

Why Food Justice Matters When It Comes to Toxicity?  
Response Paper 2

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Food justice and toxicity should not have borders, yet it appears that their relationship stems from disparities in access to healthy food, most often in low-income, marginalized minority urban communities. Fair treatment signifies that “no population, due to policy or disempowerment, is forced to bear a disproportionate exposure to and burden of harmful environmental conditions” (Hilmers 2012). There is a direct correlation between environmental exposure, nutrition, and toxicity levels due to unhealthy eating, which manifests in minority neighborhoods, representing food injustice and civil rights violations. “Access to healthy, nutritious food should not be dependent on geography”, Congressman Donald McEachin representing Virginia’s 4th District stated at a roundtable discussion last spring (Lum 2019). The United States Department of Agriculture (USDA) defines food deserts as areas that have a lack of access to healthy food, mostly discovered in impoverished “low-access communities,” that rely on convenience stores profiting from processed products (Nutrition Digest 2011). These food deserts lack scarcity and low accessibility to supermarkets with healthy choices. “Evolving studies ... suggest that diet or nutrition, as well as lifestyle changes, can modify pathologies of chronic diseases, as well as diseases associated with environmental toxic insults” (Hennig et. al. 2007). In connecting food deserts to class discussions, society cannot change the poisoning of lead, but limit exposure to it and lessen its impact through intake of a nutritious diet, “making it more difficult for lead to be absorbed” (Thayer 2019). This can only be accomplished by investing in programs in minority communities to have physical access to supermarkets, providing healthy choices.

Policies and programs that encourage supermarket development address the root causes of the existence of food deserts, the failure of lenders and retailers to invest in operations in low-income, minority communities. To advocate for legislation, First Lady Michelle Obama’s “Let’s

Move!” campaign was one initiative of economic growth that assisted the health of children’s lives and included the Healthy Food Financing Initiative which endeavored to end the food desert crisis (Let’s Move 2010). Unfortunately, this Obama-era regulations designed to improve access to healthy food for low-income families are stalled. In Richmond’s East End, the effort to attract grocery stores was lackluster, leading to the introduction and passage of S.B. 999 legislation to address food justice. In April 2019, Senator Mark Warner and Representative Donald McEachin held a Food Security in Richmond town hall, bringing together local officials and activists. At this event, food justice issues in Central Virginia were discussed, where 2015 estimates from the USDA show over 60,000 Great Richmond area citizens live in a food desert (Lum 2019). While on a tour of the G.H. Reid school district, I noticed the area had an overwhelming amount of gas stations, Dollar Generals, and fast food establishments, but no grocery store was in earshot. This particular area also tends to have lower life expectancy rates and various types of housing developments that point to gentrification. S.B. 999 is a Virginia state senate bill to create the Grocery Investment Program and Fund. This bill will “provide funding for the construction, rehabilitation, equipment upgrades, or expansion of grocery stores, small food retailers, and innovative food retail projects, defined for underserved communities” utilizing community development financial institutions (Virginia Grocery Investment Program and Fund). The investment fund will monitor the program for accountability, demographic and geographic costs, and outcome variables to sustain and maintain new supermarkets. This bill has been approved in the Senate and the House subcommittee recommends passing it indefinitely with a vote of five to three. If the bill moves forward, this will allot \$5 million for grocery store expansion in Richmond food desert communities, providing the much-needed relief for food justice.

Health disparities throughout Richmond, where food deserts are present are linked to an unhealthy diet, which bred diseases relating to obesity and infant mortality. Families need to have places to go to buy healthy foods, critical to ending the epidemic of child obesity. As part of the Richmond Mayor's Healthy Richmond Campaign, a Food Policy Task Force was created and enlists six focus groups on food security, health and nutrition, school and community gardens, the quality of school food, and community assessment. Specifically, the community needs assessment is based on quantifying the number of city residents with "food insecurity, and examine health disparities that are partially linked to poor diet" as well as "visualize the areas of Richmond where the population lacks adequate access to healthy foods" (Mayor's Healthy Richmond Campaign 2013, 13). Food insecurity and the hunger problem in Richmond is worse than the state or national average. Evidence from 2010 studies of the city shows that poverty is at 25% and 60% of residents had incomes 80% below the median (15). Furthermore, Richmond, Henrico, and Chesterfield county rates of obesity, low birth weight, infant mortality, and other health factors are increasingly above normal levels. Due to a lack of a supermarket presence, food deserts in Richmond contribute to the complex area of poisoning the human body everyday, when convenience stores proliferate selling inexpensive, high-fat, low-protein options that exceed the normal calorie consumption levels.

It is important to note that food deserts and adequate access to supermarkets, providing healthy choices is also a national issue. The New York Law Schools's *Unshared Bounty* report stated in 2012, that "23.5 million Americans live in low-income areas that lack stores likely to sell affordable, nutritious foods" (New York Law School Racial Justice Project 2012). That number has risen to 37 million in 2019, representing 11% of the country's population (Lum 2019). Furthermore, the USDA's Food Access Research Atlas used the premise that a food

desert exists if at least 500 people or 33% of the community is not within one mile of healthy food in an urban area and within ten miles in a rural one (Ploeg 2019). This Atlas, otherwise known as the food desert tracker, uses primarily income and grocery store locations to determine food access comparing 2010-2015 census tracts (Mayor's Healthy Richmond Campaign 2013, 22). Senator Warner and Representative McEachin are sponsors of the Health Food Access for All Americans Act. This act seeks to offer incentives to retail supermarkets to expand access to healthy foods in underserved populations to provide nutritious choices to eliminate food deserts, although it has yet to be approved by Congress. It hopes to create positive financial growth in areas which have "a poverty rate of 20 percent or higher or a median family income of less than 80 percent of the regional or statewide median" (Lum 2019). Direct investment by retailers can help undo the decades of accumulated disinvestment of food chains from low-income neighborhoods, leading to an expansion of convenience stores.

Interestingly, based on the USDA's Food Access Research Atlas, there is a correlation between not only low-income and low-access communities to healthy food, but different school districts, whether locally or nationally. This is evident based on our findings in the G.H. Reid school district. Food deserts go beyond just one city or state, as *What the Eyes Don't See* touches on the issue of Flint's food security, but further links food justice to other toxic political agendas, such as lead poisoning and obesity. When CVS has conquered a larger share of the grocery market industry than Whole Foods and Trader Joe's, America should "call to action" and society should be afraid. It is ironic that a pharmacy, which is typically visited to provide remedies to stay healthy, carries processed foods that contribute to diabetes and other chronic issues (Canon 2019). Will food deserts continue to prevail or will inroads be made through Congressional legislature to attempt to abate their alarming growth, throughout America? If done right,

strategies must be implemented to end the increase in childhood obesity in families in low-income neighborhoods, who lack access to supermarkets that provide a broad range of healthy foods. Access to food for all is a human right and a gross violation of food injustice.

Marginalized communities consume processed foods high in caloric content and to reduce toxicity require foods with calcium, iron, and Vitamin C to help the body absorb iron better, keep bones strong, and prevent lead absorption. Policies and programs to encourage the supply of affordable and nutritious food in underserved areas, such as zoning modifications to build new grocery stores is essential. Society needs to pay forward initiatives across public and private sectors for specific, accountable resolutions to end food deserts and achieve food security, with healthy options to avoid toxicity for a collective America.

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