Healthier Food Retail: An Action Guide for Public Health Practitioners

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

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

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acknowledgements</td>
<td>iii</td>
</tr>
<tr>
<td>Introduction</td>
<td>1</td>
</tr>
<tr>
<td>Purpose and Intended Audience of this Action Guide</td>
<td>2</td>
</tr>
<tr>
<td>Rationale for this Action Guide</td>
<td>3</td>
</tr>
<tr>
<td>How to Use this Action Guide</td>
<td>4</td>
</tr>
<tr>
<td>Organization of this Action Guide</td>
<td>4</td>
</tr>
<tr>
<td>Chapter 1: Partnerships, Assessment, and Evaluation (Partnerships, Assessment, and Evaluation in Healthier Food Retail)</td>
<td>7</td>
</tr>
<tr>
<td>Introduction</td>
<td>8</td>
</tr>
<tr>
<td>Developing Partnerships</td>
<td>8</td>
</tr>
<tr>
<td>Discover Who's Doing What in Healthier Food Retail</td>
<td>8</td>
</tr>
<tr>
<td>Initiate Discussions with Partners</td>
<td>14</td>
</tr>
<tr>
<td>Maintaining Momentum in Your Partnerships</td>
<td>15</td>
</tr>
<tr>
<td>Assessing the Healthier Food Retail Environment</td>
<td>16</td>
</tr>
<tr>
<td>Focus the Assessment</td>
<td>17</td>
</tr>
<tr>
<td>Plan the Assessment</td>
<td>17</td>
</tr>
<tr>
<td>Implement the Assessment</td>
<td>17</td>
</tr>
<tr>
<td>Synthesize and Report Assessment Findings</td>
<td>19</td>
</tr>
<tr>
<td>Evaluation</td>
<td>19</td>
</tr>
<tr>
<td>Planning Your Evaluation</td>
<td>19</td>
</tr>
<tr>
<td>Stakeholders and Partners in Evaluation</td>
<td>20</td>
</tr>
<tr>
<td>Evaluation of Healthier Food Retail Strategies</td>
<td>21</td>
</tr>
<tr>
<td>Partnership, Assessment, and Evaluation Resources</td>
<td>26</td>
</tr>
<tr>
<td>Chapter 2: Grocery Stores (Encouraging Full Service Grocery Stores to Locate in Underserved Areas and Promote Healthier Foods)</td>
<td>31</td>
</tr>
<tr>
<td>General Strategy Overview</td>
<td>32</td>
</tr>
<tr>
<td>Working with Partners and Leveraging Resources</td>
<td>34</td>
</tr>
<tr>
<td>Providing Training, Technical Assistance, and Education</td>
<td>36</td>
</tr>
<tr>
<td>Addressing Other Common Concerns for Grocery Store Development</td>
<td>39</td>
</tr>
<tr>
<td>Zoning and Site Development</td>
<td>39</td>
</tr>
<tr>
<td>Perceptions about Neighborhood Retail Markets</td>
<td>39</td>
</tr>
<tr>
<td>Grocery Store Resources</td>
<td>44</td>
</tr>
<tr>
<td>Chapter 3: Small Stores (Improving Small Stores in Underserved Areas)</td>
<td>47</td>
</tr>
<tr>
<td>General Strategy Overview</td>
<td>48</td>
</tr>
<tr>
<td>Physical Improvements for Access to Healthier Foods</td>
<td>49</td>
</tr>
<tr>
<td>Promotion and Marketing of Healthier Foods</td>
<td>49</td>
</tr>
<tr>
<td>Accepting Nutrition Assistance Program Benefits in Small Stores</td>
<td>49</td>
</tr>
<tr>
<td>Working with Partners and Leveraging Resources</td>
<td>50</td>
</tr>
<tr>
<td>Providing Training, Technical Assistance, and Education</td>
<td>53</td>
</tr>
<tr>
<td>Training and Technical Assistance to Store Owners</td>
<td>53</td>
</tr>
<tr>
<td>In-Store and Community Marketing and Education</td>
<td>55</td>
</tr>
<tr>
<td>Addressing Other Common Concerns for Small Stores</td>
<td>58</td>
</tr>
<tr>
<td>Small Stores Resources</td>
<td>63</td>
</tr>
</tbody>
</table>
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) ......................................................... 87
General Strategy Overview ........................................................................................................................................................................ 88
Working with Partners and Leveraging Resources ....................................................................................................................................... 89
Providing Training, Technical Assistance, and Education ......................................................................................................................... 91
Addressing Other Common Concerns in Healthier Mobile Food Retail ................................................................................................................ 95
Zoning and Regulatory Processes ................................................................................................................................................................... 95
Perceptions .............................................................................................................................................................................................................. 95
Healthier Mobile Food Retail Resources ................................................................................................................................................ 98

Chapter 6: Transportation (Improving Transportation Systems for Healthier Food Retail) ................................................................................................................................. 99
General Strategy Overview ........................................................................................................................................................................ 100
Working with Partners .................................................................................................................................................................................. 101
Activities to Improve Transportation Systems .................................................................................................................................................. 103
Promoting Walking and Biking Accessibility ...................................................................................................................................................... 103
Enhancing Traditional Public Transit Services ............................................................................................................................................... 106
Offering Shuttle Services .............................................................................................................................................................................. 109
Supporting Car Sharing and Carpooling .......................................................................................................................................................... 111
Transportation Resources ........................................................................................................................................................................ 112

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 for Healthier Food Retail Strategies ................................................................................................................................. 141
Tables and Figures

Table 1. Federal and State Plans and Programs of Relevance to Healthier Food Retail Initiatives................................. 11
Figure 1. Steps in the CDC Framework for Program Evaluation in Public Health........................................................... 20
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
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 tract 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. 

---

**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.

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, and persons living in lower-income communities, communities of color, or rural communities are less likely to have healthier food available to them. 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.  

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
Introduction

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

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.\textsuperscript{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 \textit{Strategies to Prevent Obesity and Other Chronic Diseases: The CDC Guide to Strategies to Increase the Consumption of Fruits and Vegetables}.\textsuperscript{21} To further promote healthier food consumption, DNPAO developed this document, \textit{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 \textit{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 \textit{Action Guide}

The \textit{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 \textit{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 \textit{Action Guide}

The \textit{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 \textit{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.
Introduction

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

Building partnerships across multiple sectors is a key component to increasing access to healthier food retail options in your state or region. Partnerships can help you creatively plan and implement your healthier food retail strategy, maximize resources, and improve program sustainability.

The process of partnership development, planning, assessment, and evaluation can be both iterative and cyclical. You may revisit any of these activities throughout your healthier food retail work.

Developing Partnerships

As a public health practitioner, you are familiar with working on issues that involve multiple sectors. Through your existing relationships, you are well positioned to convene stakeholders at local, state, and regional levels to increase healthier food retail options. However, new partners and stakeholders may be needed to successfully initiate and implement efforts in your state.

Discover Who’s Doing What in Healthier Food Retail

A first step is to consider who to partner with for healthier food retail initiatives. You have the opportunity to foster collaborative leadership among a diverse group of partners to address gaps in healthier food retail. These partnerships will allow organizations and sectors to share resources, skills, and experiences, and can help balance the strengths and limitations of individual organizations or sectors. The call out box Partnerships for Healthier Food Retail: Who to Involve describes a variety of partners often participating in healthier food retail initiatives.

