

# “Just eat healthier.”

Why “Diet Improvement” As a Chronic Condition Management Strategy Falls Short for Individuals Experiencing Food Insecurity



## BACKGROUND

Food security is a long-standing problem impacting individuals and families across the globe. Before COVID-19, more than **37 million people** in the United States lived in a food-insecure household, which constitutes approximately 11% of US households.<sup>1</sup> As of March 2020, research has shown the percentage of households increased to 38%.<sup>2</sup>

**Food insecurity** is defined as the disruption of food intake or eating patterns due to a lack of financial or other resources.<sup>3</sup> In the midst of a global pandemic, accessing food has become increasingly difficult for those who do not have sufficient resources, and it's become nearly impossible for those with less secure resources. Furthermore, food access support services that serve to address the needs of more vulnerable populations have also been experiencing hardship. The National Institute for Health Care Management (**NIHCM**) Foundation reported that 98% of food banks are at an increased demand, with about 40% of those showing immediate critical shortfalls.<sup>1</sup>

## SUPPLY AND DEMAND FOR BASIC HUMAN NEEDS HAS SEVERE IMPLICATIONS

As the demand goes up for food banks, the supply of food continued to decrease. But this familiar economic phenomenon has become an additional barrier for individuals experiencing food insecurity, particularly those with chronic conditions. Because food security and health outcomes move parallel, marginal, low, and very low food security statuses are strongly associated with chronic disease. **In a 2017 study released by the USDA**, lower food security was associated with a higher probability of each of the chronic diseases examined—hypertension, coronary heart disease (CHD), hepatitis, stroke, cancer, asthma, diabetes, arthritis, chronic obstructive pulmonary disease (COPD), and kidney disease.<sup>4</sup>

Furthermore, the lack of resources isn't just about the food itself. Those who are food insecure are also more likely to be affected by other social determinants that contribute to worsened health outcomes. Barriers such as lack of access to affordable housing, social isolation, and lower annual earnings, all contribute to the likelihood of having or developing chronic conditions, as well as having difficulty managing them. Compounding these factors with a lack of nutritious food accessibility is proven to lead to conditions, such as obesity, high blood pressure, heart disease, and diabetes.

2018

**11%** of households  
experience food insecurity



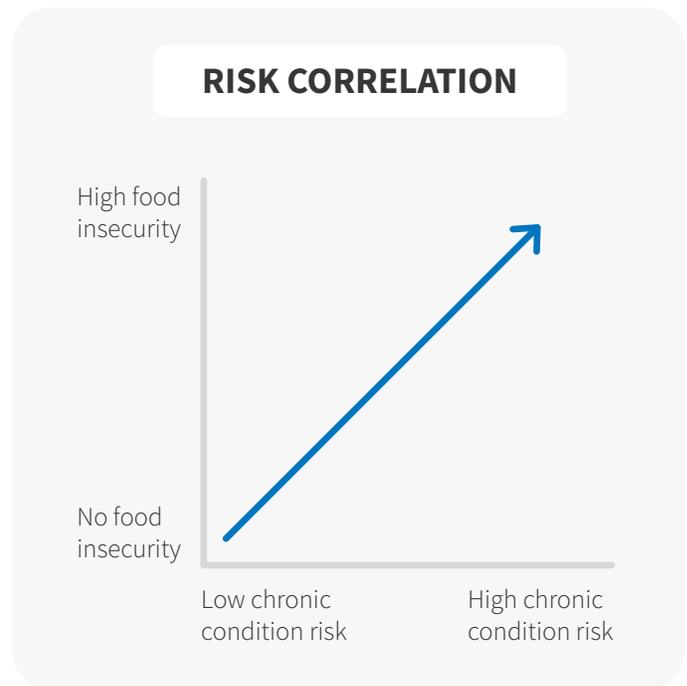
MARCH 2020

**38%** of households  
experience food insecurity



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To treat these conditions, doctors are suggesting diet changes, which presents a further dilemma for those who are food insecure. Research clearly illustrates the role nutrition plays in chronic condition management. Take, for example, a patient with Type 2 Diabetes. The food they eat is just as important as the medication they are prescribed. But without adequate food access, condition management becomes an even bigger struggle, if not almost impossible. This directs us to the bigger picture: food insecurity and chronic condition management are mutually exclusive. Successful condition management of large populations cannot occur while food insecurity is still a problem.



## IF ACCESS IS THE PROBLEM, REMOVE THE ACCESS BARRIERS

As a company that prides itself on being able to reduce barriers for members, the solution seemed pretty obvious. If access to food is the problem, we need to remove the access barriers. Grocery delivery programs is an accessible tool that can help to address access issues related to location, ability status, or even time. The problem with grocery delivery as a standalone service is its inherently transactional base; it doesn't necessarily address a nutrition education. So, we've decided to take food insecurity support a step farther by coupling grocery and meal delivery services with nutrition education through digital health coaching. To date, we have been able to deliver over 600,000 meals to food-insecure individuals across the country.

Merging meal delivery services and nutrition education provides a structured support system to help truly meet food insecure individuals where they are by providing them with comprehensive support to address a fundamental need that is quite literally essential to survival. It enables us to flip the switch on food insecurity and create the infrastructure that will set people up for success in their individual health management. Food insecurity isn't a new problem, but it is our responsibility as a society to invest in new solutions that help address it.

### TO DATE:

Pack Health has been able to deliver more than



**600,000**  
**meals**

to individuals experiencing food insecurity.<sup>5</sup>

For more information, visit [packhealth.com](https://packhealth.com).

## ABOUT PACK HEALTH

Pack Health is a digital health coaching company that helps patients with chronic conditions access the right care and develop the self-management skills to achieve better health and well-being. To learn more about how digital health coaching can help improve health outcomes, reduce costs, and increase patient satisfaction, visit [www.packhealth.com](http://www.packhealth.com) or email [strategy@packhealth.com](mailto:strategy@packhealth.com).

To learn more about Pack Health's food insecurity solution, [click here](#).

<sup>1</sup>NIHCM Foundation. "The Current State of Food Insecurity in America." NIHCM, 3 Nov. 2020, nihcm.org/publications/the-current-state-of-food-insecurity-in-america.

<sup>2</sup>Kakaei H, Nourmoradi H, Bakhtiyari S, Jalilian M, Mirzaei A. Effect of COVID-19 on food security, hunger, and food crisis. *COVID-19 and the Sustainable Development Goals*. 2022;3-29. doi:10.1016/B978-0-323-91307-2.00005-5

<sup>3</sup>Nord, Mark, et al. *Household Food Security in the United States, 2005*. United States Department of Agriculture, Nov. 2006.

<sup>4</sup>Gregory, Christian, and Alisha Coleman-Jensen. *Food Insecurity, Chronic Disease, and Health among Working-Age Adults*, ERR-235. United States Department of Agriculture, Economic Research Service, July 2017.

<sup>5</sup>Pack Health Internal Data

*Pack Health is not intended to substitute for medical advice provided by a person's treating healthcare provider and is not intended as the practice of medicine. Pack Health is intended to be an aid for people to gain insights into ways to help improve their general health and well-being. Only a person's healthcare professional should diagnose and treat their patients based on the provider's clinical assessment, education and training. This service should not be used as a substitute for a person's healthcare provider.*

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