

# **Healthier Food Retail:**

**An Action Guide for Public Health Practitioners** 



#### **Notice to Readers**

This document was created to provide examples of strategies which can be used to inform obesity prevention initiatives. Many of the examples and success stories listed in this document were conducted by organizations outside of CDC and the federal government and without CDC or federal funding; these examples are provided for illustrative purposes and therefore do not constitute a CDC or federal government activity or endorsement.

Links to non-federal government organizations found in this document are provided solely as a service to the reader. These links do not constitute an endorsement of these organizations or their programs by CDC or the Federal Government, and none should be inferred. CDC is not responsible for the content of the individual organization sites listed in this document.

#### **Suggested Citation:**

Centers for Disease Control and Prevention.

Healthier Food Retail: An Action Guide for Public Health Practitioners.

Atlanta: U.S. Department of Health and Human Services; 2014.

Healthier Food Retail: An Action Guide for Public Health Practitioners was prepared by the Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition, Physical Activity and Obesity with Carla Linkous, previously at The Cloudburst Group, and Allison Karpyn from the Center for Research in Education and Social Policy, University of Delaware (previously from The Food Trust).

### **Acknowledgements**

We would like to express our appreciation to the following individuals who provided valuable feedback during the development of this *Action Guide*:

#### **James Barham**

Marketing Services Division, Agricultural Marketing Service, United States Department of Agriculture

#### Randi Belhumeur

Integrated Medical Weight Loss (previously from Division of Community, Family Health, and Equity, Rhode Island Department of Health)

#### **Laurel Berman**

Division of Community Health Investigation, Agency for Toxic Substances and Disease Registry

#### **Diane Beth**

Physical Activity and Nutrition Branch, North Carolina Division of Public Health

#### **Rogelio Carrasco**

Retailer Policy and Management Division, Supplemental Nutrition Assistance Program, Food and Nutrition Service, United States Department of Agriculture

#### **Amy Ellings**

Healthy Eating Active Living Program, Washington State Department of Health

#### **Anne Escaron**

Department of Population Health Sciences, University of Wisconsin-Madison

#### Sheila Fleischhacker

Division of Nutrition Research Coordination, National Institutes of Health (previously from University of North Carolina at Chapel Hill)

#### **Perry Gast**

Division of Community, Family Health, and Equity, Rhode Island Department of Health

#### Diane Golzynski

School Nutrition Programs, Michigan Department of Education (previously from the Cardiovascular Health, Nutrition, and Physical Activity Section, Michigan Department of Community Health)

#### **Katherine Hebert**

Planning Department, Town of Davidson, North Carolina (previously from the Division of Nutrition, Physical Activity, and Obesity, Centers for Disease Control and Prevention)

#### **Donna Hines**

Supplemental Food Programs Division, Food and Nutrition Service, United States Department of Agriculture

#### **Kimberley Hodgson**

**Cultivating Healthy Places** 

#### **Gerry Howell**

Program Accountability and Administration Division, Food and Nutrition Service, United States Department of Agriculture

#### **Allison Karpyn**

Center for Research in Education and Social Policy, University of Delaware (previously from The Food Trust)

#### **Amy Koren-Roth**

Division of Nutrition, Bureau of Nutrition Risk Reduction, New York State Department of Health

#### **Hannah Burton Laurison**

Hannah Burton Laurison Consulting (previously from ChangeLab Solutions)

#### **Judy Love**

Retailer Policy and Management Division, Supplemental Nutrition Assistance Program, Food and Nutrition Service, United States Department of Agriculture

#### **Scott Martin**

Stony Brook University School of Medicine (previously from the National Center for Environmental Health, Centers for Disease Control and Prevention)

#### **Donna McDuffie**

Office of Statewide Health Improvement Initiatives, Minnesota State Department of Health

#### **Amy Meinen**

Wisconsin Obesity Prevention Network, University of Wisconsin-Madison Collaborative Center for Health Equity (previously from the Nutrition, Physical Activity and Obesity Program, Wisconsin Department of Health Services)

#### **Carol Selman**

Division of Emergency and Environmental Health Services, National Center for Environmental Health, Centers for Disease Control and Prevention

