Illinois Food Deserts Annual Report
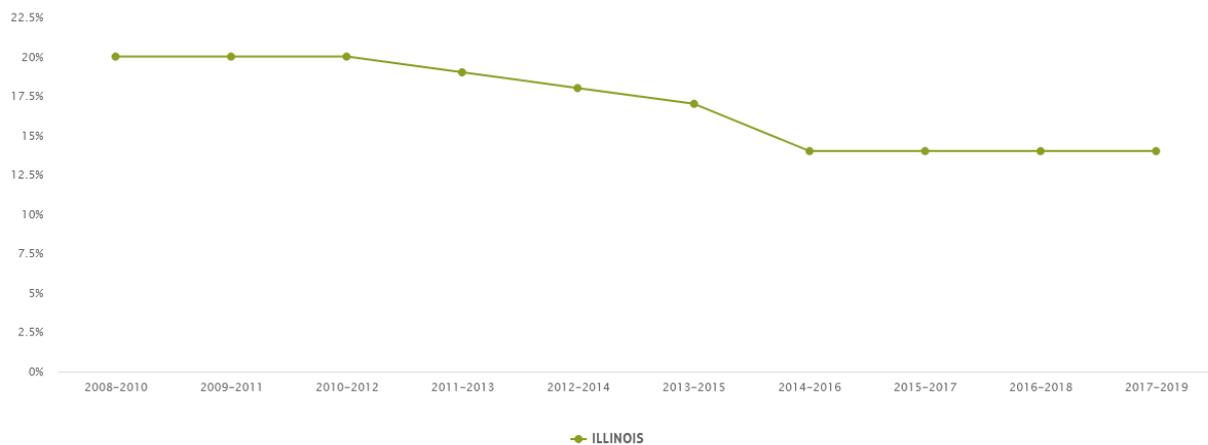
FY 2022: July 1, 2021-August 31, 2022

Food Desert Definition

For the purpose of the Illinois Public Act 100-0493, "food desert" means a location lacking fresh fruit, vegetables, and other healthful whole foods, in part due to a lack of grocery stores, farmers' markets, or healthy food providers. Food deserts are disproportionately found in high-poverty areas. There are many factors that contribute to causing a food desert, including transportation challenges, availability of convenience foods, income inequality, and business investment risks that contribute to stores not opening in the area.

Food deserts are just one type of food insecurity. The U.S. Department of Agriculture (USDA) defines food insecurity as a household-level economic and social condition of limited or uncertain access to adequate food. It is measured by looking at anxiety over food sufficiency or shortage of food in the house, reports of reduced quality, variety, or desirability of diet, and, in very low food security, the inclusion of disrupted eating patterns and reduced food intake. Nationally, about 10% of adults are experiencing food scarcity. In Illinois, About 14% of children live in households that were food insecure at some point during the year, down from 20% about 10 years ago.

CHILDREN LIVING IN HOUSEHOLDS THAT WERE FOOD INSECURE AT SOME POINT DURING THE YEAR (PERCENT)

