

Holes in the Mitten

Health Equity In Michigan: A Toolkit for Action Fact Sheet: Food Access

WHAT WE EAT IS IMPORTANT TO OUR HEALTH

Food provides nutrition and energy, and can affect your risk for chronic diseases, such as, diabetes, cancer, and heart disease. In recent years, many communities have seen a rise in overweight/obesity among adults and children. This rise is caused by many factors. Obesity/overweight has been strongly linked to the types of foods available in a community. Many low income and racially segregated communities have limited access to healthy foods. At the same time, they often have lots of fast food restaurants and stores that offer mostly high fat high sodium and high sugar foods. Why so much “junk food”? Calorie for calorie, “junk food” costs less than fruits and vegetables.¹



OBESITY/OVERWEIGHT:

A range of weight that is greater than what is considered healthy for a given height.

Obesity has been shown to increase the likelihood of certain diseases and other health problems.

FOOD DESERTS

The rise in obesity has also been linked to food deserts. A food desert is defined as an area more than a mile from a supermarket and where most households in that area have no access to a vehicle.² With no supermarket nearby it may be very difficult to find fresh fruits and vegetables on a regular basis. In 2006, 2.4 million homes in America were in food deserts. Food deserts can occur in both urban and rural areas.

<http://well.blogs.nytimes.com/2007/12/05/a-high-price-for-healthy-food/1>
http://www.michiganfood.org/assets/goodfood/docs_Good_Food_Access_Report.pdf2

Holes in the Mitten: Addressing Michigan's Gaps in Health Equity

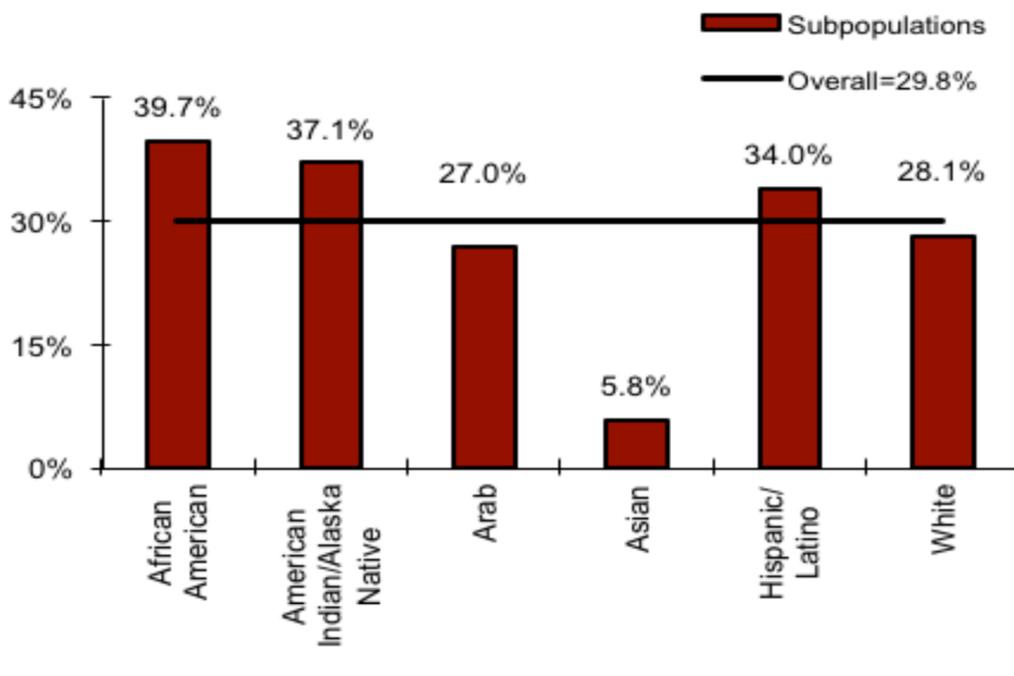
Holes in the Mitten is part of *Health Equity In Michigan: A Toolkit for Action* and aims to improve health equity in Michigan communities. The toolkit includes a video series, discussion guide, fact sheets, and other resources. The toolkit can be obtained through the Michigan Department of Community Health.

Michigan Department of Community Health, Health Disparities Reduction and Minority Health Section

Online at www.michigan.gov/minorityhealth

Email: colormehealthy@michigan.gov or Call: 1-313-456-4355

Percent Obese in Michigan by Race/Ethnicity¹



HOW IS FOOD ACCESS IMPROVING IN MICHIGAN?

In Michigan, many neighborhoods are starting community gardens.

This can provide fresh fruits and vegetables for a good portion of the year. Innovative ideas, such as “hoop houses,” allow for a longer growing season.

Michigan facts by race and ethnicity

Indicator	African American	American Indian/Alaska Native	Arab	Asian	Hispanic/Latino	White	Total Michigan Population
Diabetes (Adults) ¹	14.3%	14.9%	6.3%	11.5%	13.1%	7.4%	8.6%
Obesity (High School Students) ²	18.2%	NA	NA	NA	10.9%	10.3%	11.9%
Inadequate Physical Activity ¹	56.8%	48.3%	47.9%	62.0%	49.6%	47.8%	49.0%
Inadequate Fruits and Vegetables ¹	78.4%	72.4%	71.8%	71.2%	79.3%	78.9%	78.4%

Sources 1) Michigan BRFSS, 2007-09 2) Michigan YRBS, 2009

Michigan Department of Community Health (MDCH)

The Health Disparities Reduction and Minority Health Section (HDRMHS) provides a persistent and continuing focus on eliminating health disparities in Michigan’s populations of color. The five populations served by HDRMHS include African Americans, American Indians/Alaska Natives, Arab and Chaldean Americans, Asian Americans and Pacific Islanders, and Hispanics/Latinos.

The major functions of HDRMHS are: 1) To support and initiate programs, strategies, and health policies that address disease prevention, health service delivery, and applied research for populations of color; 2) To collaborate in the development of all MDCH programs and strategies that address prevention, health service delivery, and applied research for populations of color and 3) To facilitate an ongoing integration of culturally appropriate and linguistically appropriate health services into the public health system.

Michigan Department
of Community Health



Rick Snyder, Governor
Olga Dazzo, Director