Partnerships and Stakeholders: Use of Terms in this Action Guide

In this Action Guide, partnerships are associations you form with individuals or organizations to share resources and coordinate activities to address projects of common interest. Stakeholders are individuals or organizations that have an interest in the outcome of your healthier food retail efforts. Stakeholders may actively assist in your activities, or they may choose a more observational role.
Partnerships for Healthier Food Retail: Who to Involve

There is a wide range of private and public sector partners who can potentially contribute to your state healthier food retail efforts. Partners can have varying roles, such as offering technical assistance, providing funding, connecting to a community, or serving as consultants with subject matter expertise. Consider connecting with potential partner organizations and coordinators or managers within the following sectors.

**State, Tribal, Regional, and Local Agencies and Departments**

**Public Health Partners**
- Departments of Public Health and coordinators or managers for related programs, such as nutrition assistance benefit programs
- State Departments of Environmental Health
- State Offices on Rural Health
- Tribal health agencies and tribal human services agencies

**Education Partners**
- State Departments of Education
- Child nutrition program coordinator
- Farm-to-school coordinator
- Supplemental Nutrition Assistance Program-Education (SNAP-Ed)

**Agricultural Partners**
- State Departments of Agriculture, and coordinators or managers for related programs, such as nutrition assistance benefit programs
- Cooperative Extension offices
- Fresh fruit and vegetable inspection and standardization agencies
- Sustainable Agricultural Research and Education programs

**Urban, City, and Town Planners**
- State and local planning and development departments
- Transportation planners
- New urbanism advocates
- Regional Development Commissions

**Private Sector Organizations and Individuals**

**Retail Representatives**
- Chain supermarkets
- Independent grocery stores
- Specialty stores
- Convenience stores
- Corner grocers and small stores
- Bodegas
- Farmers market managers
- Public markets
- Cooperative grocery stores
- Mobile stores
- Community supported agriculture producers

**Food Industry Associations**
- Grocers associations
- Distributor associations
- Farmers market and other local food marketing associations
- Chambers of Commerce

Continued
Health Care
Hospital and Health System Partners
- Hospitals and health management organizations
- Clinics and health centers

Non-profit/Non-Government Organizational Sector
Community Development Associations or Community Organizations
- Community Development Corporations
- Economic Development Corporations
- Community food banks
- Civic or neighborhood associations
- Faith-based organizations

Academic and University Partners
- Departments of Public Health
- Departments of Agriculture
- Offices of Sustainability
- Departments of Urban and Rural Planning

Not-for-Profit Organizations
- Children’s health organizations
- Health and wellness organizations
- Food policy/research organizations
- Community, regional, or state foundations
- Health insurance foundations

Before engaging with potential partners, you may want to answer some preliminary questions to assist you in identifying key partners for promoting and supporting healthier food retail activities. These questions include:

- Who are key leaders across different sectors, including health, food insecurity, economic development, planning, community building, and retail development?
- Are there other partners who may be interested in working on healthier food retail?
- How can you involve communities with the greatest burden of chronic diseases?
- What healthier food retail initiatives and activities are underway already?
- Are specific neighborhoods, localities, or regions being targeted for redevelopment activities that may support healthier food retail initiatives?
- Are there current and related initiatives that you and your partners may want to track in order to monitor their impact on your healthier food retail activities?
- What potential opportunities exist for stakeholder input on local, state, and regional healthier food retail efforts?

Knowing what other healthier food retail initiatives are happening at the state and local levels, such as those in Table 1, Federal and State Plans and Programs of Relevance to Healthier Food Retail Initiatives, can direct you to possible partnerships. Existing initiatives may not be focused on public health but may have goals or activities that overlap with your program interests. Identifying these can help you and your partners avoid duplicating efforts, inform you of resources that can be potentially leveraged, and identify potential collaborators. Additionally, local strategies may present opportunities to replicate a promising model or program throughout the state.
### Table 1. Federal and State Plans and Programs of Relevance to Healthier Food Retail Initiatives

<table>
<thead>
<tr>
<th>Plan or Program</th>
<th>Description/Overlap</th>
<th>Potential Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>State Obesity Plan</strong></td>
<td>Your state may have a plan to address nutrition, physical activity, and obesity prevention either as part of a CDC-funded initiative or through a state-funded or other mandated initiative.</td>
<td>State plans are available on many of the State Department of Health or Human Services websites</td>
</tr>
<tr>
<td><strong>State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health</strong></td>
<td>Through a CDC federal grant, all 50 states and the District of Columbia receive funds to help reduce the risk factors associated with childhood and adult obesity, diabetes, heart disease, and stroke. Thirty-two states receive additional funds to enhance their program and to reach more people, including addressing healthy food access. All states work in schools, early childhood education facilities, workplace, and community settings. The states also work through health systems and communities to reduce complications from multiple chronic diseases. The five-year program began in 2013.</td>
<td>State Programs Funded by CDC: <a href="http://www.cdc.gov/chronicdisease/about/state-public-health-actions.htm">http://www.cdc.gov/chronicdisease/about/state-public-health-actions.htm</a></td>
</tr>
<tr>
<td><strong>State Economic Development Plan</strong></td>
<td>A state’s economic development plan will primarily focus on the state’s role in encouraging job growth and opportunities, meeting the state’s housing and transportation needs, and stimulating the state’s economy. States often consider access to transportation for retail and other services.</td>
<td>Governor’s Office State Department of Economic Development or Planning and Budget</td>
</tr>
<tr>
<td><strong>State Revitalization Plan</strong></td>
<td>While similar in scope to the Economic Development Plan, a Revitalization Plan looks specifically at blighted areas. Many of these plans are local or regional, but some address revitalization on a state level.</td>
<td>Governor’s Office State Department of Economic Development or Planning and Budget</td>
</tr>
<tr>
<td><strong>Brownfields or Land Reuse Programs</strong></td>
<td>These programs help states, communities, and other stakeholders to work together to prevent, cleanup, and reuse brownfields or formally used industrial or commercial properties that have perceived or real contamination. Brownfield sites are funded by the Environmental Protection Agency (EPA) Brownfields Program and land reuse sites have not received funding from the EPA Brownfields Program. Agency for Toxic Substances and Disease Registry’s (ATSDR) Brownfield/Land Reuse Health Initiative helps communities bring health considerations in land reuse decisions.</td>
<td>EPA Brownfield Program <a href="http://www.epa.gov/brownfields/">http://www.epa.gov/brownfields/</a> ATSDR’s Brownfield/Land Reuse Health Initiative <a href="http://www.atsdr.cdc.gov/sites/brownfields/overview.html">http://www.atsdr.cdc.gov/sites/brownfields/overview.html</a></td>
</tr>
<tr>
<td><strong>Agriculture Growth and Conservation Plans</strong></td>
<td>Many states develop an agricultural growth or conservation plan. These plans are typically created in the State Agricultural Office or Natural Resources Office, and may contain information relevant to accessibility of healthier food grown by local farmers.</td>
<td>State Department of Agriculture or Natural Resources</td>
</tr>
</tbody>
</table>

