

Current Practices in Healthy Food Retail: Small Stores



National Center for Chronic Disease Prevention and Health Promotion
Division of Nutrition, Physical Activity, & Obesity



Overview

The Centers for Disease Control and Prevention (CDC) supports efforts nationwide to reduce the risk factors associated with childhood and adult obesity, diabetes, heart disease, and stroke through its State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health (State Public Health Actions) program. Through a federal grant, all 50 states and the District of Columbia receive funds to help prevent these chronic diseases.

This program focuses on healthy environments in workplaces, schools, early childhood education facilities, and the community. It also focuses on working through health systems and communities to reduce complications from multiple chronic diseases, such as diabetes, heart disease, and stroke. The goal is to make healthy living easier for all Americans.

Grantees of the State Public Health Actions program serve on the front lines of public health prevention efforts, exploring and testing new and innovative approaches that can provide critical insight and lessons learned to others. The goal of this document is to summarize and share information on current approaches to help other grantees working in the same areas. This document highlights efforts by five state health departments to create healthier community environments by increasing access to and the supply of healthy foods in small stores.

Current Practices in Healthy Food Retail: Small Stores

Poor rural and urban areas often lack access to supermarkets,¹⁻³ and residents of these areas often must rely primarily on small stores for their food purchases. Small stores can include corner stores, convenience stores, tiendas, bodegas, drug stores or pharmacies, general stores, dollar stores, small markets, small groceries, and gas stations. Small stores often stock items that have long shelf lives and are in high demand, such as prepackaged processed foods, sodas, snacks, and alcohol. They are less likely to carry healthy foods, such as fruits and vegetables, whole grain foods, and low-fat dairy products.⁴

The practices highlighted in this document demonstrate ways to increase the availability of healthy foods and beverages by using public health strategies that focus on small stores. Increasing the availability of healthy foods and beverages in small stores may be more cost effective than the development of new stores or supermarkets.⁵⁻⁸

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Massachusetts Healthy Retail Task Force

The Massachusetts Department of Public Health (MDPH) is expanding its work with corner stores by bringing together representatives from multiple MDPH bureaus and programs that have complementary interests in healthy retail. The Healthy Retail Task Force includes health department staff from the Tobacco Cessation & Prevention Program, Substance Abuse Services, and the Obesity Prevention and Wellness initiative Mass in Motion (MiM). With guidance and support from MDPH and the task force, local health departments work with owners of corner stores in their communities to create healthier retail outlets.

To promote healthy retail, the Healthy Retail Task Force developed a designation program for local corner store owners. The program uses a tiered system that includes a checklist of recommendations that incorporate best retail practices for tobacco, alcohol, recreational drug paraphernalia, and healthy foods. The designation program also includes a healthy retail food environment resource guide and tool kit developed by MiM. The guide includes examples of store assessments, procurement practices, and placement for tobacco, alcohol, and other substances. The new materials will be piloted in a few communities throughout the state.

Lessons Learned

MDPH staff identified several lessons learned that public health practitioners may consider when they seek to put similar initiatives into place:

- ◆ **Organizational structures can promote collaboration.** The Tobacco Cessation & Prevention Program and Substance Abuse Services were located within the same MDPH bureau prior to a restructure that moved tobacco to the same bureau and division as MiM. The previous relationship between tobacco and substance abuse was the bridge that pulled all three programs together. This structure helps promote frequent communication, meetings, and sharing of materials and ideas.
- ◆ **Support from each task force member's division leadership is essential.** Task force members worked together to develop the criteria that became the healthy retail guidelines. Members were assigned to the task force by their division leadership, which continues to support their efforts as they move toward putting the healthy retail program into place in local communities.
- ◆ **Include a variety of staff on project development.** Epidemiologists and evaluators were instrumental in providing data expertise and helping to think through the process of how to set up the designation program. They are also helping develop an evaluation plan for the task force's efforts as well as the communities' efforts in implementing the program.

