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Review Article

Poor Nutritional Status of Disadvantaged Groups Since COVID-19

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As Coronavirus Disease-19 (COVID-19) has greatly spread out the world and influenced one's quality of life, there have been a variety of negative impacts from COVID-19. Economic recession is one of the biggest problems caused by COVID-19. Rates of unemployment have dramatically increased from levels seen before the COVID-19 pandemic, which then influences low income and job [1]. In particular, quality of life among disadvantaged groups, such as homeless people, people with disabilities, children without parents, older adults, minorities, and migrants, has noticeably diminished due to increased difficulties finding employment. In fact, before COVID-19, their socioeconomic status (SES) was already relatively low, so that the financial difficulties caused by COVID-19 may disproportionately affect them [2]. Moreover, this disproportionate financial impact may directly affect their nutritional status, as they are less able to afford nutritious foods [3].

For good nutrition, economic resources are critical because the price of healthy foods are relatively expensive compared to unhealthy foods, such as junk foods [4]. Therefore, low-income

families may be less likely to eat fruits or vegetables because of limited financial resources. In other words, they may tend to purchase cheaper, less healthy foods, not able to consider healthier options. Along with this, these groups may also be disadvantaged in the job market, as they may experience discrimination when seeking a job. In particular, many societies still report that women, people with disabilities, migrants, people of color, older adults, and LGBTQ people face challenges in finding a job that people in other groups may not [5]. However, even among those who are employed, their incomes are lower and most of them face job insecurity [2]. This phenomenon has worsened since COVID-19 and disadvantaged groups have been exposed to increased risks of financial challenges. As a result, they cannot help having to reduce the amount of healthy foods they purchase, and their nutritional status is negatively influenced by this decreased consumption of healthy foods.

As unemployment rates have increased considerably since COVID-19, opportunities for stable jobs have also decreased, particularly for disadvantaged groups. They are often employed

in types of work that provide a low income and expose them to poor working conditions during a period of crisis [2]. Nutrition is an important aspect of older adults' health and quality of life [6]. Older adults who do not have accumulated assets and experience interrupted income after retirement might also have to reduce their consumption of healthy foods due to a lack of financial resources worsened since COVID-19. Likewise, poor nutrition negatively influences developmental processes, particularly among children without parent care, such as those in foster or kinship care [7]. Additionally, even if the government provides subsidies for children's nutrition through school lunch programs, many children cannot attend school in-person during the current crisis due to risk of COVID-19 spread. Thus, they might not receive adequate food support, and as a result, they may face disadvantages in physical development and health. Therefore, inequality in food quality, accessibility and availability fosters unequal distributions of resources between wealthy households and poor households.

As we briefly look at threats to nutrition of certain disadvantaged groups since COVID-19, the situation would be same with other disadvantaged groups not specifically mentioned. COVID-19 has resulted in economic challenges and an interruption to daily life, leading to poor nutrition, particularly among those who were already at a disadvantage before the emergence of COVID-19. Such vulnerable groups generally had poor nutrition compared to other groups even before COVID-19, making them even more at risk to its negative nutritional effects. Given that insufficient nutrition is significantly related to poor physical and behavioral health, we need to increase accessibility of healthy foods to disadvantaged groups through, for example, increased funding for nutrition assistance programs, food distribution programs in communities where schools are still functioning online, along with more general financial assistance for disadvantaged groups. Through these suggestions, people at risk for poor nutritional outcomes would be able to access and afford healthy foods to improve their nutritional status during the COVID-19 pandemic and beyond.

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