The Food Gap: Healthy Lifestyles Come at a Price

The United States prides itself as a nation of wealth and prosperity. As evidence of our superiority, many Americans point to the amount of people that immigrate to the United States, the impact our media has on the world, and our overall economic might. This sense of superiority justifies, for some, our inordinate spending habits. Many Americans continually parade their wealth for the world to see. Taken at face value, America seems like a country of overwhelming wealth. However, many people tend to forget that 42.9 million people still live in poverty in the United States (U.S. Census Bureau). And the gap between the rich and the poor is gaping. In 2007, “the top 1% of households (the upper class) owned 34.6% of all privately held wealth, and the next 19% (managerial, professional, and small business stratum had 50.5%, which means that just 20% of the people owned a remarkable 85%, leaving only 15% of the wealth for the bottom 80% (wage and salary workers)” (Domhoff). This statistic alone should raise some red flags in our minds. If the top 20% of people is in control of 85% of the wealth, how is the bottom 80% of people living on only 15% of the wealth? The numbers simply do not add up. The United States, the supposed “richest” nation in the world, still has a massive amount of people living in poverty.

The gap between the rich and the poor exists not only in terms of wealth, but also in terms of access to healthy food. As Mark Winne, Executive Director of the Hartford Food System, said, “the food gap can be understood as a failure of our market economy to serve the basic human needs of those who are impoverished” (xvi). Generally, businesses do not think
about the welfare of those living in poverty; they are too concerned with their own profit margins to worry about the poor. Businesses make decisions based on economics, not based on the general welfare of the people. Ethically, the food gap is a major problem. While living in the same society, under the same constitution, some people have the money to maintain healthy diets, while others starve or overindulge to the point of obesity. Traditionally, most people have focused on the food gap between developed nations and developing nations. The divide between these two groups is obvious. I want to look at the accessibility of food in America, and the “food gap” it has created between the rich and the poor. Access to grocery stores, the amount of healthy food available in grocery stores, and the cost associated with healthy food, have all contributed to the growth of this “food gap.” In the end private initiative, and effective government programs are the only way our nation is going to be able to overcome this issue.

Access to grocery stores is one of the major causes of the growing food gap. People living in both rural and urban poverty have a particularly difficult time getting to supermarkets where they would be able to find healthy, affordable food. Low-income areas tend to have a significantly lower amount of grocery stores available. For economic reasons, grocery stores flock to high-income areas, rather than low-income areas. In the last couple of decades the concentration of wealth has shifted. While this wealth was once concentrated in the cities, now the suburban community is the ideal for the wealthy. As the wealthy moved out of the cities, major retailers, including supermarkets, followed. The minority populations, living in low-income, urban areas, now have little choice in where they shop for food. In 1995, researchers at the University of Connecticut conducted a study of 21 major metropolitan areas nationwide. They found that there were “a third as many supermarkets in low-income areas compared with high-income areas.” Grocery stores defend this practice by citing “higher security costs, greater
employee turnover and a bigger ‘shrink factor’ (theft) in high-poverty neighborhoods” (Cassady). For the poor, this makes finding food, especially healthy food, very difficult. Their choices are reduced to either paying higher prices for unhealthy food at convenience stores, or traveling a significant distance to the cheaper supermarkets, where many times healthy food is still out of their price range. In many cases travel is difficult, especially if the person does not have access to a car, or public transportation is not readily available. The likelihood of their food getting spoiled in transit rises significantly with the distance they must travel from the store to their home. Also, their ability to pay the higher prices is severely hindered by their economic standing. Many simply don’t have enough money to pay for the food available to them. A study conducted by Phil R. Kaufman, an agricultural economist, found that the low-income households in rural areas rely more on small grocery stores, and therefore face higher average food prices and reduced access to food (1). Not only are there fewer grocery stores in low-income areas, but also the average food prices are higher as result.

Food is more expensive in low-income areas than it is in high-income areas. Now I want to look at the cost of healthy food compared to unhealthy food. This furthers the “food gap” even more. Adam Drewnowski, a University of Washington professor who studies obesity and social class, found in a study “that a calorie-dense diet cost $3.52 a day compared with $36.32 a day for a low-calorie diet” (Aleccia). This cost discrepancy showcases the “food gap” between the rich and the poor. The cost of more health conscious supermarkets is also noteworthy. Whole foods and other high-end stores are significantly more expensive than bargain stores. In a small independent study of grocery stores around the Seattle region, at higher priced stores, including Whole Foods, the average cart of food cost between $370 and $420, while at lower-priced stores, a comparable basket of food cost between $225 and $280 (Aleccia). People living in poverty are
not able to eat healthy food because it is too expensive, so many resort to foods that are extremely unhealthy. Soda, chips, hot dogs, and many other processed foods are readily available for a comparatively low price. A healthy lifestyle takes a certain amount of awareness and investment, both of which those living in poverty have little access to. The rich are able to pay the Whole Foods grocery bill, the higher education tuition, and the nutritionist. They are able to workout with trainers, and try out the latest yoga fads. Overall, they are able to buy a healthier lifestyle, and are healthier because of it. The poor on the other hand, are stuck working long hours, at low wages, with very little extra time to devote to maintaining a healthy lifestyle. They don’t have the time or the money to spend on maintaining a healthy lifestyle. So, even if the poor have access to food, their ability to pay for the healthy food furthers the gap between the poor and the rich. Healthy food has a greater monetary cost associated with it.

