

'Food desert' gets a name change in response to Baltimore community feedback

18 January 2018

In a new report, researchers at the Johns Hopkins Bloomberg School of Public Health's Center for a Livable Future (CLF) detail the rationale behind replacing the term "food desert" with "Healthy Food Priority Areas." The report, which was written in collaboration with the Baltimore Food Policy Initiative, also measures the state of healthy food availability in stores across Baltimore City, using a Healthy Food Availability Index (HFAI) tool that can serve as a valuable model for assessing community food environments across the U.S.

For some, the term "[food](#) desert" stirs up negative connotations and it implies that low healthy food access is a naturally occurring phenomenon, rather than the result of underlying structural inequities. For others, the term connotes a pejorative status when some of these [areas](#) are home to vibrant communities with passionate and resilient residents and programs on the ground. Living in a "Healthy Food Priority Area" does not necessarily mean that people cannot access healthy food at all, as many people travel to shop for food, but it does indicate that they may face more barriers; they may travel further to reach healthy food outlets or may not have the economic means to afford healthy food options.

The terminology was changed within the [Baltimore City's Food Environment: 2018 Report](#) to better characterize what is being measured, and recognizing that there is a suite of structural elements shaping Baltimore's food system. For the [report](#), the Baltimore Food Policy Initiative gathered feedback from the city's resident food equity advisors as well as community-based organizations working on food access issues across the city.

A Healthy Food Priority Area is defined by the same criteria used to define a "food desert" in a 2015 CLF-Baltimore Food Policy Initiative report: an area where the average Healthy Food Availability Index (HFAI) score for all food stores is

low (0-9.5), the median household income is at or below 185 percent of the Federal Poverty Level, over 30 percent of households have no vehicle available, and the distance to a supermarket is more than 1/4 mile. Researchers at the CLF—an academic center based within the Bloomberg School's Department of Environmental Health and Engineering—created the HFAI tool to measure and assess healthy foods in stores. The HFAI tool awards points to stores based on the presence of a market basket of staple food items, as well as the availability of healthy options, including lean protein, whole wheat grains, low-fat dairy, and produce. A food store with a low score will not carry many of the food items assessed.

Researchers found that in Baltimore, about 23.5 percent of residents live in Healthy Food Priority Areas, children are the most likely of any age group to live in a Priority Area (28 percent), and black residents are the most likely of any racial or ethnic group to live in a Priority Area (31.5 percent). Since 2015, about 5,000 fewer residents live in Healthy Food Priority Areas, as a result of a new supermarket opening. The report also offers an updated and more comprehensive description of other elements of the food environment, including nutrition assistance programs and urban agriculture, to highlight additional points of access to healthy food.

According to the report, Baltimore City fares worse than Maryland's average in overall health status and diet-related health outcomes that include diabetes, obesity, and high blood pressure. These outcomes also vary significantly by neighborhood, highlighting disparities across the City. Areas identified as Healthy Food Priority Areas also tend to be burdened by other inequities including poor health outcomes. Increasing access to healthy food is one way to ease the burden on families and might contribute to forging a healthier and more equitable food environment, the report concludes.

"Developing this Food Environment Report is an important step toward understanding Baltimore City's healthy food access challenges," says report co-author, Caitlin Misiaszek, MPH, a program officer within the CLF's Food Communities & Public Health Program and leader of mapping efforts. "But to address challenges and influence the [food environment](#) across any city, it's critical to recognize the impact of systemic issues. Long-term solutions must be integrated across systems and sectors with a broad base of policies and programmatic activities to create lasting change and promote health and equity for all residents."

Misiaszek and colleagues see the report's collection of maps as an important tool to support policy change in Baltimore, and one that other cities can also develop to analyze food access. They can be created as baseline measures and updated to reflect progress in achieving more equitable access to [healthy food](#).

Provided by Johns Hopkins University Bloomberg School of Public Health

APA citation: 'Food desert' gets a name change in response to Baltimore community feedback (2018, January 18) retrieved 17 September 2019 from <https://medicalxpress.com/news/2018-01-food-response-baltimore-feedback.html>

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