GOOD HEALTH IS LINKED TO GROCER

The New York Times November 12, 2002 By MARY DUENWALD

In many American neighborhoods, poor eating habits may stem from a lack of access to fresh, nutritious food, new research suggests. The more supermarkets a neighborhood has, the more fruits and vegetables its residents eat, according to a study from the University of North Carolina. The effect was found to be especially strong in predominantly black neighborhoods, where produce consumption rose by 32 percent for each additional supermarket. In mainly white neighborhoods, the comparable increase was 11 percent.

The presence of at least one supermarket in a black neighborhood was also associated with a 25 percent increase in the number of residents who limited the amount of fat in their diets, as compared with people in neighborhoods with no supermarket. In white neighborhoods with one supermarket, 10 percent more of the residents watched their fat intake.

Only 8 percent of the black participants in the study lived in neighborhoods with at least one supermarket, while 31 percent of the white participants did. The largely white neighborhoods had, on average, five times as many supermarkets as the black neighborhoods, the researchers found.

"There is an assumption that we all have access to healthy foods, and that when people aren't eating healthy, it's because they choose not to," said Dr. Kimberly Morland, an epidemiologist and lead researcher on the study, who is now at Mount Sinai School of Medicine. "But this demonstrates that the availability of food varies between neighborhoods, and it's related to the affluence and the race of the neighborhood."

Most of the black neighborhoods in the study did have small groceries, but these were not associated with beneficial nutritional practices. Supermarkets, the researchers noted, are more likely to offer a wide selection of food at affordable prices. The findings confirm what people in black communities have long observed, said Dr. Maya Rockeymoore, a public health scholar at the National Urban League Institute for Opportunity and Equality in Washington. "In some neighborhoods, it's easier to get an artery-clogging piece of fried chicken than it is to get a fresh apple," Dr. Rockeymoore said. "Many urban community dwellers would love to have better eating habits, but if there's no grocery store nearby, you're talking about getting on public transportation with a grocery cart." Dr. Rockeymoore said the problem might partly explain why rates of heart disease, stroke and diabetes were high in many black neighborhoods.

Medical research has shown that eating plenty of fruits and vegetables can lower blood pressure, reduce the risk of heart disease and stroke and help prevent bone loss. Diets high in fat have been linked to cardiovascular disease, diabetes and cancer. "Very few illnesses have not shown some association with dietary practice," Dr. Morland said.

Her study was based on data that was originally gathered during the mid-1990's to study the risk of atherosclerosis in various communities. More than 10,000 adults in four states had been asked to answer questions about what they ate each day. The predominantly black neighborhoods studied were in and around Winston-Salem, N.C., and in Jackson, Miss. The mainly white neighborhoods were in Washington County, Md., and suburban Minneapolis. Dr. Morland correlated the nutritional reports with records from local health departments and state agriculture departments showing the locations of supermarkets.

The researchers noted that whites in their study had three times the access to cars as blacks had, and speculated that this might explain why nearby supermarkets made a greater difference among blacks.

But transportation is probably not the only explanation, said Dr. Steven B. Wing, an epidemiologist at the University of North Carolina, a co-author of the study. "If you either don't have transportation, or you work long hours because of your economic situation, or you feel that when you go to a store in a white neighborhood, you are under surveillance, it's not going to be as easy for you to have access to good food at affordable prices," he said.

 $\frac{http://www.nytimes.com/2002/11/12/health/nutrition/12FRUI.html?ex=1038136872\&ei=1\&en=b8a75f14fbea2379$