

# Chapter 1

## Structural and Social Adversity and Food Insecurity in Families with Young Children: A Qualitative Metasynthesis



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**Abstract** Food insecurity (FI) is defined as a household-level economic and social condition of limited or uncertain access to adequate food. Approximately 14.3 million households in the U.S. are food insecure and FI is associated with numerous poor health and social outcomes, particularly in families with young children. There is growing recognition in research regarding the importance of understanding and addressing structural determinants of diet/nutrition more generally and FI specifically. Qualitative metasynthesis is a technique for generating new insights across qualitative studies and helps provide comprehensive interpretation of existing research. The purpose of this metasynthesis is to understand relations between social and structural adversity, specifically, incarceration, racism/discrimination, gender discrimination, and income/wage inequality and FI and its consequences for families with young children. The synthesis resulted in the identification of five themes: (1) FI is an indicator, consequence, and determinant of social and economic disadvantage; (2) multiple layers of disadvantage exist in FI families; (3) root causes of FI are poverty, unemployment, and lack of a living wage; (4) added burden of incarceration (a pathway to and consequence of FI); and (5) broken communities (racial/ethnic and economic segregation, FI, and food access). Findings highlight the need to consider structural factors in interventions addressing FI.

**Keywords** Food insecurity · Structural determinants of diet · Burden of incarceration · Economic disadvantage · Social determinants of health · Food insecure families · Families with young children · Social adversity

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## Introduction

According to the United States Department of Agriculture (USDA), food insecurity (FI) is defined as “a household-level economic and social condition of limited or uncertain access to adequate food” (Coleman-Jensen, Rabbitt, Gregory, & Singh, 2019). In 2018, approximately 11.1% or 14.3 million households in the United States (U.S.) were food insecure at least some time during the year (Coleman-Jensen et al., 2019). The adverse social, physical, and psychological outcomes associated with FI are well documented, particularly in households with young children. These include higher rates of diabetes and hypertension, self-reported fair or poor health, maternal depression, behavioral problems/developmental delays in early life, and poor academic achievement (Abdurahman, Chaka, Nedjat, Dorosty, & Majdzadeh, 2019; Berkowitz, Basu, Meigs, & Seligman, 2018; Cook et al., 2006; Gundersen & Kreider, 2009; Venci & Lee, 2018). These outcomes are not only detrimental to the health and well-being of individual children and families but also negatively impact broader communities and society. Based on a combination of lower worker productivity, higher costs of public education, greater health care costs, and the cost associated with emergency food distribution, the economic burden associated with FI has been estimated to be over \$167.5 billion annually (Cook & Poblacion, 2016; Shepard, Setren, & Cooper, 2011).

Although there has been a cumulative decline in FI since about 2011, disparities in FI by race/ethnicity, gender, and household structure continue to persist (Coleman-Jensen et al., 2019). Compared to the national average, rates of FI are higher in households with children overall (13.9%), households with children under the age of 6 years (14.3%), and households with children headed by single women (27.8%) and single men (15.9%). Race/ethnicity and income are also key determinants of FI with non-Hispanic black households (21.2%), Hispanic households (16.2%), and low-income households with incomes below 185 percent of the poverty threshold, (approximately \$24,858 for a family of four; 29.1%) experiencing higher levels (Coleman-Jensen et al., 2019). Moreover, as expected, these racial/ethnic and socioeconomic disparities are consistent across both levels of FI including *low food security* (reports of reduced quality, variety, or desirability of diet. Little or no indication of reduced food intake.) and *very low food security* (reports of multiple indications of disrupted eating patterns and reduced food intake; Coleman-Jensen et al., 2019). Consequently, identifying solutions to lower the prevalence of FI in high risk groups has the potential to reduce the associated health and social burden in the U.S. overall.

There is growing recognition in the literature regarding the importance of understanding and addressing social and structural determinants of diet/nutrition more generally, and FI specifically (Gadhoke, Pemberton, Foudeh, & Brenton, 2018; Mills et al., 2017; Veroneze de Mello et al., 2020). As defined by the World Health Organization, social determinants of health (SDOH) are the circumstances in which people are born, grow, live, learn, work, and age, and represent key social drivers including poor housing conditions, poverty, and unemployment that impact health (Marmot, 2009). Previous studies have classified FI as a SDOH and/or closely

aligned it with other SDOH to demonstrate how families with FI lack access to the supportive resources needed to make ends meet (Andermann, 2018; Marmot, 2009). Moving more *upstream*, social determinants are influenced by broader structural factors within society including how the governing process, economic and social policies affect family's wages/earnings; working conditions; and ability to access housing, education, and transportation. Structural determinants guide equity and fairness in the distribution of resources in society, for example, whether they are unjustly/justly distributed according to race, gender, social class, geography, sexual identity, or other socially defined group (Braveman & Gottlieb, 2014; Dean, Sharkey, & Johnson, 2011; Odoms-Young & Bruce, 2018).

The purpose of this chapter is to apply a qualitative metasynthesis approach to explore possible social and structural determinants, specifically: incarceration, racism/discrimination, gender discrimination, and income/wage inequality of FI and its consequences for families with young children. Previous studies have shown that qualitative research can provide in-depth insights about the conditions and experiences of food insecure families and elevate their voices in designing programmatic and policy solutions to improve health/social outcomes and quality of life (Arney et al., 2018; Carter-Edwards et al., 2015; Valentine, DeAngelo, Alegria, & Cook, 2014). Synthesis of qualitative studies is a promising approach that has received more attention as an important source of evidence, can provide information about a studied phenomenon, and can complement findings from systematic reviews and meta-analyses allowing for a better understanding of existing knowledge (Mohammed, Moles, & Chen, 2016). Although several approaches for summarizing qualitative findings exist, metasynthesis is a relatively recent technique that was developed by Sandelowski and colleagues in the late 1990's (Sandelowski & Barroso, 2007; Sandelowski, Docherty, & Emden, 1997). Metasynthesis allows for understanding the collective body of qualitative evidence in a selected field, which can help researchers and practitioners to more effectively move from knowledge generation to knowledge application (Sandelowski et al., 1997). Given the rise of shorter qualitative studies specifically in the areas of health and nutrition, metasynthesis may be particularly important in examining content and context as it relates to inequities in FI and the social and structural determinants that drive them.

## **Qualitative Metasynthesis: Determinants of Food Insecurity**

The current study applied the qualitative metasynthesis approach outlined by Sandelowski and Barroso (2007) and Noblit and Hare (1988). In contrast to a meta-analysis, where the focus is to yield a more precise estimate of the effect of a treatment or risk factor for disease, the goal of a metasynthesis is to provide an interpretation of findings across qualitative studies while maintaining each study's individual context and integrity (Zimmer, 2006). Consistent with this approach, the author completed these six steps (Erwin, Brotherson, & Summers, 2011):

- Step 1: Formulate a clear research problem and question.
- Step 2: Conduct a comprehensive search of the literature.
- Step 3: Conduct careful appraisal of research studies for possible inclusion.
- Step 4: Select and conduct metasynthesis techniques to integrate and analyze qualitative research findings including quality appraisal, in-depth data immersion, data analysis (i.e. application of inductive, deductive, and abductive reasoning), and exploration and thematic synthesis.
- Step 5: Present synthesis of findings across studies.
- Step 6: Reflect on the process.