#### Sara Soka

Wisconsin Clearinghouse for Prevention Resources (previously from the Nutrition, Physical Activity and Obesity Program, Wisconsin Department of Health Services)

#### **Debra Tropp**

Marketing Services Division, Agricultural Marketing Service, United States Department of Agriculture

#### **Lynn Wilder**

Division of Community Health Investigations, Agency for Toxic Substances and Disease Registry

## We would also like to thank and acknowledge the following individuals who contributed to the development of the stories and examples in this *Action Guide*:

#### **Alice Ammerman**

Center for Health Promotion and Disease Prevention, Gillings School of Global Public Health, and School of Medicine, University of North Carolina at Chapel Hill

#### **Alexandra Ashbrook**

D.C. Hunger Solutions

#### **Joseph Barker**

Office of Community Health Systems and Health Promotion, Bureau for Public Health, West Virginia Department of Health and Human Resources

#### Sabrina Baronberg

Public Health Solutions (previously from Bureau of Chronic Disease Prevention and Tobacco Control, New York City Department of Health and Mental Hygiene)

#### **JoAnne Berkenkamp**

Tomorrow's Table LLC (previously from Institute for Agriculture and Trade Policy)

#### **Diane Beth**

Physical Activity and Nutrition Branch, North Carolina Division of Public Health

#### **Molly De Marco**

Center for Health Promotion and Disease Prevention, University of North Carolina at Chapel Hill

#### **Amy Ellings**

Healthy Eating Active Living Program, Washington State Department of Health

#### **Diana Endicott**

**Good Natured Family Farms** 

#### Sheila Fleischhacker

Division of Nutrition Research Coordination, National Institutes of Health (previously from University of North Carolina at Chapel Hill)

#### **Perry Gast**

Division of Community, Family Health, and Equity, Rhode Island Department of Health

#### Diane Golzynski

School Nutrition Programs, Michigan Department of Education (previously from the Cardiovascular Health, Nutrition, and Physical Activity Section,

Michigan Department of Community Health)

#### Nora Hoeft

Healthy Living Team, Minneapolis Health Department

#### Allison Karpyn

Center for Research in Education and Social Policy, University of Delaware (previously from The Food Trust)

#### Bonnie D. Kerker

Bureau of Chronic Disease Prevention and Tobacco Control, New York City Department of Health and Mental Hygiene

#### **Lauren Lindstrom**

Bureau of Chronic Disease Prevention and Tobacco Control, New York City Department of Health and Mental Hygiene

#### Katie S. Martin

Department of Allied Health Sciences, University of Connecticut

#### **Donna McDuffie**

Office of Statewide Health Improvement Initiatives, Minnesota State Department of Health

#### **Hannah Mellion**

Farm Fresh Rhode Island

#### **Katherine Rasmussen**

Capital District Community Gardens

#### **Amelia Rose**

Environmental Justice League of Rhode Island

#### **Kathlyn Terry**

Appalachian Sustainable Development

#### **David Webber**

Division of Agricultural Markets, Massachusetts Department of Agricultural Resources

John Yauch

Division of Health Promotion & Chronic Disease, Bureau for Public Health, West Virginia Department of Health and Human Resources

