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## The Use of Food Pantries and Soup Kitchens by Low-Income Households

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Food insecurity has emerged as a leading health care issue in the United States. This is due, in part, to the almost 50 million people who are food insecure in the United States and the extensive negative health outcomes and concordant costs associated with food insecurity (Coleman-Jensen et al. 2015). An extensive literature has emerged, especially over the last five years, regarding the causes and consequences of food insecurity (see Gundersen, Kreider, and Pepper 2011; Gundersen and Ziliak 2015 for reviews). Both public and private food assistance programs serve as important mechanisms to tackle the problem of hunger and food insecurity in the United States. The majority of food assistance to the poor is provided by the public sector (e.g. Supplemental Nutrition Assistance Program (SNAP), National School Lunch Program, and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)) and these have been demonstrated to be effective at reducing food insecurity (see, respectively, Kreider et al., 2012; Gundersen, Kreider, and Pepper 2012; Kreider, Pepper, and Roy 2015). However, the private sector plays a valuable supplementary role to federal assistance programs. Feeding America is the nation's largest private hunger-relief organization with a network of about 200 food banks across the country. Food banks in the Feeding America network distribute donated food to approximately 32,400 food pantries, 4,000 soup kitchens, and 3,600 emergency shelters in order to serve people at the risk of hunger (Feeding America 2014). The Feeding America network is estimated to serve as many as 46.5 million people each year, or 1 in 7 people in the U.S (Feeding America 2014).

Understanding the use of food pantries and soup kitchens by low-income households and the impact of the emergency food assistance on food security is critical to designing effective antihunger programs. However, very little research analyzes these two issues. The few existing studies on the characteristics, diet quality and food security of pantry users generally utilize data from surveying clients at one or two food pantries in one county (Duffy et al. 2009; Paynter, Berner, and Anderson 2011; Robaina and Martin 2013) and the sample sizes are small. A more extensive sample of pantry clients over a broader geographic area is needed to speak broadly of the use of emergency food assistance. Furthermore, because all survey respondents in the existing studies are food bank clients, it is difficult to compare the experiences of food bank clients with similar households who may also be in need of emergency food assistance but have not done so.

For this analysis, we use data from the USDA's National Household Food Acquisition and Purchase Survey (FoodAPS) combined with survey data from Feeding America. Every four years, Feeding America conducts the Hunger in America (HIA) study that includes a comprehensive survey of food bank clients in all their member food banks, and the agencies and programs that serve the food bank clients. The most recent around of agency and client survey were fielded from October 2012 to January 2013 and April through August 2013 respectively. This survey provides detailed characteristics of food pantries and soup kitchens including the geographic locations. The clients portion of the HIA survey provide information about the multiple characteristics of the food banks clients.

Because the HIA does not include data on non-clients, we combine these data with data on food secure and insecure households from the USDA's National Household Food Acquisition and Purchase Survey (FoodAPS). FoodAPS is a nationally representative survey of American households that collects comprehensive data about household food purchases and acquisitions during a 7-day survey week from April 2012 to January 2013. Detailed information was collected about foods purchased or otherwise acquired for consumption at home and away from home, including foods acquired through food and nutrition assistance programs. In addition, the

survey collects a wide array of demographic and other information about the households including information on home geo-coordinates, food security status, SNAP participation and other available resources (including food and nutrition assistance program benefits). The survey includes nationally representative data from over 4,826 households, including SNAP households and low-income households not participating in SNAP—both of which are oversampled in the survey, as well as households who are ineligible for SNAP.

We merge FoodAPS with data from the agency and program portion of the HIA survey at the census block groups of the FoodAPS households. We use both descriptive statistics and regression analysis to answer the four main questions:

1. What types of food do emergency food assistance clients obtain?

2. How do the food items obtained by emergency food assistance clients compare with their food obtained through other venues?

3. How do the characteristics of emergency food assistance clients compare to those not using food pantries or soup kitchens?

4. Does the distance from FoodAPS households to emergency food assistance locations and other characteristics of these locations influence the decision to use emergency food assistance?

With these results, we can contribute to the debate on whether the food pantries and soup kitchens are effective in reducing food insecurity. In addition, more specific knowledge about emergency food assistance clients' diet quality and characteristics will help pantry directors and nutrition counselors target the nutrition outreach programs more effectively.

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