



Creating The Healthiest Nation: Food Justice

OVERVIEW

FOOD INSECURITY is defined as lack of consistent access to enough food to fuel a healthy lifestyle, typically due to lack of financial resources, and it has lasting impacts on public health.¹ In 2019, 23.5 million Americans—10.5% of all U.S. households—experienced food insecurity.² One year later, amid the COVID-19 pandemic, 23% of all households experienced food insecurity, more than double the figure from 2019.³ COVID-19 exacerbated food insecurity and put a strain on our safety net, but the root causes of food insecurity do not stem from lack of access. Rather, lack of access to healthy foods stems from centuries of racial discrimination and systematic neglect of Black, Latinx and Native communities. While certain federal programs such as the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and the Supplemental Nutrition Assistance Program (SNAP) address food insecurity retroactively, it is important that public health professionals take a food justice lens to address the root causes of food insecurity to better health outcomes among communities of color.

Those who experience the highest rates of food insecurity include low-income individuals; Black, Latinx, Native and Indigenous communities; households with children; and rural regions.

WHO IS MOST AFFECTED?

While food insecurity is a widespread problem, it is not evenly distributed across the United States. Certain marginalized groups face higher rates of food insecurity as the U.S. food system is influenced by a variety of social determinants. The U.S. industrial food system provides plentiful, relatively inexpensive food, but much of it is unhealthy.⁴ Likewise, the food system is not sustainable due to its negative environmental consequences and rapid use of nonrenewable resources such as water and fossil fuels.⁵

Those who experience the highest rates of food insecurity include low-income food consumers, Black and Latinx Americans, Native and Indigenous Americans, households with children, and rural communities. In 2021, 32% of Latinx households and 36% of Black households experienced food insecurity as compared with 18% of white households.⁶ Furthermore, one out of every four Indigenous people experience food insecurity, whereas

only one in nine people in the general population are food insecure.⁷ For many tribes, lack of access to healthy and culturally appropriate food stems from centuries of colonization and subsequent loss of land and from residential zoning laws.⁸ As a result, it has become increasingly difficult to practice food traditions such as the cultivation of native foods, hunting, and fishing.

Rural communities also experience disproportionately high rates of food insecurity relative to people who live in urban areas. Rural communities make up 63% of all U.S. counties, and account for 87% of counties with the highest rates of food insecurity. Living in a rural area significantly reduces access to public transportation, which can exacerbate food insecurity if the closest supermarket or food pantry is miles away. Overall, 2.2 million rural households experience routine hunger.⁹

HEALTH IMPLICATIONS OF FOOD INSECURITY

Food insecurity has lasting impacts on the prevalence of metabolic syndrome and chronic diseases. There are clear associations between food insecurity and the factors that lead to chronic diseases such as heart disease, cancer, diabetes, and stroke, including lack of access to healthy food, which is more common in communities of color.¹⁰

Black people face the highest rates of obesity, heart disease, and other diet-related diseases of any racial or ethnic group in the United States.¹¹ The rate of diabetes among Black people is 77% higher than that among white people, and rates are 66% and 18% higher, respectively, among Latinx and Asian American communities. Also, Indigenous Americans are 60% more likely to be obese than white Americans.¹² Understanding the negative health outcomes associated with food insecurity is essential for health care professionals, policymakers, and program administrators tasked with improving health and well-being.

Food insecurity is also a salient threat to public health among children and adolescents. Being food insecure as a child is associated with a two to three times higher risk of having anemia and a significantly higher likelihood of experiencing behavioral problems, depression, suicidal ideation, and poor oral health due to decreased nutrient intake.¹³ It has also been shown that senior citizens who are food insecure are more than twice as likely to report being in fair or poor health than those with greater food security.¹⁴ Across age groups, food insecurity disproportionately impacts people of color; as a result, communities of color also disproportionately experience these diseases, conditions, and deficiencies.

