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Food is medicine for all, shouldn't all be at the table? The devastating effects of insecurity within low-income Hispanics

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ood insecurity is one of the leading problems in public health. Low-income Hispanics alone make up more than half of the food insecure population, making up 57.7 million of the U.S. total population, a total 8% of Latinos are in poverty compared to all people in the U.S. and 20% are food insecure compared to 13% of the rest of the population. Seeing this immense disparity, it is important to evaluate the barriers that confine them into food insecurity. With the current enforcements of immigration laws and cuts on initiatives like the Affordable Care Act which covered millions of Hispanics, it has led to more contributing barriers that have confined this vulnerable population into food insecurity. According to an Immigrant and Minority Health study, 211 Latinos were interviewed within their homes to assess the barriers they are experiencing while being food insecure. From the study, the majority of the participants stated that health insurance, transportation and lack of employment opportunity were all barriers that confine them. A systematic review conducted by the PCD analyzed the correlated effects of food insecurity, food deserts and lack of job opportunity. Overall, 60% of Hispanic households were below \$25,000 per year or at/below \$19,450 per year. The association is a concern and demonstrates how we must focus on affordability and accessibility to combat this health inequality. Programs have not been self-sufficient enough to eliminate and aide low-income Hispanics out of food insecurity. The lack of current research that analyzes the contributing barriers of food insecurity mostly evaluates the after effects. To have key measures of success, public health leaders as a collective must tackle food insecurity at a multivariate level. Food prescription programs need to expand their access of outreach in order to feed all individuals instead of just one portion of the population.

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