

An Examination of Food Behavior and the Barriers Preventing Food Insecure Louisiana Residents from Participating in Food Assistance Programs.

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Background: Food insecurity is the lack of consistent access to nutritious food to support a healthy lifestyle. It is a social determinant of health that directly correlates with a higher probability of numerous chronic diseases, and Louisiana has the third highest rate of food insecurity in the United States. Several support systems currently exist to aid in alleviating the burden of food insecurity in our communities ranging from local charitable organizations to federal assistance programs. A federally funded food assistance program known as the Supplemental Nutrition Assistance Program (SNAP) aims to mitigate food insecurity for low-income families and allow access to nutritious foods. SNAP benefits have been proven to reduce the likelihood of being food insecure by up to 30%. However, in 2023, 1 in 3 food-insecure individuals were not eligible to receive SNAP benefits. We have seen a similar trend locally through our work with the *Geaux Get Healthy Clinical Program at Our Lady of the Lake* in Baton Rouge, LA where 47% of food-insecure participants received SNAP benefits. There is a need to identify themes and barriers to food assistance program utilization to help propose future solutions to better address food insecurity in the area.

Methods: Affiliates of an urban, regional medical center recruited food-insecure participants from November 2022 to April 2023 who were enrolled in or interested in the *Geaux Get Healthy Clinical Program at Our Lady of the Lake* (GGHOLOL). A convenience sample of individuals previously identified as food insecure through screening from GGHOLOL was contacted. Two authors performed a semi-structured interview with consenting participants that was recorded and transcribed. Interview transcripts were reviewed, and two independent data coders performed an inductive thematic analysis of the qualitative data.

Results: Of the 10 participants interviewed, only 40% of these participants received SNAP benefits. 60% of participants did not receive help through other community assistance. In addition, we identified two major themes: shortfalls of support systems and sacrifice. Shortfalls of support systems included difficulties with the SNAP application process, failure of SNAP benefits to adjust to household expenditures, loss of SNAP benefits, and challenges associated with community resources such as awareness and quality of resources provided. Sacrifices identified by participants included specific shopping behaviors to save money such as purchasing cheaper food over healthy food, buying in bulk, and eating food after the expiration date. Participants also reported partially paying bills to afford groceries and difficulty with transportation.

Conclusion: Our study identifies access and communication issues with SNAP leading to difficulty for food-insecure individuals and families in accessing services or receiving enough benefit assistance. Additionally, there is a disconnect between allotted SNAP benefits and need. We also identified cost-saving behaviors in a food-insecure population, trouble with transportation to get groceries, and a lack of awareness of local community programs. Our study highlights possible areas of improvement for future health policy and programming.