

- A partnership of public health researchers across the five universities in North East England
- Working with policy makers and practice partners to improve health and wellbeing and tackle inequalities
- A founding member of the NIHR School for Public Health Research (SPHR)

# Food insecurity in adults living with Severe Mental Illness

Food insecurity happens when people lack the financial resources they need to get enough food to meet their diet, nutrition, and social needs. Food insecurity in adults living with Severe Mental Illness (SMI) is an under researched area worldwide.

In September 2022, 9.7 million UK adults were experiencing food insecurity, and the rate is increasing every year. Food insecurity remains a significant worldwide concern. The COVID pandemic, rising fuel prices and current cost-of-living crisis have all contributed to the sharp rise in UK food insecurity.

Food insecurity can impact on diet quality and, as a consequence, people's physical and mental health. Not having enough food can lead to anxiety and depression and may increase mental ill health symptoms. There are also links between food insecurity and the risk of suicide. The physical health impacts of food insecurity include being underweight, overweight or having obesity, high blood pressure, increased cholesterol levels and diabetes.

There are approximately 574,000 people in England living with Severe Mental Illness (SMI) such as schizophrenia, bipolar disorder, or other forms of psychosis. People living with SMI die, on average, 15-25 years earlier than the general population, and this is mainly due to preventable physical health conditions. One reason that people with SMI struggle to access healthy food is they don't always have the skills, equipment, knowledge and/or motivation to prepare a meal from fresh ingredients.

We know from speaking to people with SMI that they feel food insecurity is an important issue and we have heard stories of people wanting to remain in hospital for longer periods than needed in order to access meals. However,

there is limited research regarding the impact of food insecurity on individuals with SMI, especially in the UK.

This systematic review aimed to identify, collate and summarise available evidence relating to food insecurity in adults with SMI, in high and upper middle-income countries. The research team were particularly interested in the prevalence (rate) of food insecurity in people with SMI and to understand their experiences of food insecurity.

## Key Findings

- Overall, 41% of adults with Severe Mental Illness (SMI) had food insecurity, ranging from 16% to 74%. People with schizophrenia or schizoaffective disorder (mood symptoms as well as psychosis) had the highest rates of food insecurity. Food insecurity in people with SMI is therefore much higher than UK general population estimates of 18% to 20%.
- Adults with SMI were over three times more likely to have food insecurity than those without it.
- The relationship between food insecurity and SMI appears to be two-way; people with SMI are more likely to have food insecurity, but people with food insecurity are at higher risk of developing an SMI.
- People with food insecurity and SMI were more likely to be smokers and less likely to do regular physical activity. They also had less social support than people who were food secure.
- People with food insecurity and SMI ate less fruit, vegetables and foods containing protein. One possible explanation for this poor-quality diet is the large price difference between 'healthy' and 'unhealthy' food options. Healthy food options cost far more than unhealthy options, and people with SMI generally have lower incomes.
- There were many different food insecurity assessment tools used, and none of the studies were undertaken in the UK.

## Policy relevance and implications

- It is vital that mental health practitioners are aware of food insecurity and support individuals with Severe Mental Illness (SMI) to access sufficient food to meet their diet, nutrition, and social needs.
- Mental health practitioners may not prioritise asking about food insecurity. There are many potential explanations for this. Many people accessing food banks report a sense of social stigma and shame. The impact of multiple stigmas - including mental illness, food insecurity, or obesity - may be a barrier for people with SMI in raising the issue of food insecurity with their mental health practitioner. Routine assessment and monitoring of food insecurity in adults with SMI is therefore essential.
- The development of co-produced interventions to address food insecurity is an important next step, and policy makers should consider the “lived experience voice” when designing food insecurity policies and interventions.
- More research is needed to develop a food insecurity assessment tool for mental health settings, and to identify ways to support people to have enough food to stay healthy.

*“Adults with Severe Mental Illness were over three times more likely to have food insecurity than those without it.”*

## BRIEF DESCRIPTION OF THE RESEARCH

Research undertaken by experts from Fuse, the Centre for Translational Research in Public Health based at Teesside University, and the University of New South Wales. This systematic review (a summary of existing research) aimed to explore food insecurity in adults with Severe Mental Illness (SMI) living in high and upper middle-income countries. It found that adults with SMI were over three times more likely to have food insecurity than those without it.

Smith, J., Stevens, H., Lake, A. A., Teasdale, S., & Giles, E. L. (2023). *Food insecurity in adults with severe mental illness: A systematic review with meta-analysis*. *Journal of Psychiatric and Mental Health Nursing*, 00, 1–19.

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## FURTHER INFORMATION

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Fuse, the Centre for Translational Research in Public Health, is a collaboration of the 5 North East Universities of Durham, Newcastle, Northumbria, Sunderland & Teesside.

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