### ***Research Problem and Question***

As previously stated, the research question under consideration was to explore possible social and structural determinants, specifically: incarceration, racism/discrimination, gender discrimination, and income/wage inequality, of FI and its consequences for families with young children.

### ***Comprehensive Search of the Literature***

Six databases including PubMed (National Library of Medicine), CINAHL (EBSCO), Academic Search Premier (EBSCO), Google Scholar, Sociological Abstracts (ProQuest), and PsycINFO (Ovid) were searched using a combination of relevant terms. The database searches were supplemented by hand searching and reviewing the references of relevant studies. To gain a more complete understanding of the issue overall, there were no date restrictions on the searches. Key search terms included terms related to *FI*, specifically: food insecurity, food insecure, food access, and hunger. Key search terms related to *qualitative research methods, approaches, and designs* included qualitative, grounded theory, ethnography, phenomenology, narrative analysis focus groups, interviews, observations, photovoice, and photo elicitation. These terms were combined with terms that reflect *incarceration*, including incarceration, incarcerated, arrest, prison, justice system, and jail; *racism*, including racism, discrimination, oppression; *gender*, including gender, male, female, transgender, women, and men; *income/wage inequity*, including socioeconomic status, income, wages, employment; *social determinants of health*, including social determinants of health, social structures, and structural determinants; and *children*, including children, child, and parenting. The inclusion criteria for articles included studies that were: (1) peer reviewed, (2) published in English, (3) conducted in the U.S. or Canada, (4) qualitative in research design (specifically, any qualitative tradition and/or data collection or analysis methodology), and (5) conducted in-person or via phone (no computer or written responses on completed surveys). Because the goal in a metasynthesis is to analyze data across original peer

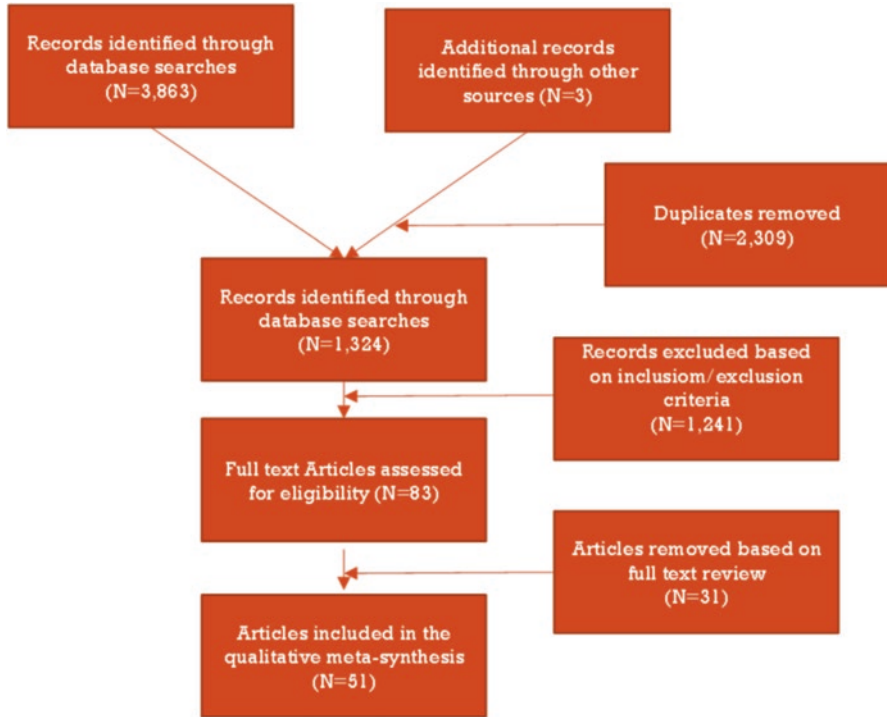
review studies, editorials, review articles, and dissertation/theses were excluded from this analysis.

### ***Appraisal of Research Studies for Inclusion***

Studies were first screened on title and abstract and then followed by full-text screening. An initial quality appraisal was carried out using the Letts quality appraisal tool, a comprehensive guide for evaluating the rigor of qualitative research for metasynthesis. Consistent with the items and domains outlined in the *enhancing transparency in reporting the synthesis of qualitative research* (ENTREQ) statement, the Letts tool consists of 17 elements including: purpose, background/literature review, study design, sampling, data collection and analysis, and overall rigor (Letts et al., 2007; Tong, Flemming, McInnes, Oliver, & Craig, 2012). To capture congruency between methodology and methods, the congruency between analysis and conclusions, and the confirmability and credibility of the findings, a second review was conducted using the Joanna Briggs Institute Checklist for Qualitative Research (Joanna Briggs Institute (JBI), 2017).

### ***Thematic Synthesis of Findings***

An iterative process of reading and interpretation was used to examine the complete text of each study. Thematic synthesis provides a novel interpretation of findings to go beyond mere aggregation (Thomas & Harden, 2008). The process initially involved reading and re-reading articles in their entirety to obtain a clearer understanding of the issues discussed within each paper. Articles were then input into Atlas.ti, a qualitative management software and classified into *families* based on their type of approach (e.g., phenomenology), methodology (e.g., focus groups), and topic (e.g., racism; Hwang, 2008; Friese, 2012). Methods, results, and discussion section text was then coded line by line to generate categories that reflected the intersection/relationships between FI and social/structural determinants of health. Using an inductive approach, this process consisted of identifying discrete ideas and concepts, breaking down article sections into smaller conceptual text units (e.g., sentences and paragraphs), and labeling or coding text units according to their meaning. Combining categories that pertained to the same phenomena and/or developing sub-categories was used to develop the final list of categories and begin the process of extracting metaphors or emerging themes (Lachal, Revah-Levy, Orri, & Moro, 2017; Sandelowski et al., 1997). The category system was then reviewed and compared/contrasted to determine relationships between constructs using reciprocal translation. This included examining the key concepts in relation to others in the original study and across studies, and analyzing the list abductively for similarities, differences, explanations, and emerging patterns. Translating findings into key con-



**Fig. 1.1** Flow of article identification and selection process

cepts or interpretive metaphors from one study to another is important to glean concepts across studies that apply different research designs, approaches, and methodologies (Sandelowski et al., 1997) (Fig. 1.1).

