Assessing Food Insecurity
Sister2Sister

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Project Background

- **Sister2Sister** Assessing Food Insecurity in Program Participants
- **S2S** is a prevention and empowerment program for young women living in Boston where high rates of Chlamydia infection prevails among adolescents, with 70% of adolescents with a diagnosis are young women of color ages 15–25
- **S2S staff** brought food Insecurity to program attention and program policy adopted giving staff authority to provide additional program incentive ($25 gift card) to address immediate needs of a participant.
- **S2S management team** is lead by me and program coordinators
Aims & target population

- Assess food insecurity in S2S participants
  - “limited or uncertain availability of nutritionally adequate and safe food or limited/uncertain ability to acquire acceptable foods n socially acceptable ways” (USDA Community Food Assessment Toolkit)
  - Hunger Vital Signs validated 2–item screening tool suitable for clinical and community–based use.

- Young women (Black/Latina) age 15–25 living in Boston
  - (Dorchester, Roxbury, Mattapan)

- Address participants needs/connect with resources to reduce vulnerability

- Inform Best Practice for serving young women
Key activities & outcomes

- Understanding the problem and issues
  - Youth as a primary population for food insecurity
  - Food Insecurity and HIV/AIDS – increased vulnerability to and worsens clinical conditions for HIV/AIDS

- Integrate Hunger Vital Signs into S2S individual assessment
  - Determine need with participant population (N=60–75)

- Identify referral resources for food and food programs
  - Referral relationship developed with programs serving youth/young women
Inputs
- Funded S2S program:
- 3P/T staff
- Participant incentive $25 gift card
- Outreach and recruitment partnerships and community connections

Activities
- Conduct individual level HIV/STI education and risk assessment with the target population
- Hunger Vital signs integrated on intake forms
- Assisted referrals for food resources
- 60–75 ILI conducted in 6-month period

Outputs
- % of participants identified as food insecure
- # participants referred
- Increased access community food resource for young women

Outcomes
- Short-term
  - Increased knowledge of HIV/STI
    - Perception of risk
    - Skill to negotiate safer sex
  - Short and long term goals for sexual health
    - Intention to practice safer sex
- Intermediate
  - Consistent safer sex practices
  - Reduction in incidence of HIV/STI
- Long-term
  - Zero HIV/STI in community
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  - Young WOC Empowerment
  - Procedure policy changes
  - Procedure policy changes
  - Affect Best Practice gender responsive programming
  - Decrease vulnerability for Young women HIV/STI risk
  - Decrease vulnerability for Young women HIV/STI risk
Public Policy

Community

Organizational – Services providers HIV/STD & Food Service affect organizational policy for serving young women

Interpersonal – Staff Relational to program participants

Individual – Young WOC 12–25
Increase: knowledge, skill, Access

Social Ecological Model
Leaders in Health concept –
  ◦ “Formative Research”

Key strategies–
  ◦ Education/Communication, participant involvement

Short term action steps –
  ◦ Literature search on topic of food insecurity, youth, HIV/AIDS, focus group questions

Long term action steps
  ◦ Conduct individual assessment/Hunger Vital Signs
Initiative 2 – Staff Education

- Leaders in Health concept that you are applying–
  - Social Ecological Framework – Interpersonal
    - Self in Relation (Horntensia Amaro)

- Key strategies–
  - Education and Communication; feedback and support

- Short term action steps
  - In–service training with staff
    - Using assessment tool; focus group results
  - Develop referral relationships

- Long term action steps
  - Quality assurance conducting assessments
Leaders in Health concept that you are applying –
  ◦ Social Ecological Model – Organizational

Key strategies
  ◦ Education and communication

Short term action steps
  ◦ Analyze data for impact of food insecurity and high risk behavior

Long term action steps
  ◦ Recommendations as appropriate for Best Practice
Sister2Sister aims is to offer the best possible programs that support the sexual health of young women of color in Boston.

This research we hope will improve our responsiveness to the gendered needs of young women to reduce vulnerability and increase protective factors for their sexual health and empowerment.