National KIDS COUNT from datacenter.kidscount.org
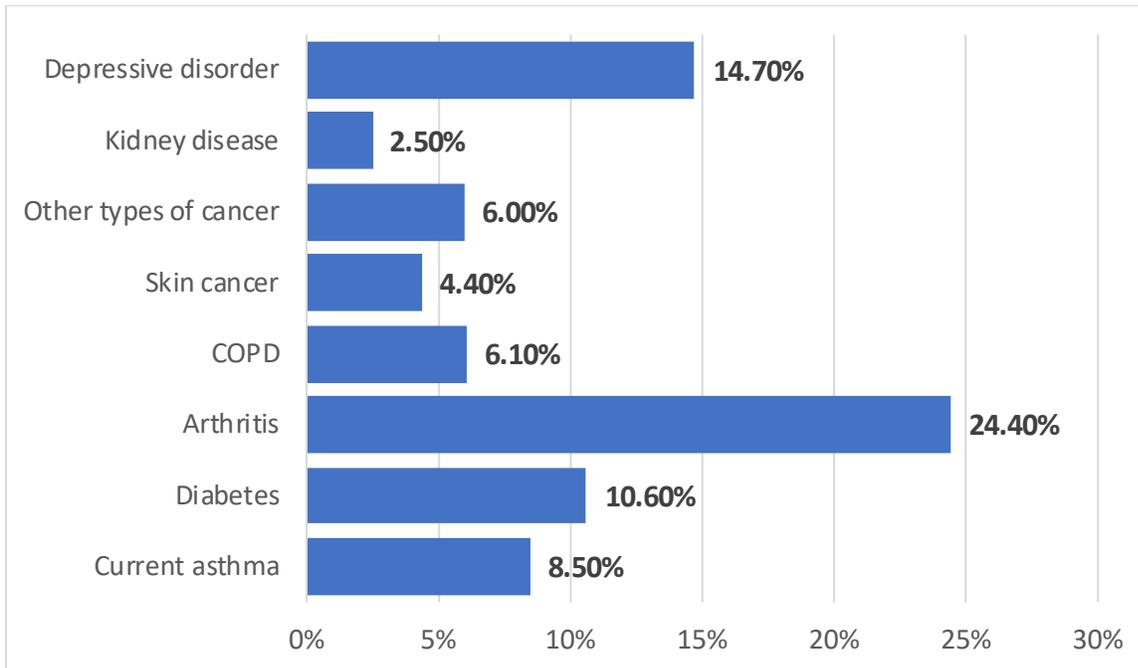
Food Deserts and Chronic Disease

Healthy diets are typically recommended to persons diagnosed with chronic diseases. However, living in a food desert limits access to the nutritious foods needed for a healthy diet. A 2017 USDA report indicated that food security status may be more strongly predictive of chronic illnesses. Food insecurity has been associated with increased odds of self-reported poor health and development of chronic diseases, such as obesity, diabetes, and hypertension for young and older adults. A 2020 review published in *Pediatric Clinics of North America* reported children experiencing food insecurity with limited access to healthy foods demonstrated poorer eating behavior may lead to the development of chronic disease. Food-insecure children may manifest with many different ailments, including anxiety and depression, and have an increased prevalence of anemia, asthma, and hospitalization with diabetes.

Chronic Disease in Illinois

The Illinois Behavioral Risk Factor Surveillance Survey (BRFSS) measures the self-reported prevalence of chronic diseases in adults 18 years and older. Most (96.5%) Illinois adults have been told they have 1 of 7 chronic diseases measured by BRFSS. This includes heart disease (heart attack/stoke/angina), current asthma, any cancer, chronic obstructive pulmonary disease (COPD), arthritis, depression, and kidney disease. Arthritis is the most prevalent chronic disease reported (24.4%) followed by depression (14.7%).

The BRFSS does not measure food deserts or food insecurity. The BRFSS, however, does measure chronic conditions at the county level through its county round survey. The Round 5 maps are posted on the IDPH website (County Level Prevalence Maps [illinois.gov]). The figure below displays prevalence of chronic conditions for the state.

Adult Chronic Disease Prevalence, Illinois, 2020

Condition	Prevalence
Depressive disorder	14.70%
Kidney disease	2.50%
Other types of cancer	6.00%
Skin cancer	4.40%
COPD	6.10%
Arthritis	24.40%
Diabetes	10.60%
Current asthma	8.50%

Food Desert Mapping

The 2021 Annual Food Desert Report for Illinois is published online at:

https://www.ilga.gov/reports/ReportsSubmitted/3015RSGAEmail5772RSGAAttachFood%20Desert%20Annual%20Report%202021.pdf. The 2021 report relied on estimates in the Food Access Research Atlas for 2019 that are based on a 2019 list of supermarkets, the 2010 decennial census, and the 2014-18 American Community Survey. The site is hosted by USDA and is not updated annually. Therefore, the 2022 Annual Food Desert Report does not have updated maps to share. However, the food access research atlas is interactive, and users can search for a specific ZIP code to see if it is in a food desert (defined below). Visit the food atlas here: https://www.ers.usda.gov/data-products/food-access-research-atlas/go-to-the-atlas/

Food desert terminologies defined by USDA

Low-income tract definition

The USDA defines a low-income tract as an area with either a poverty rate of 20% or more, or a median family income less than 80% of the statewide median family income, or a tract in a metropolitan area with a median family income less than 80% of the surrounding metropolitan area median family income.

