UCLA Fielding School of Public Health | USC Dornsife | USC Price | USC Schaeffer Center for Economic and Social Research | Keck School of Medicine of USC | Los Angeles Regional Food Bank

Research Brief

Food and Nutrition Insecurity in California in 2025



Published November 2026

public exchange | USC



Far too many California households struggle to get enough food and enough nutritious food. In 2025, **about 1 in 5 California households (21%) experienced food insecurity,** meaning they lacked access to enough food. **The same share (21%) experienced nutrition insecurity**, meaning they lacked access to nutritious food. These estimates come from survey data collected through the Understanding America Study and are representative of California households.

Food Security

Food security focuses on whether a household has enough food.

Households that are food insecure may report that they don't have enough food, and may cut portions, skip meals, or worry about running out of food.

***21%** of California households (~2.8M) experienced food insecurity in 2025.*

Nutrition Security

Nutrition security focuses on whether a household has access to nutritious food, not just enough calories.

Households that are nutrition insecure report that it is hard to regularly eat healthy foods that support their health and wellbeing.

***21%** of California households (~2.8M) experienced nutrition insecurity in 2025.*

Although the two rates are the same — 21% — they describe overlapping but not identical groups of households.

Among the ~2.8 million California households that experienced *food insecurity* in 2025:

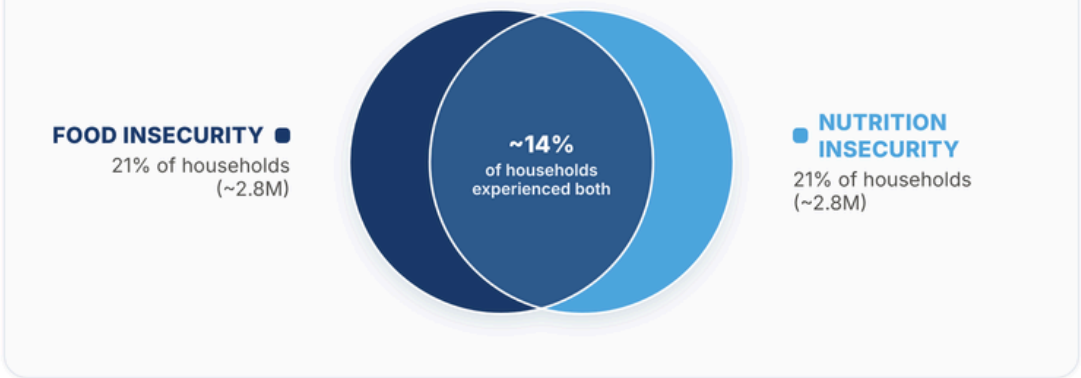
- About two thirds (67%, ~1.9M) also experienced nutrition insecurity.
- About one third (33%, ~920,000) were nutrition secure: although they didn't have enough food, they *did not* report difficulty eating healthy food.

Among the ~2.8 million California households that experienced *nutrition insecurity* in 2025:

- About two thirds (65%, ~1.8M) also experienced food insecurity.
- About one third (35%, ~980,000) were food secure: although they had enough food, they reported it was hard to eat healthy foods.

Altogether, more than 1 in 4 California households (28%, ~3.8M) experienced food insecurity, nutrition insecurity, or <u>both</u> in 2025. The overlap of food and nutrition insecurity is shown in Figure 1.

Figure 1. Food Insecurity and Nutrition Insecurity Overlap
Among California Households, 2025



28% (about 3.8M households) of California households experienced food insecurity, nutrition insecurity, or both in 2025

Source of data: Rates of food and nutrition insecurity are from the Understanding America Study, University of Southern California. California household counts are from the U.S. Census Bureau (2020–2024 American Community Survey 5-Year Estimates).



Why this matters: Going without enough nutritious food doesn't just mean an empty stomach. It often leads to poorer health. Adults facing food or nutrition insecurity are more likely to have conditions like type 2 diabetes and heart disease (Craig, 2025; Thomas, 2021). Children who are food insecure are more likely to be in fair or poor health, and to have problems like asthma and anemia, as well as developmental delays and behavioral, emotional, and academic difficulties (Gundersen & Ziliak, 2015; Shankar, 2017). These effects ripple into the wider community, adding an estimated $52 billion a year in health care costs nationwide (Berkowitz, 2019) — a cost shared by families, hospitals, and taxpayers.