### *Metasynthesis Findings*

In total, the search method yielded 3863 citations. An additional three studies were identified through hand searches and reference lists. Approximately 2309 references were removed as duplicates with 1324 remaining. Abstracts and titles were assessed using inclusion/exclusion criteria leaving 83 articles. Subsequently, full-text articles were reviewed for quality and content. Thirty-two additional articles were excluded because the article were not relevant to families with children (e.g., homeless adults without children), targeted some other nutrition-related area with limited/no discussion of FI (e.g., childhood obesity, child feeding), focused on personal experiences of FI with limited/no discussion of determinants, did not provide any information on the sample or methodology, and/or reported limited results.

Fifty studies within 51 articles were included in the metasynthesis. Two of the articles included data from the same study but focused on different research questions. Articles were published in a diverse set of journals from a variety of disciplines including nutrition, sociology, public health, women and gender studies, social work, family studies, maternal and child health, medicine, and public policy.

The 50 studies included in the metasynthesis had a total sample of over 1600 participants with supplementary analyses of observations and policy documents that incorporated an unknown number of individuals, contexts, and experiences. As expected, the majority of the participants targeted were low income and/or participated in food assistance or similar programs such as the Supplemental Nutrition Assistance Program (SNAP) or Supplemental Nutrition Program for Women, Infants, and Children (WIC). Interviews (65%) and focus groups (27%) were the dominant data collection methodology used in the studies. For data analysis, most studies applied content analysis (39%), grounded theory/constant comparative analysis/modified ground theory (30%), or thematic analysis (18%). Studies largely targeted all or majority women and/or low income or unemployed adults, and about half targeted rural and/or African American, Latinx, or Native American populations.

**Themes of Food Insecurity in Families with Children** The synthesis resulted in the identification of five principal themes which highlight the relationships between structural and social adversity and FI in families with children. As captured by Beaumier and Ford (2010), overall, FI was influenced by “social, economic, political and environmental conditions and processes which interact over multiple spatial and temporal scales” (Beaumier & Ford, 2010, p. 200). Themes include: (1) FI as an indicator, consequence, and determinant of social and economic disadvantage; (2) Carrying the weight of the world on your shoulders: Multiple layers of disadvantage; (3) Root causes: Poverty, unemployment, and lack of a living wage; (4) The added burden of incarceration; and (5) Broken communities: Racial/ethnic and economic segregation, FI, and food access. A more detailed description of each of the themes is provided.

*FI: Indicator, Consequence, and Determinant of Social and Economic Disadvantage* Across studies, the experience of FI served as an indicator, a consequence, and in some discussions, a determinant of social and structural adversity across the life course. Consistent with the early descriptions of FI and hunger by Radimer and colleagues (Radimer, Olson, & Campbell, 1990), studies confirmed that the lived experience of being food insecure is multidimensional, including quantitative, qualitative, psychological, and social dimensions and serves as a key indicator of families’ material and social deprivation and the stress connected to it:

When you ain’t got food, you get depressed, and you stressed. Because you stress yourself trying to figure out how you going to get it. How you going to get it, that’s the biggest thing. Who I’m call, where I’m a go, what I’m get. (Participant in Chilton & Booth, 2007, p. 120).

The hardship associated with FI was further magnified by the responsibility of *caregiving*. As cited earlier, the prevalence of FI varies considerably among household types. Households with children, overall, and children under the age of 6 years disproportionately bear the burden of FI. Studies highlighted the strong emotional impact that parents/caregivers experienced when they were not consistently able to provide food for their family. A key theme that emerged in the metasynthesis was that participants' concern about adequately nourishing their children greatly exceeded the desire to feed themselves:

You are thinking about how you will provide for your kids and what you will not be able to make and create a healthy meal for them because you are limited. A lot of people around here have that experience... I think that they are barely getting by. I'm watching the news, considering the situation that I am in. You feel angry, sad, and upset. When you follow all the rules...you feel upset, like "what now?" (Participant in Page-Reeves, Scott, Moffett, Apodaca, & Apodaca, 2014, p. 10).

It's depressing because I'm okay with my kids going to sleep with a full stomach, or at least a satisfied stomach that they can go to sleep. But it's uncomfortable for me to wake up and my stomach's touching my back... 'Cause now I'm upset 'cause there's nothing to eat here. [My kids are] looking at me like, "Okay we ate yesterday, what about today?" So, then I'm like, "Okay, now what do I do?" (Participant in Knowles, Rabinowich, Gaines-Turner, & Chilton, 2015, p. 27).

It's a stress to have to think for tomorrow what you are going to eat when there is nothing in the refrigerator; Well, you have to feed your children first and you're pregnant and you don't have nothing else to feed yourself; if your kids ask for something, 'Oh, I want a snack for school' and you don't have the money to afford, Food Stamps or whatever. It is stressful. (Participant in Bermúdez-Millán et al., 2011, p. 7)

Moreover, the trade-offs parents/caregivers make to feed their families also emphasized the role of FI as an indicator of material deprivation. Across studies, participants reported needing to decide between food and covering other basic necessities, as well as the associated feelings of inadequacy and guilt:

...if I paid the medical bills we wouldn't eat, and it's basically a choice between going into horrific debts and having people look at you horribly and have your credit score tank because you can't pay your medical bills or feed your child, you know. I'm sorry if that makes me a horrible person, I'll take that. I'm going to put food on the table first. (Sano, Garasky, Greder, Cook, & Browder, 2011, p. 119)

I can't afford food. Just paying for rent and utilities is all. So, I just go as far as I can without food. (Dutta, Hingson, Anaele, Sen, & Jones, 2016, p. 652)

In addition, study findings also revealed that some families felt pressure to engage in activities that they viewed as socially unacceptable to access food. In depicting the hunger that she and her child experienced, a participant in Dutta et al. (2016) described being tempted to engage in illegal activity because she could not provide food for herself and son:

This was just recently, actually before I moved out of my old apartment. This was last year. We didn't have no food. I was tempted to go to the store and steal, but I didn't because I have my son with me. And I was in the house trying to call people crying, praying to God,



hoping that a miracle could come and we were in there with nothing but crackers, not even a whole bunch of crackers. And my son is looking at me and am looking at him and am like 'do you want the crackers?' and he is like 'yea.' I gave him some but I try to hide the rest. He was so hungry that he ate the four crackers. He was so hungry that he was still crying, rumpling and crying, won't go to sleep, and neither one of us went to sleep and that whole night was horrible and complicated. We couldn't find food. We couldn't find no friend (Dutta et al., 2016, p. 655).

The stigma associated with the experience of seeking and maintaining food assistance also demonstrated the ways in which social and economic adversity is embodied in experiences of FI. As reported by one participant, "You are ashamed because the system makes you feel ashamed," (Jablonski, McFadden, & Colpaart, 2016, p. 921).

The stigma and shame felt by some participants in accessing food assistance was further illustrated by their perceptions of the inadequacy of the benefit, compared to their need.