Low-income and low-access tract measured at 1 mile and 10 miles definition

According to USDA, a low-income tract with at least 500 people, or 33% of the population, living more than 1 mile (urban areas) or more than 10 miles (rural areas) from the nearest supermarket, supercenter, or large grocery store.

Low-income and low-access tract measured at ½ mile and 10 miles definition

According to USDA, a low-income tract with at least 500 people, or 33% of the population, living more than ½ mile (urban areas) or more than 10 miles (rural areas) from the nearest supermarket, supercenter, or large grocery store.

Low-income and low-access tract measured at 1- and 20-miles definition

According to USDA, a low-income tract with at least 500 people, or 33% of the population, living more than 1 mile (urban areas) or more than 20 miles (rural areas) from the nearest supermarket, supercenter, or large grocery store.

Low-income and low-access tract using vehicle access and at 20 miles definition

A low-income tract in which at least one of the following is true: at least 100 households are located more than ½ mile from the nearest supermarket and have no vehicle access; or at least 500 people, or 33% of the population, live more than 20 miles from the nearest supermarket, regardless of vehicle availability.

No vehicle, low access, number of housing units at 10 miles definition

Number of housing units located more than 10 miles from the nearest supermarket, supercenter, or large grocery store without access to a vehicle.

The appendix contains data from the food access research atlas that was published in the 2021 Food Desert Report.

Illinois Fresh Food Fund

The purpose of the Illinois Fresh Food Fund (IFFF) is to increase the availability of fresh food in communities and neighborhoods throughout Illinois. This statewide public-private partnership is designed to achieve a reduction in the high incidence of diet-related diseases, bring healthy food to communities which historically have not had access to fresh products, and to stimulate investment of private capital in low wealth communities.

For additional information contact:

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Appendix

References

The Annie E. Casey Foundation, https://www.aecf.org/blog/exploring-americas-food-deserts

USA Facts, https://usafacts.org/articles/hunger-one-in-10-adults-are-currently-experiencing-food-scarcity/

The Annie E. Casey Foundation, Kids Count Data Center,

https://datacenter.kidscount.org/data/tables/5201-children-living-in-households-that-were-food-insecure-at-some-point-during-the-year

The U.S. Department of Agriculture, Economic Research Service,

https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-u-s/definitions-of-food-security/

The Institute for Functional Medicine, https://www.ifm.org/news-insights/food-insecurity-chronic-disease/

Adult Chronic Disease Prevalence

Chronic Condition	Estimated Population	Estimated Percentage	95% Confidence Interval	Number of Respondents
Current asthma status[1]	832,244	8.50%	7.4%-9.7%	324
Told have diabetes	1,037,818	10.60%	9.4%-12.0%	425
Told have arthritis	2,381,264	24.40%	22.5%-26.3%	1,070
Told had COPD	598,727	6.10%	5.2%-7.2%	251
Told had skin cancer?	433,039	4.40%	3.8%-5.2%	230
Told had any other types of cancer?	587,846	6.00%	5.1%-7.0%	299
Told had kidney disease?	248,901	2.50%	2.0%-3.2%	112
Told had a depressive disorder	1,434,567	14.70%	13.2%-16.4%	509
Chronic health[2]				
No Chronic Disease	342,146	3.50%	2.8%-4.3%	120
1 Chronic Disease	5,168,153	52.80%	50.7%-55.0%	1,777
2+ Chronic Diseases	4,270,533	43.70%	41.5%-45.8%	1,777

Data Source: 2020 Illinois Behavioral Risk Factor Surveillance System

1. Calculated by CDC. Prevalence for no asthma and former asthma is not displayed.
2. Calculated by IDPH. Chronic health conditions were calculated from heart disease (heart attack/stoke/angina), current asthma, any cancer, COPD, arthritis, depression, kidney disease questions.

NOTE: The COVID-19 pandemic began in 2020 so be aware when comparing or trending years.

Census Tract Maps, 2019

Figure 1. Low-income census tracts where a significant number or share of residents is >1 mile (urban) or 10 miles (rural) from the nearest supermarket.

