1

TITLE: A qualitative phenomenological research study exploring the perceptions that African

American adolescents have with food insecurity in urban communities of New York City

INVESTIGATOR: Brianna Carnagie

Team: Professor Kathleen McGoldrick

A. SPECIFIC AIMS

The purpose of this qualitative research phenomenological study is to understand the

perceptions that African American adolescents aged 14-18 have of food insecurity in low-

income families in urban communities within Bronx, NY.

The main question guiding this phenomenological study is:

What are the shared perceptions of African American adolescents from low-income, food

insecure families living in urban neighborhoods in New York City?

The sub-question is:

How do the shared experiences of African American adolescents coming from food

insecure homes contribute to their perception of their overall health?

B. LITERATURE REVIEW

Research has shown that food insecurity in low-income communities have apparent health

implications on the families that they affect (Adams et al., 2020, p. 2060; Distel et al., 2019,

p. 214; Knowles et al., 2015, p. 28; Rosa et al., 2018, p. 6). Among unhealthy eating habits,

another negative health behavior includes poor feeding practices (Lindow et al., 2021, p. 4;

Rosa et al., 2018, p. 6; Vedovato et al., 2016, p. 1409). These factors have led to increased

psychological distress among parents who fail to address their children's dietary needs

despite their best efforts (Lindow et al., 2021, p. 4; Knowles et al., 2015, p. 26). Additionally,

parents have become more concerned about obesity within their children due to the lack of

nutritious food available to them (Adams et al., 2020, p. 2060; Kral et al., 2017, p. 6; Vedovato et al., 2016, p. 1406). The detrimental effects of food insecurities in low-income communities have been linked to racial and ethnic disparities, specifically within the African American and Latino population (Distel et al., 2019, p. 213; Dubowitz et al., 2021, p. 494; Vedovato et al., 2016, p. 1405).

Unhealthy eating habits and poor feeding practices are among the common mechanisms that parents use to cope with food insecurity within the family (Knowles et al., 2016, p. 27; Lindow et al., 2021, p.5; Rosa et al., 2018, p. 7; Vedovato et al., 2016, p. 1414). Research has shown that parents tend to treat their kids to desserts and unhealthy foods to promote normalcy despite the struggles they face with securing food (Lindow, 2021, p. 4; Rosa, 2018, p. 7). Another poor feeding practice that families tend to implement is meal skipping and portion control (Rosa et al., 2018, p. 6). In scenarios when low-income families would not have enough money to buy large amounts of food, parents often skipped meals and/or ate smaller portions so that their kids could have enough to eat (Rosa et al., 2018, p. 6; Knowles et al., 2016, p. 27). Parents describe that a common barrier to seeking healthy foods is the cost and availability (Lindow, 2021, p. 3). Lindow et. al (2021) found that healthy foods, like fruits and vegetables, were limited in availability or unobtainable due to the high cost (p. 5). Vedovato et. al (2016) found a similar barrier, claiming that there was a widespread perception amongst low-income families that healthy foods are more expensive and less satisfying (p. 1413). In fact, families would much rather stock up on unhealthy foods that are more shelf-stable and calorie-dense to fulfill themselves for longer while maintaining frugality (Adams et al., 2020, p. 2061).

Coinciding with unhealthy eating habits and poor feeding practices, parents have started to become more concerned about instances of obesity within their children (Adams et al., 2020, p. 2056; Kral et al., 2017, p. 6). According to Kral et al. (2017), parents from food-insecure households show higher levels of concerns about their children's weight and used restrictive feeding practices when compared to food-secure families (p. 6). These concerns regarding obesity within children are related to the poor feeding practices parents impose on their children and the impacts that this will have on their health (Adams et al., 2020, p. 2057). Negative mental health effects are also common among parents that are affected by food insecurity (Knowles et al., 2016, p. 30; Lindow et al., 2021, p. 4). Research findings have shown that parents expressed feelings of shame and distress resulting from their experiences with food insecurity (Lindow et al., 2021, p. 4). According to Knowles et al. (2016), the distress that parents experience is caused by the lack of financial and social resources available to them that would help them make better meal choices (p. 30). A racial disparity has been observed among low-income families experiencing food insecurity (Distel et al, 2019, p. 213; Dubowitz et al., 2021, p. 494; Vedovato et al., 2016, p. 1405). According to Odoms-Young and Bruce (2018), the adverse social, physical, and psychological outcomes associated with food insecurity are two times higher in both non-Hispanic Black and Hispanic households compared to non-Hispanic white households (S3). In fact, research has shown that Mexican American youth coming from food-insecure families are more likely to be obese and suffer from chronic stress (Distel et al., 2019, p. 218). Similarly, low-income African Americans have a higher prevalence of food insecurity and disproportionate rates of childhood and adult overweight and/or obesity when compared to food-secure families (Vedovato, 2016, p. 1413). These disparities worsened during the

COVID-19 pandemic, and the pandemic has since magnified existing racial and ethnic disparities in food security (Adams, 2020, p. 2056; Dubowitz, 2021, p. 496).