Continued
### Plan or Program

<table>
<thead>
<tr>
<th>Plan or Program</th>
<th>Description/Overlap</th>
<th>Potential Sources</th>
</tr>
</thead>
</table>
| **Transportation Plans**                     | State Departments of Transportation or local and regional planning committees develop comprehensive transportation plans that may also address the relationship of transportation to land use, economic development, the environment, and energy consumption. Regional and state efforts may also address transportation coordination of federal, state, regional, and local plans. Transit routes and walking or bike paths are other plans that might provide an idea of accessibility, especially for those with limited car ownership. | State Department of Transportation  
Local or Regional Transportation Committees  
Federal Highway Administration field offices: [http://www.fhwa.dot.gov/about/field.cfm](http://www.fhwa.dot.gov/about/field.cfm) |
| **Neighborhood Stabilization Program**       | The U.S. Department of Housing and Urban Development (HUD) operates the Neighborhood Stabilization Program (NSP) as part of the Community Development Block Grant (CDBG) program. NSP exists to stabilize communities that have suffered from foreclosures and property abandonment through the purchase and redevelopment of foreclosed and abandoned homes and residential properties. NSP grantees develop individualized programs and funding priorities. Activities funded by NSP must benefit low- and moderate-income persons. | Neighborhood Stabilization Program Learning Center: [http://hudnshelp.info/index.cfm](http://hudnshelp.info/index.cfm)  
| **Regional or Municipal Economic Development and Revitalization Plans** | Some municipalities and/or regions of a state may have more specific regional economic development or revitalization plans. These plans may have strategies that are targeted toward specific needs in those regions. | Local or Regional Chambers of Commerce  
Local or Regional Commissions or Planning Bodies  
Chamber Directory Search Page: [https://www.uschamber.com/chamber/directory](https://www.uschamber.com/chamber/directory)  
Potential Funding Sources for Healthier Food Retail Strategies

Funding for healthier food retail efforts can come from a variety of sources. Several resources exist that guide you to funding sources specifically for healthier food retail strategies.

- **Healthy Food Access Portal** from PolicyLink, The Food Trust, and The Reinvestment Fund is a comprehensive Web site on healthier food retail strategies. The Funding section provides a searchable database of available funding. Available at [http://healthyfoodaccess.org/funding](http://healthyfoodaccess.org/funding).

- **Green for Greens: Finding Public Financing for Healthy Food Retail**, from ChangeLab Solutions, provides information on approaching the economic development sector for healthier food retail funding and lists possible funding sources. Available at [http://changelabsolutions.org/publications/green-for-greens](http://changelabsolutions.org/publications/green-for-greens).


Foundations are often sources of funding for healthier food retail efforts at a national, state, or local level. Two examples of national, private foundations with an interest in healthier food retail initiatives are:


- Kaiser Permanente Community. This organization provides most of its funding, including support of healthier food retail efforts, through regional offices. You can learn more about their programming at [http://share.kaiserpermanente.org/total-health/community-benefit/](http://share.kaiserpermanente.org/total-health/community-benefit/).

There may be other organizations that can help you find private sources of funding at the national, state, and local level. One example is the Foundation Center which provides an online foundation directory available at [www.foundationcenter.org](http://www.foundationcenter.org).
Initiate Discussions with Partners

After identifying partners in your state or region, consider ways in which you can encourage them to become involved in your healthier food retail initiatives. Stakeholders may want to get involved in your healthier food retail efforts for a variety of reasons, many of which are not directly related to achieving public health outcomes. They may support your healthier food retail initiatives because of their interests in any of the topics below.

**Nutrition Assistance**: Increasing healthier food purchase and consumption via food benefit programs such as the Special Supplemental Nutrition Assistance Program for Women, Infants, and Children (WIC) and the Supplemental Nutrition Assistance Program (SNAP).

**Agriculture**: Supporting the distribution, marketing, and sales of produce and other products from regional and local farmers.

**Community Development and Neighborhood Revitalization**: Transforming distressed areas into thriving, productive spaces where people want to live, work, and play.

**Community Assistance or Support**: Collaborating to provide synergistic efforts in serving and supporting the health of community residents.

**State or Regional Economic Development**: Developing a healthy economy via business attraction and workforce development.

**Commercial Opportunities**: Maximizing retail potential in untapped or underutilized markets.

**Land Use and Urban Planning**: Creating community, economic, environmental, and transportation initiatives that take into consideration structural requirements for increasing availability of and access to healthier food retail.

**Safety and Crime Prevention**: Improving safety of neighborhoods and perceptions of neighborhood safety.

When initiating discussion with new partners, keep in mind that:

- Finding and creating common ground will generally be more fruitful than trying to enlist others for your own goals or agenda.
- Supporting the work of other individuals and organizations may be more productive than executing a parallel or competitive process, especially if you are all working with limited resources.
- Identifying and developing compelling messages for potential partners is a critical element in recruiting partners. In order to interest non-traditional partners, articulate the reasons why healthier food retail is important to them.
Steps for Engaging New Partners

- Find out if a potential partnering organization has public meetings that you can attend to hear their issues, priorities, and concerns.
- Review the organization’s existing materials.
- Make contact with the appropriate person within the organization through a phone call or introductory e-mail.
- For initial meetings or discussions:
  - Be brief; schedules are tight.
  - Acknowledge the partners’ current contributions to healthier food retail and listen to what they say about their interests, objectives, and perceived limitations to identify your common ground and potential complementary roles.
  - Focus on how working together could be mutually beneficial and within available resources.
  - Be precise with what you are requesting from partners, and include a “hook” in the discussion (such as what the partner will gain from the relationship).
- Be persistent. Although you may provide a lot of information in meetings or discussions, it may take two, three, or more meetings for your messages to resonate with your audience.
- Develop relationships with individuals first, and then bring all partners to the table together. This can be particularly helpful if there have been or could be conflicts between organizations or individuals.
- When bringing diverse partners together for the first time, consider hosting a forum, presentation, or panel discussion. These could include sharing of assessment findings or hosting a speaker with broad appeal. Consider bringing community stakeholders, such as a retail vendor or a customer, to tell personal stories about why healthier food retail is important to them.

Maintaining Momentum in Your Partnerships

As the partnerships develop and initiatives get under way, you can help maintain momentum by supporting the partnerships through training, technical assistance, and communication activities. For example, consider the following actions:

- Convene regular (perhaps monthly) conference calls or meetings so that partners can provide updates, share successes, and brainstorm about ways to address challenges.
- Host networking and training opportunities where partners have access to one another as well as local, state, or national experts on healthier food retail.
- Host public round-table discussions where partners are able to solicit feedback from community stakeholders across the state.
- Offer or coordinate targeted technical assistance to partners working on specific activities or topics through regular calls and meetings, site visits, or a connection to a regional or national technical assistance provider.
Develop resource and training materials, such as fact sheets or tools that partners can use in implementing or promoting their activities.

Develop and maintain communications with partners using methods such as websites, blogs, newsletters, or social media, and ask partners to contribute. Communications can include updates on healthier food retail activities in the state and nation, partner activities, funding opportunities and upcoming webinars and conferences.

Encourage partners to present or lead sessions at regional or state events.

Recognize partners for their contributions.

---

**Bringing Stakeholders Together through Food Policy Councils**

Food policy councils bring together diverse stakeholders representing public, private, and nonprofit sectors with knowledge in nutrition, health, agriculture, education, community design, and commerce. The goal of most food policy councils is to identify innovative ways to improve local, regional, or state food systems. Improving food systems can spark economic development within the area, increase the environmental sustainability of food systems, or increase access to and availability of healthy and affordable foods.  

Many food policy councils provide support and advice in the development of policies and programs to improve local food systems, which often includes leadership and support for improving access to healthier food retail options as part of a greater systems approach. Food policy councils can be commissioned by state, tribal, or local governments, developed at the community level, or created through some combination of these approaches.

Reference names vary from state to state and city to city. You may see alternate terms for food policy councils such as: food systems council, food security council, food and agriculture council, food commission, food coalition, and food advisory group.