Food and nutrition insecurity at this scale is not acceptable. It requires a comprehensive policy response from leaders at all levels of government, including action on the factors that shape what people earn, what food and essentials cost, and who gets help. Continued monitoring is also essential to understand who is experiencing food and nutrition insecurity, particularly now that national USDA monitoring has been terminated (USDA, 2025). California has the resources and the capacity to act, and the choices we make together will determine whether every Californian has enough nutritious food to live a full life.

Authors

Kayla de la Haye, **PhD**, Professor, Fielding School of Public Health, University of California, Los Angeles (UCLA)
Angela Zhang, PhD Candidate, Spatial Sciences Institute, Dornsife College of Letters, Arts and Sciences, University of Southern California
Natasha Wasim, PhD Candidate, Department of Population and Public Health Sciences, Keck School of Medicine, University of Southern California
Wändi Bruine de Bruin, **MSc**, **PhD**, Provost Professor, Schaeffer Institute for Public Policy and Government Service, Price School of Public Policy, and Dornsife Department of Psychology, University of Southern California
Michael Flood, President & CEO, Los Angeles Regional Food Bank
John Fanning, Senior Project Manager, Public Exchange, Dornsife College of Letters, Arts and Sciences, University of Southern California

References

Berkowitz SA, Basu S, Gundersen C, Seligman HK. (2019). State-level and county-level estimates of health care costs associated with food insecurity. Preventing Chronic Disease, 16:E90.

Craig HC, et al. (2025). Development and validation of a brief Nutrition Security Screener (NSS) for clinical and public health settings. *The American Journal of Clinical Nutrition*. 122(6), 1689-1700.

Gundersen C, Ziliak JP. (2015). Food insecurity and health outcomes, *Health Affairs*, 34(11), 1830-1839.

Shankar P, Chung R, Frank DA. (2017). Association of food insecurity with children's behavioral, emotional, and academic outcomes: a systematic review. *Journal of Developmental & Behavioral Pediatrics*. 38(2):135-50.

Thomas MK, Lammert LJ, Beverly EA. (2021). Food insecurity and its impact on body weight, type 2 diabetes, cardiovascular disease, and mental health. *Current Cardiovascular Risk Reports*, 15(9):15.

USDA. (2025, September 20). USDA Terminates Redundant Food Insecurity Survey. https://www.usda.gov/about-usda/news/press-releases/2025/09/20/usda-terminates-redundant-food-insecurity-survey

Research Methods

This report is based on data from the Understanding America Study (UAS), administered by the USC Center for Economic and Social Research. UAS respondents are members of a probability-based internet panel who participated in surveys conducted between December 1 and December 31, 2025. Food security was measured using the USDA U.S. Household Food Security Survey Module: Six-Item Short Form. Nutrition security was measured using the Nutrition Security Screener (Craig, 2025). All respondents are 18 years or older, and sampling is representative of all households in California. The survey is conducted in English and Spanish. The sample size for this report is 2,213, and all results are weighted to CPS benchmarks, accounting for sample design and non-response. Participants were recruited for the UAS internet panel using an address-based sampling (ABS) method; methodological details for the UAS panel are available at https://uasdata.usc.edu. The UAS has been funded in part by the Bill & Melinda Gates Foundation, the National Institute on Aging, the Social Security Administration, the National Science Foundation, the University of Southern California, and many others who have contributed questions.

Acknowledgements

Support for data collection came from the Los Angeles Regional Food Bank. This work was also supported by the University of Southern California (USC) Dornsife Public Exchange and by a grant from the National Science Foundation (Grant #2125616, S&CC-IRG Track 1: Smart & Connected Community Food Systems, PI: de la Haye). We would also like to acknowledge the USC Center for Economic and Social Research, which administers the Understanding America Study.

Disclaimer

The views expressed herein are those of the authors and not necessarily those of the UCLA Fielding School of Public Health, the USC Dornsife College of Letters, Arts and Sciences, the Schaeffer Institute for Public Policy and Government Service, the Price School of Public Policy, the Keck School of Medicine, or the University of Southern California as a whole.