Um. It don't meet the needs because [sighs] um, I have 2 kids and 1 on the way and it doesn't help. I get WIC. And WIC helps with the milk, the cheese, the eggs, the healthy stuff. The stuff that you need on a regular basis. The food stamps, you can get, you know, food with it, but how much can you get to feed a full-sized family? With that amount? So, it's just not enough" (Robbins, Ettinger, Keefe, Riley, & Surkan, 2017, p. 1546).

That week before baby bonus [a child tax credit cheque] is always a struggle [referring to accessing milk]...The last couple of days we've been sitting there, no butter, no milk—nothing and I'm just sitting there waiting for cheque day...And my daughter says 'Mom, there's no butter' and I say 'I know. Cheque day is tomorrow (Williams, McIntyre, & Glanville, 2010, p. 147).

Study results also demonstrated that FI is a consequence of social and structural adversity. In a study of 25 migrant women originating from Mexico and Central America in Santa Barbara County, California, the intersection of poverty and migration status worked together to impact families' experiences of being food insecure (Carney, 2014). Consistent with the concept of trade-offs, many women in the study made significant sacrifices to feed their families and make ends meet. Similar to the phenomenon described by Sternberg (2010) as "mothering from a distance," to escape poverty and to improve the life of her children, Malena, a participant in Carney (2014) faced the difficult decision to emigrate from Mexico to the U.S., leaving some of her children behind with relatives:

...her decision to migrate was informed by tensions with her husband that obstructed her ability to feed her children... 'He left me with my child when he was only two months old; he came here. He has been coming here since 1984' ... Yet after years of sending remittances home to his family, he suddenly stopped all forms of communication (p. 7).

When I meet Malena, she is working 70 hours per week as a hotel housekeeper and living with her youngest daughter. Three of her children (ages 13, 14, and 18) are still living in Guerrero with their grandmother and she has since divorced her husband. Although Malena conveys tremendous grief in being far from her children, she rationalizes her decision to migrate to the United States by conveying that in Mexico she was no longer able to fulfil her responsibilities as a mother. Her husband had forfeited his obligations—both emotional and

material—to the family, and she had accumulated a debt from needing to borrow money for food purchases (Carney, 2014, p. 7).

Lastly, study findings suggest that early life exposure to FI could potentially serve as a determinant of later social and structural adversity. Conversely, exposure to structural and social adversity in early childhood also could increase the risk of families current FI. Research has shown that disrupted eating patterns in early childhood are linked to an increased risk of adverse social, emotional, educational, and physical outcomes and contribute to poor health and well-being later in life (Cook & Frank, 2008; Johnson & Markowitz, 2018; Whitaker, Phillips, & Orzol, 2006). Grounded in a life course perspective, Chilton, Knowles, and Bloom (2017) examined intergenerational experiences of childhood adversity and FI in 21 food insecure caregivers in Philadelphia. FI and other adverse circumstances in childhood contributed to a participating caregiver’s current condition of being food insecure:

Karina identified childhood experiences of violence and hunger at the roots of her current circumstances. She described how her stepfather’s drug use and violent behavior affected her as a child. She explained that he often stole from her mother and they consequently ran out of money for food. Although she described social support from other relatives who provided meals and emotional support, Karina recognized that the stress of financial hardship and threat of violence in her home accompanied her over the course of her life. Karina explained,

‘It’s like the tree. The tree: it will grow from the roots. So, if the roots is damaged, the tree is going to be damaged. You know? So that’s my tree. Like, my home was rotted by a bad person. And now, it escalated in my life.’

Karina’s description of the roots suggests that current experiences among families reporting FI are related to how caregivers were treated by their own parents and grandparents (Chilton et al., 2017, p. 279–280).

*Weight of the World on Your Shoulders: Multiple Layers of Disadvantage* The majority of the studies considered in the metasynthesis reported that food insecure families navigate disadvantage across multiple systems and domains including: Transportation: limited reliable transportation or no money for gas; housing: unstable housing; social service, business, and government systems: hassles dealing with food and social service systems, and disconnected utilities; health: illness, exposure to sexual/physical violence, and lack of access to health supporting resources; education: limited/low-quality educational opportunities and resources for children; and social networks: burden of supporting other family members and lack of family support vs supporting each other by pooling resources.

Each of these domains existed across a continuum with intensity varying across families and time. For example, in a focus group study of Puerto Rican Latinas experiencing FI in Connecticut, participants described how FI coexists with other social and economic concerns including unsafe physical environments, lack of social support, and lack of access to quality education: “The elementary schools do

not offer a good education for our children. How are they going to even make it to, to middle school?" (Bermúdez-Millán et al., 2011, p. 6). Other studies also highlighted the theme of multiple layers of disadvantage. In contrast to experiencing FI in isolation, findings across studies indicate that the multiple challenges faced by food insecure families are complex and interconnected:

You cannot ask a person, 'Why are you stressing?' You cannot ask a person, 'Why is there so much violence here?' You cannot ask a person, 'Why are you hungry?' All three go together. No matter how you see it, all three go together. I could be here like, 'Okay, I'm stressing because I don't have no food, and it's violent because I'm fighting my husband because we need money.' (Chilton et al., 2017, p. 279).

The possible physical, social, economic, and psychological consequences associated with severe experiences of disadvantage were also described in policy studies examining the lived experience of food insecure families. These multiple layers of disadvantage were viewed as particularly concerning in the face of limited resources and assistance. A study that brought to light legislators' construction of household FI analyzed discussions of FI by members of the federal parliament and provincial legislatures in Canada (McIntyre, Patterson, Anderson, & Mah, 2016). These discussions stressed the consequences of FI and broader disadvantage on families without the appropriate government supports:

Hungry people with no housing get sick, and they get sick more often. They have more encounters with the police and judicial system. It's obvious that people cannot survive on the kinds of supports that you are willing to provide. (Document excerpt in McIntyre et al., 2016)

*Root Causes: Poverty, Unemployment, and Lack of a Living Wage* The majority of studies included in the metasynthesis emphasized the important role of poverty as a root cause of food security among families with children. The impact of generational poverty was particularly salient when participants discussed how poverty shaped both their previous life chances and current opportunities. A participant described how for many families, poverty is a way of life:

That's the hardest thing in life: to face reality. When you face reality then you goin' somewhere. When you in denial, then you at a standstill. And I don't want to be at a standstill. This is the way it is. We is poor and we is hungry (Knowles, Rabinowich, Ettinger de Cuba, Cutts, & Chilton, 2016, p. 27).

Studies also reported that poverty and FI were strongly related to participants' or their partners' employment status, specifically being unemployment or underemployment; difficulty finding a job, keeping a job, or being treated unfairly on a job; and the wages paid and the time wages are received. Several factors were associated with the ability to maintain stable employment including the broader economy, access to reliable transportation, legal residency status, discrimination, incarceration status, and health status/illness. Additionally, families experiencing FI described how long periods of unemployment were associated with stress and uncertainty:

It has been six months now that we are without a job. I don't think that is going to change soon. He [referring to her husband] has been sending out his resume. No luck. As each day goes by, I am less certain (Participant in Dutta et al., 2016, p. 651).