### **Contents**

Acknowledgements	iii
Introduction	1
Purpose and Intended Audience of this Action Guide	2
Rationale for this Action Guide	3
How to Use this Action Guide	4
Organization of this Action Guide	4
Chapter 1: Partnerships, Assessment, and Evaluation (Partnerships, Assessment, and Evaluation in Healthier Food Retail)	7
Introduction	
Developing Partnerships	8
Discover Who's Doing What in Healthier Food Retail	8
Initiate Discussions with Partners	14
Maintaining Momentum in Your Partnerships	15
Assessing the Healthier Food Retail Environment	16
Focus the Assessment	17
Plan the Assessment	17
Implement the Assessment	17
Synthesize and Report Assessment Findings.	19
Evaluation	19
Planning Your Evaluation	19
Stakeholders and Partners in Evaluation	
Evaluation of Healthier Food Retail Strategies	
Partnership, Assessment, and Evaluation Resources	26
Chapter 2: Grocery Stores (Encouraging Full Service Grocery Stores to Locate in	
Underserved Areas and Promote Healthier Foods)	
General Strategy Overview	
Working with Partners and Leveraging Resources	
Providing Training, Technical Assistance, and Education	36
Addressing Other Common Concerns for Grocery Store Development	
Zoning and Site Development	
Perceptions about Neighborhood Retail Markets	
Grocery Store Resources	44
Chapter 3: Small Stores (Improving Small Stores in Underserved Areas)	47
General Strategy Overview	48
Physical Improvements for Access to Healthier Foods	49
Promotion and Marketing of Healthier Foods	49
Accepting Nutrition Assistance Program Benefits in Small Stores	49
Working with Partners and Leveraging Resources	50
Providing Training, Technical Assistance, and Education	53
Training and Technical Assistance to Store Owners	53
In-Store and Community Marketing and Education	55
Addressing Other Common Concerns for Small Stores	58
Small Stores Resources	63

Chapter 4: Farmers Markets (Encouraging Farmers Markets in Underserved Areas)	65
General Strategy Overview	66
Accepting Nutrition Assistance Program Benefits at Farmers Markets	66
Implementing Incentive Programs at Farmers Markets	67
Working with Farmers Markets in Underserved Communities	67
Working with Partners and Leveraging Resources	70
Providing Training, Technical Assistance, and Education	73
Providing Training, Technical Assistance, and Education to Support Market Management	73
Providing Assistance with Direct-to-Consumer Marketing, Nutrition Education, and Community  Marketing and Outreach	77
Addressing Other Common Concerns for Farmers Markets	79
Farmers Market Management	79
Zoning Issues	80
Community Awareness of Farmers Markets	80
Farmers Market Resources	84
Chapter 5: Mobile Food Retail (Encouraging Healthier Mobile Food Retailers	
to Operate in Underserved Areas)	
General Strategy Overview	
Working with Partners and Leveraging Resources	
Providing Training, Technical Assistance, and Education	
Addressing Other Common Concerns in Healthier Mobile Food Retail	
Zoning and Regulatory Processes	
Perceptions	
Healthier Mobile Food Resources	98
Chapter 6: Transportation (Improving Transportation Systems for Healthier Food Retail)	99
General Strategy Overview	
Working with Partners	
Activities to Improve Transportation Systems	
Promoting Walking and Biking Accessibility	
Enhancing Traditional Public Transit Services	
Offering Shuttle Services	
Supporting Car Sharing and Carpooling	111
Transportation Resources	
Chapter 7: Distribution (Improving Distribution Systems for Healthier Food Retail)	115
General Strategy Overview	116
Working with Partners	117
Activities to Improve Distribution Systems	120
Improving Existing Distribution Systems for Independent and Small Store Retailers	120
Creating or Supporting Small Store Buying Groups	122
Connecting Local Food Producers to Distributors and Retailers	123
Distribution Resources	130
References	133
Appendix: Examples of Evaluation Questions, Indicators, and Data Sources	1/11

## **Tables and Figures**

Table 1. Federal and State Plans and Programs of Relevance to Healthier Food Retail Initiatives	1
Figure 1. Steps in the CDC Framework for Program Evaluation in Public Health	2



Introduction

### Purpose and Intended Audience of this Action Guide

The purpose of *Healthier Food Retail: An Action Guide for Public Health Practitioners* is to provide guidance for public health practitioners on how to develop, implement, and partner on initiatives and activities around food retail in order to improve access, availability, and affordability of healthier foods and beverages. The guide is from the Centers for Disease Control and Prevention (CDC) Division of Nutrition, Physical Activity and Obesity (DNPAO). With this guide, public health practitioners can begin work in healthier food retail or enhance work on existing healthier food retail activities with new ideas and practical tools and tips. This *Action Guide* will help practitioners consider the landscape of initiative options and engage in partnerships to support healthier food retail initiatives, assess the food retail environment, and evaluate healthier food retail initiatives.

