the opportunity to represent our community and patients this morning to discuss one of the leading determinants of health for our patients and community, ---- access to adequate and nutritious food.

This morning, I woke up, I got dressed, I had a cup of tea, a yogurt and a banana. Later today, I will probably grab a salad for lunch and maybe some pasta for dinner. Not once during the day, will I have to calculate if eating three meals today compromises my ability to cover childcare cost next week. Nor will I wonder if having breakfast today means that someone else in my household must give up a meal. However, for far too many of the patients we serve at Einstein these are the real considerations and the very real choices they must make.

Food Insecurity is defined as the lack of access to enough food for a healthy and active life and at its core equals hunger. Across the Commonwealth of Pennsylvania, it is estimated that 11% of the population is food insecure with the highest percentage right here in Philadelphia county. In the communities served by Einstein Medical Center Philadelphia, food insecurity is a daily concern impacting the health and well-being of thousands of men, women and children.

This pervasive issue of not having enough food and the concern over where the next meal will come from impacts physical and mental health, emotional wellbeing and the overall success of all those who face it.

Children who are food insecure are twice as likely to be in poor health; Adults are almost 40% more likely to have one or more chronic conditions – and more than three times as likely to skip needed medications; Seniors are 40% more likely to report congestive heart failure and 53% more likely to report heart attacks. These disparities lead to not only poor health outcomes, but increased cost of care. Food Insecure adults are about 50% more likely to go to the ER and to be hospitalized and on average have about \$1,900/year more in healthcare expenditures. Food insecure adults with chronic diseases have more healthcare expenditures than food secure adults with the same diseases (with heart disease, \$5,100/year more; with diabetes, \$4,400 more; with hypertension, \$2,200 more). And because almost 40% of the patients treated at Einstein are covered by Medicaid, that extra cost is ultimately born by the Commonwealth.

As I know you are aware, the federal Supplemental Nutrition Assistance Program (SNAP) provides food resources to low-income individuals and families to purchase food. Before COVID, the community served by Einstein ranked among the hungriest in the United States. While it will be some time before we realize the full effect of COVID, the number of food insecure Philadelphians is expected to double. Only nine other places in the country are more SNAP-dependent. While childhood hunger has remained steady in the United States, it's tripled in North Philadelphia among families where parents work 20 or more hours a week, according to research by Drexel University's Center for Hunger-Free Communities and at Einstein single mothers with children are the most food insecure

segment of our population. Also, by the third week of the month, Research indicates that people are starting to run out of SNAP benefits because the allotment is too low which leads to skipping meals or medications or choosing low cost and poor-quality food. This is not just an issue for Philadelphia. Just a few miles away in Montgomery County, the second wealthiest county in Pennsylvania, 13.2% of children are food insecure.

However, it is not just the ability to afford food, but access to healthy food that remains a challenge for much of our community. Lack of supermarkets in low-income areas; lack of healthy high-quality food in nearby stores; and the lack of transportation to stores outside the area. all compound the nutritional issues that families have.

We have taken several steps at Einstein to address food insecurity because we see firsthand its detrimental health effects. In 2017, we began screening every inpatient admission for food insecurity. Positive screens prompt a referral to a social worker who, at minimum, provides the patient with a list of Food Resources in Philadelphia. We screen in our outpatient obstetrical and pediatric residency clinics with positive screens receiving referrals to resources. We provide a meal voucher for the hospital cafeteria in our pediatric clinic during visits because we know if a child is in our clinic for a visit during the week, they may be missing a school lunch and that lunch may be the only nutritious meal they get for the day.

In collaboration with Philabundance, Einstein hosts a weekly pop-up food market. Einstein Fresh for All provides those in our community with access to **free** fresh fruits, vegetables, meats and cheeses every Tuesday morning, rain or shine.

In June 2020, Einstein and Philabundance expanded the partnership to include home deliveries of food to patients requesting resources in response to the increased demand for food and the impact of COVID. This partnership includes Liberti Network/Small Things which provides the actual delivery of food.

Additionally, in partnership with The Food Trust, Einstein provides Philly Food Bucks to patients with diabetes in our Community Practice Center. The Food Bucks allow patients who are enrolled in SNAP to increase their purchasing power of fruits and vegetables in local stores and farmers markets. Einstein also provides nutrition education to almost 10,000 SNAP eligible students and families per week, including providing food tastings and recipes.

All of these efforts are completely dependent on our success securing private financial support. With such a high public payor mix, Einstein operates with breakeven to negative margins. Which means the lost the private funding for these programs, would leave us unable to sustain them.

