

Healthy food availability could depend on where you live -- so does the quality of your diet

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The availability of healthy food choices and your quality of diet is associated with where you live, according to two studies conducted by researchers at the Johns Hopkins Bloomberg School of Public Health. Researchers examined healthy food availability and diet quality among Baltimore City and Baltimore County, Md., residents and found that availability of healthy foods was associated with quality of diet and 46 percent of lower-income neighborhoods had a low availability of healthy foods. The results are published in the March 2009 issue of the *American Journal of Clinical Nutrition* and the December 2008 issue of the *American Journal of Preventive Medicine*.

"Place of residence plays a larger role in dietary health than previously estimated," said Manuel Franco, MD, PhD, lead author of the studies and an associate with the Bloomberg School's Department of Epidemiology. "Our findings show that participants who live in neighborhoods with low healthy food availability are at an increased risk of consuming a lower quality diet. We also found that 24 percent of the black participants lived in neighborhoods with a low availability of healthy food compared with 5 percent of white participants."

Researchers conducted a cross-sectional study to examine the association between the availability of healthy foods and diet quality among 759 participants of a population-based cardiovascular cohort study, the Multi-Ethnic Study of Atherosclerosis (MESA). Using a food frequency

questionnaire, Franco, along with colleagues from the Johns Hopkins School of Medicine, the University of Michigan and the University of Texas, summarized diet into two dietary patterns reflecting low and high quality diet. The availability of healthy foods was assessed by examining food stores within MESA participants' neighborhood or census tract, their closest food store and all food stores within one mile of the participants' residence. Availability of healthy foods in each food store was assessed by measuring the availability of items like fresh fruits and vegetables, skim milk and whole wheat bread as recommended by the U.S. Department of Agriculture. Their findings were reported in the *American Journal of Clinical Nutrition*.

In the *American Journal of Preventive Medicine*, Franco, along with colleagues from the Johns Hopkins School of Medicine and the University of Michigan, examined the differences in the availability of healthy foods across 159 neighborhoods and 226 neighborhood stores in Baltimore City and Baltimore County. Researchers found that 43 percent of predominantly black neighborhoods and 46 percent of lower-income neighborhoods fell under the category of low availability of healthy foods versus 4 percent and 13 percent, respectively, in predominantly white and higher-income neighborhoods. In addition, supermarkets in predominantly white and higher-income neighborhoods had higher levels of healthy food availability compared to supermarkets located in lower-income neighborhoods and predominantly black neighborhoods.

"Previous studies have suggested that race and income are related to healthy food intake and our choice of foods play a major role in our health and diet," said Benjamin Caballero, MD, PhD, professor at the Bloomberg School's Department of International Health. Our studies show that where you live is a major determinant of your health. The joint efforts of public health researchers in collaboration with community groups and policymakers will be required to effectively change the current picture of the less-than-optimal availability of

recommended healthy foods."

"Availability of Health Foods and Dietary Patterns: The Multi-Ethnic Study of Atherosclerosis" was written by Manuel Franco, Ana V. Diez-Roux, Jennifer A. Nettleton, Mariana Lazo, Frederick L. Brancati, Benjamin Caballero, Thomas A. Glass and Latetia V Moore.

"Neighborhood Characteristics and Availability of Healthy Foods in Baltimore" was written by Manuel Franco, Ana V. Diez Roux, Thomas A. Glass, Benjamin Caballero and Frederick L. Brancati.

Source: Johns Hopkins University Bloomberg School of Public Health

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