The primary audience for the guide is state-level public health practitioners, particularly those working in nutrition and obesity prevention. However, the guide is also intended to be useful to practitioners at regional and community levels, with many action items and examples applicable at these levels.

This *Action Guide* is unique in that it is organized around public health roles, particularly at the state level, such as facilitating partnerships, doing assessments, providing technical assistance, or coordinating the work of local public health or communities.

### **Setting the Stage: Definitions**

**Healthier Food Retail.** In this *Action Guide*, we identify strategies to increase access to healthier foods and beverages through the establishment or improvements of retail venues, specifically in full service grocery stores, small stores, farmers markets, and mobile food vending. Our definitions for healthier foods and beverages are based on the *Dietary Guidelines for Americans*, *2010*. For the purpose of this guide, healthier foods include fruits, vegetables, whole grains, fat-free and low-fat dairy products, seafood, and foods with less sodium (salt), saturated fats, trans fats, cholesterol, added sugars, and refined grains. Healthier beverages include fat-free or low-fat milk and milk products, fortified soy beverages and other lactose-free products, 100% juice, and water.

Availability and Accessibility. Availability most often refers to the physical location or proximity of food retail outlets to residential areas, for example if a neighborhood has or is close to a grocery store. Sometimes the term is also used to describe the presence of healthier foods within stores, for example whether or not a small store sells fruits, vegetables, whole-grains, and other healthier items. Accessibility is a broader concept that includes availability as well as the selection, cost (affordability), and quality of foods. Healthier food options may be available, but if the prices of those foods are beyond the

Continued

customers' budgets or if the selection or quality of the foods is inadequate (for example, limited varieties, spoiled produce, or expired dairy products), then the healthier foods are not accessible.

Underserved Areas and Food Deserts. In healthier food retail, communities are often defined as underserved if they do not have access to healthier foods in close proximity to their homes. What constitutes close proximity and access to healthier foods varies. For example, CDC provides a calculation of underserved or low-access that looks at presence of at least one healthier food retailer located within or close to a census tract¹ to highlight areas where few healthy options may exist. The definition of underserved or food desert used by the United State Department of Agriculture (USDA) more specifically focuses on vulnerable populations by looking at whether healthier food retailers are present in census tracts and whether a significant portion of the residents of the census tract are low-income or do not have household vehicle access.²

### Rationale for this Action Guide

Obesity is a complex, multifaceted problem requiring a multipronged approach to achieve long-term reductions in its prevalence. Policy and programmatic approaches to combat obesity often include comprehensive environmental changes that easily enable healthier lifestyle choices. The United States Surgeon General's report, *The Surgeon General's Call to Action to Prevent and Decrease Overweight and Obesity 2001*, recognized obesity as a national public health priority, and shifted the focus of public health efforts from being solely on individual responsibility to include the roles that families and communities, schools, health care, media and communications, and worksites play in addressing obesity and reducing less healthy eating habits and barriers to sedentary lifestyles.<sup>3</sup>

The availability of healthier foods is an environmental factor contributing to a person's diet and risk of related chronic diseases. Full-service grocery stores, farmers markets, and other retailers who sell healthier foods and beverages such as fruits, vegetables, whole grains, and low-fat dairy are not found in every neighborhood. The United States Department of Agriculture estimates that nearly 30 million Americans live in neighborhoods without easy access to affordable nutritious food,<sup>2</sup> and persons living in lower-income communities, communities of color, or rural communities are less likely to have healthier food available to them.<sup>4</sup> What can be found in these neighborhoods, often in great abundance, are convenience stores and fast food restaurants that sell mainly cheap, energy-dense, processed foods and that offer few recommended food options, such as fresh fruits and vegetables, at affordable prices.<sup>4,5</sup>

Without access to healthier foods, a nutritious diet is out of reach. Making affordable, healthier foods more available to underserved residents is one of several strategies that may lead to individuals making healthier choices about what to eat and may be associated with better health outcomes. For example, research has shown that residents with access to full service

grocery stores tend to eat more fruits and vegetables,<sup>4,6-10</sup> although others have not found this relationship.<sup>11</sup> Studies have also found an association between healthier food retail access and lower prevalence of overweight and obesity among their residents.<sup>12-16</sup> Conversely, the prevalence of overweight and obesity is higher in areas where food is mostly available through small stores and fast food outlets.<sup>4,13,17</sup>