ROOT CAUSES OF FOOD INSECURITY

One root cause of food insecurity is systemic racism and oppression. The lack of healthy and affordable food in communities of color is not accidental but, rather, the result of decades of racially discriminatory policies and systematic disinvestment.¹⁵

- **Zoning policies.** Since the early 20th century, institutional racism and discriminatory zoning policies have divided cities along racial lines and inequitably limited food access in low-income areas. Redlining and yellow-lining are the practices by which the private and public sectors combined their efforts to prevent Black and other people of color from receiving mortgage loans, and they were intended to limit property in wealthier areas to white people—purposefully concentrating poverty along racial lines.¹⁶



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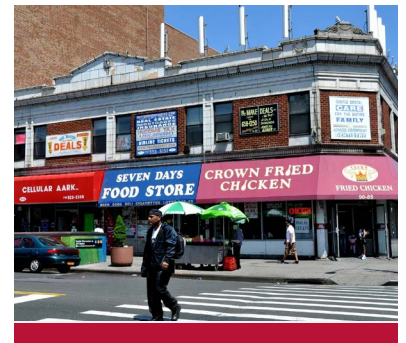
In 1910, Baltimore instituted the country's first zoning laws, which aimed to quarantine Black residents in isolated slums to reduce civil disturbance and protect property values in white neighborhoods. The use of municipal zoning strategies to separate communities by race and class grew exponentially following Baltimore's implementation, from eight laws nationwide in 1916 to 1,246 in 1936.¹⁷

- **Supermarket redlining.** Residential segregation spurred by homeowner associations denying Black communities access to affordable housing and federal housing subsidies has also made it more difficult for people of color to leave low-income areas or accrue wealth. This impacts food insecurity through “supermarket redlining,” a process in which larger supermarket retailers refuse to open storefronts in low-income areas and close existing outlets in lower-income neighborhoods as a result of racism and fear of lost revenue.¹⁸
- **Lack of support for Black farmers.** There is a systemic lack of economic capital within rural communities of color due to historical racial inequities, especially among Black farmers. At the height of Black farming in 1920, Black farmers accounted for around 14% of all farm operations in the United States; in 2012, Black farmers made up less than 2% of all farmers.¹⁹ This is due in part to the U.S. Department of Agriculture's long-standing and well-documented history of discrimination against Black farmers. Over the past century, there has been an unequal distribution of government farm subsidies and support programs between Black and white farmers. White farmers on average received emergency grant assistance that was 20% greater than assistance given to Black farmers.²⁰ Similarly, Black farmers have been historically and consistently more likely to be denied loan applications or loan restructuring assistance than other groups, often leading to foreclosure and contributing to a median household income for Black farmers that is half that of white small farmers.²¹ Economic capital offers power and authority over the choices one makes. Without choice, there can be no food sovereignty or self-determination in food systems.²²
- **Low income or socioeconomic status.** Low-income families are more likely to live in areas populated by smaller corner stores, convenience markets, and fast-food vendors with limited healthy food options.²³ Combined with the absence of supermarkets and transportation, residents in these communities often see convenience stores as the most viable option for food purchases. As a result of purposeful disinvestment in communities of color, race and socioeconomic status are inextricably linked, so Black communities are more likely to live in low-income neighborhoods facing limited access to healthy foods.²⁴

MOVING UPSTREAM FROM FOOD DESERTS TO FOOD APARTHEID

Food deserts are a frequently cited concept used to describe and measure food insecurity. Food deserts are geographic regions with limited access to healthy and affordable food.²⁵ In 2017, 12.8% of U.S. residents—around 39.5 million people—lived in a low-income area classified by the USDA as a food desert.²⁶

There are some issues with food deserts as a concept. First, food deserts do not consider delivery services, which reduce the relative importance of one's physical location. Likewise,



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most people already shop outside of their neighborhood for food. Second, food desert classification often fails to take into account “food mirages,” or areas where there are places to buy food but they are too expensive for the neighborhood.²⁷ Most important, the term food desert does not address the primary factor driving food insecurity: financial insecurity.²⁸ Instead, the food desert narrative implies that these areas occur naturally rather than acknowledging economic disparities as the underlying root cause.

Food apartheid, by contrast, acknowledges the history of institutionalized segregation created by racially discriminatory policies.²⁹ Food apartheid evolved as a term to highlight the role of racist policies in limiting access to healthy food in the United States and, in doing so, create systematic change. Activists chose this terminology to replace “food deserts” to refocus our attention on the intersectional root causes that contribute to low-income and low-food-access areas.³⁰ More important, the change in framing drives public health professionals to create structural changes that address more than improved access and the provision of food assistance.

