



Strengthening US Policies and Programs to Promote Equity in Nutrition Security

Overview

Poor dietary intake is a leading contributor to the development of chronic diseases such as diabetes, cardiovascular disease, and cancer.^{1,2} Food insecurity, a household-level social or economic condition of limited access to sufficient food,³ is a common cause of poor dietary intake and has contributed to disparities in chronic disease outcomes, especially cardiovascular diseases.^{4,5} While many US food policies and programs are designed to address food insecurity, there is growing consensus that the focus should be broadened to include nutrition security. Nutrition security is defined as having equitable and stable availability, access, affordability, and utilization of foods and beverages that promote well-being and prevent and treat disease. Shifting focus to nutrition security is critical for addressing socioeconomic and racial/ethnic disparities in nutrition and chronic diseases.

Components of Nutrition Security

Availability, Accessibility, and Affordability

Availability, accessibility, and affordability of nutritious foods are the foundation of nutrition security.^{6,7} Availability means that every community have sufficient quantity (calories) and appropriate quality (nutrients) of food. Accessibility means that nutritious foods are obtainable by individuals of all physical and mental conditions and in all geographic locations and are acceptable and align with individuals' cultural, social, or other dietary preferences.^{6,8} Affordability means that individuals have sufficient resources to acquire nutritious foods and that these foods are available at a cost that can be purchased by all individuals. Availability, accessibility, and affordability of nutritious foods are inequitable in the US. Individuals with lower incomes tend to have lower diet quality and consume fewer vegetables, fruits, and whole grains and more refined grains, saturated fats, and added sugars.^{4,9} These differences are related to several factors including personal knowledge, preferences, and skills, the higher cost of eating a nutritious diet,¹⁰ and variation in the built environment between communities.^{9,11}

Utilization

Another important component of nutrition security is utilization which refers to the steps that occur between the time of access to food, to the time when the nutrients from food are made available to be used by the body. Maximizing physiological utilization of nutrients requires adequate health to chew, digest, absorb, and distribute nutrients. There are also steps prior to consumption that impact utilization including food storage, preparation, and distribution within the household. Many perishable foods require refrigeration while others require dry spaces and containers for preventing exposure to moisture, contaminants, or pests. Individuals who do not have access to proper food preparation tools and kitchen equipment, who have low nutrition knowledge or culinary literacy and skills, or who have limited time due to work or other responsibilities, are more likely to have compromised utilization and lower nutrition security.¹²⁻¹⁵ There are other factors that also impact utilization. Among older adults, social isolation, lack of social support, and decreased mobility can have an adverse impact on utilization and intake of healthy food.^{16,17} Social stigma related to poverty and race/ethnicity also impact utilization of food assistance programs and consumption of a nutritious diet by influencing individual and structural factors, such as program participation, discrimination, and targeted marketing practices.¹⁸

Stability

Nutrition security requires stability of a nutritious diet across the lifespan, ensuring that all people have availability, accessibility, affordability, and utilization of nutritious food at all ages. US food policies and

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programs help to ensure stable access to nutritious food for several populations; however, there are numerous gaps within and between these programs that create barriers to nutrition stability. For example, in the Supplemental Nutrition Assistance Program (SNAP), states are required to issue benefits to eligible households once a month. The evidence suggests that many families spend most of their benefits within the first week of receipt, running out of benefits at the end of the month.¹⁹ Similar gaps also exist within food assistance programs aimed at children. In the summer, children are at a higher risk for food insecurity because they do not have access to the National School Lunch Program and the School Breakfast Program. Nutrition is important at every stage of life; however, early childhood is especially important because it provides an opportunity for developing long-term healthy eating habits that track into adulthood.²⁰

Recommendations for Improving Nutrition Security

More effort is needed to improve the reach and sustainability of federal, state, and community policies and programs, while maintaining equity and dignity of participants. The American Heart Association has examined some of the policies and programs with the largest reach and provided recommendations, based on existing evidence and expert consensus, for strategies that could increase their impact on nutrition security. Recommendations include:

- Extending WIC eligibility for children from ages 5 to age 6 to address the gap in nutrition assistance prior to entering kindergarten.²¹
- Expand access of school meals, including breakfast, lunch and summer meal programs to all children through universal free meals.²²
- Increasing federal funding to expand access to all eligible older adults by reducing lengthy waitlists and eliminating meal costs. Expand options to include more culturally appropriate food.
- Providing CMS funding to improve nutrition through specific interventions (e.g., medically tailored meals or groceries, produce prescriptions) to prevent and treat chronic disease.^{23, 24}
- Making permanent the recent expansion of online SNAP purchasing during the COVID-19 pandemic.

The Association's recommendations for improving nutrition security in the US are guided by several overarching principles for food assistance programs and policies:

- Emphasizing nutritional quality
- Improving reach
- Ensuring optimal utilization
- Improving coordination across programs
- Ensuring stability of access to programs across the life course
- Ensuring equity and dignity for access and utilization.

The Association Advocates

The American Heart Association advocates for:

- Equitable and stable availability, access, affordability, and utilization of nutritious food for Americans who are at risk for or who are experiencing food insecurity.
- New or expanded policies and programs that will not only improve food security but will increase equity in nutrition security in the US.
- Expanding the USDA measure of food security to include metrics of nutrition security: availability, access, affordability, utilization, and stability of nutritious food.

Conclusion

The Association has identified opportunities in existing and future US food policies and programs to improve equity in nutrition security in the US. This work will require coordinated and sustained efforts across all levels of government – federal, state, and local – and future advocacy, innovation, and research to expand and strengthen existing policies and programs and to develop and implement new policies and programs that improve nutrition and health and reduce socioeconomic and racial/ethnic disparities in chronic diseases.

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