



IN SHORT SUPPLY: American Families Struggle to Secure Everyday Essentials

EXECUTIVE SUMMARY

RESEARCH OVERVIEW

The *In Short Supply: American Families Struggle to Secure Everyday Essentials* research project found that many American families struggle to afford basic non-food household goods—including products related to personal care, household care and baby care—and, as a result, make trade-offs with other living expenses and employ coping strategies to secure essential household goods. In this two-part research project, commissioned by Feeding America and supported by a research grant from Procter & Gamble, the Family Resiliency Center at the University of Illinois at Urbana-Champaign first conducted qualitative interviews in fall 2011 with 25 food pantry clients about non-food essentials. These interviews were then used to inform a nationally representative, quantitative phone survey of 1,876 households with children, conducted by Abt SRBI from January through March 2012. Low-income families, those with an income at or below 200 percent of the federal poverty level (FPL), were oversampled to ensure adequate representation.

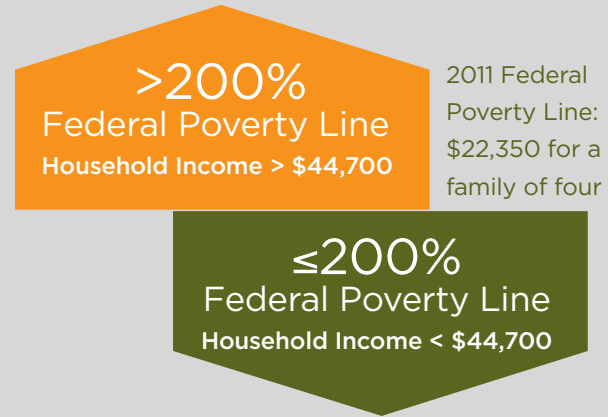


HIGHLIGHTS OF KEY FINDINGS

- Thirty-four percent of low-income families in the national survey reported challenges affording basic household goods in the past year. Of these families, 82 percent were identified as living in households with low or very low food security, meaning that they could not afford adequate food for all household members.¹ These families experience difficulty meeting not only their household and personal care needs, but also their need for food.
- In both the food pantry interviews and the national survey, families reported using a variety of coping strategies when they were unable to afford personal care and household care items, including stretching, substituting, borrowing and doing without.² Some of these strategies, such as altering eating habits and delaying other healthy habits to afford non-food items, raise concerns about potential risks to the health and well-being of many families with children.
- Respondents in both the interviews and phone survey expressed concerns about other people's opinions about their families and their ability to be good parents. Respondents were particularly likely to report being embarrassed to borrow products, worrying that

they could not reinforce healthy habits with their children because of a lack of basic household essentials and being concerned that other people think they do not care about their appearance and health. From the survey, more than a third of higher-income families and more than 40 percent of low-income families expressed concern that people would “think I’m not a good parent” or “think we are not a respectable family.”

CHART 1: DEFINITION OF LOW- VS. HIGHER-INCOME HOUSEHOLDS IN THIS REPORT



BACKGROUND

There is ample existing economic and policy research that documents the high rate of food insecurity in the United States, but there is a lack of information about the struggle many families experience to obtain non-food household goods, including products related to personal care, household care and baby care. According to the U.S. Department of Agriculture (USDA), 50 million people in the United States were food insecure in 2011.³ *Hunger in America 2010*, which identified the charitable food assistance programs available to fight

food insecurity and profiled a subset of the 37 million clients, found that 58 percent of emergency food programs reported that clients need more non-food household goods than are currently available.⁴ The goal of the *In Short Supply* research project is to better understand how low-income families endure challenges securing critical non-food items and the trade-offs they often make in an effort to secure these basic household goods.

¹ Food Insecurity refers to the USDA's measure of lack of access, at times, to enough food for an active, healthy life for all household members; limited or uncertain availability of nutritionally adequate foods, which is determined through the annual Current Population Survey (CPS) administered by the U.S. Census Bureau and the USDA Economic Research Service. A six-item subset of this food insecurity module was included in the *In Short Supply* questionnaire.

