

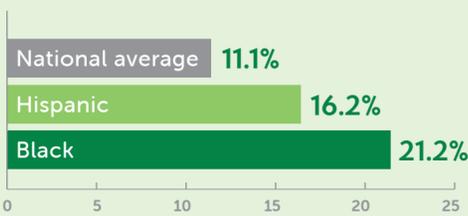
Hunger, Race, and Health Equity

Health equity has received considerable attention recently, especially as we continue to expand our understanding of how social determinants of health (SDOH) and longstanding health inequities can impact entire populations of people.

FOOD INSECURITY

The complex relationship between food insecurity and race/ethnicity is a long-standing issue several hundreds years in the making. While food insecurity rates were steadily improving pre-2020, the effects of the COVID-19 pandemic worsened food accessibility for many, especially communities of color.

PERCENT OF HOUSEHOLDS FACING FOOD INSECURITY¹



Food insecurity rates for Black and Hispanic households are at least twice the level of white households.²

Predominantly Black and Hispanic neighborhoods are LESS LIKELY than predominantly white, non-Hispanic neighborhoods to have

full-service supermarkets³

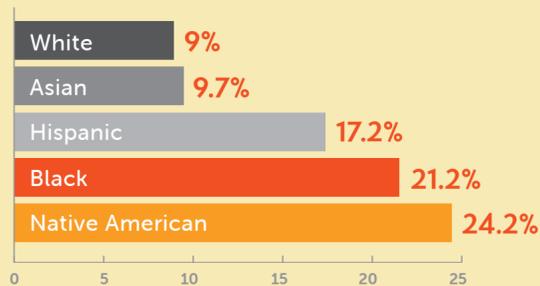


During COVID, Black households were more likely to report that they could not afford to buy more food, Asian and Hispanic households were more likely to be afraid to go out to buy food.

SOCIAL DETERMINANTS OF HEALTH

Social determinants of health (SDOH) are non-medical factors that can influence health outcomes, like socioeconomic status, geographic location, social network, and transportation access. Challenges to any of these can significantly increase a person's risk of encountering food insecurity.

POVERTY RATES BY RACE/ETHNICITY⁴



Disparities in hourly wages mean that people of color bring home less money than their white counterparts.⁴



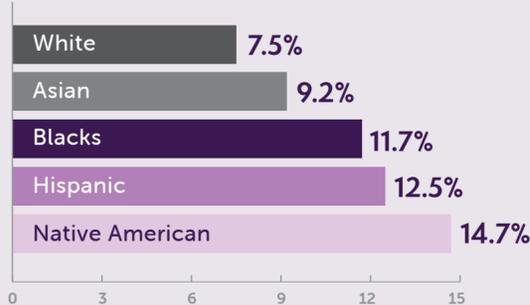
CHRONIC DISEASE

Food insecurity and other SDOH inequities are known as risk factors for many chronic diseases. This may explain why chronic disease rates for communities of color far surpass the national average.

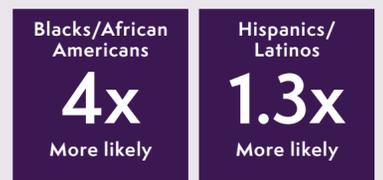


Minorities, including Black, Hispanic, and Native American people, are up to twice as likely to have a major chronic disease compared to white people⁵

DIABETES RATES BY RACE/ETHNICITY⁶



CHRONIC KIDNEY DISEASE RATES BY RACE/ETHNICITY⁷



Cardiovascular disease age-adjusted death rates are 33% higher for Blacks than for the overall population in the U.S.



High blood pressure is more prevalent in certain racial/ethnic minority groups in the U.S.⁸

Mom's Meals is committed to supporting and recognizing those individuals and organizations making a difference in the fight against health inequity. We proudly partner with health plans, community organizations, and other groups to develop innovative food and nutrition solutions that help uplift communities across the U.S. Contact us to learn more.

momsmeals.com | 866.716.3257



Sources:

¹ <https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us/key-statistics-graphics.aspx#householdtype>

² <https://www.feedingamerica.org/hunger-in-america/african-american>

³ <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/food-insecurity#19>

⁴ <https://www.kff.org/other/state-indicator/poverty-rate-by-raceethnicity/?currentTimeframe=0&selectedRows=%7B%22wrapups%22:%7B%22united-states%22:%7B%7D%7D%7D&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>

⁵ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3794652/>

⁶ <https://www.diabetes.org/resources/statistics/statistics-about-diabetes>

⁷ <https://www.kidney.org/atoz/content/minorities-KD>

⁸ https://www.heart.org/idc/groups/heart-public/@wcm/@hcm/@ml/documents/downloadable/ucm_429240.pdf