

Researchers find household insecurity associated with food insecurity, poor health

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Researchers from Boston Medical Center have recently found that as household energy insecurity increases, the odds of infants and toddlers experiencing food insecurity, negative health, hospitalizations and developmental risks also increases. A household experiences energy insecurity when it lacks consistent access to the amount or the kind of energy needed for a healthy and safe life. These findings appear in the Vol. 122, No. 4, October 2008, issue of the journal *Pediatrics*.

Rising energy prices are forcing many low-income families to choose between paying utility bills and other necessities, such as food and rent. Health effects of inadequate home heating and cooling on the elderly have been described in some detail, but research has not addressed the effects of home energy insecurity on infants' and toddlers' health and development.

BMC researchers conducted a cross-sectional study of caregivers using the emergency departments and primary care clinics in five large urban hospitals. Of the 9,721 children who were studied, the researchers found 11 percent (1,043 children) experienced moderate energy insecurity, while 23 percent (2,293 children) experienced severe energy insecurity.

Children in households with moderate or severe energy insecurity had odds of being reported in fair or poor health (by their caretakers) more than one-third greater than those in energy-secure households. The odds of a child from a moderately-insecure household being hospitalized since birth were 22 percent greater than a child from an energy-secure home.

According to the researchers, many poor families have to make difficult choices between paying for energy to heat (or cool) their homes and paying for enough food because household expenses do not allow both. "In addition to direct effects of

unregulated environmental temperatures on infant and child health, our data suggests that household food insecurity associated with energy insecurity can also adversely affect children's nutritional status and health," said lead author John Cook, PhD, co-principal investigator of the Children's Sentinel Nutrition Assessment Program (C-SNAP) at BMC.

"Pediatric health care providers need to be aware of the energy security status of their patients' households and use this information to inform decisions regarding both treatment and referrals for other services," he added.

Source: Boston University

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