For more information on food policy councils, see the Resources at the end of this chapter.

---

**Assessing the Healthier Food Retail Environment**

Assessing the food retail environment is necessary to understand the extent and nature of any disparities in the accessibility and availability of affordable and nutritious food. Assessments can include the number of stores in a given location, the types of food items sold in stores, or the types of marketing approaches that stores employ. Whether you are analyzing existing data or collecting new data, assessments generally require extensive resources or specialized skills. Therefore, it is important to work with partners to conduct your healthier food retail assessments.

When collecting data, make sure you follow local and federal policies related to data collection, including those related to privacy and research, if applicable.
Focus the Assessment

To begin your food retail assessment, you will want to work with your partners to determine your assessment objectives. It is important to consider why you are conducting a healthier food retail assessment, what you hope to learn from the assessment, and how the assessment will be used. For example, you may want to determine healthier food retail availability in either low-income, urban areas around your state or in rural areas, depending on where the greatest needs are and where you may have the most impact given your resources. After outlining your objectives, draft a manageable set of specific questions to answer. These will help you focus and plan your assessment. Specific assessment questions could include:

- On average, how far do residents in low-income, urban areas have to walk to get to supermarkets or grocery stores that sell healthier food options, such as fruits and vegetables, whole grains, and low-fat dairy?
- What percentage of the state's farmers markets accept or participate in federal food assistance programs, such as Electronic Benefits Transfer (EBT) cards for SNAP and WIC?
- How much fresh produce and other healthier food items do local small stores carry, and what are the different options available in those stores?
- What are the existing and potential resources and assets available for distribution to small stores to encourage the inclusion of healthier food options? That is, are there financial or other resources available like advertising assistance, funding for equipment or renovations, or training and technical assistance?
- What products are being marketed at the check-out area and front of store displays?

Plan the Assessment

When planning your healthier food retail assessment, consult CDC's *Healthier Food Retail: Beginning the Assessment Process in Your State or Community*. This document will provide you with an overview of how to develop an assessment of your state’s or community’s food retail environment. The document describes levels of data; existing data sets (public and commercial); Geographical Information System (GIS) mapping; in-store assessments for availability, cost and quality; and various methodological considerations. It also provides state and community examples. This document is available at: [http://www.cdc.gov/obesity/downloads/hfrassessment.pdf](http://www.cdc.gov/obesity/downloads/hfrassessment.pdf).

Implement the Assessment

Your implementation plan for the assessment will vary depending on whether you are collecting primary data or whether you will be analyzing existing data. Components of an implementation plan include gathering existing measurement tools, drafting surveys or direct observation forms, training data collectors, collaborating with GIS experts, and helping all assessment partners to understand their roles and responsibilities. To ensure the success of your assessment, keep the following considerations in mind:

- Use existing reliable and valid tools whenever possible to provide stronger data and to lead
to more appropriate decision-making. If none are available, test your surveys or observation procedures for reliability and, if possible, validity.

- Use quality control measures to make sure the observation and data collection are being done properly.
- Work iteratively with data analysts to ensure they have a clear understanding of your assessment objectives.

Assessment in Action: State and Regional Healthier Food Retail Assessments

Several states and communities have undertaken assessments of their food retail environment and reported their findings. Some examples are provided here.


**Central Puget Sound Food System Assessment, Washington.** The Regional Food Policy Council and the University of Washington completed a comprehensive assessment of the Seattle area food system, including rural agriculture, fisheries, food deserts, food hubs, restaurants, and more. The food desert chapter provides maps of food deserts in the various counties under study. They also looked at food deserts in relation to their elderly population and vehicle ownership. The full report is available at [http://courses.washington.edu/studio67/psrcfood/](http://courses.washington.edu/studio67/psrcfood/).

**Northern Colorado Regional Food System Assessment.** The Northern Colorado Regional Food System Assessment was a broad reaching assessment project that included many rural areas. The assessment aimed to “understand the local food system as it relates to public health, economic development and the quality of life.” The report includes assessments in direct marketing of agricultural products, shopping habits, food distribution, access to food, nutrition assistance program benefits, and community gardens. The project background and the full report are available at [http://www.larimer.org/foodassessment/report.cfm](http://www.larimer.org/foodassessment/report.cfm).

---

* The Food Trust is a nonprofit organization that originally developed a comprehensive approach to increasing availability of healthier food in Pennsylvania. This organization has implemented this framework in other states such as Louisiana, New York, Arizona, Georgia, Maryland, Massachusetts, Minnesota, Mississippi, Tennessee, and Texas. More information is available at [http://www.thefoodtrust.org/](http://www.thefoodtrust.org/).
Synthesize and Report Assessment Findings

Once you have analyzed your data, you will want to communicate the key findings to your stakeholders, often via a written report or an in-person presentation. When preparing reports or presentations, customize your communications to the audience. Develop different types of communication products that are tailored to different audiences’ needs and preferences. For example, policy makers may only be interested in an executive summary rather than a detailed full report. Community members may be best reached through a newspaper article or social media; therefore, you may want to coordinate a press release or web-based posts.

Evaluation

Evaluation is an essential component of planning and implementing your healthier food retail initiative. It provides a systematic method for demonstrating results and improving your activities by helping you answer overall questions, such as:

- Did you do what you intended to do?
- Do you have the right partners?
- How are partners working together?
- Are you reaching your intended audience?
- Did you have your intended impact?
- Were there unanticipated outcomes?
- What lessons can you and others apply to future initiatives?

Findings from your evaluation can help build the knowledge base on how to implement healthier food retail strategies, which can assist other public health practitioners as they plan their efforts. The findings can also sustain and re-energize you and your partners for further work on your initiative.

Planning Your Evaluation

One resource for planning and implementing your evaluation is the CDC Framework for Program Evaluation in Public Health. This framework was developed to provide a common, step-wise approach to public health evaluation. Figure 1 presents the Steps in the CDC Framework for Program Evaluation in Public Health, showing the ongoing and iterative process of program evaluation. It also delineates four categories of standards that guide evaluation quality: utility, feasibility, propriety, and accuracy. The CDC Framework and accompanying materials, including more information about the steps and the standards, are available at http://www.cdc.gov/eval/index.htm.

Another document which may be helpful in your evaluation efforts is Developing an Effective Evaluation Plan: Setting the Course for Effective Program Evaluation. This workbook, which follows the steps of the CDC Framework for Program Evaluation in Public Health, comes from CDC’s Division of Nutrition, Physical Activity, and Obesity and Office on Smoking and Health. It is designed to help public health program managers, administrators, and evaluators develop an effective evaluation plan. This resource is available at http://www.cdc.gov/obesity/stateprograms/resources.html.
Figure 1. Steps in the CDC Framework for Program Evaluation in Public Health

Stakeholders and Partners in Evaluation

As shown in Figure 1, stakeholder engagement is an important piece of program evaluation, which allows those groups and individuals who have a vested interest in the program to provide input on evaluation planning, implementation, and dissemination.

