

Acute Health Care Utilization among Food-insecure Children in Primary Care Practices

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ABSTRACT: Building on prior research, this study tested two theories: (1) differences in child health care utilization can predict household food insecurity (FI), and (2) FI is associated with subsequent increased acute health care use. We conducted a prospective cohort study of 3,335 children screened for FI at three-year well-child visits in three urban practices, evaluating their acute care use one year before and after FI screening. Prior to screening, food-insecure participants had fewer acute primary care visits, but there were no differences in emergency department visits or hospitalizations. Overall, child demographic characteristics and health care use were no better than chance in predicting household FI. For those who screened positive, there were no differences in subsequent acute care use. This study suggests that the risk of FI among three-year olds cannot be reliably predicted based on acute health care use patterns, and FI may not be associated with subsequent acute health care use.

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