While the existing evidence has shown that parents are aware of the adverse health effects of food insecurity in their families, little to no research focuses on the perceptions that African American adolescents have of food insecurity and how they perceive its effects on their health. Therefore, the purpose of this study is to understand the perceptions that African American adolescents aged 14-18 have of food insecurity in low-income families in urban communities within Bronx, NY.

C. RESEARCH DESIGN AND METHODS

1. Rationale/Overview: This phenomenological research study will employ in-depth semi-structured interviews to describe African American adolescents' shared experiences in low income, food insecure homes and understand how these experiences contribute to their perception of their overall health. Prior to data collection, parents of eligible participants will complete a demographics questionnaire and the United States Household Food Security Survey Module to assess food security status. All in-depth interviews will be completed with the study coordinator. These interviews will be recorded, transcribed, and checked for accuracy prior to themes being extracted from the data. Three experienced qualitative researchers will then perform a thematic analysis on the interview transcripts via an iterative, inductive approach. Along with identifying and coding themes from the interview transcripts, researchers will use the constant comparative method to divulge themes that emerge across multiple interviews.

2. Sampling:

- a. Research Site: African American adolescents selected for the research study will be recruited from various neighborhoods in Bronx, New York. After being deemed eligible for the study, participants will be able to schedule an interview with the study coordinator. Interviews will be conducted at Bronx Community College in Meister Hall in a second-floor classroom once permission is granted from the building coordinator. The data will be collated in the Stony Brook University School of Health Technology and Management Health Science Department.
- b. Study Sample: A purposive sampling method will be used for this research project. Parents will be recruited from the Bronx, New York area through social media posts and fliers at local food pantries and small grocery stores. The fliers and posts will be described as seeking families willing to participate in "a research study examining how families obtain food during economic hardship". Parents who are interested in the study will be screened by the research study coordinator. Interested parents will report their family's socioeconomic characteristics through an online questionnaire.
 Parents will also be asked to complete the 18-item United States Household Food Security Survey Module. After completing the questionnaire and survey, families will be eligible to participate in the study in the case that the parent reported at least one positive response to the Household Food Security Survey Module, they have a child of African American descent between the ages of 14 and 18 years old, the child is eligible for

free/reduced price school lunches from their academic institution (an indicator of low-income status) and the child is fluent in English (to be reported by their parent). In families where more than one child is eligible for the study, all eligible adolescents will be able to participate. Upon arrival to the interview session, the eligible child will be dropped off by a parent who will be asked to review and sign the parent consent form. Time will be allotted for parents to read the consent form and ask questions as needed. Prior to starting the interview with the participant, a research member will go through the assent process in which the purpose of the study is verbally explained in a language appropriate for the age of the participants. The study will attempt to exhaust this purposively sampled population.

c. Screening: All returned data will be included if the participants' parents report instances of food insecurity in the past year, the participant speaks fluent English, receives free/reduced school lunch from their academic institution and identifies as African American.

3. Procedures

a. Data Collection: Parents who have signed up their children to participate in the research study will bring their child the day that the interview is scheduled. The parent will be given a parent consent form. The drop-off will be structured to allow time for the parent to review the parent consent form.
If a parent does not want their child to participate in the study, their child will not continue in the study.

The in-depth semi-structured interviews will be conducted after the parent consent form is completed and the participant is assented in a way that they understand the purpose of the research study. Interviews will be conducted in a classroom with only the research coordinator and participant present. Interviews are anticipated to last between ½ hour to 1 hour and questions will be asked regarding their overall awareness and perception of food insecurity in the household. They will also be asked to explain how they think their experiences with food insecurity contribute to their overall health. Participant's experiences of food insecurity will be probed with questions about how they feel and what factors they think contribute to poor health within the family. In addition, participants will be given an opportunity to share any other information with the interviewer that they wish.

b. Data Analysis: When data saturation is reached and new themes are no longer emerging from interviews, data collection will conclude. Three experienced qualitative researchers will complete thematic analysis of the interview transcripts. Along with identifying and coding themes from the interview transcripts, researchers will use the constant comparative method: an iterative and inductive process to divulge themes that emerge across multiple interviews.