Furthermore, the constant cycle of being employed then unemployed was described. One participant reported that when she had a job her situation was stable, but when she was unemployed it was difficult to cover her living expenses and provide for her family.

'When I had my other job, I used to work at a trucking company...and I got paid more. I was able to keep food consistent [in my house].' Tracy, whose household included her adult daughter, two grandchildren, and teen daughter, experienced a period of inadequate food supplies due to a medical crisis that led to job loss. She reported that unemployment income wasn't 'nearly enough' to cover food and living expenses (Jarrett, Sensoy Bahar, & Odoms-Young, 2014, p. 197).

A common theme among families (as well as among policy makers) with the lived experience of being food insecure was the inconsistency between the wages/earnings of low-income families, the costs of basic goods and services, and inadequacy of public benefits. Some families mentioned how the food assistance system can disadvantage low-income families by reducing benefits when they obtain employment:

Because, you know, you figure if you get a job, if I get a minimum wage job, like, now, something that's just paying minimum wage, you know, and I may be working 30 hours a week, they're going to cut my Food Stamps. They're going to cut. So, then you figure, I'll be paying for, you know, I have to have transportation to get to and from that job. I have to. It's not enough to be able to be able to get by. You know what I mean. I think if you get a job, if you a, you know, get a small job and you're going to cut some of my benefits, don't take, you know what I mean, 75% of it, you know what I mean? Because I'm not going to be able to survive because I'm going to have to spend money on food. I'm going to have to spend money on... You know, that little pay check isn't not gonna, you know, I'm still not going to get ahead. And it's not like I'm making enough to really survive" (Robbins et al., 2017, p. 1547).

*Added Burden of Incarceration* Similar to the previous theme of root causes, incarceration impacted families with the lived experience of FI by limiting opportunities for employment and access to resources. Previous quantitative studies have shown that incarceration is associated with a higher prevalence of FI in households with children (Cox & Wallace, 2016; Davison et al., 2019; Turney, Lee, & Comfort, 2013). Additionally, higher rates of FI have been reported among formally incarcerated adults (Testa, 2019). However, only three studies included in the current meta-synthesis specifically mentioned relationships between incarceration and FI. These studies suggest that FI can serve both as a pathway to incarceration based on engagement in crime to make ends meet (e.g., theft) and as a consequence of incarceration (e.g., difficulty finding employment post-incarceration). This theme was highlighted by De Marco, Thorburn, and Kue (2009):

One subtheme that came up several times was that participants had made poor decisions in the past that were contributing to their experiences with FI. A rural female participant

(food-insecure, non-low-income) had spent ten years in prison. She had experienced stigma in her small community because of her stint in prison and had a history of unstable employment. She attributed her FI to this lack of job stability (p. 1014).

Studies that considered relationships between FI and incarceration mainly focused on the impact of incarcerated fathers or partners on family life and resources. Most of these studies reported that prior to incarceration, fathers were contributing economically to the household and actively involved in parenting their children. Consequently, the loss of fathers from the household caused economic hardship which led to FI. Participants across these studies cited additional challenges associated with incarceration that exacerbated the negative impact of FI on families including maintaining housing security, loss of social relationships, loss of employment, and accumulation of legal and household debts.

While in prison I had no real sources of income. You can do work while in jail but they pay less than minimum wage. So yeah...I had nothing to contribute to family finances...[Wife's name] was on her own...making sure the kids had a roof over their head and food on the table (Participant in Davison et al., 2019, p. 7).

Findings also indicated that the threat of FI in the context of incarceration of a male partner could correlate with the risk of other health issues including sexual risk. Similar to the theme of FI as an indicator of social and economic adversity, the lack of support from the incarcerated partner prompted some women to develop new romantic relationships to secure shelter and food. In some cases, participants described how their partner's incarceration left them destitute requiring them to establish other romantic partnerships to make ends meet:

.... he offered to help put me and my kids somewhere and I took the help and I regretted it at the time but I was also thankful for it because...he put us somewhere and not just let me and my kids be out on the street (Participant in Cooper et al., 2015, p. 533).

*Broken Communities and Policies* Participants across studies highlighted the complex role of racial/ethnic and socioeconomic (particularly in rural communities) segregation and racism in shaping FI. Segregation and economic disinvestment in communities impacted employment opportunities and access to resources such as healthy food. For example, across several studies, families discussed the lack of availability of healthy food options in their neighborhood and high prevalence of low-quality foods:

Nobody comes to my neighborhood and cares about what I eat. It's all economics. My corner man in the grocery store is charging me three times for a can of tomato sauce because he has got to get rich (Participant in Sealy, 2010, p. 572).

You have to be careful with ground meat. It's real pretty pink on top. But when you break it, on the inside it is kind of white. They put the fresh meat on top, so you have to be very careful (Participant in Ramadurai, Sharf, & Sharkey, 2012, p. 6).

A study of Puerto Rican women highlighted the impact of racism in limiting employment opportunities for women of color.

Like every time I go to . . . the mall to a store and you see that they are hiring because they have the paper outside but when you go in, they said to you they are not. They don't accept applications . . . there are people that are . . . racists and don't care. Do you understand me? (Participant in Bermúdez-Millán et al., 2011, p. 7).

This example aligns with the previous theme of how limited employment opportunities impact the risk of FI.

### *Reflecting on the Metasynthesis Process*

In this chapter, we used a qualitative metasynthesis methodology to conduct an in-depth exploration of the relationship between social and structural adversity and FI. Applying this approach allowed us to identify themes within and across studies employing a variety of data collection approaches (e.g., focus groups, in-depth individual interviews) and representing the perspective of over 1600 participants with diverse demographic and social characteristics (e.g., race/ethnicity, geographic, gender) within 50 studies. As expected, the majority of these studies included samples of low-income/unemployed, rural, African American, Latinx, and Native American populations, that are disproportionately at risk for FI. Similar to the qualitative methods used in the biomedical literature overall, interviews and focus groups (92%) were the dominant data collection methodologies used in the studies. For data analysis, the majority of the studies applied content analysis (39%), grounded theory/constant comparative analysis/modified grounded theory (30%), or thematic analysis (18%; Al-Busaidi, 2008; Green & Thorogood, 2009; Holloway & Wheeler, 2010; Meyer, 2000). In contrast to the current investigation, we found that few of the previous qualitative metasyntheses report a summary of the data collection and/or methodology used (Gerchow et al., 2014; Minges et al., 2015).