Figure 2. Low-income census tracts where a significant number or share of residents is >1/2 mile (urban) or 10 miles (rural) from the nearest supermarket.

Figure 3. Low-income census tracts where a significant number or share of residents is >1 mile (urban) or 20 miles (rural) from the nearest supermarket.
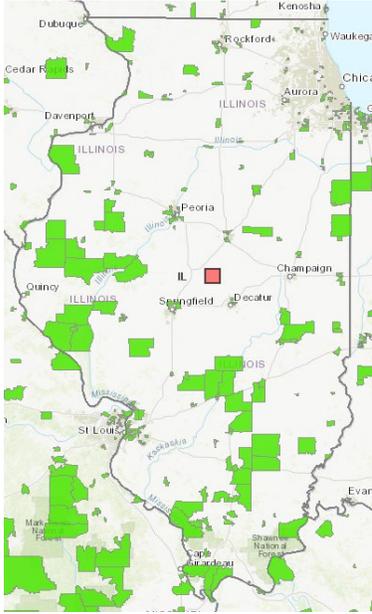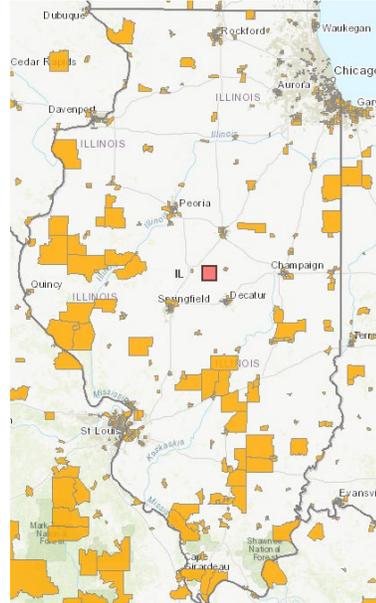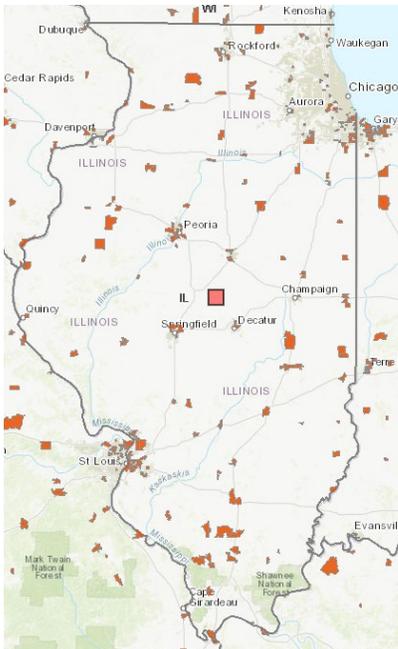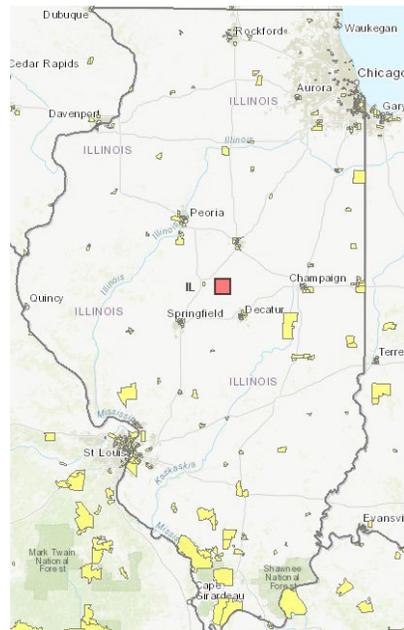

Figure 4. Low-income census tract where more than 100 housing units do not have a vehicle and are >½ mile from the nearest supermarket, or a significant number or residents are >20 miles from the nearest supermarket.