² Fiese, B., Koester, B., and Knowles, E. (2011). *A Report to Feeding America on the Non-food Household Product Needs of Pantry Clients*. University of Illinois at Urbana-Champaign.

³ Coleman-Jensen, A. et al. (2012). *Household Food Security in the United States in 2011*. U.S. Department of Agriculture, Economic Research Service.

⁴ Mabli, J. et al. (2010). *Hunger in America 2010*. Mathematica Policy Research for Feeding America.

MAJOR FINDINGS

ATTITUDES TOWARDS BASIC HOUSEHOLD NEEDS

Families in the food pantry interviews and the national phone survey agreed that “basic essentials” are the products that cannot be foregone or easily substituted. Products considered to be very important across all income categories include items such as soap, toilet paper, diapers and feminine care products.

While these basic essentials were all ranked similarly by both low- and higher-income households, differences in the ranking of other household goods between income groups in the national survey show a divergence in attitudes towards basic household needs. For instance, when compared to higher-income households, low-income households were found to rank both mouthwash and denture products (see Chart 3) as more essential. Considering that prior research has demonstrated that low-income adults have a much greater likelihood of poor oral health than their higher-income counterparts,^{5,6} the elevated importance of these products by low-income households could be tied to dental health outcomes.

CHART 2: HOUSEHOLD PRODUCTS IDENTIFIED BY ALL INCOME GROUPS AS “BASIC ESSENTIALS”

Toilet paper	Bath soap
Toothpaste	Disposable diapers
Deodorant	Shampoo
Laundry detergent	Feminine hygiene products

Another household good with a distinct difference in relative ranking by income group is light bulbs. Approximately 79 percent of higher-income families rank this product as an essential; in contrast, less than half of low-income families do the same. While the research does not permit a full assessment of the differentiation in rankings, it may be that low-income families are accustomed to using less lighting as a means of saving money. Further exploration is needed in order to fully understand these ranking patterns.