We believe that the current metasynthesis provides an important contribution to the literature on FI generally, and the link between social and structural adversity and FI, specifically. Overall, studies applying a qualitative research synthesis methodology to the issue of food and nutrition are limited. Our searches revealed only 15 studies using a qualitative research synthesis approach that focused on food and/or nutrition more generally, and only three examined or reported results related to FI (Gerchow et al., 2014; Jovanovski & Cook, 2019; Weiler et al., 2015). Similar to our analysis, metasyntheses by both Gerchow et al. (2014) and Jovanovski and Cook (2019) reported that low-income women/mothers face multiple barriers, including economic constraints, to access and provide food for their families. However, in contrast to the current investigation, neither study focused specifically on the impact of social and structural adversity. A meta-narrative approach was used by Weiler et al. (2015) to explore relationships between food sovereignty, food systems and health equity. Similarly, our study acknowledges the importance of social factors such as race/ethnicity, citizenship, and poverty in shaping experiences of FI by highlighting the voices and describing the experiences of these groups.

Findings from the current metasynthesis illustrate that social and structural disadvantage has a complex relationship with FI. Results revealed that FI was a key indicator of social and economic deprivation. The level of this deprivation was particularly salient in discussions of parent's/caregiver's difficulty in providing food for their children. The stress associated with this experience has been found in previous quantitative studies (Allen, Becerra, & Becerra, 2018; Laraia, Vinikoor-Imler, & Siega-Riz, 2015). For example, in their study of low-income pregnant women, Laraia et al. (2015) reported that perceived stress was higher for pregnant women from marginally food secure and food insecure households compared to those from food secure households.

Additionally, consistent with findings from quantitative studies, the current investigation highlights the impact of the cumulative layering of disadvantage, whereby food insecure families face multiple hardships including lack of transportation, lack of social support, and ill health. Although the current analysis only includes studies conducted in the U.S. and Canada, we are aware of one study from Australia with consistent findings on the impact of layers of disadvantage. A recent study examining FI and stressful life events using a nationally representative sample of individuals in Australia, found that participants who witnessed violence, had trouble with the police, and/or experienced abuse or violent crime were approximately three or more times more likely to report FI compared to participants who did not (Temple, 2018).

Lastly this investigation underscores the need to expand the focus on the impact of incarceration as well as broader community level processes in work on FI. The studies within the current metasynthesis suggests that FI can serve both as a pathway to incarceration based on engagement in crime to make ends meet and implications of incarceration for accessing employment and income. Moreover, similar to the impact of cumulative disadvantage at the individual/family level, disadvantage in communities also impacts food insecure families by shaping their access to resources and limiting the quality of local amenities including food. However, although studies included in this metasynthesis underscored the role of income in FI, few focused on or reported results related to racial/ethnic discrimination, racism, and/or gender inequality. Given the demographic, economic, and social characteristics associated with an increased risk for FI and findings from quantitative studies stressing the importance of these factors, more studies are needed in these areas (Burke et al., 2018; Phojanakong, Brown Weida, Grimaldi, Lê-Scherban, & Chilton, 2019).

Although this metasynthesis provides important insights to the literature, it is not without limitations. First, although studies were selected using a comprehensive search of scientific literature databases, there may be more relevant work in the gray literature and unpublished reports that were not included in this analysis. Second, evidence suggests that the addition of a second reviewer could have provided additional eligible studies for consideration in the metasynthesis (Stoll et al., 2019). Nevertheless, although searches (with the assistance with a graduate student), data extraction, and coding were performed by the first author, we used systematic approaches that have been widely cited elsewhere for literature reviews, meta-

analysis, and metasynthesis (Sandelowski & Barroso, 2003; Sandelowski et al., 1997). Third, although we used a previously published instrument to evaluate the quality of research studies, the tool could still be viewed as somewhat subjective and based on the interpretation of the author (Letts et al., 2007). Lastly, while we found relevant studies conducted in Africa and Australia/New Zealand, this metasynthesis was limited to studies published in the U.S. and Canada. Consequently, the findings from this investigation cannot be generalized to other countries which may have different social/political contexts.

## Conclusion

Building on previous studies, this investigation contributes to the literature examining relationships between FI and social and structural adversity. Findings from this analysis suggest that to meet this goal, it is important to not only focus on individual families but improve the systems and structures that shape family's circumstances and promote equity. Additionally, findings from this metasynthesis emphasize the importance of looking at FI through a broader contextual lens to consider other adverse circumstances that co-occur with FI in low-income and marginalized families. As indicated by the United Nations Human Rights Council-Committee on Economic, Social and Cultural Rights, "The right to adequate food is realized when every man, woman and child, alone or in community with others, has physical and economic access at all times to adequate food or means for its procurement" (Ayala & Meier, 2017; Rasanathan, Norenhag, & Valentine, 2010). Consistent with the findings from this study, effective policies and structures have a strong effect on population health and well-being and evidence suggests that removing barriers that limit self-efficacy and opportunities for individuals and communities likely have important implications for improving FI (Ayala & Meier, 2017; Chilton & Rose, 2009) (Table 1.1).



**Table 1.1** Brief overview of included studies

Author	Country	Data collection approach /sources	Data analysis	Population
Al-Bayan, Islam, Edwards, and Duncan (2016)	U.S. (New York, NY)	Semi-structured interviews ( $n = 17$ )	Thematic analysis	$N = 17$ 100% female 100% African American Mean age 47 years Residing in public housing
Alkon and Norgaard (2009)	U.S. (Oakland, CA)	Semi-structured interviews ( $n = 18$ )	No specific method indicated	$N = 18$ West Oakland food members collaborative and farmers market vendors
Andress and Fitch (2016)	U.S. (Marion, Harrison, Preston, Taylor, Doddridge, and Monongalia counties, WV)	Focus groups ( $n = 6$ )	Thematic analysis	$N = 30$ 100% women enrolled in SNAP 100% $\geq 21$ years old
Beaumier and Ford (2010)	Canada (Igloodik, Nunavut)	Semi-structured interviews ( $n = 36$ ); focus groups ( $n = 5$ ); key informant interviews ( $n = 13$ )	Content analysis	$N = 55$ 100% female 100% Inuit 64% 21–40 years 72% unemployed $N = 13$ key informant health professionals
Bermúdez-Millán et al. (2011)	U.S. (CT)	Focus group ( $n = 5$ )	Content analysis	$N = 29$ 100% female 100% Puerto Rican Mean age 25 72.4% single 44.8% Spanish speaking 79% $\leq$ high school/GED 85.7% unemployed 69% monthly household income < \$999 90% Medicaid

(continued)

Table 1.1 (continued)

