Food Insecurity Common Among People Receiving Treatment for HIV in British Columbia

Importance of this study
- An estimated 9% of Canadian households were food insecure (see definition in study findings) in 2005
- Studies suggest that HIV-positive food insecure individuals receiving treatment have reduced HIV treatment adherence, body mass index, higher chance of death and, decreased chance of lowering the virus in the blood (viral load)
- This study assessed how common food insecurity is among HIV-positive adults who are receiving HIV treatment in BC and identified risks and harms related to food insecurity among this group

RESEARCH QUESTION:
What are risk factors for food insecurity among HIV-positive individuals receiving treatment in BC?

MAIN FINDING:
Participants who had low incomes, currently used illegal drugs and tobacco, or who had depressive symptoms were more likely to be food insecure

How this study was conducted
- Data was analyzed from the LISA study, a cohort of HIV-positive individuals on antiretroviral therapy in British Columbia, Canada
- This research is based on 457 interviews that asked about sociodemographic characteristics, house stability, depression, food security and substance use

What the study found
- 324 individuals (71%) reported being food insecure (not having access to enough quality food)
- Individuals who earned less than $15,000 per year, used illegal drugs, smoked tobacco, were younger in age and had depressive symptoms were more likely to report being food insecure
- Participants in this study were seven times more likely than the Canadian general population to report being food insecure. This rate is 23% higher than a similar study among HIV-positive individuals in BC conducted ten years earlier.

What this means for public policy
- Food security is alarmingly common among people receiving treatment for HIV in British Columbia. More research and policy action is needed to identify and implement strategies that can effectively improve food security among people living with HIV.