Taken at face value, these arguments may not have very much merit. It seems pretty obvious that the poor are going to have a harder time accessing healthy food because healthy food is more expensive. Many would argue that this is a problem of the poor[,] and the government is not responsible for making healthy food available to all; that the responsibility rests on the consumer’s shoulders, not the policy maker’s shoulders. This argument may seem fair but[,] to fully assess it, one must also look at how the “food gap” affects public health. Because access to healthy food directly correlates to many diet-related diseases, the “food gap” becomes a public health issue. As pointed out in the Rudd Report, a report on access to healthy foods in low-income neighborhoods conducted by Yale University’s Rudd Center, “prevention of obesity and related chronic diseases such as diabetes and heart disease can significantly decrease health-related costs that burden both government and the individual” (“Access to Healthy Foods” 3) The most pressing diet-related disease is obesity. If you compare poverty
rates with obesity rates nationwide, the picture is pretty self-evident. The government should be concerned with this issue, because of the connection between poverty and obesity. Those that are on welfare and obese, must drain a significant amount of funds from the Medicaid program. If we were able to prevent obesity in the first place, costs would go down significantly. Below are a graph of the percentage of people in poverty by state and a graph of the percentage of obese adult population:

(Bishaw 2)  (“Mississippi”)  

These show the connection between obesity and poverty. The higher the percentage of people in poverty, the more likely there is a high percentage of obese adults. Of course poverty isn’t the only factor contributing to obesity—cultural pressures and other factors have weight—but the parallel between the two is an interesting one.

The “food gap” is clearly a major issue in the United States. There is a significant discrepancy between the rich and the poor when it comes to finding, purchasing, and finally consuming healthy food. The natural question that arises from all of this research is the following: What steps should the government and private nonprofit groups take to try and correct this problem? There are many possible solutions. The government could provide tax incentives
to attract supermarkets to low-income neighborhoods. Policy makers could work with city and urban planners to develop public transit systems that would be affordable and accessible to low-income citizens. The government could create incentive programs to refurbish existing grocery stores and allow them to sell healthy, fresh produce, and whole grains ("Access to Healthy Foods" 4). The problem with all of these programs is that they cost money, and this means increases in taxes, and an increase in the burden to the government. I think we should first focus on what private enterprise can do with a little bit of education on the topic. According to a report by researchers at the UC Davis Center for Advanced Studies in Nutrition and Social Marketing, "inner-city supermarkets can improve their profit margins and the health of the communities they serve by offering shoppers free transportation" (Cassady). These shuttle services have been found to increase the profit margins by increasing the amount of people coming to the supermarket, and also by decreasing the "shrink factor" in these neighborhoods. Without the shuttle system, many shoppers resort to stealing shopping carts as a means of getting their food home. This can cost up to $300,000 a year, which significantly cuts into the profit margins of a small store (Cassady). This should be enough incentive for these inner city supermarkets to provide shuttle services.

We would need to take a different approach to correct the food gap between the rich and the rural poor. There is not the same private initiative to bring quality supermarkets within reach of these consumers. This is where the government must intervene. The same policies listed above could help tremendously with lessening this gap. Education could also help in this case, because the consumers are living in rural areas. If the rural poor were taught to produce some food for themselves, instead of relying on the supermarkets that are difficult to access, they might have a better chance at a healthy diet. Finding and purchasing food from the local area could help lower
the cost associated with a healthy diet, and help the local economy as well. These types of education initiatives would complement the government’s policies.

Education about what a healthy diet consists of and how to choose healthy food when shopping would help the problems of obesity and diabetes that are associated with the “food gap” between the rich and the poor. There are already specific requirements in place for physical education in public schools across America. In New York State, physical education is required from Kindergarten to 12th grade. The goal of physical education is, in part, to ensure that students will be able to “understand how to evaluate and access resources in their community to pursue a healthy and active life” (“Physical Education”). Many schools are starting to introduce healthier options in their cafeterias as well. At Fayetteville-Manlius High School, a public high school in Central New York, a carrot machine was put in the cafeteria this fall. FM makes it a point to have healthy options available at breakfast and lunch and they have introduced whole grains and lower fat dairy products as a part of this goal (“Baby carrot”). However, more can be done.

National ad campaigns, interactive websites, and signs within grocery stores, would all help educate a relatively unresponsive public. Even though all three of these tactics are already being utilized, we can still try to get the word out even further. In 2003, “one out of every eight deaths in America is caused by an illness directly related to overweight and obesity” (Carmona). And there is little sign of this reversing any time soon. Any tactics that aim to decrease the obesity rate, and increase the number of people leading healthy lives in America should be taken. Health should not be a commodity available only at a premium price. Healthy food should be accessible to all; whether an individual chooses to consume in a healthy way should not be influenced by his or her ability to pay.
Not everyone believes that the food gap actually exists. Many people point to the ideals of perfect competition, and market philosophy to try to justify why the supermarkets are moving out of low-income areas. However, as an educated society, I think it is our responsibility to counter these forces when they are clearly harming a specific group of people. This brings us back to the wider issue of poverty. It is our responsibility to help the impoverished, and this starts with providing them access to healthy, affordable food.

Sarah,
You have written a wonderful, adroit, heartfelt essay. It almost sounds to me as if—in food equity—you have found a cause to support. A trip to Wal-Mart shows that obesity abounds in WTVL.

The essay proceeds confidently; it covers many issues; it provides both analysis and suggestions for remedies. You make helpful use of statistics, graceful use of sources, and resourceful use of persuasive rhetoric.

I would, however, mention unemployment as an underlying problem.

Aside from a few too many “is” verbs, this essay could serve as a model. I may well use it as such next year.

A

I hope to see you again in an English class. In fact, I hope you major in English.

Peter
Works Cited