ADVANCING FOOD JUSTICE

We can address the food apartheid plaguing marginalized Americans by focusing our efforts towards “food justice.” Food justice addresses the long history of economic injustice and racial discrimination by incorporating the need for land and financial reparations and increasing access to capital for communities of color to facilitate property ownership, including farmland.³¹ Food justice also calls for reinvestment in education and job opportunities, specifically in neighborhoods historically discriminated against and thus denied access to healthy, affordable food. Food sovereignty, which attempts to rectify power imbalances in the food system by ensuring autonomy over and ownership of food access, is another aspect of food justice.³²

Typical food access programs such as anti-obesity education, “buy local” campaigns, and government-funded food assistance programs are critical safety nets, but are not enough to ensure food justice. While these programs work to address barriers to accessing healthy food and have successfully reduced food insecurity in the short term, they typically influence health outcomes and reduce disparities only so long as recipients continue to receive benefits.³³ Food insecurity is mediated and exacerbated by the social determinants of health. Therefore, to ensure lasting reductions in health disparities, we must rectify the historical and current practices and policies causing food insecurity through a food justice lens.

Building alternative food systems that empower marginalized communities and implementing strong food justice policies are necessary to ensure that no neighborhood experiences food apartheid. Innovative community-driven approaches have been implemented across America to address food apartheid and redistribute power to remove systems of oppression. Ways in which local communities have aimed to alleviate food apartheid include strengthening regional food systems through urban and small-scale farming and rethinking the grocery store model through co-ops, food trusts, and the Food Sovereignty Movement.

RECOMMENDATIONS

Public health professionals need to use an equity lens when looking at power in the food system. The food system was built through land theft, genocide of Indigenous people, and exploitative labor by people of color. Moving towards the goal of food justice requires us to reverse the harm to and uplift the voices of communities of color to center the movement around their needs. To do so, the public health community must commit to developing a complete understanding of the structural conditions that perpetuate conscious and unconscious bias in personal attitudes and behaviors; facilitating opportunities for community members to express priorities and provide their perspectives on the factors and conditions proliferating the racial hierarchy and hindering progress; ensuring that members of marginalized communities are engaged in policy and program development and implementation; and supporting efforts to decolonize, preserve and sustain Native peoples, cultures and governments. This work also necessitates challenging longstanding perceptions about racial equity—by exploring internal narratives and envisioning a world without racial hierarchy—and acknowledging America’s past and present maltreatment of Native peoples.³⁴



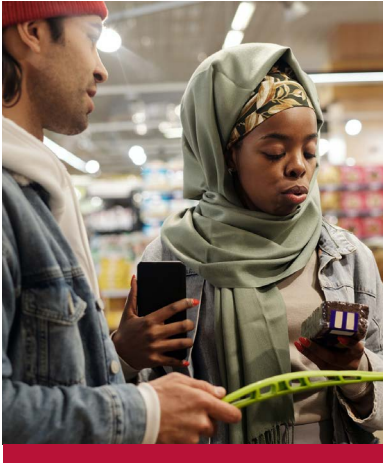
PUBLIC HEALTH PROFESSIONALS SHOULD:

Ensure that efforts to address food insecurity are led by communities of color and implement strategies that primarily center their experiences.

Since 2012, Soul Fire Farm in upstate New York has offered the Black and Latinx Farmers Immersion Program as a means of using food justice to address racism in the criminal justice system.³⁵ In its nine years of implementation, the program has distributed fresh food to approximately 1,400 individuals in marginalized communities, trained 7,500 youth and adults in best practices in farming and food sovereignty, and educated more than 44,000 people through workshops and “Liberation on Land” video lectures.³⁶ The farm has directly funneled \$35,000 into 10 Black and Latinx farming and justice organizations and advised donors to move another \$1.2 million into Black farming organizations in the South.³⁷

Advocate for strengthening regional food systems through urban and small-scale farming.

The Baltimore Sustainability Plan incentivizes participation in community-supported agriculture. The aim is to change zoning and animal husbandry regulations to remove barriers to urban farming. During the COVID-19 pandemic, the plan technologically and financially supported disenfranchised populations in growing their own food. In total, 183 flats of seedlings and several thousand plants were delivered to 13 urban farms and community gardens, seven community programs that redistributed them to Baltimore’s most marginalized residents, and nine additional home gardens.³⁸



Inclusionary zoning policies can promote health and bolster economic opportunity by increasing the availability of affordable housing, creating mixed-income neighborhoods and—as a result—encouraging supermarket retailers to repopulate the area, thereby reducing food insecurity.

LOCAL AND STATE GOVERNMENTS SHOULD:

Invest directly in the regional food culture and economy and fund local farms, food ventures, and small businesses.

