

Hunger of the Body and Hunger of the Mind: African American Women's Perceptions of Food Insecurity, Health and Violence

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ABSTRACT

Objective: This qualitative study examined the relationship between health, hunger, and food insecurity among African American women in Philadelphia.

Design: Four focus groups and 12 individual in-home, semistructured interviews were conducted.

Setting: 3 food pantries in Philadelphia, Pennsylvania.

Participants: 34 women recruited from 3 food pantries.

Phenomenon of Interest: Interview topics included participants' experiences of food insecurity, food sources, and the relationship between food, hunger, and health.

Analysis: A phenomenological coding scheme and network analysis was developed based on themes emerging from qualitative data.

Results: The experience of food insecurity was related to violence and poor mental health. Women described 2 kinds of hunger: "hunger of the body" and "hunger of the mind." Hunger of the body referred to the outright painful sensation of hunger caused by insufficient funds. Hunger of the mind was related to trauma, encompassing feelings of depression and hopelessness. Both forms of hunger may be a physical manifestation of structural and interpersonal violence.

Conclusions and Implications: There is a need for a broader framework to examine the health effects of food insecurity that addresses women's safety, economic independence, and physical and emotional well-being.

Key Words: food insecurity, violence, hunger, women, qualitative methods, African American

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INTRODUCTION

Food insecurity, currently defined as the lack of access at all times to enough food for an active and healthy life, disproportionately affects female-headed households, households with children, and people of color. In 2005, 12.6 million households (11%) experienced food insecurity at some point during the year, primarily as a result of inadequate income to purchase food. Households headed by single females with children experienced food insecurity at 3 times this rate (31%). Moreover, African American house-

holds experienced food insecurity at almost 3 times the rate of white households (22.4% vs. 8.2%).¹

Food insecurity among adults has been associated with multiple poor health outcomes, such as poor overall health,²⁻⁷ poor mental health,⁸⁻¹² and higher rates of chronic disease with more severe complications.¹³⁻¹⁶ In addition to unacceptably high rates of food insecurity, African American women suffer some of the worst burdens of disease and poor health compared to other groups in the United States. In the most recent food insecurity studies to date, mental health, exposure to violence, and chronic disease disproportionately affect African American women who are food insecure.^{2,12} However, the *contextual* factors associated with their health in relation to food insecurity are still poorly understood.

Qualitative research is more likely to investigate the contextual factors of hunger. However, in North America, such qualitative studies that have included African American women have not distinguished African American women's experiences from those of other women.¹⁷⁻¹⁸

Aside from the qualitative work of the Manpower Dem-

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onstration Research Corporation (MDRC) program¹⁷ and advocacy work of antihunger organizations,¹⁹ there is a dearth of qualitative food security research on African American women who reside in inner cities. There has also been little investigation on the phenomenon of the relationship between food insecurity and health from the women who embody that relationship in everyday life. In addition, most food insecurity studies use cross-sectional study designs and measure the associations between food insecurity and health outcomes. Yet there is minimal ability to determine causality, or the local contexts that influence such associations.

In the middle and late 1980s, there was little consensus on the existence and experience of hunger in the United States and the potential health effects from lack of food. Through the ethnographic methods of participant observation and in-depth interviewing, Radimer and colleagues used a qualitative, phenomenological approach to investigate the experience of hunger among women in order to find ways of talking about lack of food from those who experience it the most.^{20,21} From analyses of the themes and cognitive testing regarding standardized questions related to these themes, a measure of food insecurity grounded in a Rasch model was created and adopted by the US Department of Agriculture (USDA).²² This USDA Household Food Insecurity Scale has since been included in national surveys. Each year, annual prevalence rates are officially released by the USDA.¹

Since the development of the measure, other qualitative research has investigated the experience of lack of enough food in Quebec²³ and in Toronto.⁴ More recently, in the United States, qualitative food insecurity investigations regarding adults have addressed the experience of food insecurity among the elderly²⁴⁻²⁷ and among migrant farm workers,^{28,29} as well as cognitive testing regarding the applicability of the US food insecurity scale in different cultural and linguistic contexts.³⁰ Most of this research has sought to develop ways to compare qualitative findings with the current quantitative USDA Household Food Insecurity Measure to investigate how adequately it measures lack of access to food.

Similar qualitative research has also been undertaken outside the United States. The drive behind this research has been to develop econometric and psychometric techniques for the purposes of estimating food insecurity across a wide range of a population.³¹ This type of exploration is summarily important in light of the recent National Academies of Science report prepared by the special expert panel on food insecurity.³² The report suggested that although food insecurity is essential to measure, the definition and measurement of hunger should be refined. This is especially the case given the current methods of calculating severe food insecurity, and, as the panel suggests, the emotional and political weight that the term “hunger” carries.

The emphasis of the special panel of the National Academies of Science was to scrutinize the measures used to quantify the experience of lack of food. This type of

discourse on food insecurity is primarily concerned with estimating the magnitude within the population. The focus on measurement techniques for accurate population estimate has no real intention to understand hunger as an experience that “matters” to individuals. “Experience,” defined by Arthur Kleinman, is the “flow of everyday interactions in a local world.”³³ Experience is dependent on relationships with others; it is affected by social, cultural, and political processes, as well as with subjective states, such as emotions and memory. To highlight experience is to emphasize *what matters to individuals in their local world*, and the values that are embodied therein.³⁴ In current food insecurity discourse, the experience of lack of access to food or food deprivation, within the local context of lived human experience, is lost or ignored.

The investigation presented here went beyond the intention to crosscheck quantitative measures with qualitative definitions of hunger. It sought to characterize hunger qualitatively, without restriction to comparisons with the USDA food insecurity measure (for instance, what qualitative response fits or does not fit with a concept currently used), and it sought to investigate women’s explanatory mechanisms for the relationship between lack of access to food and their own health.

This study used a phenomenological approach. In qualitative research, a phenomenological investigation is grounded in the analysis of everyday, lived experience.³⁵ Thus, this investigation sought to understand food insecurity and hunger in the somatic, local, and valued experiences described by low-income African American women.

A phenomenological approach was chosen for this investigation because the experience of food insecurity and hunger is, at its core, an experience of suffering. The depiction and understanding of physical and social suffering demands a kind of inquiry that privileges lived experiences to the point where one cannot deny their moral implications.³⁶⁻³⁷ In an effort to resist reducing the suffering of hunger to a medical illness or a social pathology, the study described here sought to ground its inquiry in lived experience to understand the relationship between food insecurity and health in ways that matter to individuals. As previously stated, African American women experience some of the highest rates of food insecurity in the United States. From the theme analysis of their narratives, a conceptual model of the relationship between food insecurity and poor health was created.

METHODS

Participants were recruited from 3 food pantries in north Philadelphia between May 2002 and January 2003. Food pantries are church- or community-based emergency feeding programs that provide free food packages (groceries) to low-income people in need. They are generally open 1 day a week, and they may often limit the use of their food cupboard to once a month by each of their clients. A total

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