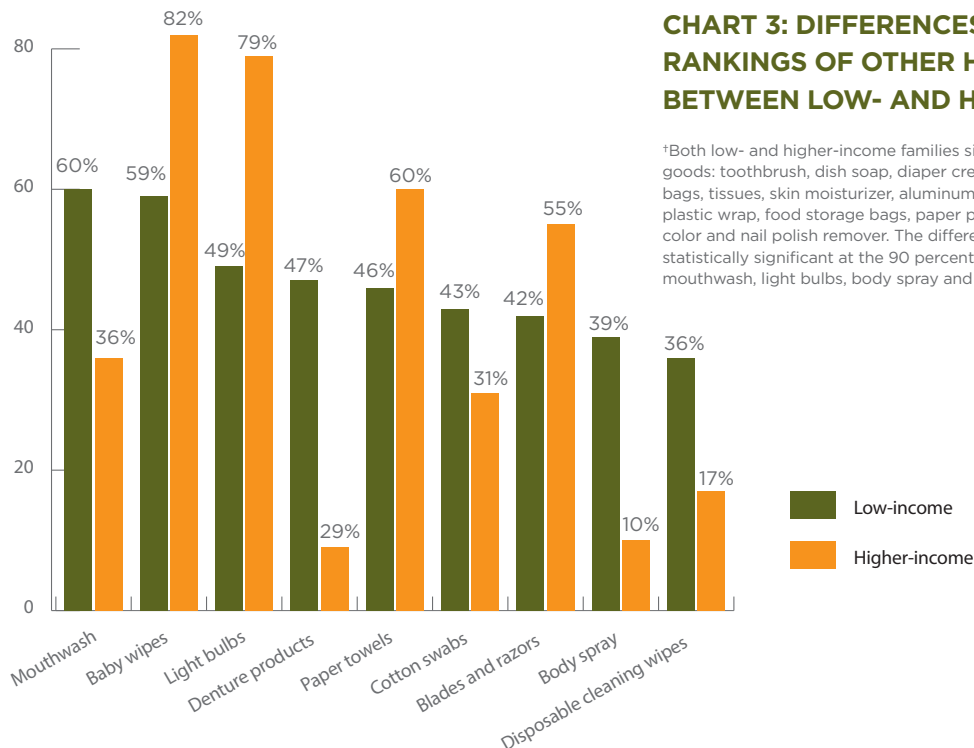


CHART 3: DIFFERENCES GREATER THAN 10% IN RANKINGS OF OTHER HOUSEHOLD GOODS BETWEEN LOW- AND HIGHER-INCOME FAMILIES†

†Both low- and higher-income families similarly ranked the following other household goods: toothbrush, dish soap, diaper cream, dental floss, multi-surface cleaner, garbage bags, tissues, skin moisturizer, aluminum foil, hair conditioner, cosmetics, bandages, plastic wrap, food storage bags, paper plates, paper napkins, fabric softener, hair dye/color and nail polish remover. The differences in rankings between income levels are statistically significant at the 90 percent confidence level for the following items: mouthwash, light bulbs, body spray and disposable wipes.

5 U.S. Government Accountability Office. (2000). *Oral Health: Dental Disease Is a Chronic Problem Among Low-income Populations*.

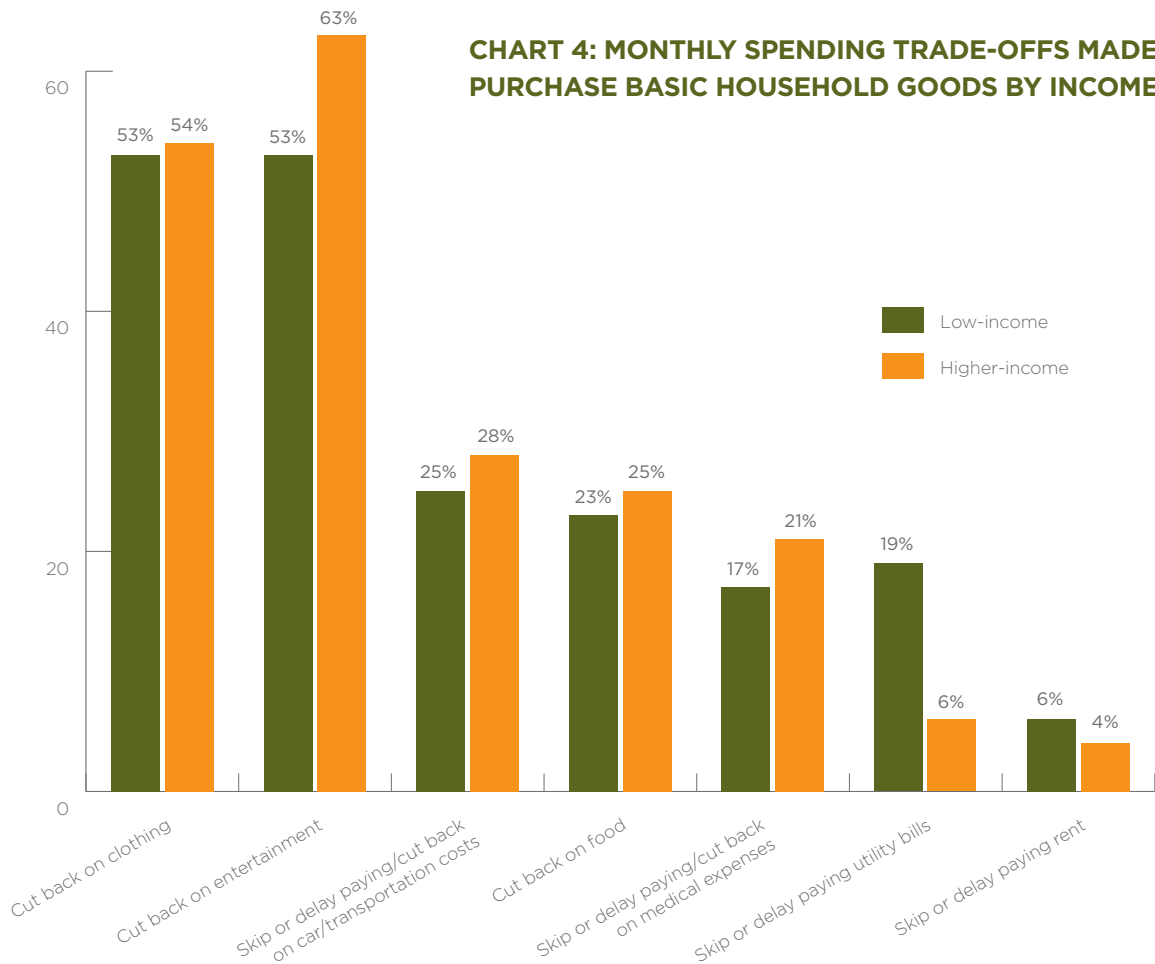
6 Stanton M., M. Rutherford. (2003). Dental care: improving access and quality. *Research in Action* Issue #13. Agency for Healthcare Research and Quality.

