Over 25,000 Minnesotans experience food insecurity. Many of these individuals change what or how often they eat because they worry they will not otherwise have enough. Individuals who experience extreme food insecurity have lost weight or experienced other poor health outcomes because they were unable to access enough affordable, healthy food. Food insecurity tends to be more common among lower-income residents and residents of color. Households with children, particularly single parent households, are also more likely to experience food insecurity. Improving access to healthy, affordable food is one way to help ensure residents avoid the negative health outcomes associated with poor nutrition, including obesity, diabetes, and heart disease.

Why is food access a health equity issue?

Health inequities are differences in health that are caused by unjust and avoidable differences in social conditions and decisions that advantage some groups while disadvantaging others. Access to grocery stores, reliable transportation options, and employment opportunities can vary by neighborhood and impact access to healthy foods. Structural biases, including historical racism, can shape long-standing systems, policies, and practices, such as community zoning decisions or benefit program eligibility requirements, and routinely disadvantage populations.

Health equity is achieved when all people can attain their highest level of health and when differences in health outcomes between groups of people are eliminated. Therefore, organizations that develop programs and initiatives to improve access to healthy foods must carefully consider who benefits and whether there are any potential negative outcomes that disproportionately impact some groups.

What resources are available to learn more about health equity and improving access to healthy food?

The following resources may be helpful to individuals and organizations interested in doing mindful work to improve access to healthy food in ways that also reduce inequities:

- **Health Equity Assessments: A brief review.** Wilder Research, June 2015. 7 pp. This summary reviews tools that can be used to assess an organization’s capacity to advance health equity in their work. Available online: http://www.wilder.org/Wilder-Research/Publications/Studies/HealthEquityinPrevention/HealthEquityAssessments-ABriefReview.pdf


- **Advancing Health Equity in Minnesota: Report to the Legislature.** Minnesota Department of Health, February 2014, 130 pp. This report provides clear definitions of health inequities and describes how structural racism contributes to these differences in health. The report includes an overview of health inequities impacting Minnesota residents and offers recommendations to advance health equity in Minnesota that were informed through a statewide series of community dialogues. Available online: http://www.health.state.mn.us/divs/che/

- **Healthy Food, Healthy Communities: Promising strategies to improve access to fresh, healthy food and transform communities (expanded version).** PolicyLink, July 2011, 84 pp. This resource describes the impact of poor food access on health. It presents a number of promising programs and policies to increase access to healthy foods. Case studies of some highlighted initiatives are included. Available online: https://www.policylink.org/sites/default/files/HFHC_FULL_FINAL_20120110.PDF