Additionally, you may work with partners to supplement your evaluation resources. Partners may have expertise, time, or data that you do not have. Such partners may include:

- Local universities and colleges (including the Prevention Research Centers; see [http://www.cdc.gov/prc/index.htm](http://www.cdc.gov/prc/index.htm) for more information).
- Research institutes.
- Public health institutes.
- Private businesses.
- Regional or local planning commissions.
- Evaluators from state, regional, or local public health or other government agencies.
Partnership Evaluation

As part of the evaluation, you may evaluate the partnerships that support your initiative or program. Partnership evaluation is important for determining what is working and what is not in relation to the partnership structure, processes, and progress. Partnership evaluation may be formal through regular process evaluation, or you may informally solicit feedback. To design your evaluation, consider starting with *Partnership Evaluation: Guidebook and Resources* from the Division of Nutrition, Physical Activity, and Obesity at the CDC. This document was developed to provide state staff with suggested approaches to and methods for evaluating partnerships. This resource includes examples and tools specific to the scope and purpose of state Nutrition, Physical Activity, and Obesity programs and is available at http://www.cdc.gov/obesity/stateprograms/resources.html.

Evaluation of Healthier Food Retail Strategies

In this *Action Guide*, the following healthier food retail strategies are discussed: grocery stores, small stores, farmers markets, mobile food, transportation, and distribution. Specific examples of evaluation questions, potential indicators, and data sources for each of these healthier food retail strategies, as well as for partnerships, are provided in the *Appendix: Examples of Evaluation Questions, Indicators, and Data Sources for Individual and Overarching Strategies*.

Although you and your partners may be eager to answer a multitude of evaluation questions, make sure that your evaluation plan is feasible given your time and resources. Discuss constraints with your stakeholders as you focus the evaluation, prioritize evaluation questions, and decide on the design and methods. This most likely will be an iterative process until you come to consensus with your stakeholders.
Evaluation in Action: State and Local Healthier Food Retail Evaluation Efforts

The program evaluations described below provide examples for four of the six healthier food retail strategies described in this guide, i.e., grocery store, small store, farmers market, and mobile food vending initiatives.

Pennsylvania: Fresh Food Financing Initiative. The Pennsylvania Fresh Food Financing Initiative (FFFI) was a financing program aimed at drawing supermarkets and grocery stores to urban and rural underserved areas. A number of different evaluations have examined the impact of FFFI using a variety of methods including archival data review, case study, and econometric analysis.

The Food Trust and The Reinvestment Fund† monitored and reported on initial outcomes for FFFI that included:

- The number of applications submitted.
- The number of applications approved.
- The amount of funding approved through grants and loans.
- The number of projects approved.
- Total jobs created or retained.

The program received 206 applications. As of June 2010, the FFFI approved 93 of them, representing 88 projects approved for funding. More than $73 million in loans and $12 million in grants were disbursed for supermarket projects. The projects created or retained over 5,000 jobs in Pennsylvania.

A study of the impact of a supermarket opening in two communities (one urban and one suburban) looked at real estate prices and economic activity in the surrounding community. The study indicated that:

- There was an increase in nearby house values associated with the opening of a grocery store. This positive effect was greater for properties that had lower average prices and that were not immediately next to the new grocery store.
- There were increases in both employment and wage earnings proportionate to amount of direct expenditures.

†The Reinvestment Fund (TRF) finances neighborhood revitalization in Mid-Atlantic communities. TRF is a CDFI and has been in operation since 1985. It finances projects around housing, community facilities, supermarkets, commercial real estate, and energy efficiency. TRF also gives public policy expertise through helping clients develop solutions and through data sharing and analysis. More information available at http://www.trfund.com/.
The Pennsylvania Fresh Food Financing Initiative is described in more detail in the Grocery Stores chapter. You can also learn more about the FFFI, including ongoing evaluation results, at http://www.trfund.com/pennsylvania-fresh-food-financing-initiative/ and at http://www.cdc.gov/nccdphp/dnpao/programsta/nutrition.html.

**Hartford, Connecticut: Healthy Food Retailer Initiative.** In 2006, the nonprofit organization Hartford Food System (HFS) developed the Healthy Food Retailer Initiative (HFRI) to encourage small stores in Hartford to offer healthier foods. By 2008, forty of the approximately 130 small stores joined the HFRI and agreed to convert 5% of their shelf inventory to healthier food items.31

The University of Connecticut Center for Public Health and Health Policy (CPHHP) partnered with HFS to conduct a longitudinal evaluation of the HFRI project. Stores participating in the HFRI were compared to control stores. Measurements included:31

- Changes in the availability and quality of healthier foods in participating stores.
- Changes in the promotion of healthier foods within participating stores.
- The relationship between customer purchasing habits and healthier food availability in corner stores.

From January 2009 through January 2010, evaluators conducted four complete store inventories in 52 corner stores (28 HFRI stores and 24 control stores), measuring changes in the availability, quality, and promotion of healthier foods. To measure customer purchasing habits, evaluators conducted face-to-face interviews with 372 customers of 19 participating stores.31

Evaluators found an 8% increase overall in the inventory scores for availability of healthier foods at stores. Larger stores had higher overall scores, but smaller stores demonstrated the most improvement from baseline to follow-up. There was not a significant difference between the HFRI stores and the control store scores at any point throughout the study. While there was substantial variability in the inventory scores for stores, stores certified to accept Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) benefits tended to have higher scores.

Evaluators noted that even when healthier options were available in stores, there was little in-store or community promotion of these healthier options.31 They also found that customers tended to purchase more fruits and vegetables when the store stocked a wider variety.32

CPHHP shared the results of the evaluation with HFS and recommended that future interventions could be more targeted to generate desired changes. For example, they could work with a smaller number of stores who are highly invested in the program and provide them support for promoting healthier options in the store.31 HFS will use the findings and recommendations from the evaluation to inform future planning and implementation.

You can find more information about the HFRI and ongoing efforts at http://www.hartfordfood.org/ and http://www.publichealth.uconn.edu/the-evaluation-of-the-healthy-retailer-program.html.
Massachusetts: Supplemental Nutrition Assistance Program Benefits at Farmers Markets.
The Massachusetts Department of Transitional Assistance (DTA) and the Department of Agricultural Resources (DAR) collaborated to increase the accessibility of farmers markets for Supplemental Nutrition Assistance Program (SNAP) benefit recipients by:33

- Providing funding to assist with the purchase or rental of point of sale terminals.
- Subsidizing transaction fees associated with SNAP purchases.
- Supporting community outreach and promotional efforts targeted to SNAP recipients.
- Funding nutrition incentives to increase SNAP recipients’ purchases at farmers markets, such as dollar-to-dollar match incentives up to $10.00 or a one-time coupon.

To evaluate the success of the program, DAR conducted a survey of managers of participating farmers markets. The evaluation questions focused on determining:33

- Amount of Electronic Benefit Transfer (EBT) sales.
- Costs of operating EBT machines.
- Challenges experienced by participating markets in processing benefits.
- Success of outreach efforts.
- Effect of financial incentives on SNAP purchases.

Overall, the program increased the number of farmers markets that accepted SNAP from 30 to 58 in one year, and increased SNAP sales by 510%. The evaluation also found that there was a significant increase of more than $1700 in SNAP sales for farmers markets that offered an incentive program compared to those that did not.33 Market managers also reported that costs associated with equipment and fees were most likely to influence whether or not they would maintain SNAP certification.33 Therefore, Massachusetts DAR is working to maintain and build partnerships to sustain financial support for these critical elements of the program.

You can learn more about SNAP usage at Massachusetts farmers markets at http://www.wholesomewave.org and at http://www.mass.gov/agr/massgrown/farmers_markets.htm.

New York, New York: Green Carts. The New York City (NYC) Green Carts Initiative aims to increase access to healthier food by increasing the number of mobile food carts that offer fresh produce. The Green Carts may only operate in designated underserved precincts of NYC.34 The NYC Department of Health and Mental Hygiene (DOHMH) conducted an evaluation of this initiative. They monitored initial outcomes including:

- Number of Green Cart permit applications submitted.
- Number of Green Cart permits approved.
- Number of Green Cart applications on the waiting list.
- Number of program violations.

