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MOTION BY SUPERVISOR HILDA L. SOLIS

Healthy Food Access for Diabetes and Prediabetes Prevention

November is National Diabetes Month, when communities across the country come together to bring attention to type 2 diabetes. Organizations across the country focus on raising awareness for diabetes and prediabetes prevention. For example, the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) focuses on building a health care team to manage care and the American Diabetes Association highlights the disparate impacts type 2 diabetes has had on communities due to social inequities.

In Los Angeles County, the overall prevalence of type 2 diabetes is roughly 11%, increasing with age. Over 1 in 5 adults aged 60 years and above have type 2 diabetes. The condition also disproportionately impacts certain communities, with 14.4% of African American and 13.6% of Latino residents reporting type 2 diabetes, compared with 8.8% of White residents and 8.2% of Asian residents. 44% of County residents have prediabetes, and nearly two of three adults are either obese or overweight, and this issue is even more pronounced among the 3.7 million low-income residents in the county. The direct cost in type 2 diabetes treatment in the county alone is estimated to be as much as \$6 billion per year, and is further exacerbated by existing health disparities.

For low-income communities, the incidence of type 2 diabetes can partially be attributed to

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problems accessing enough healthy food, known as nutrition security. A lack of nutritious food can significantly increase the risk for type 2 diabetes, as well as affect how people with diabetes are able to manage their health. This is often driven by the fact that some communities find nutritious food hard to access, or it can be too expensive for many to afford. 1 in 3 Latino and 1 in 3 Black children are living in poverty and experiencing food insecurity.

A major contributing factor that drives childhood obesity and the risk of type 2 diabetes is excess consumption of sugary drinks. Sugary drinks are beverages that contain added sugar and other caloric sweeteners. Some studies have suggested that these drinks represent the single largest source of calories in children's diets today, providing nearly half of kids' added sugar intake. Sugary drinks pose a health risk to youth because they can significantly increase the risk of excess weight gain, tooth decay, obesity, type 2 diabetes, and even heart disease later in life. Latino and Black communities have higher rates of these conditions, in part due to consuming excess sugary drinks. Nearly two-thirds of U.S. children consume these drinks each day, with higher rates reported in Latino and Black youth. In 2018, companies spent more than \$1 billion on advertising these drinks, much of which was targeted toward communities of color through place-based marketing and prices designed to appeal to specific income groups. These drinks, along with other unhealthy foods, are driving increases in the incidence of type 2 diabetes among county residents.

Fortunately, there are multiple opportunities for the County to invest in upstream interventions, providing access to healthy foods for the most vulnerable residents to help prevent

the onset of type 2 diabetes. With the State of California implementing its California Advancing and Innovating Medi-Cal (CalAIM) initiative to transform and strengthen Medi-Cal, there are new opportunities to provide lower-income residents with access to healthier food options. Through CalAIM, health plans are now able to engage with Medi-Cal patients and provide them with medically supportive food, meals, and other food and nutrition-based resources.

Additionally, the Department of Public Health (Public Health) administers a produce prescription project, which brings together stakeholders from the food and healthcare system to improve the health and nutritional status of low-income households who suffer from or are at risk of developing a diet-related health condition. This project aims to improve dietary health through the consumption of fruits and vegetables, reduce individual and household food insecurity, and reduce healthcare use and related costs. The County currently partners with four community-based organizations to provide incentives for food insecure, Medi-Cal patients who are either prediabetic or diabetic to purchase fruits and vegetables in participating grocery stores.

Public Health also implements the Market Match program, which is currently temporarily funded by the American Rescue Plan Act. Market Match is a healthy food incentive program which distributes funds to overcome financial barriers for low-income residents to buy fresh produce at farmers' markets in LA County. At an individual level, Market Match extends the purchasing power of nutrition assistance programs, such as CalFresh and WIC. The program can provide up to \$20 in matching funds for CalFresh and WIC participants to purchase fruits and vegetables at

participating farmers' markets. This program is also vital in supporting local farmers and businesses, promoting sustainable food systems and community food security. Researchers estimate that the federally funded incentive dollars at California farm-direct outlets can lead to an economic impact multiplier of 3.0 in the local economy. This means that for every \$1 of Market Match invested, an additional \$3 is generated in the local economy.

The County has also implemented the Food Equity Roundtable initiative, a unique partnership among government, philanthropy, and community-based organizations, building a coalition of leading cross-sector organizations dedicated to advancing food justice and addressing inequities in food systems for the most vulnerable groups in the region. This coalition is implementing cross-sector solutions to achieve food and nutrition security in the county with a focus on underserved communities, enabling food justice with enhanced access, affordability, and consumption of nutritious food, advancing the equitable impact of food public benefits and food distribution programs. These programs and collaborative initiatives are essential in decreasing food insecurity and the incidence of type 2 diabetes as well as prediabetes across the county.

I, THEREFORE, MOVE that the Board of Supervisors proclaim November 2022 as Los Angeles County Diabetes Awareness Month.

I, FURTHER, MOVE that the Board of Supervisors direct the Department of Public Health, in collaboration with the Department of Health Services, the Chief Executive Office Anti-Racism, Diversity, and Inclusion Initiative, the Department of Public and Social Services, the Alliance for Health Integration, the Los Angeles County Food Equity Roundtable, and the Los Angeles County based health plans to:

1. Disseminate a report focused on sugar sweetened beverage consumption among children and youth, in Los Angeles County. The report should include data collected from the latest Los Angeles County Healthy Survey and policy recommendations for improving the overall health of the community including potential key dietary actions such as lowering of sugary drink consumption, a known contributor to both obesity and type 2 diabetes;
2. Identify opportunities for implementing CalAIM Community Supports that focus on type 2 diabetes management and treatment, considering (a) the status of Los Angeles-based health plans to engage and provide Medi-Cal patients with medically supportive food, meals, and other food and nutrition-based resources, (b) identify barriers encountered by these health plans in providing/reimbursing for these services, and (c) opportunities where the County could support health plans to provide these services which are now available to patients under Medi-Cal, including recommendations on how to integrate current programs into Managed Care Plans' CalAIM care coordination and additional health plan programs;
3. Explore the feasibility of expanding the produce prescription project, identifying new partners focused in communities with high prevalence of prediabetes and type 2 diabetes, with an analysis of funding sources to support this expansion;
4. Explore strategies for making the Market Match program sustainable, including implementation of the program in alignment with other nutrition assistance programs such as CalFresh and working with the Department of Public Social Services to consider housing Market Match under its administration and programs; and

5. Report back in 120 days with the results of the above directives.

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