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An Avoidable \$2.4 Billion Cost: The Estimated Health-Related Costs of Food Insecurity and Hunger in Massachusetts

- **The first study of the health-related costs of hunger and food insecurity in Massachusetts**, conducted by Children's HealthWatch at Boston Medical Center and sponsored by The Greater Boston Food Bank.
- **Food insecurity has harmful and costly impacts on the health of children and adults**, among them low birth weight, impaired brain development, malnutrition, increased hospitalizations, Type 2 diabetes, heart problems and mental health issues.
- **1 in 10 MA residents can't afford enough food to lead active, healthy lives (about 700,000 people)**

Key Findings

- **\$2.4 billion in health-related costs attributable to hunger and food insecurity in 2016.**
- **Costs breakdown:**
 - Poor General Health \$635.4 million
 - Pulmonary Diseases \$572.6 million
 - Special Education \$520.3 million
 - Type 2 Diabetes \$251.1 million
 - Mental Health Conditions \$223.3 million
 - Obesity \$132.7 million
 - Rheumatology Diseases \$76.9 million

Policy Recommendations:

- **Healthcare providers should screen for food insecurity routinely.**
- **Health insurers should reimburse healthcare providers for screening and reimburse food intervention costs.**

- **Maintain current funding and structure of the Supplemental Nutrition Assistance Program (SNAP, formerly known as food stamps).**
- **Increase funding of the Massachusetts Emergency Food Assistance Program (MEFAP),** which helps support the state’s four food banks, to \$20 million in FY19
- **Create a common application for MassHealth and SNAP.**
- **Mandate high-poverty schools in Massachusetts institute breakfast after the bell.**
- **Improve access to federal child nutrition assistance programs administered by the state.**
- **Conduct further health-related food-insecurity research, e.g., impact of food insecurity on high-risk populations, intervention studies on impact of food resource referrals.**

Study Details

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Sponsor: The Greater Boston Food Bank

Methodology: In-depth analysis of peer-reviewed journals and reports on associations between food insecurity and adverse health conditions with cost estimates reflecting expenditures by payers for treatment of some, but not all, health conditions found to be connected to food insecurity in the literature.

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