Food insecurity and poverty are associated with poor dietary quality, including excessive intake of sodium and salty foods.¹

- Seventy-five percent of sodium intake in the American diet comes from processed and restaurant foods.²,³
- Research indicates an association exists between food insecurity and poor diets. A 2014 study found people who were food insecure or food poor had significantly worse diets than non-food poor individuals. Low-income and food insecure individuals in the study were more likely to add salt to their foods and consume fried foods regularly compared to higher income individuals, who reported having a lower sodium diet.⁴
- Increasing dietary potassium is one method for lessening the impact of a high sodium diet and reducing the risk of elevated blood pressure. But many foods identified by the Dietary Guidelines as good sources of potassium tend to be more expensive and less accessible in low-income communities.¹

Participants in federal food assistance programs, such as the Supplemental Nutrition Assistance Program (SNAP) and the Women, Infant and Children’s (WIC) program, consume levels of dietary sodium that exceed recommendations.⁵

- SNAP benefits can be used to purchase nutrient-rich and nutrient-poor foods. Purchasing nutrient-rich fruits, vegetables and whole grains is more expensive and less calorically dense compared to nutrient-poor and high-sodium foods, such as processed meats and salty snacks.
- The 2015 Dietary Guidelines recommend that the average American not exceed 2,300 milligrams of sodium daily.⁶ A 2012 study found that average daily sodium intake of SNAP participants was 3,132 milligrams a day and average energy intake was 1,979 calories.⁵ A different 2013 study of Hispanic and African-American WIC participants found that neither group met the Dietary Guidelines’ sodium recommendations.⁷
- One in 7 Americans depends on federal food assistance benefits, but the programs do not have incentives in place to encourage beneficiaries to consume or purchase low sodium foods.⁵,⁸

Food insecurity is associated with hypertension and cardiovascular disease risk factors.⁹ High dietary sodium intake increases the risk for hypertension and CVD.⁹

- Low-income individuals, particularly low-income people of color, disproportionately experience morbidity and mortality from hypertension and other associated risks for cardiovascular disease.¹
- There is an association between food insecurity and increased risk of hypertension and other risk factors for cardiovascular disease.⁹
• High sodium and low-potassium diets, such as the diets of many low-income or food insecure individuals, increase risk of developing hypertension.\(^9\)

• Though more research is needed, there is some information that suggests it is challenging for low-income individuals to find low-sodium alternatives within their food environment and budgets.\(^1,9\)

**African Americans have among the highest rates of hypertension in the world and highest prevalence in the United States.**\(^10\)

• Data from the National Health and Nutrition Examination Survey, 2009-2010, showed that 40 percent of non-Hispanic African Americans had hypertension compared to 27 percent of non-Hispanic whites and 26 percent of Hispanics.\(^11\)

• The Centers for Disease Control estimates that 44 percent of African American men and 48 percent of African American women are hypertensive.\(^12\)

• The proportion of African Americans adults and Mexican Americans adults with hypertension who are under the age of 65 is greater than that of Whites.\(^13\)

**Many children who live in low-income communities have high sodium diets. They also live with a reduced access to healthy food environments compared to children from more advantaged neighborhoods.**\(^14\)

• Children in low-income urban or rural environments are more likely to live in unhealthy food environments, which have a high density of fast food restaurants, convenience stores and food outlets that sell high sodium foods.\(^15\) This increases their exposure to sources of sodium and puts them at increased risk for excessive sodium intake.\(^15\)

• A 2009 study conducted in New York City among children living in disadvantaged neighborhoods found that children who lived in the most disadvantaged neighborhoods—high unemployment rates, poverty and vacant housing—consumed 3,549 milligrams daily. This was 23 percent more sodium daily than children from the least disadvantaged communities.\(^15\)

• A 2013 Australian study found that children with low socioeconomic status (SES) have an average 9 percent greater intake of high sodium foods, such as high salt soups, sauces, sausages and potatoes, compared to children with high SES.\(^15\)

• Low-income children and children of color who regularly consume nutrient poor and high sodium diets are at an increased risk of long-term health problems, particularly hypertension and cardiovascular disease.\(^15\)

2 American Heart Association. Processed Foods: Where is all that salt coming from? [http://www.heart.org/HEARTORG/Conditions/HighBloodPressure/PreventionTreatmentofHighBloodPressure/Processed-Foods-Where-is-all-that-salt-coming-from_UCM_426950_Article.jsp](http://www.heart.org/HEARTORG/Conditions/HighBloodPressure/PreventionTreatmentofHighBloodPressure/Processed-Foods-Where-is-all-that-salt-coming-from_UCM_426950_Article.jsp)

3 The U.S. Centers for Disease Control. Get the Facts: Sodium and Processed Food. [http://www.cdc.gov/salt/pdfs/sodium_role_processed.pdf](http://www.cdc.gov/salt/pdfs/sodium_role_processed.pdf)


12 U.S Centers for Disease Control. Take Control of Your Heart: It’s All in the ABCS. [http://www.cdc.gov/dhdsp/data_statistics/fact_sheets/docs/fs_aa.pdf](http://www.cdc.gov/dhdsp/data_statistics/fact_sheets/docs/fs_aa.pdf)