County Census Tract Counts by Food Desert Level

All Counties - Total Income and Low Access Low Tract

All counties	Low income and low access tract measured at **1** mile for urban areas and **10** miles for rural areas.	Low income and low access tract measured at **1/2** mile for urban areas and **10** miles for rural areas.	Low income and low access tract measured at **1** mile for urban areas and **20** miles for rural areas.	Low income and low access tract using vehicle access or low income and low access tract measured at 20 miles.
2015				
Total	268	799	236	373
Percent of all census tracts (n=3,123)	8.9%	25.6%	7.6%	11.9%
2019				
Total	318	870	281	424
Percent of all census tracts (n=3,115)	10.2%	27.9%	9.0%	13.6%

Low income and low access tract measured at x mile for urban areas and y miles for rural areas

County	1 and 10	Half and 10	1 and 20	Vehicle
Adams	1	7	1	2
Alexander	3	3	2	1
Bond	1	1	1	1
Boone	2	3	2	2
Brown	0	0	0	0
Bureau	1	1	1	0
Calhoun	0	0	0	0
Carroll	1	1	1	0
Cass	0	2	0	0
Champaign	3	18	3	11
Christian	0	5	0	1
Clark	1	1	1	0
Clay	0	1	0	1
Clinton	0	0	0	0
Coles	6	9	5	5
Cook	51	331	51	186
Crawford	1	1	1	1
Cumberland	0	0	0	0
De Witt	0	2	0	0
DeKalb	5	7	5	3
Douglas	1	1	1	1
DuPage	0	12	0	2
Edgar	2	2	2	2
Edwards	1	1	0	0

Low income and low access tract measured at **x** mile for urban areas **and** **y** miles for rural areas

County	1 and 10	Half and 10	1 and 20	Vehicle
Effingham	2	3	1	0
Fayette	5	5	2	1
Ford	1	2	1	0
Franklin	3	6	2	3
Fulton	2	4	0	1
Gallatin	1	1	0	0
Greene	0	1	0	0
Grundy	1	1	1	0
Hamilton	0	1	0	0
Hancock	3	3	1	0
Hardin	0	0	0	0
Henderson	0	0	0	0
Henry	2	3	2	1
Iroquois	3	3	1	1
Jackson	7	9	5	8
Jasper	1	1	1	1
Jefferson	4	5	2	2
Jersey	0	0	0	1
Jo Daviess	1	1	0	0
Johnson	0	0	0	0
Kane	5	30	5	4
Kankakee	5	10	5	7
Kendall	1	1	1	0
Knox	4	7	4	2
Lake	8	26	8	7
La Salle	5	7	5	4
Lawrence	1	2	1	0
Lee	1	1	1	1
Livingston	2	2	2	1
Logan	0	1	0	1
Macon	4	17	4	10
Macoupin	1	4	0	1
Madison	16	25	16	18
Marion	5	6	4	3
Marshall	0	0	0	0
Mason	2	2	1	0
Massac	1	2	1	1
McDonough	5	6	4	2
McHenry	2	4	2	1
McLean	8	16	7	10
Menard	0	0	0	0
Mercer	1	1	0	0
Monroe	0	0	0	0
Montgomery	4	4	3	3

Low income and low access tract measured at x mile for urban areas and y miles for rural areas

County	1 and 10	Half and 10	1a nd 20	Vehicle
Morgan	5	5	4	2
Moultrie	0	0	0	0
Ogle	2	2	2	0
Peoria	16	25	16	18
Perry	2	2	2	3
Piatt	0	0	0	0
Pike	4	4	1	0
Pope	0	0	0	0
Pulaski	2	2	0	2
Putnam	0	0	0	0
Randolph	1	1	1	1
Richland	0	2	0	0
Rock Island	10	21	10	8
Saline	3	5	3	2
Sangamon	5	24	5	12
Schuyler	1	2	0	0
Scott	0	0	0	0
Shelby	1	2	0	0
St. Clair	20	27	20	19
Stark	0	0	0	0
Stephenson	0	4	0	2
Tazewell	3	7	3	4
Union	1	2	1	1
Vermilion	6	11	6	9
Wabash	1	2	1	0
Warren	1	2	1	0
Washington	0	0	0	0
Wayne	2	4	0	0
White	0	1	0	1
Whiteside	4	5	4	1
Will	16	35	16	9
Williamson	5	5	5	4
Winnebago	11	37	11	12
Woodford	0	0	0	0

Data source: U. S. Department of Agriculture, Food Access Research Atlas, 2019.