Many groups have recommended making changes to places where people shop for food to increase people's ability and motivation to purchase affordable and quality healthier foods. 18-20 CDC's DNPAO provided strategies that can be implemented to increase access to and sales of healthier foods in communities through retail environments in *Strategies to Prevent Obesity and Other Chronic Diseases: The CDC Guide to Strategies to Increase the Consumption of Fruits and Vegetables*. 21 To further promote healthier food consumption, DNPAO developed this document, *Healthier Food Retail: An Action Guide for Public Health Practitioners*, to provide more depth on how to implement strategies for increasing access to healthier food retail. Strategies for underserved populations are also presented in this *Action Guide*, including ways to incorporate federal food assistance programs that allow low-income families to access and afford fruits, vegetables, and other healthier foods at most retail venues.

### How to Use this Action Guide

The *Action Guide* presents a broad range of strategy options that can be implemented to address access of healthier foods and beverages through retail venues. The *Action Guide* is not prescriptive. You may engage in or plan to take action in one, some combination of, or all of the strategies presented. The initiatives that you and your colleagues undertake to establish, facilitate, or promote healthier food retail will depend on your resources, the context of your state or region, and the priorities for your agency or organization.

Examples of programs and policies are presented throughout the text to demonstrate how others are approaching healthier food retail initiatives in their state, region, or community. Many of the examples were conducted by organizations outside of CDC and the federal government and without federal funding; these examples are provided for illustrative purposes. Topic-specific resources are described within chapters to provide you with access to more detailed information and existing tools that may be useful to you as you move forward with your healthier food retail efforts.

### Organization of this Action Guide

The *Action Guide* begins by describing how to support healthier food retail in your state, region, or community through partnership development, assessment, and evaluation. Activities related to partnership building, assessment, and evaluation may be conducted concurrently, and can be both iterative and cyclical.

The Action Guide then provides chapters that describe how to conduct strategies in four retail venues to provide healthier foods and beverages to states and communities: grocery stores, small

stores, farmers markets, and mobile food retail. These four strategy chapters outline information about and action steps for public health practitioners related to:

- Working with partners and leveraging resources.
- ▶ Providing training, technical assistance, and education.
- Addressing other common concerns for healthier food retail in underserved areas.

Lastly, the *Action Guide* describes two cross-cutting strategies, transportation and distribution, that are important to the success of healthier food retail efforts.

### **Chapter Descriptions**

## Chapter 1: Partnerships, Assessment, and Evaluation (Partnerships, Assessment, and Evaluation in Healthier Food Retail Initiatives)

This chapter focuses on partnership development and includes two partnership activities often conducted with partners—assessment and evaluation.

## Chapter 2: Grocery Stores (Encouraging Full Service Grocery Stores to Locate in Underserved Areas and Promote Healthier Foods)

This chapter focuses on strategies that encourage full service grocery stores to locate in underserved areas or that support existing stores in supplying and marketing healthier items.

#### **Chapter 3: Small Stores (Improving Small Stores in Underserved Areas)**

This chapter focuses on improving small stores in underserved areas to increase the accessibility and promotion of healthier foods.

#### **Chapter 4: Farmers Markets (Encouraging Farmers Markets in Underserved Areas)**

This chapter focuses on developing new farmers markets and supporting existing markets, with emphasis on providing nutrition assistance program benefits at the markets.

## Chapter 5: Mobile Food Retail (Encouraging Healthier Mobile Food Retailers to Operate in Underserved Areas)

This chapter focuses on developing initiatives to encourage healthier mobile food retailers to operate in underserved areas.

## Chapter 6: Transportation (Improving Transportation Systems for Healthier Food Retail)

This chapter focuses on developing safe and viable transportation options for people to travel to healthier food retail venues.

#### **Chapter 7: Distribution (Improving Distribution Systems for Healthier Food Retail)**

This chapter discusses options for sourcing and distributing healthier foods for retail venues, including local or regional foods.