We know that access to healthy affordable nutrition has the power to improve health and mental well-being. Long-term sustainability of programs that address food insecurity ultimately will reduce cost of care and improve health outcomes for the Commonwealth.

Thank you for the opportunity to speak with you today. On behalf of our community, we look forward to working with this committee on policies that remove barriers and make systematic changes to eradicate hunger in Pennsylvania and improves health outcomes.

Einstein Medical Center Philadelphia Background

Service Area Demographics

The community primarily served by Einstein Medical Center Philadelphia is comprised of nine zip codes in North Philadelphia (19118, 19119, 19120, 19126, 19138, 19140, 19141, 19144, 19150 19120, 19138, 19141, 19144). According to the Public Health Management Corporation's 2018 Southeastern Pennsylvania Household Health Survey (PHMC 2018), the population of this area is more than 328,680, with 251,450 Adults and 77,230 children ages 0-17. 41% of the adults are male and 59% are female. Almost 40% (38%) of the adults are ages 18-39; one third (33%) are 40-59; and 29% are age 60 or more. This is a culturally and ethnically diverse area with 60% African Americans, 13.6% Hispanics, 16.8% Caucasians, 1.3% Asians, 0.8% Native American, 4.8% Two or More Races, and 2.7% Other. More than 19,600 adults in the area were foreign born, from more than 30 countries with their own separate heritage and culture. More than 20% of the adults speak another language at home, with the majority speaking Spanish.¹

To help reduce the burden of poverty, the federal Supplemental Nutrition Assistance Program (SNAP) provides food resources to low-income individuals and families to purchase food. According to an article in the Philadelphia Inquirer in May 2018, two years prior to the 2020 COVID-19 pandemic, which is expected to double the number of people in Philadelphia who are food insecure, the North Philadelphia area, including the target area zip codes, already ranked among the hungriest in the United States. At that time 25.9 percent of people living there relied on SNAP benefits, which means they are food insecure – lacking enough food in a year to lead a healthy life, according to data from Feed America in Chicago, the largest hunger-relief nonprofit in the country. Only nine other places in the country are more SNAP-dependent. Nationally only about 12 percent of people are food insecure and in Philadelphia it was 21 percent in 2018.² However, as noted above a higher percentage of adults in our 9 zip codes (**28.7%**) rely on SNAP benefits. Also, PHMC 2018 data reports almost one quarter of the adults (23.5% - 55,470) in our 9-zip code area reported cutting the size of their meals or skipping meals because there was not enough money in the budget for food.³

While childhood hunger has remained steady in the United States, it's tripled in North Philadelphia among families where parents work 20 or more hours a week, according to research by Drexel University Professor Mariana Chilton, director of the Center for Hunger-Free Communities. By the third week of the month, Philadelphia gets hungry. Her research shows that people are starting to run out of SNAP benefits because the allotment is too. "We are never going to affect obesity, heart disease, and diabetes if we don't deal with the lack of healthy food in the home," said Saba Khan, a pediatrician at Children's Hospital of Philadelphia, part of the association's research group. Children who are food insecure are twice as likely to be in poor

¹ PHMC Data 2018

² <https://www.philabundance.org/hunger-in-philly-its-a-pain-in-my-belly/>

³ PHMC Data 2018

health, studies show, and face the potential stunting of their physical, cognitive, social, and emotional development.⁴

In a report produced by The Food Trust, it was found that accessing healthy food is a challenge for low-income people and communities of color like our target zip codes. This is due to a lack of supermarkets in the area; lack of healthy high-quality food in nearby stores because of the predominance of convenience/corner/liquor stores that lack healthy items (low-income zip codes have 30% more convenience stores than higher income areas); and the lack of transportation to stores outside the area. These all compound the nutritional issues that families have. Studies have shown that better access to healthy foods corresponds to healthy eating and lower risk for obesity and other diet-related chronic diseases.⁵ PHMC 2018 data for the zip codes in the area corroborates these findings, showing that the quality of the stores in the neighborhoods as fair or poor, compared with SEPA and many people must travel outside their neighborhood to go to a supermarket.⁶

Poverty is the underlying determinant for many of the racial and ethnic health disparities that persist in Philadelphia. Many Philadelphians live, learn, work, shop, and play in high poverty neighborhoods that make good health difficult to achieve. Neighborhoods with high rates of poverty often have lower access to healthy affordable foods, safe outdoor spaces for physical activity, and clinical services, and higher rates of tobacco and alcohol retailers and community violence. These contextual factors in addition to cultural norms often shape health behaviors. Ultimately, they both partially explain poor health and point toward potential solutions.⁷