A total of 501 permits were issued from 2008 to 2011.34 Other initial outcome data are described by borough in the report by NYC DOHMH to the NYC Council.

NYC DOHMH is also evaluating the intermediate project outcomes:

- Changes in the consumption of fruits and vegetables.
Changes in the availability and variety of fruits and vegetables in neighborhood food retail establishments.

Fruit and vegetable consumption data were collected at five points through the Community Health Survey (CHS) between 2002 and 2010. The CHS collects data on about 10,000 randomly selected New Yorkers each year. These analyses are not yet complete.

Evaluators assessed if the presence of Green Carts affected overall availability and variety of fresh produce in neighborhoods (i.e., did the Green Carts influence other neighborhood food retail establishments to stock more produce). To do this, the evaluators measured the existence and types of fruits and vegetables in a sample of permanent food retail establishments in selected neighborhoods with Green Carts and comparison neighborhoods without Green Carts. Data were collected before Green Carts were implemented, and at two points after implementation.

In Green Cart precincts, there was a significant increase in the availability of fresh fruits and vegetables at retail establishments from 2008 to 2009. This increase was maintained in 2011; from 50% of retail establishments selling fruits and vegetables in 2008 to 69% in 2011. For variety of fresh fruits and vegetables, there was an increase from 2008 to 2009 and this increase was maintained in 2011; from 31% of retail establishments selling 10 or more types of fruits and vegetables in 2008 to 38% in 2011.

In addition to the evaluation conducted by NYC DOHMH, researchers at the Albert Einstein College of Medicine conducted an evaluation study to examine where Green Cart vendors tend to locate and whether or not they generally comply with program requirements to sell fresh produce. Researchers first identified 61 carts and then used GIS analysis to determine the distance of carts from one another and from notable landmarks, such as a medical center. The analysis revealed that Green Cart vendors covered only approximately 57% of the areas of high need and tended to cluster together around areas likely to have high pedestrian traffic, creating Green Cart hot spots. Researchers also interviewed or observed 21 vendors and found that some were selling disallowed products such as sugary drinks and cookies. The researchers offered the following recommendations:

- Expand community partnerships to create additional demand for fresh produce in areas where there was little cart coverage.
- Have community groups recruit residents of underserved neighborhoods to become Green Cart vendors.
- Explore acceptance of SNAP/EBT for Green Carts.
- Expand efforts to recruit more prospective vendors to the Green Cart program.
- Have community groups help Green Cart vendors to distribute themselves more evenly throughout the allowable areas and to comply with program requirements.

NYC DOHMH has responded to these recommendations. For example, they gave out 10 small grants to community business organizations that supported training and community outreach, including helping potential vendors apply for permits. Also SNAP/EBT is now accepted by many Green Cart vendors. You can learn more about the NYC Green Carts program and get updated reports at [http://www.nyc.gov/greencarts](http://www.nyc.gov/greencarts).
Partnership, Assessment, and Evaluation Resources

**CDC, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition, Physical Activity, and Obesity (DNPAO)**

*Healthier Food Retail: Beginning the Assessment Process in Your State or Community* provides public health practitioners with an overview of how to develop an assessment of their state’s or community’s food retail environment. The document describes levels of data; existing data sets (public and commercial); Geographical Information System (GIS) mapping; in-store assessments for availability, cost and quality; various methodological considerations; and state and city examples. [http://www.cdc.gov/obesity/downloads/hfrassessment.pdf](http://www.cdc.gov/obesity/downloads/hfrassessment.pdf)

The *Health Bucks Intervention Tool Kit*, hosted by the Center for Training and Research Translation and part of the evaluation materials for the Health Bucks practice-tested intervention summary, includes a healthier food retail strategy logic model. [http://www.centertrt.org/?p=intervention&id=1109&section=10](http://www.centertrt.org/?p=intervention&id=1109&section=10)
Developing an Effective Evaluation Plan: Setting the Course for Effective Program Evaluation helps public health practitioners understand the key components of an evaluation plan, why evaluation planning is important, and how to develop an effective evaluation plan during the overall planning process. [http://www.cdc.gov/obesity/downloads/cdc-evaluation-workbook-508.pdf](http://www.cdc.gov/obesity/downloads/cdc-evaluation-workbook-508.pdf)

The Cleveland-Cuyahoga Food Policy Council practice-tested intervention summary includes an evidence summary, core components, resources for implementation, and intervention materials that can be used by public health practitioners. [http://www.cdc.gov/nccdphp/dnpao/programsta/nutrition.html](http://www.cdc.gov/nccdphp/dnpao/programsta/nutrition.html)

The Evaluation Framework, hosted by the Center for Training and Research Translation, can be applied to the evaluation of programs or policies, particularly those focused on environmental and behavioral obesity-related outcomes. Using the framework generates a logic model for the program or policy that can then help guide evaluation efforts. Additionally, there are materials describing some healthier food retail interventions, which include existing evaluation plans, logic models, and findings. [http://www.centertrt.org/?p=evaluation_framework](http://www.centertrt.org/?p=evaluation_framework)


The Health Equity Resource Toolkit for State Practitioners Addressing Obesity Disparities from DNPAO aims to increase the capacity of state health departments to work with and through communities on implementing effective responses to obesity among populations that are facing health disparities. The toolkit provides a planning process for creating policy, systems, and environmental changes to reduce obesity disparities and achieve health equity. Examples are provided for addressing disparities through healthy food retail, with a focus on underserved communities. [http://www.cdc.gov/Obesity/Health_Equity/pdf/toolkit.pdf](http://www.cdc.gov/Obesity/Health_Equity/pdf/toolkit.pdf)

DNPAO undertakes evaluability assessments to better understand innovative initiatives and policies being implemented in states and communities. There are “Spotlights” from the assessments on food policy councils that summarize program functions and accomplishments and provide considerations for those wanting to implement similar initiatives. [http://www.cdc.gov/obesity/stateprograms/resources.html](http://www.cdc.gov/obesity/stateprograms/resources.html)

**CDC, Other Divisions**

The Division of Cancer Prevention and Control developed the Guidance Document for Comprehensive Cancer Control Planning as a resource for Cancer Control Program grantees. This resource includes a Partnership Toolkit that outlines many of the action steps highlighted in this chapter in detail. [http://cancercontrolplanet.cancer.gov/](http://cancercontrolplanet.cancer.gov/)
The State Program Evaluation Guides: Developing and Using a Logic Model was developed by the Division for Heart Disease and Stroke Prevention. This guide provides a general overview of the development and use of logic models as planning and evaluation tools. [http://www.cdc.gov/dhdsp/programs/nhdsp_program/evaluation_guides/logic_model.htm](http://www.cdc.gov/dhdsp/programs/nhdsp_program/evaluation_guides/logic_model.htm)

CDC’s Evaluation Efforts Web site provides information on CDC’s Framework for Program Evaluation in Public Health. This Web site also provides additional evaluation resources such as manuals and a self-study guide. [http://www.cdc.gov/eval/index.htm](http://www.cdc.gov/eval/index.htm)

**National Collaborative on Childhood Obesity Research (NCCOR)**

The NCCOR Measures Registry is a searchable database of diet and physical activity measures relevant to childhood obesity research. The purpose of the registry is to promote the consistent use of common measures and research methods across childhood obesity prevention and research at the individual, community, and population levels. These measures could be used for assessment or evaluation. [http://nccor.org/projects/measures/index.php](http://nccor.org/projects/measures/index.php)

