



NUTRITIONALLY STRANDED: FACTS ABOUT ACCESS TO HEALTHY FOOD



FOOD ACCESS FACTS

BARRIERS TO HEALTHY FOOD ACCESS EXIST IN COMMUNITIES WHERE RESIDENTS' ACCESS TO AFFORDABLE, HEALTHY FOOD OPTIONS (ESPECIALLY FRESH FRUITS AND VEGETABLES) IS RESTRICTED OR NONEXISTENT DUE TO A LACK OF GROCERY STORES WITHIN CONVENIENT TRAVELING DISTANCE.

ACCORDING TO THE
USDA:

1

23.5 MILLION PEOPLE LIVE IN LOW-INCOME AREAS MORE THAN 1 MILE FROM A LARGE GROCERY STORE, AND THAT 11.5 MILLION OF THESE PEOPLE HAVE LOW INCOMES THEMSELVES¹

2

THERE ARE MORE THAN 6,500 FOOD DESERT TRACTS IN THE US²

BETWEEN 1989 AND 2005, THE OVERALL PRICE OF FRUITS AND VEGETABLES IN THE US INCREASED BY NEARLY 75%, WHILE THE PRICE OF FATTY FOODS DROPPED BY MORE THAN 26%²

THE SCOPE OF THE PROBLEM

THESE ISSUES AREN'T JUST CONFINED TO A SINGLE TYPE OF COMMUNITY. URBAN, SUBURBAN AND RURAL RESIDENTS CAN ALL FACE LIMITED ACCESS TO PROPER NUTRITION.

1

2.2 MILLION HOUSEHOLDS IN RURAL COMMUNITIES FACE HUNGER.²

3

AT LEAST 5.6% OF THE POPULATION LIVES IN COMMUNITIES WITH LOW ACCESS TO FOOD RETAIL.²

2

IN URBAN AREAS, RESIDENTS OF LOW-INCOME AREAS UNDERSERVED BY FOOD RETAILERS ARE TRAVELING MORE THAN TWICE AS FAR TO FULL-SERVICE FOOD-RETAIL LOCATIONS.

POVERTY & ACCESS TO FOOD

SOCIO-ECONOMIC FACTORS ALSO PLAY A LARGE PART.

1

AREAS WITH HIGHER LEVELS OF POVERTY ARE MORE LIKELY TO SUFFER FOOD INSECURITY.¹

3

AROUND 30 PERCENT MORE NON-WHITE RESIDENTS FACE LIMITED ACCESS TO FOOD RETAIL WHEN COMPARED TO WHITE RESIDENTS.²

2

BECAUSE LOW-INCOME FAMILIES MUST OFTEN TRAVEL OUTSIDE THEIR COMMUNITY TO SECURE ACCESS TO FOOD RETAIL, MILLIONS OF DOLLARS ARE LOST FROM THEIR LOCAL ECONOMY.²

FEELING THE EFFECTS

ACCESS TO HEALTHY FOOD MAKES IT MORE DIFFICULT TO:

1

GET PROPER NUTRITION - MANY COMMUNITIES CONTAIN AN OVERABUNDANCE OF LOW-QUALITY FOOD RETAIL SELLING PROCESSED FOODS THAT ARE HIGH IN FAT, SUGAR AND SALT.

2

MEET DIETARY RESTRICTIONS, SUCH AS LACTOSE INTOLERANCE, GLUTEN ALLERGIES, ETC.

3

MAINTAIN PERSONAL HEALTH - THE CONSEQUENCES OF LONG-TERM CONSTRAINED ACCESS TO HEALTHY FOODS CAN BE A CONTRIBUTING FACTOR TO OBESITY, TYPE 2 DIABETES, CARDIOVASCULAR DISEASE, AND OTHER DIET-RELATED CONDITIONS.²

SOURCES

1. WWW.ERS.USDA.GOV/WEBDOCS/PUBLICATIONS/45014/30940_ERR140.PDF

2. WWW.FEEDINGAMERICA.ORG/HUNGER-IN-AMERICA

3 CURRY, ANDREW. "BRINGING HEALTHY FARE TO BIG-CITY 'FOOD DESERTS.'" DIABETES FORECAST, 2009. WEB ACCESSED FEBRUARY 23, 2015. WWW.DOSOMETHING.ORG/US/FACTS/11-FACTS-ABOUT-FOOD-DESERTS#FNREF11

4. WWW.AJC.COM/NEWS/STARVING-FOR-NUTRITION/01PSCQCQVFDVVUBK2T9AJ