Role of the State Health Department

Developer of Healthy Retail Guidance:

With guidance and technical assistance (TA) from MDPH, the Healthy Retail Task Force developed a checklist of healthy retail guidelines that can be used on a local level.

Technical Assistance Provider:

MDPH provides education and TA to local health departments or other local programs that will be leading the work to put healthy retail strategies into place in their communities.

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Missouri Stock Healthy, Shop Healthy

Stock Healthy, Shop Healthy is a comprehensive, community program that allows communities to improve access to healthy, affordable foods by working with a small food retailer. The Missouri Department of Health and Senior Services (MDHSS) operates this program through a contract with the University of Missouri (MU) Extension. The program has two primary components: (1) *Stock Healthy* works with small store owners to improve the quality and variety of healthy and affordable foods they stock and (2) *Shop Healthy* provides educational efforts in the community.

Since the fall of 2014, six local public health agencies in Missouri have worked with nine retail stores (five urban and four rural) as part of this program. In each community, staff from MU Extension and MDHSS provide a full-day of training to local public health agency staff and their community partners (e.g., neighborhood associations, school districts). The first part of the training focuses on building awareness and increasing the demand for healthy foods and beverages through activities such as nutrition education classes.

The second part of the training teaches local public health agencies and their partners how to approach small food retailers, recruit them into the program, and help them make small improvements to their stores. The agencies and their partners use the *Stock Healthy, Shop Healthy* community and retail tool kits to put the program components into place. MU Extension provides additional TA through monthly telephone calls.

Initial results from evaluation activities have demonstrated an increase in the amount of space devoted to healthy foods and beverages at eight of the nine stores.

Lessons Learned

Stock Healthy, Shop Healthy program staff identified several lessons learned that public health practitioners may consider when they seek to put similar initiatives into place:

- ◆ **Community partners and community outreach improve the ability of local public health agencies to reach food retailers.** By actively engaging with various community groups, local health agency staff are able to build rapport and credibility with the community, which in turn makes it easier to recruit store owners and maintain their interest in the program.
- ◆ **Developing training material is time consuming.** Developing the program materials required a substantial amount of time, effort, and funding. However, investing in high quality materials and resources was necessary to help make the program a success.
- ◆ **MU Extension staff expertise helps make the program successful.** MU Extension staff provide high-quality training and TA to local public health agencies and their partners, which ultimately helps them recruit more stores into the program.

Role of the State Health Department

Funder: MDHSS partners with and funds the MU Extension to develop trainings and resources and to provide TA for the state's *Stock Healthy, Shop Healthy* program.

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New Jersey Healthy Corner Stores

Two programs in the New Jersey Department of Health (NJDOH)—the Community Health and Wellness Unit (CHW) and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)—partnered with The Food Trust to increase access to healthier foods in WIC-authorized small retail vendors (e.g., corner stores, bodegas). The Food Trust is a national nonprofit organization that works to ensure access to affordable, nutritious food through strategies such as working with corner store owners to increase healthy offerings. In June 2014, WIC instituted a new nationwide policy requiring all WIC-authorized stores to stock a minimum of two fresh fruits and two fresh vegetables.

In the first year of NJDOH's efforts under CDC's State Public Health Actions program, CHW and WIC provided training to the state's more than 900 WIC vendors to introduce the new policy. In the second year, 20 small retail vendors located in areas defined by the US Department of Agriculture as food deserts were recruited to take part in an intensive TA program.

This program includes onsite visits from coordinators from The Food Trust, who provide TA training on how to select and price healthy products, buy and handle fresh produce, and use in-store marketing strategies to promote healthy products to the community.

CHW is in the process of formally evaluating the program. This evaluation will look at the larger landscape of healthy food access for people living in underserved communities, as well as how The Food Trust's TA efforts have affected the use of WIC cash value vouchers in these communities.