Author	Country	Data collection approach /sources	Data analysis	Population
Bhawra, Cooke, Hanning, Wilk, and Gonneville (2015)	Canada (Midland-Penetanguishene and London Ontario)	Focus groups ( $n = 4$ )	Thematic analysis	$n = 32$ Caregivers of Metis and off reservation first nations children 81% female
Borre, Ertle, & Graff (2010)	U.S. (eastern NC)	Open-ended interviews ( $n = 36$ ). Supplemented with observations and dietary histories	Content analysis	$N = 36$ 100% migrant and seasonal farmworkers 98% from Mexico Mean age 29 years Mean household size 4.5 Mean household income \$396 Mean age of children 4 years
Bove and Olson (2006)	U.S. (Upstate NY)	In-depth interviews $9n = 28$ )	Constant comparative analysis	$N = 28$ 100% female 78% 20–39 years old 68% $\leq$ High school/GED 89% White 82% living with partner 54% employed 57% food insecure
Carney (2012)	U.S. (Santa Barbara County, CA)	Observations and unstructured interviews	No specific method indicated	$N = 3$ Food centered venues including weekend markets and swap meets, locally owned retail food outlets, corporate supermarkets, community gardens, and food assistance program offices in low-income neighborhoods

Author	Country	Data collection approach /sources	Data analysis	Population
Carney (2014)	U.S. (Santa Barbara County, CA)	Life history interviews, dietary surveys, focus groups, and participant observation ( <i>n</i> = 25)	No specific method indicated	<i>N</i> = 25 Migrant women Mean age 38 years 98% from Mexico 56% unemployed/underemployed
Cherry-Chandler (2009)	U.S.	Personal narrative ( <i>n</i> = 1)	Qualitative case study	<i>N</i> = 1 100% African American 100% public housing
Chilton and Booth (2007)	U.S. (Philadelphia, PA)	Focus groups ( <i>n</i> = 4) and semi-structured interviews ( <i>n</i> = 12)	Constant comparative analysis	<i>N</i> = 34 Mean age 45 100% female 100% African American 85% unemployed 47% < high school 65% SNAP 79% food insecure
Chilton, Rabinowich, and Woolf (2014)	U.S. (Philadelphia, PA)	Semi-structured interviews ( <i>n</i> = 31)	Grounded theory	<i>N</i> = 31 Food insecure women with children <4 years old Mean age 26 55% Black/African American 39% Hispanic/Latinx 64% unemployed 62% high school/GED or lower 90% SNAP 48% low/very low food insecure

(continued)

Table 1.1 (continued)

Author	Country	Data collection approach /sources	Data analysis	Population
Chilton et al. (2017)	U.S. (Philadelphia, PA)	Semi-structured interviews ( $n = 31$ )	Grounded theory	$n = 31$ Food insecure women with children <4 years old Mean age 26 55% Black/African American 39% Hispanic/Latinx 64% unemployed 62% high school/GED or lower 90% SNAP 48% low/very low food insecure
Christaldi and Cuy Castellanos (2014)	U.S. (Lackawanna County, PA)	Focus groups ( $n = 10$ )	Combination	$n = 89$ 76% male Mean age: 48 years 51% Hispanic/Latino 23% White 58% college graduate 85% single/divorced/windowed 20% unemployed 28% SNAP benefits 27% SNAP benefits and food pantry user
Cooper et al. (2015)	U.S. (Atlanta, GA)	Four waves of semi-structured interviews ( $n = 120$ )	Grounded theory	$N = 30$ Mean age 33 African-American women with a primary male partner who had been incarcerated in the past 12 months
Davison et al. (2019)	Canada (Fraser Valley, British Columbia)	570 hours of naturalistic observation; in-depth individual interviews ( $n = 47$ ); focus groups ( $n = 3$ )	Interpretive thematic analysis	$N = 40$ key informant stakeholders $N = 16$ families with a father Who is currently or formerly incarcerated in a Canadian federal correctional facility $N = 7$ partners of fathers

Author	Country	Data collection approach /sources	Data analysis	Population
De Marco et al. (2009)	U.S. (Benton County, OR)	Semi-structured interviews (n = 25)	Content analysis	N = 25 Mean age = 47.75 years 72% female 80% White 56% rural 80% food insecure
Dong, Must, Tang, Stopka, and Beckwith (2018)	U.S. (RI)	In-depth interviews (n = 22)	Thematic analysis	N = 22 Adults under active probation supervision Mean age 31 68% male 23% Hispanic/Latinx 77% White 23% Black 73% SNAP
Dutta et al. (2016)	U.S. (Tippecanoe County, IN)	In-depth interviews (n = 18)	Grounded theory	N = 18
Haynes-Maslow, Auvergne, Mark, Ammerman, and Weiner (2015)	U.S. (NC)	Focus groups (n = 13)	Content analysis	N = 105 71% African American 74% female 53% ≤ high school/GED 71% annual household income <\$20,000 56.2% SNAP benefits 59% single/divorced

(continued)

Table 1.1 (continued)

Author	Country	Data collection approach /sources	Data analysis	Population
Hecht, Biehl, Buzogany, and Neff (2018)	U.S. (Baltimore, MD)	Semi-structured interviews ( $n = 25$ )	Phrenetic iterative approach	$N = 13$ Baltimore food system stakeholders/key informants Food access organizations including governmental offices, non-profits $N = 12$ Baltimore food system stakeholders/key informants community leaders from predominantly low-income and African-American neighborhood, including leaders of neighborhood associations, churches, etc.
Hege et al. (2018)	U.S. (Rural NC)	Focus group ( $n = 3$ )	Constant comparative analysis	$N = 24$ Individuals using food pantries and community meals County characteristics 91% White 7% unemployment 13.7% $\geq$ Bachelor's degree Median household income \$35,763 19% below poverty
Heinrich et al. (2008)	U.S. (HI)	Focus group ( $n = 10$ )	Content analysis	$N = 86$ 73.5% female 61.6% native Hawaiian/Pacific islander 62.7% ages 18–39 80.5% high school 50.6% income $<$ \$10,000 73.5% SNAP

Author	Country	Data collection approach /sources	Data analysis	Population
Jarrett et al. (2014)	U.S. (unknown inner city)	Semi-structured interviews	Interpretive approach	<i>N</i> = 12 Mean age 31.9 83% single/divorced/widowed
Jernigan, Salvatore, Styne, and Winkleby (2012)	U.S.	Focus groups ( <i>n</i> = 5)	Content analysis	<i>N</i> = 40 100% native American
Johnson, Williams, and Gillis (2015)	Canada (Nova Scotia)	In-depth interviews ( <i>n</i> = 12)	Thematic analysis	<i>N</i> = 12 100% female Women who participated in Nova Scotia participatory food security project, a program focused on gathering data about the affordability of a nutritious food basket through province-wide participatory food costing
Kato (2013)	U.S. (New Orleans, LA)	Ethnographic observations over 19 months ( <i>n</i> = 4–6 weekly) ethnographic interviews ( <i>n</i> = 30)	No specific method indicated	<i>N</i> = 30 Staff, volunteers, customers, gardeners, and residents in garden program
Knezevic, Hunter, Watt, Williams, and Anderson (2014)	Canada (Nova Scotia)	PFC reports, project newsletters, publications, meeting minutes and other documents	Content analysis	N/A