State and local governments can pass legislation to directly allocate funding towards community food access initiatives—such as food trusts and healthy retail food ventures—to bolster the economy in low-income communities while increasing healthy food options. One such initiative is the Food Trust in Philadelphia, which works to ensure that all residents have access to affordable, healthy food. Policymakers in the city have combined nutrition education with greater availability of food to form a comprehensive approach to increasing food access rooted in community partnerships.³⁹ At the individual level, the Food Trust offers free two-hour healthy cooking workshops for adults at more than 150 sites in the area. At the community level, the Trust has increased collective capacity and existing resources to support efforts to minimize food insecurity and maximize community health.⁴⁰

Follow and implement inclusionary zoning practices to increase food equity in low-income areas.

Local governance can implement equity-informed zoning policies to build spaces for diverse food retailers and community kitchens to offer healthier options in poorer neighborhoods. Inclusionary zoning policies can promote health and bolster economic opportunity by increasing the availability of affordable housing and creating mixed-income neighborhoods.⁴¹ As a result, inclusionary zoning can diversify neighborhood socioeconomic status, encouraging supermarket retailers to repopulate the area and thereby reducing food insecurity. As part of its 2040 plan, Minneapolis aims to “establish equitable distribution of food sources and food markets” to provide all of the city’s residents with reliable access to healthy, affordable, safe, and culturally appropriate food. Part of this aim includes exploring and implementing regulatory changes that would allow for and promote mobile fresh food markets and pantries as a means of increasing healthy food retail in the city.

Advocate for Native voices in policy issues affecting Native territories, especially with regard to food production, zoning policies, and subsequent health outcomes.

Placement of mines and associated impacts on wildlife, water, and health. In the 1800s, the U.S. Bureau of Land Management and the Department of the Interior leased land to mining companies without tribal approval. On Quapaw land, these companies mined lead and zinc to supply war efforts until the 1970s.⁴² Now abandoned, more than 160,000 mines—built mostly on Native American lands—have polluted local water and land and caused developmental delays in local Indigenous and non-Indigenous children.⁴³ As a direct result of their proximity to the mining activities and industrial waste, Indigenous people living near abandoned uranium mines have an increased likelihood of kidney disease, hypertension, and other chronic diseases. Recognition that these mines have had lasting impacts on both environmental and human health should inform comprehensive policy changes at the local and state level to protect community health in the future and remediate and protect tribal lands.⁴⁴

Self-sufficiency has always been the main priority of the Indigenous food justice movement, along with cultural preservation and job creation. Recently, the Quapaw tribe has been successful at protecting tribal land sovereignty in Oklahoma. The Quapaw people opened the nation's first tribally owned, USDA-approved cattle processing plant in 2017.⁴⁵ The Quapaw tribe also secured a contract with the Environmental Protection Agency more than a decade ago to remediate the land at the Tar Creek Superfund Site and repurpose the land for agriculture. Today, the restored land is used for cattle and bison grazing and cultivation of row crops such as canola, non-GMO corn, soybeans, and wheat, and the tribe has built greenhouses to grow pesticide-free vegetables.⁴⁶



Zoning for food justice. In tribal communities, land use and zoning policies have also made it more difficult to engage in traditional food practices such as cultivation of Indigenous foods, hunting, and fishing. For Indigenous populations, food justice must be facilitated through tribal sovereignty acknowledgments and land return.⁴⁷ Local governance can address this issue by honoring treaty rights and instituting policies that ensure access to and safety of traditional foods. For the city of Albuquerque, New Mexico, legal recognition of tribal governments' sovereignty and self-determination requires the city to establish a government-to-government relationship between Albuquerque and surrounding tribes. The law also mandates regular consultation with tribal governments on city-wide programs or actions that affect federally recognized tribal communities.⁴⁸

CONGRESS SHOULD:

Maintain and strengthen the SNAP program consistent with the need to reduce stigma and ensure dignity.

The Massachusetts State Legislature temporarily expanded SNAP benefits in the state in 2016. The following year, this expansion was linked to reductions in inpatient Medicaid expenditures. After the increase in SNAP benefits, cost growth for inpatient care among Medicaid recipients fell by 73% due to reduced hospital admissions.⁴⁹ This suggests that conventional SNAP benefit levels are too low and that increased benefits could significantly reduce health disparities among low-income and marginalized populations.

Pass agricultural policy that expands access to land and technical resources for Black farmers to correct the historically disparate loan rates between Black and white farmers.

Policymakers have previously introduced legislation that would address longstanding biases against Black farmers and ranchers by requiring reforms within the Department of Agriculture, including enhanced oversight of lending practices.⁵⁰ To prevent future discrimination, legislators can consider establishing land grants for new and existing Black farmers, creating debt relief mechanisms designed to strengthen land retention, and increasing investments in technical and legal assistance programming aimed at improving overall conditions for Black farmers and their families.

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