D. HUMAN SUBJECTS PROTECTION FROM RISK

- 1. Risk to Subjects: This research study poses minimal to no risk to the subjects. It is anticipated that no harm will result from participating in the interview since it seeks to analyze the perception of food insecurity in low-income African American families. Additionally, the United States Household Food Security Survey Module is an established screening tool that has been developed and tested to assess food insecurity in a way that keeps respondent burden to the minimum needed to get reliable data. Although no issues are anticipated, as a precaution, psychologists from Stony Brook University's Department of Psychology will be available to address any emotional issues that may arise for some participants.
- 2. Adequacy of Protection Against Risks: The interview transcripts will be placed in a sealed drop box which will be opened in the School of Health Technology & Management at a later time with no subjects present. The parent consent forms will be kept by the P.I in a separate locked file in the School of Health Technology and Management to protect the parents' and participants' privacy. All data analysis will be stored on a password protected, encrypted computer. There are no other anticipated risks.
- 3. Potential Benefits of Proposed Research to the Subjects and Others: The results of this research study may influence development of policies or food assistance programs that address the consequences of food insecurity, as told by adolescents. There will not be individual benefit to the participants.
- **4. Importance of the Knowledge to be Gained:** The knowledge gained will establish the perceived impact of food insecurity in African American adolescents from low income, food insecure households. It will also add to the body of literature, which calls for the exploration of the negative health implications associated with food insecurity in

adolescents, given that low-income and food-insecure minorities are most vulnerable to the adverse effects of food insecurity.

References

- Adams, E. L., Caccavale, L. J., Smith, D., & Bean, M. K. (2020). Food insecurity, the home food environment, and parent feeding practices in the era of COVID-19. *Obesity (Silver Spring, Md.)*, 28(11), 2056-2063. https://doi.org/10.1002/oby.22996
- Distel, L. M. L., Egbert, A. H., Bohnert, A. M., & Santiago, C. D. (2019). Chronic stress and food insecurity: Examining key environmental family factors related to body mass index among low-income Mexican-Origin youth. *Family & community health*, 42(3), 213-220. https://doi.org/10.1097/FCH.0000000000000228
- Dubowitz, T., Dastidar, M. G., Troxel, W. M., Beckman, R., Nugroho, A., Siddiqi, S., Cantor, J., Baird, M., Richardson, A. S., Hunter, G. P., Mendoza-Graf, A., & Collins, R. L. (2021). Food insecurity in a low-income, predominantly African American cohort following the COVID-19 pandemic.
 American journal of public health (1971), 111(3), 494-497.
 https://doi.org/10.2105/AJPH.2020.306041
- Knowles, M., Rabinowich, J., Ettinger de Cuba, S., Cutts, D. B., & Chilton, M. (2016). "Do you wanna breathe or eat?": Parent perspectives on child health consequences of food insecurity, trade-offs, and toxic stress. *Maternal and child health journal*, 20(1), 25-32. https://doi.org/10.1007/s10995-015-1797-8
- Kral, T. V. E., Chittams, J., & Moore, R. H. (2017). Relationship between food insecurity, child weight status, and parent-reported child eating and snacking behaviors. *Journal for specialists in pediatric nursing*, 22(2), e12177-n/a. https://doi.org/10.1111/jspn.12177
- Lindow, P., Yen, I. H., Xiao, M., & Leung, C. W. (2021). 'You run out of hope': an exploration of low-income parents' experiences with food insecurity using Photovoice. *Public Health Nutrition*, 1-7. https://doi.org/10.1017/S1368980021002743

- Odoms-Young, A., & Bruce, M. A. (2018). Examining the impact of structural racism on food insecurity: Implications for addressing racial/ethnic Disparities. *Family & community health, 41 Suppl 2 Suppl, Food Insecurity and Obesity*(2), S3-S6. https://doi.org/10.1097/FCH.000000000000183
- Rosa, T. L., Ortolano, S. E., & Dickin, K. L. (2018). Remembering food insecurity: Low-income parents' perspectives on childhood experiences and implications for measurement. *Appetite*, *121*, 1-8. https://doi.org/10.1016/j.appet.2017.10.035
- Vedovato, G. M., Surkan, P. J., Jones-Smith, J., Steeves, E. A., Han, E., Trude, A. C. B., Kharmats, A.
 Y., & Gittelsohn, J. (2016). Food insecurity, overweight and obesity among low-income African
 American families in Baltimore City: associations with food-related perceptions. *Public Health Nutrition*, 19(8), 1405-1416. https://doi.org/10.1017/S1368980015002888