Low-income families were more commonly unable to purchase basic household goods, with 34 percent of low-income survey respondents and 5 percent of higher-income respondents reporting that they could not afford these goods during the past year.

Due to limited resources, families often need to prioritize some expenses over others. Families were most likely to prioritize paying for rent, water and utility bills and transportation costs. Less emphasis was placed on paying for food and medicine, despite some families also reporting such significant chronic health conditions as diabetes and asthma.

To varying degrees, families reported cutting back on critical living expenses in order to afford basic household goods. For instance, **40 percent of the low-income survey respondents and 32 percent of higher-income**

respondents had skipped or delayed their rent payment in the past year to afford non-food household essentials. As might be expected, discretionary spending, such as clothing or entertainment expenses, were the first to be removed, while low-income households reported doing so on a less frequent basis than higher-income households. A potential explanation is that low-income households may already be managing core expenses tightly, while higher-income families may have experienced more recent hardship that has resulted in trade-off decisions in some of the more discretionary expense categories. It is important to note that **both income categories reported cutting back on food, utility bills, medical expenses and rent within the past year**, highlighting that critical living expenses are oftentimes sacrificed in an effort to afford essential household goods.



COPING STRATEGIES

When families cannot afford basic household necessities, they employ a variety of strategies to compensate for the absence of these needed goods. All survey respondents who were unable to afford basic household goods indicated that they substitute brands or use less than necessary in order to extend the life of a product. Additionally, a majority of low-income families (74 percent) reported skipping washing dishes or doing laundry in an effort to compensate for the lack of household goods.

In addition to compensating for the absence of needed goods, some families also rely on alternative means to procure the items they need. While the majority of families borrow products from a friend or neighbor, low-income families reported that they would be more likely to also turn to a charitable agency such as a house of worship, school or pantry for these basic essentials. Among low-income households surveyed, 61 percent said they would be willing to turn to a charitable agency for personal care items, whereas only 37 percent of higher-income households would do the same.

Families in the pantry interviews similarly described a variety of specific strategies they employed to compensate for a lack of basic essentials.

Borrowing:

- “Sometimes I have to call certain people, family members to borrow things.”
- “I have a big family...but...I just don’t like to keep borrowing and borrowing.”

Stretching:

- “We can only do laundry once a month.”
- “I may just not buy the big, giant [detergent brand] that I would like to have but the smaller one. I don’t like to get the cheap one because it doesn’t work as well. You have to use more.”

Substituting:

- “And to do dishes, you’ll have to sit there and use shampoo sometimes.”
- “...if you don’t have deodorant you can put baking soda up under your arms.”

- Participants also frequently mentioned substituting paper plates when they were unable to clean dishware because of a lack of dish soap.

Stockpiling:

- “When I have the money to get it, I’ll buy extra. That’s what I usually do is buy extra when I can.”
- “Whoever has a sale, I stock up on them.”

