

# PREVALENCE OF FOOD INSECURITY AND ITS IMPACT UPON HEALTH OUTCOMES AMONGST PEOPLE LIVING WITH HIV IN SYDNEY

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## Disclosure of Interest

- Nil



# Food Security

*“All people, at all times, have physical and economic access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life”\**

## The Four Main Components of Food Security

### 1. AVAILABILITY

There is a reliable and consistent source of quality food.

### 2. ACCESS

People have sufficient resources to produce and/or purchase food.

### 4. STABILITY

People's ability to access and utilize food that remains stable and sustained over time.

### 3. UTILIZATION

People have the knowledge and basic sanitary conditions to choose, prepare, and distribute food in a way that results in good nutrition.



## In Australia

- 1 in 6 Australians report having experienced food insecurity at least once in the last 12 months. Food Bank 2016
- Other surveys indicate 5% nationally
- Prevalence of food insecurity in PLHIV unknown



## Why?

- Increasing evidence of association between food insecurity and issues such as adherence in resource-rich countries
- HIV Futures 6 (2009) showed 42% of PLHIV were receiving a government pension and 31% of PLHIV living below the poverty line
- Change in availability of HIV specific services that provided food aid in metropolitan Sydney
- Anecdotal increase in referrals to Dietitian for food insecurity



## Methodology

- Quantitative, cross-sectional study
- Ethics approval and client consent required
- Six sites in Sydney
- USDA Abbreviated 6-item Subset food Insecurity Tool
- Demographic information
- Goal of 200 participants



# Demographics

- Length since HIV diagnosis
- CD4
- Viral load
- ARV adherence
- Self rated health
- Education
- Employment
- Income source

# USDA Six item subset tool

“(I/we) couldn’t afford to eat balanced meals.” Was that often, sometimes, or never true for (you/your household) in the last 12 months?

- Often true
- Sometimes true
- Never true
- DK or Refused

In the last 12 months, were you ever hungry but didn’t eat because there wasn’t enough money for food?

- Yes
- No
- DK

- Six sites across Sydney
  - Royal Prince Alfred Hospital
  - Redfern Health Centre
  - The Albion Centre
  - HIV Outreach Team
  - Liverpool HIV Community Team
  - Clinic 16 Royal North Shore Hospital
- Telephone administered

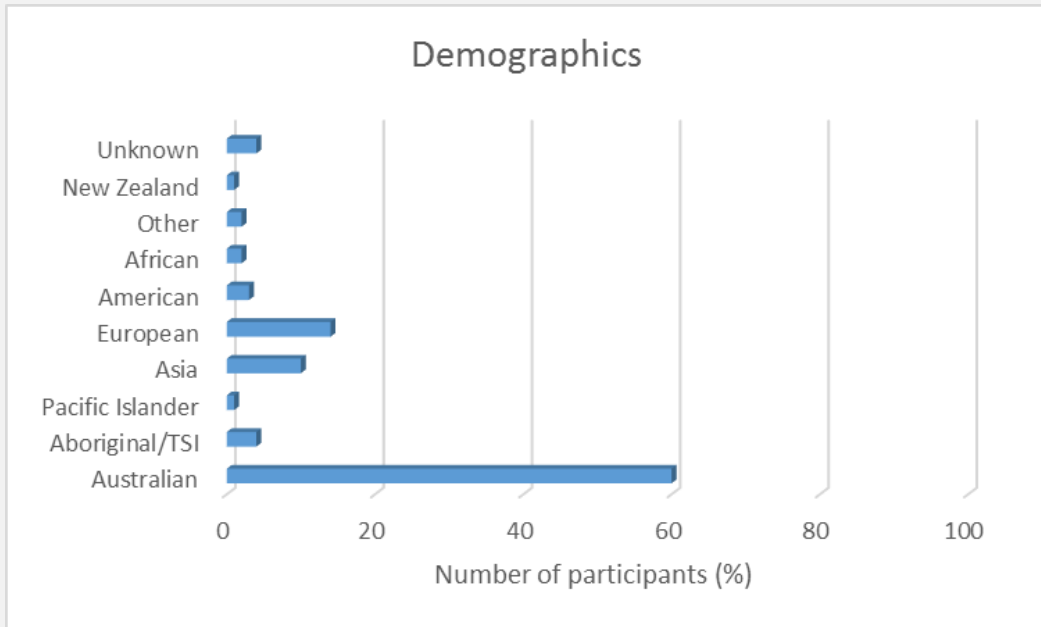


## Results

- ▶ Over three years, 2013-2016
- ▶ 162 participants
  - ▶ 92% male 8% female
  - ▶ 51 years old