Lessons Learned

Program staff identified two lessons learned that public health practitioners may consider when they seek to put similar initiatives into place:

- ◆ **Community education and engagement are important.** Store owners told The Food Trust and NJDOH that they need innovative strategies to increase community demand for the healthy foods they stock. Future training efforts will incorporate new techniques to encourage consumption of healthy foods, such as in-store nutrition education and cooking and recipe demonstrations.
- ◆ **Limited infrastructure in corner stores can make it challenging to stock fresh, healthy foods and beverages.** The Food Trust's training gives store owners resources to help them increase their profits and reduce spoilage while keeping healthy foods affordable and accessible. Participating stores are also encouraged to apply for minigrants from other funders for infrastructure improvements.

Role of State Health Department

Collaborator: Two NJDOH programs worked with The Food Trust to enhance food access across the state.

Funder: CHW funds The Food Trust to provide expert training, TA, and resources through an intensive TA program.

Evaluator: CHW evaluates the TA program through inventory tracking, stakeholder surveys, and analysis of the use of WIC cash value vouchers.

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Pennsylvania Healthy Corner Stores Initiative

The Division of Nutrition and Physical Activity in the Pennsylvania Department of Health’s (PA DOH’s) Bureau of Health Promotion and Risk Reduction developed an approach to scale the Philadelphia Healthy Corner Store model and partnered with The Food Trust to implement the Pennsylvania Healthy Corner Store (HCSI) initiative. HCSI provides support and training to corner store owners to sell healthy products. The Food Trust works to ensure access to affordable, nutritious food through strategies such as working with corner store owners to increase healthy offerings.

The Division of Nutrition and Physical Activity operates HCSI through regional contractors that are part of a statewide network set up by the state’s Tobacco Prevention and Control Program. These contractors participate in train-the-trainer activities delivered by The Food Trust and use a variety of strategies in their assigned communities (see Table for details).

Role of the State Health Department

Funder: PA DOH funds regional contractors and The Food Trust.

Technical Assistance Provider: PA DOH and The Food Trust provide ongoing TA to regional contractors through monthly telephone calls, during which contractors can share information and lessons learned.

Pennsylvania Healthy Corner Stores Initiative

Phase	Description
Phase 1: Recruitment	Regional contractors assess and recruit stores in their communities, focusing on stores close to schools, community centers, and other community gathering places. Store owners must introduce at least four new healthy products. Store owners then receive a \$100 incentive for successfully stocking four new healthy products.
Phase 2: Inventory Changes and Healthy Food Identification	Store owners display materials from the Healthy Food Identification marketing campaign. Regional contractors assess the stores’ progress during this phase, using a data dictionary to ensure consistency. Store owners and the regional contractors assess the nutritional content of store offerings during this phase.
Phase 3: Business Training for Owners-Sell Healthy Guide	Every 3 months, store owners can select one training from The Food Trust publication <i>Why Sell Healthy Food? Stocking More Healthy Foods Could Mean Better Business for You</i> . These trainings are delivered by the regional contractors and teach store owners strategies like how to display healthier items, better market healthy items, or improve their business management skills.
Phase 4: Conversions and Enhanced Programming	Once store owners complete Phases 1-3, the regional contractors give them a variety of materials (e.g., shelf talkers, window decals, extra shelving) that can be used to stock and display healthy products and may qualify for mini-grants to make minor infrastructure changes to their stores that improve display and storage of new healthy inventory. Store owners receive these mini-grants and sign a memorandum of understanding with PA DOH that outlines their ongoing commitment to stock healthy foods and beverages. During this phase, store owners also receive in-store nutrition education and are connected with local growers who can stock their stores with healthier food items.
Phase 5: Healthy Certification	During this phase, store owners can become certified as part of the state’s Healthy Corner Store Network and become a “Champion Store” that other stores might want to use as a model. Regional contractors also help stores modify their tobacco retail environment.

