Examining The Complexity Of Food Insecurity Among Cleveland Residents Through The Cleveland Health Survey

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Background

The Cleveland Health Survey (CHS) is a collaborative effort between the Prevention Research Center for Healthy Neighborhoods and the Cleveland Department of Public Health that explores the health and wellbeing of Cleveland residents.

Representing a locally tailored version of the Centers of Disease Control and Prevention's Behavioral Risk Factor Surveillance System, the survey focused on areas of demographic characteristics, general health status, chronic health conditions, cancer screening, mental health, social determinants of health, racial and ethnic discrimination, neighborhood safety and violence, tobacco and nicotine product use, and alcohol and other drug use.

This initiative is intended to provide insight on the unique needs of Cleveland's many communities and therefore help guide the development of the implementation of programs, polices, and resources to better serve these communities.

Population

English and Spanish speaking adult residents were recruited and screened from 34 unique Cleveland neighborhoods.

Learning Objectives

- Gain experience in community-based research by learning how to effectively monitor and analyze data to better understand community needs and successes
- Bridge connections between community members and stakeholders through collection and analysis of data to promote positive health outcomes
- Learn how to disseminate local level data by using public health surveillance (locally tailored version of the CDC's BRFSS) and become familiar with the mechanisms of surveillance

Activities

- The survey was available online or over the phone between November 21, 2024, to January 21, 2025
- A total of 1,497 adults were successfully recruited, with 124 surveys being completed over the phone
  - Personally conducted 48 phone-based surveys
  - Surveys, on average took about 30 minutes to complete, but could go up to 2 hours.
- Attended meetings with the team and stakeholders involved to learn more about Cleveland's public health landscape
- Analyzed data specific to the social determinants of health for community-based dissemination

Lessons Learned

- Survey conduction in research is an effective tool to understand the health and wellbeing of communities
- Qualitive and quantitative analysis have a profound impact in influencing community engagement
- Became more knowledgeable about Cleveland's public health landscape and the importance of community engagement

Public Health Implications

There are various barriers within Cleveland that restrict proper access to care. Additionally, food insecurity remains a major concern in Cleveland, continuing to disproportionally affect underserved and marginalized communities. Collaboration between stakeholders and the community is essential to improving access to food as well as increasing adequate nutrition measures in Cleveland.

This information from the Cleveland Health Survey can help professionals be better equipped in responding to community need overall, through health promotion initiatives such as programming, trainings, policy implementation, and advocacy.

"Better health starts with an affordable place to make meals and access to affordable healthy foods."

Deliverables

- **Conducted qualitative analysis by creating a codebook -** coding each response into specified categories covered in the survey
- **Developed a data brief -** emphasizing the relationship of unmet needs within Cleveland residents

Findings – Qualitative Analysis

- **Three open ended questions were asked at the end the survey, which influenced the codebook creation for qualitative analysis:**
  1. *Are there other items related to health and wellbeing that you think need to be considered that were not covered on this survey?*
  2. *In your opinion, what is the biggest issue or concern facing the people in your community?*
  3. *What do you think should be done to address those needs?*

First Analysis-Food Insecurity Rates

Demographic Factor	Food Insecurity Rate (%)
Geographic Location	
Cleveland	30.2
Ohio	13.2
U.S.	12.5
Race	
White	17.5
Black	42.0
Hispanic	35.1
Age	
18-34	31.4
35-59	40.3
60+	20.6
Household Size	
No Kids	26.0
Kids	49.4
Employment Status	
Employed	22.9
Out of Work	64.1
Unable to work	59.3
Retired	16.2
Student/Homemaker	47.9

The items highlighted in **RED** indicate the highest rate of food insecurity found within each group. While geographic location focuses on Cleveland, Ohio, and the United States as a whole, the rest of the demographic factors listed refer to Cleveland residents only.

Table 1: Comparison of Demographic Factors and Corresponding Food Insecurity Rate Based on Cleveland Health Survey Responses.