The residents of this project area live in inner-city neighborhoods, marked by high levels of poverty, unemployment, crime, and chronic health problems. **More than one quarter of the adults (27.2% - more than 64,950 people) live at or below 100% of the Federal Poverty Level (FPL),⁸ which is more than twice the number in Southeastern Pennsylvania (SEPA), and almost three times the estimated national average of 10.5% in 2019.⁹** Almost one half of the adults in the area (47.0% - more than 112,390) live at 200% of poverty, which has been defined as “true poverty” since it comes closer to the income needs calculated as the real cost of living. **And 10.5% of the adults (more than 25,080) live in deep poverty, which is almost three times the number in SEPA of 4.5%.¹⁰** Deep Poverty is defined as having household incomes less than 50% of the poverty threshold. According to U.S Census Bureau Current Population Reports 2017, for a single person younger than 65, that means living on less than \$6,243 per year; for a family of four, less than \$12,500.¹¹ Deep poverty is hard to exit, say researchers, who add that it’s more likely to persist across multiple generations than is poverty as traditionally defined. Over time, extreme material hardship and cumulative disadvantage

⁴ <https://www.philabundance.org/hunger-in-philly-its-a-pain-in-my-belly>

⁵ “The Grocery Gap: Who Has Access To Healthy Food and Why It Matters,” The Food Trust, 2010

⁶ PHMC Data

⁷ “Philadelphia Community Needs Assessment 2018,” Philadelphia Department of Health

⁸ PHMC Data 2018

⁹ U.S Census Bureau 2019 Estimates

¹⁰ PHMC Data 2018

¹¹ U.S. Census Bureau (Semega, J.L., et al., [U.S. Census Bureau, Current Population Reports, P60-259](#), 2017).

resulting from problems like poor health care, a weak social safety net and a lack of affordable housing accumulate to create health inequities and restrict educational attainment.¹²

Impact of the COVID-19 Pandemic

In Philadelphia, seven of the 10 zip codes with the highest rates of coronavirus cases by population are majority Black and Latino and two of those 10 zip codes are in the target area. In the zip code 19126, which includes East Oak lane, and Oak Lane and is 95% minority, one out of every 17 residents have tested positive for the coronavirus. In the zip code 19140, which includes Hunting Park, Tioga, and Nicetown, and is 97% minority, one out of every 20 residents have tested positive. By comparison, the Old City and Society Hill zip code is more than 82% white and just one out of every 33 residents have tested positive. Some non-minority zip codes with high infection rates contain either a detention center or long-term care facilities, which skews the data. Some zip codes with high case counts and high minority populations also have long-term care facilities, but across the Philadelphia region those areas with at least a 75% minority population have more than twice the rate of COVID-19 infections compared with those populations that are at least 75% white.¹³ Those increased rates of infection in minority areas have a great impact on the health and wellness of the residents in the target area both because they are at high risk for infection but also because recent research has shown that many patients who survive a COVID-19 infection have long-term health consequences: lung fibrosis, kidney disease, heart damage.¹⁴

Health Status

Those North Philadelphia stressors identified above are reflected in our target population, which experiences a disproportionate prevalence of health problems. According PHMC 2018, more than one quarter of the adult population in the target area (27.2% - 68,300) report their general health condition to be fair or poor, compared with only 19.2% of adults in Southeastern Pennsylvania (SEPA). This percentage rises to 32.9% for those ages 40-59; to 45% for Latinos; and to 42.8% for those living below the poverty line (more than 27,250 adults). Fourteen percent (14.8%) have been diagnosed with diabetes, which is higher than national average of 10.5%¹⁵. This percentage rises to 18.2% for those African Americans; 22.6% for Latinos; 21.9% for those living below the poverty line, and almost one third (30.7%) for those age 60 and above. 36.1% have been diagnosed with high blood pressure, which is more than 91,000 adults and was probably based on the old guidelines. More than 5% (5.4% - more than 12,840) adults report having been diagnosed with cancer.¹⁶ The incidence of cancer is also higher in this area due to the majority of African Americans living here, who assume a disproportionate share of the cancer burden.¹⁷

¹² McLeod, J., et al., Eds., "[Handbook of the Social Psychology of Inequality](#)," 2014

¹³ "Nine Months into the Pandemic, Philly's Black Residents Still Suffer the Most," Jason Laughlin, Philadelphia Inquirer, November 29, 2020

¹⁴ "Violence Costs Can Last a Lifetime," Corbin Pomerantz, Philadelphia Inquirer, August 23, 2020

¹⁵ CDC – National Diabetes Statistics Report - 2018

¹⁶ PHMC Data 2018

¹⁷ PHMC Data 2014