After store owners successfully complete all phases of the HCSI, the regional contractors reassess them to ensure continual stocking of healthy inventory. Participating stores are connected with local community organizations to increase community involvement around healthy lifestyle changes. Community media events are held to engage residents and increase awareness of participating stores and the availability of healthy options.

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Lessons Learned

PA DOH staff identified several lessons learned that public health practitioners may consider when they seek to put similar initiatives into place:

- ◆ ***Regional contractors know the community and are well-established in their regions.*** Because Pennsylvania is a diverse state, the characteristics of different regions and communities vary. The regional contractors' knowledge of and connection to their local communities makes for productive relationships with store owners.
- ◆ ***Staff overseeing the initiative should participate in trainings and implementation.*** Because PA DOH staff went through the same training as the regional contractors, they felt more informed and engaged. They were also able to help contractors troubleshoot issues they experienced in the field.
- ◆ ***Consistent data collection is key to expanding the initiative statewide.*** PA DOH developed a data dictionary to help regional contractors assess the stores in their regions. This resource helped to ensure a higher level of reliability for tracking regional activities and store inventories. Consistent data collection and reporting is key if state officials want to expand an initiative like this one across the state.



Wisconsin CHANGE Coalitions

The Wisconsin Department of Health Services (DHS) supports local obesity prevention coalitions across the state to use policy, system, and environmental interventions at the local level. This local focus helps the coalitions tailor their efforts to the retail food environments, needs, and resources in their communities.

DHS began the process by using the Community Health Assessment and Group Evaluation (CHANGE) assessment tool to conduct a comprehensive needs assessment. Since then, the local coalitions have been called CHANGE coalitions. The coalitions used the findings from the needs assessment to develop interventions designed to foster healthy food retail in Wisconsin. To support these efforts, DHS compiled a list of resources developed for corner store initiatives across the country and provided TA to the CHANGE coalitions as needed.

DHS staff have also helped establish statewide partnerships as a way to promote collaboration between the public health community and the food industry. These partners came together for the first time in January 2015 and again in July 2015. These partnerships are made possible in part because of DHS's long-standing relationships with food retail organizations like the Wisconsin Grocers Association. The department has also reached out to new partners, such as Kwik Trip™ (a regional convenience store chain) and the Wisconsin Petroleum Marketers and Convenience Store Association.

Lessons Learned

DHS staff identified several lessons learned that public health practitioners may consider when they seek to put similar initiatives into place:

- ◆ ***There is no need to reinvent the wheel.*** Many great resources have been developed by other organizations that can be used to support healthy food retail efforts in corner stores. Seeking out, vetting, and compiling these resources can be very helpful.
- ◆ ***Connect with the right people.*** To help make changes statewide, DHS staff involve representatives from food industry organizations who are empowered to make decisions that support healthy food retail.
- ◆ ***Partnerships take time and effort. Consistent engagement can be a challenge, particularly with new partnerships.*** New relationships require that state health department staff take the time to reach out to and communicate with the right people in the right organizations and positions.

Role of the State Health Department

Funder: DHS provides grant funding to local obesity prevention coalitions.

Technical Assistance Provider: DHS provides a list of resources and TA as needed to local obesity prevention coalitions.

Convener: DHS helps to bring together public health and food industry organizations to support state efforts that promote healthy food retail environments.

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Resources and References

Resources for More Information

CDC publication: [CHANGE Tool and Action Guide](#)

CDC publication: [Healthier Food Retail: An Action Guide for Public Health Practitioners](#)

CDC publication: [Healthier Food Retail: Beginning the Assessment Process in Your State or Community](#)

California Department of Public Health website: [Retail Program - Policy, Systems, and Environmental Change \(PSE\) Resources](#)

University of Missouri Extension website: [Stock Healthy, Shop Healthy](#)

The Food Trust website: [Healthy Corner Store Initiative](#)

The Food Trust publication: [Why Sell Healthy Food? Stocking More Healthy Foods Could Mean Better Business for You](#)



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