



ACHIEVING HEALTH EQUITY THROUGH CROSS-SECTOR COLLABORATION

The full letter is below. To officially add your organization's name, please fill out [this form](#)

The Honorable Glenn Thompson
Chairman
House Committee on Agriculture
1301 Longworth House Office Building
Washington, DC 20515

The Honorable David Scott
Ranking Member
House Committee on Agriculture
1010 Longworth House Office Building
Washington, DC 20515

The Honorable Debbie Stabenow
Chairwoman
Senate Committee on Agriculture
328A Russell Senate Office Building
Washington, D.C. 20510

The Honorable John Boozman
Ranking Member
Senate Committee on Agriculture
328A Russell Senate Office Building
Washington, D.C. 20510

Dear Chairman Thompson, Ranking Member Scott, Chairwoman Stabenow and Ranking Member Boozman:

We, the undersigned, write to express our support for key Farm Bill priorities and programs that address hunger and nutrition insecurity in communities across the country.

As you know, the ill effects of nutrition insecurity are well documented. Studies repeatedly show that nutrition-insecure households consistently have more emergency room visits, hospital admissions and total days in the hospital. Hunger causes higher incidences of chronic diseases such as diabetes, hypertension, heart disease, kidney disease, and depression. However, while hunger and nutrition insecurity are prime contributors to our leading causes of disability and mortality, the impact of diet-related diseases is not equally distributed. The effects on health are particularly pronounced among older Americans who are 50 percent more likely to be diabetic, nearly 60 percent more likely to have congestive heart failure or experience a heart attack, and twice as likely to have asthma if they are nutrition insecure. Communities of color, rural communities, people living with disabilities, children and LGBTQI+ people all see higher rates of diseases related to hunger and nutrition insecurity, and hunger greatly impairs the performance of children in school and increases the likelihood of long-term behavioral and psychological problems.

Furthermore, this issue is growing as shown in the U.S. Department of Agriculture Economic Research Service's recently released [Household Food Security in the United States in 2022](#)



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report, which found that more than 44.2 million Americans lived in households that struggled with hunger in 2022, an increase of 10.3 million more than the previous year. The percentage of U.S. households facing very low food security increased from 3.8 percent in 2021 to 5.1 percent in 2022, with statistically significant increases in food insecurity across almost all categories compared with the previous year. 13.4 million children were living in households that experienced food insecurity and rates were higher for Black and Latino households and single-parent households headed by women.

Financially, the effects of hunger are just as bleak. The costs to the healthcare industry alone are \$53 billion annually, placing an ever-widening burden on our nation's hospitals, health systems, federally qualified health centers, non-clinical community-based service organizations and citizens. Ending hunger – which is well within our reach, and long overdue as a national priority – would have immediate, positive impacts to health and well-being. Estimates show that for every \$1 spent on providing food to an individual experiencing hunger, approximately \$50 is saved in Medicaid expenses. Investments such as these improve health outcomes and lower healthcare utilization rates as well as overall costs.

To fully address hunger and nutrition insecurity, we recommend:

- Strengthening the Supplemental Nutrition Assistance Program (SNAP) to mitigate nutrition insecurity and diet-related disease and providing higher allotments for emergency use that help households keep up with increasing food costs.
- Authorizing increased funding for the Gus Schumacher Nutrition Incentive Program (GusNIP) and Produce Prescription Programs which have been shown to be effective at incentivizing healthy eating and should be maintained and funded at higher levels to increase participation. Investments in rural communities to support broadband capabilities and improved access to virtual health care services.

As always, thank you for your diligent work on this year's Farm Bill and in addressing the hunger and nutrition security needs of our country. If you have any questions, please do not hesitate to reach out to Barbara Petee, President at bpetee@rootcausecoalition.org.

Sincerely,

AdventHealth
Adventist Health Policy Association (AHPA)
Center for Science in the Public Interest
Community Care Cooperative (C3)
Community Servings
Conduit Government Relations



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Great Plains Food Bank

Houston Food Bank

Meals on Wheels America

Meals on Wheels Wake County

Mid-Ohio Food Collective

Opportunities for Williamson and Burnet County

Quest Diagnostics

The National Association of Nutrition and Aging Services Programs (NANASP)

University of Michigan Health-Michigan Medicine