Food Pantry “Shopping”:

- “There’s different places, if you’re lucky, they’ll give you a [toilet paper] roll or two, here or there.”
- “I thank God for the food bank, because I actually sometimes get things from the food bank that I can’t afford on my own.”

Doing Without:

- “You can just brush your teeth with water if it comes down to it because we’ve been homeless before.”

Using Public Facilities when They Do Not Have Products at Home:

- “I had to use hygiene products in public bathrooms to freshen up and not make us look homeless.”

CHART 5: COPING STRATEGIES USED TO PROCURE BASIC HOUSEHOLD GOODS BY THOSE WHO COULD NOT AFFORD THEM

Substitute brands	96%
Extend use by using less	88%
Skip washing dishes or doing laundry	69%
Borrow detergents	63%
Only clean children’s clothes	63%
Skip shampooing	55%
Delay changing a diaper	48%
Reuse paper towels	43%
Brush teeth without toothpaste	37%
Bathe without soap	33%
Reuse diapers	32%
Clean dishes with water only	22%
Clean clothes with water only	20%
<i>Sample size (Number of Households)</i>	350

FOOD INSECURITY

Eighty-two percent of survey respondents who reported being unable to afford basic household goods were identified as having low or very low food security at some point in the year. When compared to the national household food insecurity rate of 14.5 percent,⁷ it is clear that households struggling to afford basic goods experience much higher food insecurity rates than those reported for the general population.

Additionally, among households that reported being unable to afford basic household goods, a majority of households (73 percent of higher-income families and 58 percent of low-income families) indicated that they cut back on food in order to pay for these goods within the past year. **Of those who had to cut back on food, nearly a quarter (24 percent) did so each month in order to afford basic household goods.**



⁷ Coleman-Jensen, A. et al. (2012). *Household Food Security in the United States in 2011*.

EMOTIONAL TOLL

Respondents reported that the ability to procure basic household necessities for themselves and their families is critical to their sense of self and personal respect. Heads of households who are unable to pay for these goods and who seek alternative means for procuring household goods often endure stress and sometimes have concerns about their parenting abilities. Low-income families worry more frequently than higher-income families about whether they will be able to meet the needs of their children: **47 percent of low-income respondents worry “often” or “almost all of the time,” compared to only 15 percent of higher-income respondents.**

“I’m a man, I got to stand up like a man, but sometimes it brings me down, and it’s a hurting feeling because when I do things like that and asking people, it really bothers me and it hurts me. Sometimes it brings tears to my eyes.”

Among both low-income and higher-income families, respondents expressed the greatest concern over borrowing non-food essentials from others. Sixty-three percent of higher-income families were embarrassed to borrow from others, and half of the low-income families expressed the same concern, despite their greater likelihood to rely on borrowing from others as a coping strategy. About half of the respondents in both the low- and higher-income groups were concerned about the social stigma regarding their personal appearance and health when they cannot afford basic household goods.

Clients in food pantry settings talked at length about how access to basic essentials affected their sense of self-image and level of stress.

- “I like my place to look nice, because that tells you something about a person.”
- “I worry so much about hygiene stuff.”
- “It gets overwhelming and it gets stressful.”

Pantry clients also described feelings of personal degradation when they were unable to afford basic household needs. One client said, “People knowing that we don’t have things—like having to bum them, that’s degrading.” Another client, a father, said “I’m a man, I got to stand up like a man, but sometimes it brings me down, and it’s a hurting feeling because when I do things like that and asking people, it really bothers me and it hurts me.”

The qualitative interviews highlighted that clients view access to basic household goods as important to their desire to be good parents.

- “Well, the head of the household is keeping the kids clean, keeping them neat and hair combed, make sure they eat and make sure they have a decent place to stay and be clean. That’s my major goal for kids.”

Another related interview theme was a need to have products on hand to reinforce the hygiene habits that were being taught in school.

- “We always brush our teeth. They teach our kids, you know, at school.”

Concern about general household health was also reflected in the interviews.