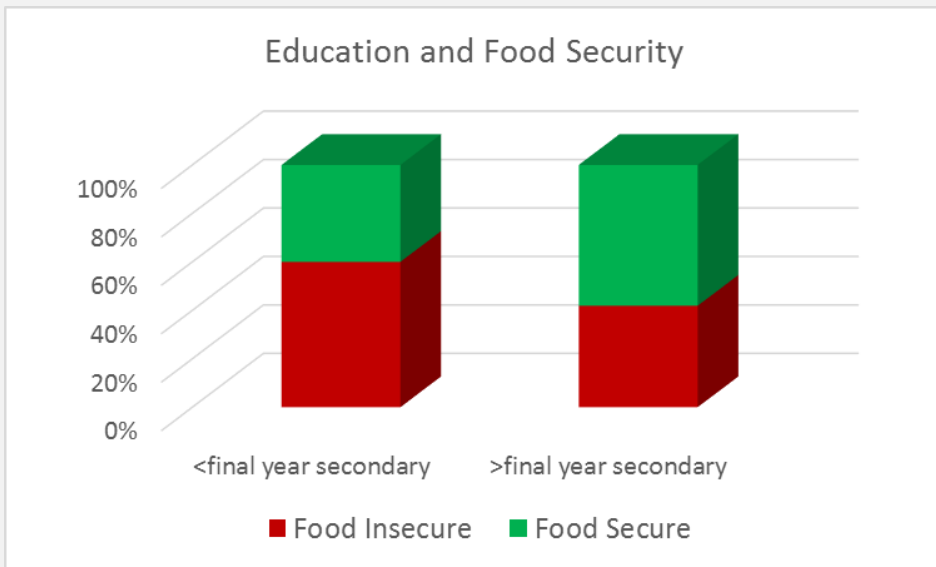
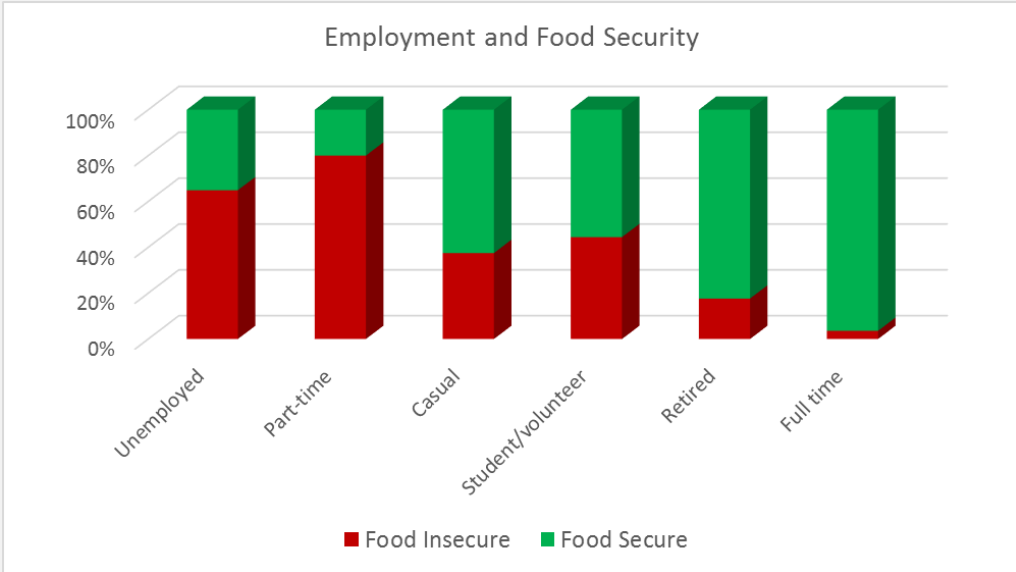
47% food insecure





## Results

- ▶ Most likely food insecure client
  - ▶ Inner city
  - ▶ Unemployed
  - ▶ Receiving government pension
  - ▶ Low self perception of health
  - ▶ CD4 <500
  - ▶ Detectable or unknown viral load
  - ▶ Missed at least one dose of ARV in the last month
  - ▶ No further study past senior year of school



## Limitations

- Low CALD numbers
- Uneven distribution between sites re numbers
- Recruitment investigators differences in work hours
- Did not really access higher socioeconomic individuals
- LHD's closest to central Sydney highest in food insecurity

## Conclusions

- Food insecurity is a significant issue for our client group in inner Sydney
- Prevalence is significantly above the general Australian population
- Correlations with not only expected socio-economic factors, but also perceived health status and clinical measurements
- Awareness of Food Insecurity may be lacking
- Referral to Dietitians



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