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Table 1.1 (continued)

Author	Country	Data collection approach /sources	Data analysis	Population
Knowles et al. (2015)	U.S. (Philadelphia, PA)	Semi-structured interview and photo elicitation/photovoice ( <i>n</i> = 69)	Content analysis	<i>N</i> = 69 98% female 37% Black/African American 26% Hispanic 6% White 31% employed 66% ≥ high school/GED 81% food insecure 50% housing insecure
Knowles et al. (2016)	U.S. (Minneapolis, MN and Philadelphia, PA)	Interviews	Content analysis	<i>n</i> = 51 Parents/caregivers children <4 years 96% female 76% African American 12% Latino 18% other 45% single 80% ≤ high school/GED 86% unemployed
Leung et al. (2013)	U.S. (national)	Semi-structured key informant interviews ( <i>n</i> = 27)	Thematic analysis	<i>N</i> = 27 Experts from advocacy, government, industry, and research organizations
Loth, Uy, Neumark-Sztainer, Fisher, and Berge (2018)	U.S.	Semi-structured interviews ( <i>n</i> = 40)	Content analysis	<i>N</i> = 40 72.5 female 80% White 6.75% full time employment 45% Bachelor's degree 82.5% married 25% income <\$50,000



Author	Country	Data collection approach /sources	Data analysis	Population
Mayfield, Carolan, Weatherspoon, Chung, and Hoerr (2017)	U.S. (Flint, MI)	Focus group (n = 8)	Content analysis	N = 30 100% African American 100% female 56% mothers age 21–50 years With children aged <18 years in the Household
McClain, Dickin, and Dollahite (2019)	U.S. (upstate NY)	Semi-structured interviews (n = 27)	Content analysis	N = 27 Mean age 30 24% married or living with partner 14% unemployed 24% from southern Mexico 19% food insecure in childhood Median monthly income \$1000 51% SNAP
McIntyre, Patterson, and Mah (2019)	Canada	Policy documents, debates, historical sources including government-commission scientific report (110 extracts), committee evidence (123 extracts), legislators’ statements and policy entrepreneur interviews	Conventional qualitative content analysis	N = 84 legislators N = 17 advocates, and policy
McIntyre et al. (2016)	Canada (Ontario, British Columbia, and Nova Scotia)	Debate texts of legislative argumentation about household FI from Hansard records at the federal level and in three provincial jurisdictions	Conventional qualitative content analysis	Legislators

(continued)

Table 1.1 (continued)

Author	Country	Data collection approach /sources	Data analysis	Population
Munger, Lloyd, Speirs, Riera, and Grutzmacher (2015)	U.S. (MD)	In-depth, semi-structured interviews (n = 42)	Modified grounded theory	N = 42 Mean age 44.3 100% Latino adults 57.1% undocumented 50% male 75% < High school/GED 54.2% single, divorced, or separated 97.5% income 0-\$10,000
Page-Reeves et al. (2014)	U.S. (Albuquerque, NM)	Ethnographic interviews (n = 16)	Modified grounded theory	n = 16 93% Hispanic women/Latina from neighborhood with high FI and low food access
Quandt, Grzywacz, Trejo, and Arcury (2014)	U.S. (NC)	Interviews (n = 33)	Thematic analysis	N = 33 Migrant and seasonal farmworkers Child 2-5 years of age
Quintanilha, Mayan, Jarman, and Bell (2019)	Canada (Edmonton, Alberta)	Interviews (n = 17)	Qualitative content analysis	N = 17 100% Somali refugees 100% female 41% at least one adult in the household employed 59% social assistance
Ramadurai et al. (2012)	U.S. (Central TX)	Focus groups (n = 12)	Constructivist grounded theory	N = 86 Mean age 53 years 72% female 31.4% White/Caucasian 47.7% African American 20.9% Latinx/Hispanic

Author	Country	Data collection approach /sources	Data analysis	Population
Robbins et al. (2017)	U.S. (Baltimore, MD)	In-depth interviews (n = 33)	Phenomenological approach.	N = 33 100% mothers 100% SNAP 93.9% African American
Rosemond et al. (2019)	U.S. (SC)	Semi-structured interviews (n=60)	Grounded theory	N = 40 (caregiver and child participants) N = 20 caregivers Mean age: Caregiver 41.19 90% female 75% non-Hispanic black 85% mothers 50% very low FI 50% low FI 75% annual income <\$35,000 65% receives SNAP N = 20 children Mean age: Child 12.7 years 50% female 75% non-Hispanic black
Sano, Garasky, Greder, Cook & Browder (2011)	U.S. (CA, MI, OR, and IA)	In-depth interviews (n = 10)	Grounded theory	N = 10 100% Latino immigrant mothers Mean age 31.2 years Mean monthly income \$2157 40% SNAP

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Table 1.1 (continued)

Author	Country	Data collection approach /sources	Data analysis	Population
Sano, Routh, & Lamigan (2019)	U.S. (WA)	In-depth interviews (n=17)	No specific method indicated	N = 17 100% female 52.9% non-Hispanic White 29.4% Hispanic 17.7% Other or Unknown 35.3% >High School 52.9% Married/Cohabitation/Domestic Partnership
Savoie-Roskos, Durward, Jeweks, and LeBlanc (2016)	U.S. (Northern UT)	Semi-structured interviews (n = 14)	Inductive content analysis	N = 14 71% 18–39 years of age 71% female 93% income <\$30,000 42% employed
Sealy (2010)	U.S. (New York, NY)	Focus groups (n = 3)	Constant comparative analysis	N = 34 Mean age 36.9 76.5% female 50% African American 29.4% Caribbean 20.5 Puerto Rican 85% employed 47% ≤ high school 72% ≤ \$35,000

Author	Country	Data collection approach /sources	Data analysis	Population
Webber and Rojhani (2010)	U.S. (Southwest MI)	Semi-structured interviews (n = 77)	Thematic analysis	N = 69 WIC participants Mean age: 27 years 70% High school/GED or higher 60% White/Caucasian 33% Mexican/Mexican American 65% married/living with partner N = 8 food retailers 1 big box superstore 2 limited assortment discount food store 2 Mexican bodega 3 grocery store franchises
Webber and Dollahite (2008)	U.S.	Interviews (n = 28)	Content analysis	N = 28 Mean age 36.5 89% female 78.5% White 39% rural 60% SNAP 42% WIC
Williams et al. (2010)	Canada (Nova Scotia)	Individual interviews (n = 4); focus groups (n = 5)	Conventional content analysis	N = 34 Mothers of children <14 years of age
Youngner, Blake, Draper, and Jones (2015)	U.S. (Columbia, SC)	Semi-structured interviews (n = 14)	Constant comparative analysis	n = 14 Adults over 25 years of age, with children, who used food pantries or lived in transitional housing 79% female

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