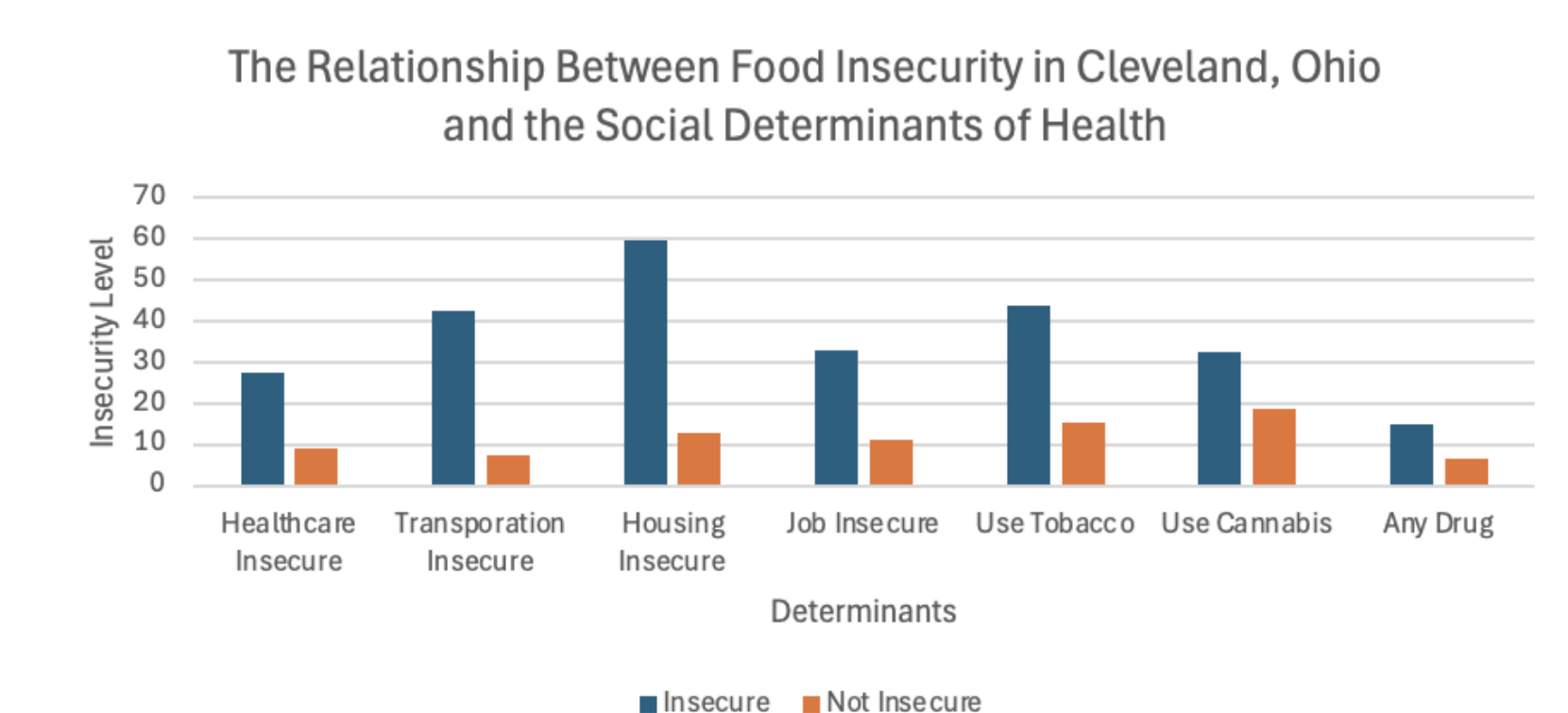### Second Analysis-Social Determinants

Figure 1: The Relationship Between Food Insecurity in Cleveland, Ohio and the Social Determinants of Health

This figure portrays the relationship between food insecurity represented within Cleveland and the likelihood to experience other key determinants of health that was evaluated within the survey responses.

Overall, these findings represent the current climate surrounding food insecurity and its relationship to other determinants present within Cleveland communities.

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Click here to learn more about the Cleveland Health Survey!