

PRIORITIZING HEALTH EQUITY & FOOD SECURITY

Spotlight on Epilepsy



Feeding America is collaborating with Epilepsy Foundation to raise awareness about epilepsy and its connection to food insecurity and health equity. Epilepsy is a disorder of the brain that causes repeated seizures. A seizure is a brief change in normal electrical brain activity resulting in alterations in awareness, perception, behavior, or movement.¹

Epilepsy affects 3.4 million Americans and about 470,000 children and adolescents in the United States had active epilepsy in 2015.² Social, structural, and systemic inequities have contributed to higher rates of food insecurity and epilepsy occurring together for Black, Hispanic, and other marginalized individuals compared to white individuals.^{1,3}

To overcome these inequities, new approaches are needed to ensure that everyone has access to culturally appropriate, healthy food, unbiased health care, and essential resources that improve overall health and well-being. Community groups, food banks, food pantries, non-profits, public health, and health care organizations can work together to support individuals in accessing nutritious foods. Feeding America is focusing on solutions and supports that inform models of community health, free from injustices and inequities. This brief includes “real life” stories of progress. Together, we can help people facing hunger get the help they need to manage seizures and epilepsy.

Social Determinants of Health

If not controlled, seizures can have an impact on quality of life and health outcomes. Individuals with uncontrolled seizures are more likely to use the emergency department and be hospitalized, which contributes to higher costs to both family and the healthcare system.²

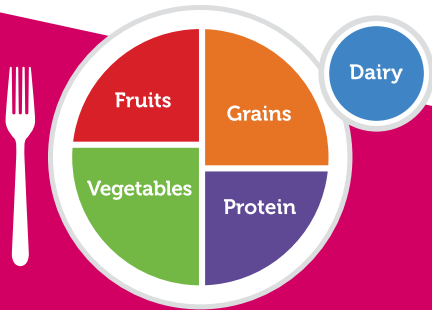
Food insecurity is associated with decreased access to healthcare services. Having unsure, unstable, or unreliable access to food has a significant impact on how families manage complex chronic health conditions such as epilepsy. Children with epilepsy who are food insecure are more likely to be seen in the emergency department or hospitalized and have side effects to anti-seizure medications compared to children who are not food insecure.³ Epilepsy Foundation’s goal is for all workforces, including those working to improve food security, to become **Seizure First Aid Trained**.

Diet and Nutrition

A well-balanced dietary pattern of fruits, vegetables, whole grains, nuts, seeds, and lean proteins is critical to maintain good health, well-being, and to help control seizures and epilepsy. A special diet is sometimes prescribed for people with epilepsy to treat their seizures. This diet can be expensive and difficult to follow even for people who are not food insecure. Please see **this resource** for more information about dietary therapies authored by the Epilepsy Foundation. If you are considering a dietary therapy for yourself or your child, it is important to talk with your treatment team.

FAST STATS

- 3 in 10 children who had at least one seizure in the past year live in homes without enough food.¹
- About 28% of adults with epilepsy vs. 14% of those without epilepsy live in a family having problems paying medical bills in the past year.²
- About 34% of adults with epilepsy vs. 21% of those without epilepsy live in households below the federal poverty line.¹



MyPlate.gov

FRUITS AND VEGETABLES	1/2 PLATE
WHOLE GRAINS	1/4 PLATE
FISH AND OTHER LEAN PROTEINS	1/4 PLATE
LOW FAT OR FAT-FREE DAIRY	3 CUPS

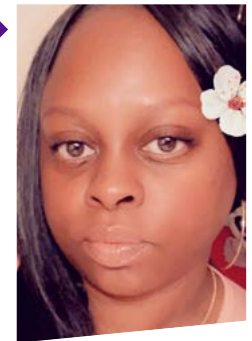
- Food low in saturated and trans fats
- Low sodium options
- Low sugar options

Stories from the Field

One individual, Lanika Johnson, tells her story of living with epilepsy throughout her life and how community programs provided the support her family needed at critical times:

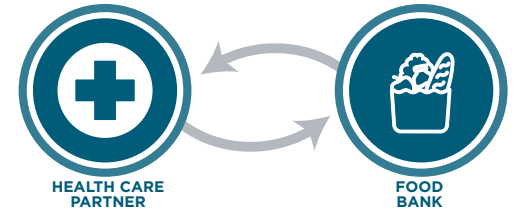


“Since I was a little girl, I always dealt with epilepsy. After not having seizures for so long and then getting rid of my headaches, I had a tragedy in my life in 2011. Then my seizure reappeared. At this time, I had moved to another state for a change in my life thinking that was the problem. [The seizures] came back and got real bad for 2 years where I had to stay at home. So I just dealt with them. They went away again for 8 years, then COVID-19 hit and I had one while I was asleep... With the help of my kids and training them to know what to look for, my oldest jumped up immediately and helped. This year, in December, it will be two years without a seizure, but the headaches are back, but still mild. I feel like since this runs in my family, and I don't have them every week like some of my relatives have and I'm also not on meds, I just learned to deal with it. Still to this day, [doctors] have no idea what is causing my epilepsy. I ran into this wonderful lady named Tanisha Tyler Graves that is a part of the **Operation Love Inc.**, an organization that helps families in need. She delivered food once a week and she also did a program that helped the kids for Christmas gifts. They helped out a lot in the community when it was needed. Very grateful for their help. Epilepsy is a very hard thing to deal with. You never know when it's coming or what triggers it.”



Lanika Johnson

TACKLING FOOD INSECURITY TOGETHER



Take Action! Address epilepsy and hunger.



CONVENE health care, food/hospitality, education, social service, and other community partners to identify and develop solutions to hunger and health barriers within the community.



PRIORITIZE increasing access to affordable food, health care and medication; addressing the social determinants of health; eliminating health disparities; and amplifying community voice.



BUILD TRUST through positive interactions and communication with communities and engage in developing strategies to address the unique and complex needs of people facing hunger, while eliminating bias, recognizing we are all in this together.



DESIGN culturally appropriate diet, nutrition, and health resources and make them available in local clinics, grocery stores, food banks and pantries, community centers, schools and places of worship.



SUPPORT policy, systems, and environmental change approaches that increase nutritious food access and improve health and well-being for community members in greatest need.

For more information about how to address epilepsy disparities, visit epilepsy.com or contact the Epilepsy Foundation at programs@efa.org.

¹ Cui W, Kobau R, Zack MM, Helmers S, Marshaly N, Yeargin-Allsopp M. Seizures in children and adolescents aged 6–17 years – United States, 2010–2014. *MMWR*. 2015;64(43):1209–14. doi: [10.15585/mmwr.mm6443a2](https://doi.org/10.15585/mmwr.mm6443a2)

² Zack MM, Kobau R. National and state estimates of the numbers of adults and children with active epilepsy — United States, 2015. *MMWR*. 2017;66:821–825. doi: [10.15585/mmwr.mm6631a1](https://doi.org/10.15585/mmwr.mm6631a1)

³ O'Malley JA, Klett BM, Klein MD, Inman N, Beck AF. Revealing the Prevalence and Consequences of Food Insecurity in Children with Epilepsy. *J Community Health*. 2017;42(6):1213–1219. doi: [10.1007/s10900-017-0372-1](https://doi.org/10.1007/s10900-017-0372-1)



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