SA households are facing food insecurity, causing anxiety and depression

Food insecurity and coping strategies associate with higher risk of anxiety and depression among South African households with children

The recent COVID-19 pandemic and economic challenges have worsened food insecurity, particularly in resource-poor settings like South Africa. Food insecurity does not only increase the likelihood of obesity and related diseases, but also negatively impacts mental health, with children facing detrimental effects on their overall development. Our nationally representative survey that was conducted in October 2021 revealed that over 20% of South African households experienced food insecurity during the transition out of the COVID-19 pandemic. Findings from that study had also highlighted the relationship between food insecurity and the risk of anxiety and depression, particularly when coping strategies involved extreme measures like begging for food. However, whether the high rates of food insecurity were caused by the lockdown restrictions was not investigated. Likewise, that previous study was not focused on households with children who are known to be more affected by inadequate food access. Therefore, to get more insight into the scope of food

insecurity among South African households with children, we conducted a similar survey after the lockdown restrictions had ended.

Methodology

We used a nationally representative study design to include all 9 South African provinces. A total of 1 774 adults living with children were surveyed and the data were weighted to represent almost 21 million households. Face-to-face interviews were done using questionnaires that included both household-related aspects and individual-related factors. Adapted from validated questionnaires, the study assessed food insecurity, coping strategies, and anxiety/ depression levels. We used Community Childhood Hunger Identification Project (CCHIP) for food insecurity, Coping Strategies Index (with 11 items) to understand how households cope during food shortages, and Generalised Anxiety Disorder (GAD-7) and Patient Health Questionnaire-9 (PHQ-9) for anxiety and depression screening, respectively.

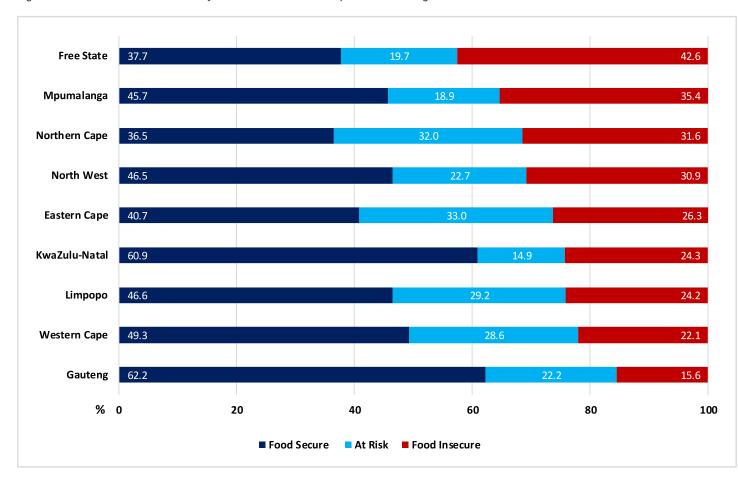


Figure 1: Prevalence of food insecurity across all South African provinces among households with children

Figure 2: Coping strategies among food-insecure South African households with children

	6.8					
Rely on less preferred and less expensive foods	22.9	14.0		7.5		48.8
Borrow food, or borrow money to buy food	21.9	12.5	4.5 0.9			60.2
Purchase food on credit	15.0	4.3 10.7 0				69.5
Rely on help from a relative or friend outside the household for food	22.8	11.9	3.7 0.9			60.6
Limit portion sizes at mealtimes	21.4	14.2	4.1 3.1			57.2
Ration the little money you have to household members to buy street food	18.6		0.9			66.9
Limit your own, or another adult household member's, consumption to ensure a child gets enough food to eat	18.2	4.	2.8			62.6
Reduce number of meals eaten in a day	18.8	12.8	4.3 2.6			61.4
Skip whole days without eating	10.9 7	2.0 .4 0.5				79.2
Send household members to eat elsewhere	12.6	2,4 6.1 0.5				78.4
Send household members to beg for food	8.6 6.	2.0 1 0.4				83.0
	0.0	20.0	40.0	60.0	80.0	100



Key findings

We found that food insecurity among South African households with children was more than 1 in 5 (about 23.7 %). We also confirmed that living in a food-insecure household was associated with a higher risk of anxiety and depression, even after the lockdown restrictions had ended. Our study further reported that 67.0% of the households used at least one coping strategy, and more than half (50.6%) used at least three of the included strategies. The study demonstrated that all coping strategies used by South Africans to deal with food insecurity had varying associations with risk of anxiety and depression. Among the tested strategies, relying on less preferred and less expensive foods was the most common, used by 85.5% of food-insecure households. Like our previous findings, sending a household member to beg for food was the strongest factor associated with anxiety and depression.

Key conclusions

The findings from the study underscore the high prevalence of food insecurity among households with children following the COVID-19 pandemic. This emphasizes the need for collaborative efforts between the government, private sector, and civil society to address and eradicate food insecurity, particularly in poorer households with children, who are identified as the most vulnerable population.

Reference:

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