

Statement for the Record
House Ways and Means Committee
“The Disproportionate Impact of COVID-19 on Communities of Color”

By
The Academy of Nutrition and Dietetics

The Academy of Nutrition and Dietetics (the “Academy”) appreciates the opportunity to submit a statement for the record in response to the House of Representatives Ways and Means Committee hearing on **“The Disproportionate Impact of COVID-19 on Communities of Color”** on Wednesday, May 27, 2020. Representing over 104,000 registered dietitian nutritionists (RDNs);¹ nutrition and dietetic technicians, registered (NDTRs); and advanced-degree nutritionists, the Academy is the largest association of food and nutrition professionals in the United States and is committed to addressing health disparities experienced by communities of color.

Invest in SNAP to Address Food Security

The Centers for Disease Control and Prevention have reported that people from racial and ethnic minority groups are being hospitalized and dying from COVID19 at much higher rates than white people. These same communities already were far more likely to experience food insecurity – a lack of access to sufficient quantities of affordable, nutritious food. Add rising unemployment and widespread uncertainties about the future, and the pandemic has only made the situation worse.

Food insecurity significantly affects the health and well-being of individuals and families, potentially for generations. It is a risk factor for negative psychological and health outcomes and it increases the risk and severity of diet-related diseases. We often see how those experiencing food insecurity try to stretch their budgets in ways that can damage their health, like not taking costly prescription drugs or postponing or forgoing preventive services or medical interventions. The financial burden of COVID-19 has only compounded the problem.

The Academy is calling on Congress to increase the investment in The Supplemental Nutrition Assistance Program, or SNAP, to ensure access to healthy foods for food insecure families. SNAP has been shown to reduce food insecurity, health care utilization and costs. On average, adults participating in SNAP incur health care costs nearly 25 percent less than costs incurred by their non-participating counterparts over a 12-month period. An increase in SNAP can help even further. By increasing SNAP funding and the benefits to families, we’d not only be feeding Americans and addressing some health inequities, but we’d also be providing funding that is returned immediately into the economy in support of local businesses and agriculture.

The Importance of Medical Nutrition Therapy Access

Many diet-related chronic conditions are contributing to poor COVID-19 outcomes, and the CDC lists obesity, diabetes and heart disease among the conditions that put people at greater risk of severe illness from COVID-19.

The situation is particularly dire for black Americans and other minority groups that have long faced chronic disease health disparities due to socioeconomic inequalities and reduced access to health care,

¹The Academy approved the optional use of the credential “registered dietitian nutritionist (RDN)” by “registered dietitians (RDs)” to more accurately convey who they are and what they do as the nation’s food and nutrition experts. The RD and RDN credentials have identical meanings and legal trademark definitions.

healthful foods and safe places to be active. These long-standing inequalities and disparities are now driving disproportionately high impacts of COVID-19 morbidity and mortality for these populations.

Access to medical nutrition therapy through Medicare is one tool that can help prevent, manage, and treat a wide range of chronic conditions. Reps. Eliot Engel and Pete King recently introduced the Medical Nutrition Therapy Act of 2020 (H.R. 6971). This legislation would expand access through Medicare Part B to include medical nutrition therapy for a range of chronic conditions.

Medical nutrition therapy (MNT) is a cost-effective component of treatment for obesity, diabetes, hypertension, unintended weight loss and other chronic conditions that are contributing to poor COVID-19 outcomes. Despite the potential benefits, Medicare only covers MNT for patients with diabetes or kidney disease or post-kidney transplant, leaving millions without access to care. The Medical Nutrition Therapy Act of 2020 gives Medicare beneficiaries access to the care they need by providing coverage through Medicare Part B for MNT for people with prediabetes, obesity, high blood pressure, high cholesterol, malnutrition, eating disorders, cancer, celiac disease, HIV/AIDS and unintentional weight loss.

Need for Diversity in Allied Health Professions including Dietetics

We know that cultural competency and relatability is often the touchstone of success for engaging patients and clients and motivating them to change dietary patterns. For these reasons, the Institute of Medicine report *Unequal Treatment Confronting Racial and Ethnic Disparities in Health Care* recommended increasing the proportion of health professionals from underrepresented racial and ethnic minority groups.

The Academy is currently calling on Congress to provide \$310 million for the Department of Education, of which \$300 million would be set aside for grants for Historically Black Colleges and Universities, Tribal Colleges and Universities, Minority Serving Institutions (MSIs), such as Primarily Black Institutions, Hispanic-Serving Institutions and Asian American, Native American, and Pacific Islander Institutions to strengthen and grow their allied health education programs, including nutrition and dietetics. The remaining \$10 million would be set aside for grants for organizations or institutions to conduct national outreach initiatives to encourage young people of color to pursue careers in nutrition and dietetics and to provide technical assistance to grantees to recruit and mentor students that enroll in their newly opened nutrition and dietetics programs.

Thank you for the opportunity to submit outside witness testimony to the committee. We look forward to continuing the necessary and overdue conversation on ways to reduce health disparities among communities of color in this country.

Sincerely,

A handwritten signature in blue ink that reads "Jeanne Blankenship MS RDN". The signature is written in a cursive, flowing style.

Jeanne Blankenship, MSN, RDN
Vice President, Policy Initiatives and Advocacy
Academy of Nutrition and Dietetics