- “Got to have a clean place because I have a 15 year old and it’s hard. They need to make sure they’re clean because otherwise they could get infections.”
- Another client stated that household supplies were a priority “to keep the house clean because the kids would get sick otherwise.”

Respondents also expressed concern about the impact on their children’s acceptance by other children.

- “I have seen how other kids pick on the kids when they are not dressed properly...and that affects kids. I’ve seen it.”
- One participant even went so far as to express concern that failing to be able to provide for good hygiene for children can put families at risk of being “turned in” to children and family services.

POTENTIAL IMPLICATIONS

The findings of this study clearly highlight that low-income families, and some higher-income families, struggle to afford basic household necessities that are needed to maintain personal hygiene, household care and sense of self. While families engage in compensating behaviors in an effort to overcome these resource issues, it is clear that the inability to afford needed household goods translates into heightened stress and stigma and an inability to afford other living necessities, including food.

While many of the charitable agencies serving low-income families are already aware of these needs, this research suggests that, overwhelmingly, families are continuing to struggle to afford basic household goods. The findings of this study underscore the need for institutions to work together in an effort to assist low-income families in meeting basic needs. Organizations such as health care clinics and dentists' and physicians' offices might consider becoming more aware of low-income families' hygienic needs in an effort to ensure that personal care is not compromised when basic household goods are unaffordable. Additionally, social service agencies and other organizations which routinely interact with families—including food pantries and schools—are encouraged to become aware of the

particular household needs of families with children. As recent literature has shown, low-income families with babies and small children have different personal care needs than other families and many families with babies already struggle to afford diapers and promote optimal child health.⁸

As important as social service and health care networks are, charity alone cannot address the unmet need for households' basic living essentials. There is also an opportunity for retail and manufacturing sectors to become engaged in efforts to remove the barriers to access to basic household goods. Federal nutrition assistance programs, such as the Supplemental Nutrition Assistance Program (SNAP), focus only on food items, so there is a need for other creative strategies to help families afford non-food goods that are just as important for maintaining a healthy lifestyle. If efforts are made by the manufacturing and retail sectors to include low-income families in the mainstream economy—both affording them the dignity of participation and minimizing the need for households to engage in potentially deleterious coping strategies—the stress and stigma that undermine low-income families' health and well-being could be alleviated.

TECHNICAL APPENDIX: SUMMARY OF RESEARCH METHODS

Before undertaking a larger national survey, Feeding America partnered with the Family Resiliency Center at the University of Illinois at Urbana-Champaign to conduct qualitative interviews with pantry clients in both Chicago (a large urban setting) and in the micro-urban area of Urbana-Champaign and adjoining semirural communities in central Illinois. Twenty-five clients in nine food pantry settings took part in semi-structured interviews in fall 2011. Participants received \$25 cash for their time. All research procedures were reviewed and approved by the Institutional Review Board at the University of Illinois.

The focus of the project was to identify household products that food pantry clients are most likely to find essential for basic living, explore which strategies

they have used in the past to obtain these household products and investigate the perceived consequences of having to go without certain household products. This information was gathered to inform the design of a larger, nationally representative survey of Americans, as well as to help food banks and pantries assess their clients' concerns regarding the need for household products.

Participants in the qualitative study were over the age of 18, and were heads of households with at least one child under the age of 18. The research approach was grounded in the concept of family resilience: families develop multiple strategies and rally resources when faced with daily challenges.

⁸ Smith, M. V., et al. (2013). Diaper Need and Its Impact on Child Health. *Pediatrics* Vol. 132, No. 2.

An interview guide was constructed to ask about:

- Economic pressures the family faces and how they allocate resources across various living expense categories
- Household products the family uses on a regular basis
- How the respondent would rank what he or she regarded as the most essential non-food household items, from a list of items generated from the American Red Cross preparedness list
- Which strategies the family employs to procure resources or compensate when resources are low
- What the perceived consequences are of going without these essential items

Findings from the qualitative food pantry interviews were used to inform the design of a survey administered by Abt SRBI to a nationally representative sample of households with children, with oversampling to ensure representation of low-income households. Low-income households were determined by using household income values at 200 percent or below the federal poverty level, or FPL, which was \$22,350 for a family of four in 2011. Among the 1,876 families surveyed in the national study, nearly half (45 percent) were low-income, although it is important to note that an

additional 10 percent of those families, who were considered as part of the higher-income group, barely met the 200 percent level.

