**Literature Review**

Consumption of food is vital for every organism on the planet, no matter the kind of organism it is. However, the consumption of food greatly depends on the choice that person has at hand and resources present in the region. Therefore, this paper seeks to address the food insecurities and the reason behind these insecurities. An individual needs to consume just enough calories on a daily basis to stay healthy. Food security is defined the ability of an individual to consume just enough food daily, with the required amount of food being available to the person. While there is more than enough food produced in the world to feed everyone in the world, however, unequal distribution of food causes food insecurity in various regions of the world. This food insecurity gives rise to a number of medical conditions and has many causes associated with them. While there are many causes for food insecurity, none of them are as prevalent as poverty. Poverty makes it difficult for an individual to produce, or buy enough food. The rapid growth of human population has a huge impact on food security. It is expected that food insecurity will significantly increase with time. Population in the next 30 years may exceed to a critical point where it will be difficult to produce and distribute enough food to everyone. In order to understand the issue in detail, a number of research papers, journals and newspapers were studied to collect information on the subject.

There is a correlation between food assistance, food security and health status of the people. This was studied by Martin and his colleagues (2012), who conducted controlled and randomized research. They evaluated their result by comparing a hundred fresh place members with a hundred individuals who consume food from traditional food pantries. The main purpose of the research is to explain the community based participatory research process for the fresh place evaluation and development. The changed score analyzed over a period of three months was compared through t-test. This included the outcome of diet quality, food security, and self-sufficiency. The results indicate that partnership between university and community agencies brought larger change score and better diet quality and food security (Martin, Shuckerow, O’Rourke, & Schmitz, 2012)..

Alvarez and his team of researchers (2015) acquired data from the Community Health Center Patient Survey to figure out the relationship between health outcome, and food insecurity. The research indicates that sample reported for health status, food assistance, and food security was about 31.9%, 52.6%, and 10.9% respectively. In addition, women reported for health status were significantly higher than men. These findings suggested that food assistance and food security have a direct impact on the poor/good health outcome where programs like affordable care act and patient protection can play a vital role (Alvarez, Lantz, Sharac, & Shin, 2015).

Financial conditions is one of the main factors that cause food insecurity in a household that results in several health issues.

Chang, along with Chatterjee and Kim (2014) worked with qualitative data and information from the Panel Study of Income Dynamics to identify the role of financial problem in health outcome. Throughout the whole process, the researchers put the focus on the insolvency risk, asset inadequacy, and liquidity constraint. The research suggested that Americans get affected by the repeated expansion of hunger, food insecurity and assistance where major contributors for the causes are unemployment poverty and income level (Chang, Chatterjee, & Kim, 2014).

Long and colleages (2017)analyzed publication from 1997 to date to review the searches about food insecurity, hunger, food banks, and other food-related keywords. Publications were reviewed based on eligibility criteria that is whether the research is related to food issue and can help to address the food insecurity issue in the context of the household. The result suggested that during food insecurity period household increase their food consumption through food banks and food pantries which results in various diseases and health issues (Long, Rowland, Steelman, & McElfish, 2017).

Household somehow manages healthy food and therefore good health but outside home people experience food insecurity. Bowen, along with colleagues (2019), assessed the role of factors related to health outcome in homeless adults who live in supported housing. The research used survey interviewed 237 people of age above 45 in California. The result indicated that about 67% of the total population faces the issue of food security and income level is the main factor that affects the health outcome (Bowen, Lahey, Rhoades, & Henwood, 2019).

Knol and team (2018) characterized the food insecurity experienced by the student at the undergraduate level. Survey and interviews from fourteen students were conducted, and factors that lead to experiences of food insecurity were collected. Findings highlights that financial problem is the cause that leads to the food insecurity and issues like frustration, aggression, anxiety, and depression (Knol, Robb, McKinley, & Wood, 2018).

Geographical information system and demographic data are useful to acquire the information regarding food insecurity and needs of the people.

Bacon and Baker (2017), focused on the estimation and researched method for the findings of food insecurity. Seventeen indicators were used to identify the factors and risks of food insecurity. Cluster analysis was used to analyze the data. The findings indicate that the geographical information can be helpful to understand the needs and problems of the people and efficient use of resources can be ensured (Bacon & Baker, 2017).

Borders and team (2018) made use of the demographic data, geographical information system, and location of food assistance. The data was analyzed through the food

insecurity index, potential food insecurity, distance, and poverty rate through the case study method. The result highlights that poverty is the only approach that is helpful to estimate the food insecurity rate and access of the people for it. Therefore, poverty should be addressed to reduce the issue (Borders, Ferris, Jo Beeby, & McCahill, 2018).

Wright and his colleagues (2016)defined the term food desert, referring to the areas that lack access nutritious, healthy and even affordable food. The sample was taken from a list of known food deserts, especially one which uses observational data regarding local availability, quality, price. It then deploys focus groups and food insecurity. The purpose of this research was to show that the people in neighborhoods with a full-service supermarket have a much poor diet than the ones that do. The only recommended solution to this issue is to open full-service supermarkets in various neighborhoods and provide food to low-income populations , 2016).

Zepeda (2017) redefined good insecurity within the country as reduced variety, reduced quality and even desirability of diet. Lack of food or food insecurity does not necessarily mean hunger, but it is related to a poor diet, health problems and even weight gain. This process of redefining was done by carrying out a research-based assessment of 20 people living in middle America suffering from food insecurity, since they do not have a pantry in their homes. Furthermore, they are also classified families on the basis of the Asset Vulnerability Framework (AVF) to deal with food insecurity. The various points associated to the subject refer to the structural changes in the economy. These changes have reduced labor assets of a number of middle-class participants using decreased job security, reductions in wages, and finally increased nonstandard work along with a significant increase in costs of benefits as being responsible for food insecurity (Zepeda, 2017).

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