

Food Insecurity and Housing Instability Early in the COVID-19 Pandemic

COVID-19 impacts on pregnant people and families in California, 2020



Experiencing food insecurity and housing instability after childbirth can have negative impacts on maternal physical and mental health and on infant health and development.¹⁻⁴

In California in 2020, many birthing people experienced food insecurity or housing instability after pregnancy:



1 in 6
was food insecure



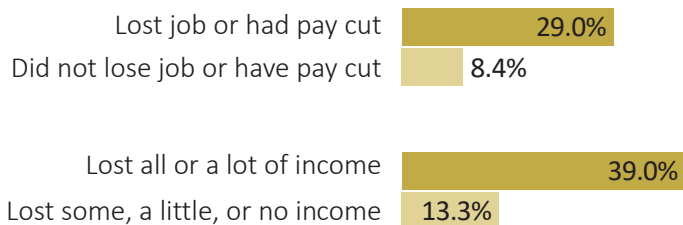
1 in 20
had unstable housing

FINANCIAL HARDSHIPS AND FOOD INSECURITY OR HOUSING INSTABILITY

Job and income loss were widespread during the COVID-19 pandemic.⁵⁻⁶ These financial hardships can negatively impact family well-being, including the ability to afford food and stable housing.

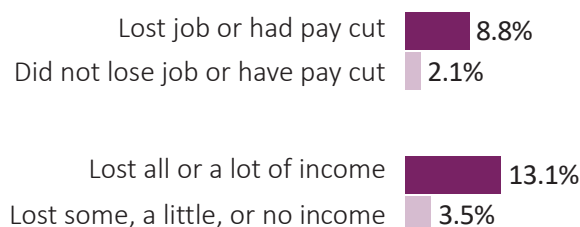
After pregnancy, 17.8% of birthing people experienced food insecurity and 5.2% experienced housing

Percentage of food insecurity was greater among those with financial hardships than among those without financial hardships



instability. Birthing people who experienced job loss or loss of all or a lot of income during or after pregnancy were three to four times more likely than were those without these financial hardships to also experience food insecurity or housing instability.

Percentage of housing instability was greater among those with financial hardships than among those without financial hardships



“Since COVID, the need for housing has increased tremendously, so it would be nice to have more housing for single mothers, low-income families or mothers.”

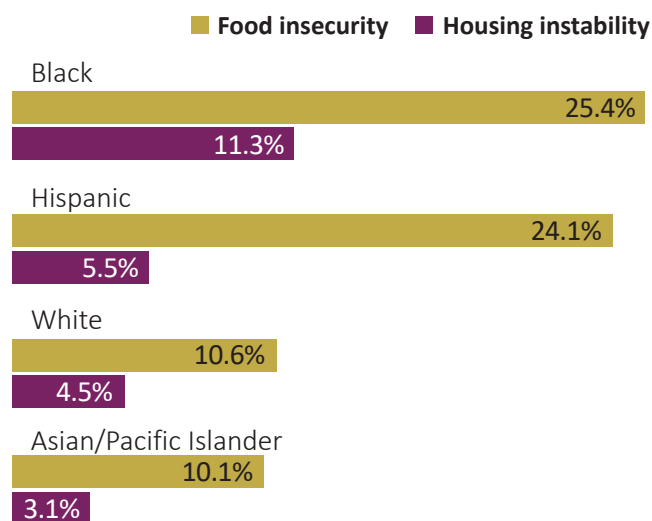
– MIHA 2020 respondent

RACE AND ETHNICITY AND FOOD INSECURITY OR HOUSING INSTABILITY

Food insecurity was most common among Black and Hispanic birthing people, with about one in four experiencing food insecurity, compared to one in ten White and Asian/Pacific Islander birthing people. Among Black birthing people, 11.3% experienced housing instability, more than twice the percentage in other racial and ethnic groups.

“I’m lucky that I didn’t miscarry during my pregnancy due to my lack of food. It is so terrible to be hungry and not know what to do or when you will be able to eat.”
– MIHA 2020 respondent

Experience of food insecurity and housing instability by race and ethnicity



FOOD INSECURITY AND HOUSING INSTABILITY AS BARRIERS TO HEALTH EQUITY

Financial hardships increased during the COVID-19 pandemic, which had negative impacts on the health of families, especially families with lower incomes.⁷⁻⁹ A lack of consistent access to food or housing during and after pregnancy can have direct impacts on the health and well-being of families, including detrimental effects on maternal and child mental and physical health, as well as access to care.¹⁰⁻¹¹ These hardships in early childhood can not only affect child development and weight, but also increase the risks for chronic health conditions and childhood hospitalizations.^{1-4,12}

Millions of California families relied on safety net programs to meet their needs for food and housing during the COVID-19 pandemic.⁷ Several federal,

state, and local policies were enacted in response to the pandemic, including eviction moratoriums; government cash assistance; and expansions in food assistance, Medicaid coverage, and unemployment insurance programs. In California, participation in Medi-Cal, the Supplemental Nutrition Assistance Program (SNAP or CalFresh) and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) grew substantially in 2020.¹³ The high rates and large disparities in food insecurity and housing instability highlight the need for critical safety net resources for the health and well-being of birthing people and their families, in pursuit of health equity for all.¹⁴

This data brief series describes the well-being of Californians who gave birth early in the pandemic using data from the Maternal and Infant Health Assessment (MIHA) survey. The MIHA 2020 sample was drawn from births occurring from March 16, 2020 to June 15, 2020. For more information about MIHA visit www.cdph.ca.gov/MIHA.

For references, methods and other information please visit go.cdph.ca.gov/MIHACOVID19.