**National Cancer Institute**

The Measures of the Food Environment Web site, updated weekly, provides a compilation of articles that include community-level measures of the food environment. The “Instruments” section provides a list of potential instruments made available by researchers that address a variety of food environments. The Web site also provides links to peer-reviewed publications from studies that have relied on the instruments. [https://riskfactor.cancer.gov/mfe](https://riskfactor.cancer.gov/mfe)

**United States Department of Agriculture (USDA)**


The Food Environment Atlas provides food environment indicators to examine factors related to food choices and diet quality. It also provides an overview of a community’s ability to access healthier food. USDA Food Atlas has over 160 indicators that are related to the food environment, including indicators on health and well-being, and community characteristics. Regarding retail, the Food Atlas provides indicators in the areas of access and proximity to grocery stores, availability of food stores, and local foods. [http://www.ers.usda.gov/data-products/food-environment-atlas.aspx](http://www.ers.usda.gov/data-products/food-environment-atlas.aspx)

The Food Access Research Atlas uses a map of the entire United States to show the census tracts in the nation that are food deserts based on multiple indicators of food access. [http://www.ers.usda.gov/data-products/food-access-research-atlas.aspx](http://www.ers.usda.gov/data-products/food-access-research-atlas.aspx)
Healthy Corner Stores Network (HCSN)
HCSN provides a resources page with information on surveys and assessment. This includes in-store assessment tools, store owner surveys, sample materials, and resource guides. http://www.healthycornerstores.org/tag/surveys

Harvard Law School Food Law and Policy Clinic
Good Laws, Good Food: Putting Local Food Policy to Work for Our Communities and Good Laws, Good Food: Putting State Food Policy to Work for Our Communities are law and policy toolkits for local and state food policy councils, respectively, trying to navigate their food systems. The documents provide information to help food policy councils develop and succeed, and describe how to make changes in the food and agriculture systems. http://blogs.law.harvard.edu/foodpolicyinitiative/publications/

Community Commons
Community Commons is an interactive resource that went live in the fall of 2011, with over 2,500 community initiatives posted on the searchable national map. Community Commons allows users to access maps, apps, and data for healthier food retail assessment at state, county, zip code, census tract, block group, and address levels. Users can create contextualized maps and other data visualization products, and are required to register for a free account to access data and other resources. http://www.communitycommons.org/

Policy Map, from The Reinvestment Fund
Policy Map offers on-line mapping capabilities based on more than 10,000 indicators related to demographics, real estate, city crime rates, health, schools, housing affordability, employment, energy, and public investments. It includes data available from a supermarket study on food access; a subset of the data is available for free. A subscription is required for detailed information. www.policymap.com

ChangeLab Solutions
New Opportunities for Public Health: Working with Redevelopment (podcast) highlights ways for public health staff to partner with redevelopment agencies to build healthier communities, exploring strategies to overcome some of the challenges they may face. http://changelabsolutions.org/healthy-planning/new-opportunities-redev

The Healthy Planning Web site offers a variety of resources and training and technical opportunities on planning for healthier food retail strategies with nontraditional partners. http://changelabsolutions.org/healthy-planning
American Planning Association (APA)
APA’s Policy Guide on Community and Regional Food Planning is written for planning bodies and outlines policies and justification for incorporating food systems into a city or region’s planning process. Their “General Policy #3” specifically addresses supporting food systems that improve the health of residents, and discusses retail venues and farmers markets. [http://www.planning.org/policy/guides/adopted/food.htm](http://www.planning.org/policy/guides/adopted/food.htm)

Northwest Health Foundation
Framework and Tools for Evaluating Progress toward Desired Policy and Environmental Changes: A Guidebook Informed by the NW Community Changes Initiative offers community-based organizations and coalitions practical tools and methods to use when evaluating policy and environmental change initiatives. The guidebook focuses on activities around healthy eating and active living. Available at [http://nwhf.org/resources#handbooks](http://nwhf.org/resources#handbooks), click on “Northwest Community Changes Guidebook.”
Chapter 2: Grocery Stores

Encouraging Full Service Grocery Stores to Locate in Underserved Areas and Promote Healthier Foods
General Strategy Overview

This chapter discusses the public health role in encouraging full service grocery stores to locate in underserved areas or supporting existing stores in supplying and marketing healthier items.

Encouraging new, permanent food retailers, like full service grocery stores, to locate in underserved areas is one of many approaches for states to increase the availability of affordable healthier food options in underserved communities. Residents of communities with full service grocery stores tend to eat more fruits and vegetables and tend to have a lower risk of obesity. However, low-income, ethnic minority, and rural neighborhoods often face limited access to full service grocery stores.

Full service grocery stores generally offer healthier food options to customers at lower prices than other retail venues. They also have the potential to spur economic development in underserved communities because they can often serve as anchors around which other businesses are willing to locate; they can create jobs for residents, both in the construction and the operation of the grocery store as well as in other retail businesses that may locate nearby; and they can result in a modest increase in the values of nearby homes.

Grocery store development is a long-term commitment that requires significant financial investment. Multiple incentive options are available that encourage new, permanent food retail stores to locate in underserved areas. Incentives such as Healthy Food Financing Initiatives generally come from programs developed through public-private partnerships, and usually include a Community Development Financial Institution (CDFI). Some incentive programs are created through state legislation, such as in Pennsylvania, New York, and Illinois. Other state incentive programs, such as in California and New Jersey, have been supported through non-legislative mechanisms. Incentive programs frequently assist with costs associated with development activities, such as land acquisition, building and construction, and retail feasibility studies. See the feature at the end of the chapter, Grocery Stores in Action: Healthy Food Financing Initiatives, for more information.

What is a Grocery Store?

In this Action Guide, grocery store refers to full service food retailers that offer a wide selection of healthier foods and beverages, including those recommended by the Dietary Guidelines for Americans, 2010. 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. Grocery stores can be independently owned or chain operated. They can range in size from medium-sized stores and specialty markets with a full product line to large supermarkets.

† CDFIs are financial institutions, such as banks, credit unions, or corporations that help serve low-income people and communities through increasing their access to loans, investments, financial services, and technical assistance. CDFIs are certified by the federal CDFI Fund at the U.S. Department of the Treasury. More information is available at http://www.cdfifund.gov/index.asp.
For new or existing grocery stores, promotion of healthier foods and beverages is important in grocery stores to help consumers make healthier choices. The different types of marketing in grocery stores can be represented by the “four P’s”: product, placement, price, and promotion (see call out box on Marketing and Promotion in Grocery Stores). The marketing can involve

**Marketing and Promotion in Grocery Stores**

Grocery stores market foods in many ways, but often it is through the products themselves (such as the assortment of products available), pricing incentives (such as coupons or differential prices), placement of products (such as at eye-level or at the end of an aisle), or promotion of products (such as displays and advertising, which can also overlap with the other categories). Some specific examples include:

**Grocery store shelf labeling systems.** Shelf labeling systems are food “grading” systems that are implemented by grocery store owners to identify healthier foods or to allow comparisons between foods. Some systems rate foods using a proprietary nutritional algorithm, with the information being summarized by a symbol such as the number of stars representing “good, better, and best” (e.g., the Guiding Stars® nutrition navigation system) or by a numerical score of 1 to 100, with 100 as best (e.g., the NuVal® system).