The survey instrument and all research procedures were approved by the Institutional Review Board of Abt SRBI. The survey was administered over the phone by trained interviewers, using a dual-sampling frame of both landline and cellular telephone numbers. Data was collected from January through March 2012. Participants were sent a \$10 incentive for completing the survey. The final response rate was 32 percent, which is above the national average for these types of surveys, but reflects the general downward trend in telephonic survey participation.⁹ Results were weighted to adjust for sampling probabilities, non-response and gaps in coverage of the population. The questionnaire included an eligibility screener to ensure that the household included a child under the age of 18. If the respondent indicated that the household was eligible, informed consent was obtained and information was gathered on the number of adult and child household members and the age range of each member. The key sections of the survey included:

- Questions for both low- and higher-income respondents on the purchasing and ranking of basic household goods. Examples included, “How do you buy your items of importance?” and “Where do you shop?”

REFERENCES

Abt SRBI. (2012). *Survey of Americans' Basic Household Care Needs*.

Coleman-Jensen, A., M. Nord, M. Andrews, and S. Carlson. (2012). *Household Food Security in the United States in 2011*. U.S. Department of Agriculture, Economic Research Service.

Fiese, B., B. Koester, and E. Knowles. (2011). *A Report to Feeding America on the Non-food Household Product Needs of Pantry Clients*. University of Illinois at Urbana-Champaign.

Mabli, J., R. Cohen, F. Potter, and Z. Zhao. (2010). *Hunger in America 2010*. Mathematica Policy Research for Feeding America.

Pew Research Center for the People & the Press. (2012). *Assessing the Representativeness of Public Opinion Surveys*.

Smith, M.V., et al. (2013). Diaper Need and Its Impact on Child Health. *Pediatrics* Vol. 132, No. 2.

Stanton M., M. Rutherford. (2003). Dental care: improving access and quality. *Research in Action* Issue #13. Agency for Healthcare Research and Quality.

U.S. Government Accountability Office. (2000). *Oral Health: Dental Disease Is a Chronic Problem Among Low-income Populations*.

⁹ Pew Research Center for the People & the Press (2012). *Assessing the Representativeness of Public Opinion Surveys*.

ACKNOWLEDGEMENTS AND CREDITS

Research for the *In Short Supply: American Families Struggle to Secure Everyday Essentials* investigation was generously supported by Procter & Gamble and carried out by Abt SRBI. Feeding America would also like to thank the Family Resiliency Center at the University of Illinois at Urbana-Champaign for their involvement in the piloting and formation of the *In Short Supply* questionnaire.

We appreciate the contributions of the following people for their work on the *In Short Supply: American Families Struggle to Secure Everyday Essentials* research project:

Elaine Waxman, Co-Investigator
Feeding America

Robert Santos, Co-Investigator
Urban Institute

Kelly Daley, Co-Investigator
Abt SRBI

Barbara Fiese, Co-Investigator
University of Illinois at Urbana-Champaign

Brenda Koester, Co-Investigator
University of Illinois at Urbana-Champaign

Erin Knowles, Co-Investigator
University of Illinois at Urbana-Champaign

Elaine Waxman, Content Contributor
Feeding America

Emily Engelhard, Content Contributor
Feeding America

Brittany Morgan, Content Contributor
Feeding America

Meghan O’Leary, Content Contributor
Feeding America

David Ciemnecki
Abt SRBI

Julie Pacer
Abt SRBI

Benjamin Phillips
Abt SRBI

FEEDING AMERICA NATIONAL OFFICE STAFF

Julia Brown

Nancy Curby

Angela De Paul

Theresa Del Vecchio

Jacqueline Goodman

Amy Satoh

Jennifer Tan