**Healthy checkout aisles.** Stores can designate certain checkout aisles or lanes as healthy. For example, as part of the Change the Future WV program, healthy checkout aisles were established in eight grocery stores across the MidOhio Valley of West Virginia. Program leaders developed partnerships with local food store owners and managers, including those at WalMart and Foodland, to create a checkout aisle that sold fresh fruits and vegetables along with toys that promote physical activity. The initiative also included signage and displays to draw attention to the checkout aisles. More information is available at [http://www.changethefuture.wv.gov/](http://www.changethefuture.wv.gov/) and in Making the Healthy Choice the Easy Choice: Real-life Stories and Practical Tools from Change the Future WV at [http://ctfwresources.com/building-a-legacy.php](http://ctfwresources.com/building-a-legacy.php). A video about the project from the Centers for Disease Control and Prevention includes the positive effects on business, and is available at [http://www.youtube.com/watch?v=RIQQx-ekIzU](http://www.youtube.com/watch?v=RIQQx-ekIzU). A news story about the project is available at [http://wvgazette.com/News/201110083123](http://wvgazette.com/News/201110083123).

**Financial incentives.** The United States Department of Agriculture implemented the Healthy Incentives Pilot (HIP) to promote the purchase and consumption of fruits and vegetables. HIP took place in Hampden County, Massachusetts and provided participants in the Supplemental Nutrition Assistance Program (SNAP) with a financial incentive: for every SNAP dollar spent on the eligible fruits and vegetables, 30 cents was credited back to the participant’s SNAP Electronic Benefit Transfer (EBT) card. The incentive could then be used towards any SNAP-eligible food and beverage purchases. More information and reports are available at [http://www.fns.usda.gov/healthy-incentives-pilot-hip-interim-report](http://www.fns.usda.gov/healthy-incentives-pilot-hip-interim-report).
approaches such as labeling of foods on shelves allowing consumers to identify healthier foods and beverages or providing coupons for certain food items. Additionally, grocery stores may have educational programs that teach consumers how to shop for healthier foods.

**Working with Partners and Leveraging Resources**

Engaging stakeholders from multiple sectors is critical to the development of grocery stores in underserved communities. As a public health practitioner, you are uniquely positioned to act as a liaison for a variety of programs and resources. The *Partnerships, Assessment, and Evaluation* chapter has detailed information on partnering for healthier food retail initiatives. There are a variety of potential partners that you can include to encourage full service grocery stores to locate in underserved areas of your state or region. You may want to include representatives of:

**Grocery Stores and their Representatives**
- Grocers’ associations.
- Corporate offices of chain, cooperative, and independent grocery stores.

**Business and Development Groups**
- Community Development Corporations.
- Chambers of Commerce.
- Economic Development Corporations.
- Regional Development Commissions.
- State or local labor or workforce development offices.
- Local or regional developers.
- Banks and other businesses.
- U.S. Economic Development Administration.

**Nutrition and Food Access Groups**
- U.S. Department of Agriculture’s (USDA) Food and Nutrition Service (FNS) regional offices.
- Federal nutrition assistance programs at the state-level administering agency.
- State, regional, or local food policy councils.
- Nutrition professionals.
Hunger and food security advocates.
- National organizations supporting food access (such as The Food Trust).

**City and Neighborhood Groups**
- City and town planning department offices.
- Civic or neighborhood associations.

**Environmental Groups**
- Environmental Protection Agency regional offices.
- Agency for Toxic Substances and Disease Registry (ATSDR) regional offices.
- Food safety offices.

You can also collaborate with pre-existing groups to support grocery store initiatives (such as food access committees, task forces, or food policy councils) or create a group that fits your state or region’s needs.

**Action Items**

As a public health practitioner, you can do the following to work with partners and leverage resources:

- **Lead or support assessment activities** to understand the healthier food retail landscape in your state and identify areas of the state where individuals do not have reasonable access to a full service grocery store. Refer to the *Partnerships, Assessment, and Evaluation* chapter for additional information on assessment.

- **Provide information to stakeholders** to demonstrate the potential of grocery store development as an economic and community development strategy. You may want to compile relevant information that is collected by other agencies, e.g., grocery purchases of residents outside of the community (known as leakage) to quantify the potential spending power of that community, or workforce capacity data from the Department of Labor and Workforce Development Boards.

- **Determine if there are existing state efforts** led by other agencies or organizations that have similar or overlapping goals with your healthier food retail goals. Work with these groups to expand their initiatives to include public health goals. This approach may present fewer obstacles and take less time than establishing new initiatives. For example, some states have extended existing economic development and rehabilitation incentive programs to include qualified grocery stores.

- **Assist state, tribal, and local partners with applying for loans or grants**, including supplying health data to demonstrate need, providing letters of support for applicants, or serving as a fiscal agent.
Grocery Stores in Action: The Texas Healthy Food Advisory Committee

Texas Senate Bill 343 authorized an advisory committee to study the availability of healthier food retail options in specific underserved areas of the state. Established by the Commissioner of Agriculture and the Executive Commissioner of the Health and Human Services Commission, the Healthy Food Advisory Committee (HFAC) was charged with studying lack of access to fresh fruits and vegetables and other healthier foods and providing recommendations to the legislature for improving access in underserved areas.42

The Health and Human Services Commission and the Department of Agriculture appointed four members each to the HFAC. Committee members represented rural and urban areas and different geographical regions of the state, and had expertise related to both nutrition and retail business. In their report delivered to the Texas legislature in January 2011, the HFAC made several recommendations that could address healthier food retail accessibility in Texas, including:42

- Maximize existing financing programs to ensure funds are appropriately distributed to the most underserved urban and rural areas across the state, and create public-private partnerships that provide incentives for the redevelopment and expansion of healthier food retail outlets that are sustainable over time.
- Share lessons learned from Texas’ Fresh Food Financing Initiative pilot project with stakeholders.
- Establish regional, city, or county food policy councils.
- Encourage communities to promote direct-to-consumer marketing outlets such as Community Supported Agriculture (CSA) and farmers markets.
- Encourage local-level discussion of improvements to transportation systems for better access to healthier food retail outlets.


Providing Training, Technical Assistance, and Education

Training, technical assistance, and education can support the development and sustainability of full service grocery stores in underserved areas. Your efforts in these areas can communicate the public health and economic benefits of access to healthier foods and beverages through grocery stores and can educate partners about the components of grocery store incentive programs. Additionally, you can focus on programs that help customers choose healthier foods and beverages (see call out box on Educational Tools for Healthier Shopping). As a public health practitioner, you can directly provide the training, technical assistance, and education directly, or you can coordinate experts to do so.
Action Items

As a public health practitioner, you can do the following to provide training, technical assistance, and education on grocery store development initiatives:

- **Educate stakeholders on health status and behavioral indicators** in underserved areas. These are relevant issues when initiating grocery store development programs.

- **Enhance the capacity of stakeholders** by providing training and technical assistance, or coordinating training with outside experts, on topics such as:
  - The health benefits of increasing accessibility and affordability of healthier foods.
  - Ways communities can access capital.
  - Strategies for working with the private retail sector.
  - Methods to define underserved areas and track progress on the initiative.

- **Facilitate training and technical assistance** on key financing issues, such as certification of institutions or organizations as a CDFI or a Community Development Entity (CDE).§

- **Educate eligible grocery store initiative applicants** about the existence of incentive programs and the benefits available to them. For example, staff members at the Michigan Department of Community Health helped retailers apply for an incentive program that had passed as state policy in 2008, but had a low number of applicants for the program.

- **Educate communities about community-owned grocery store or co-op models**, which may be particularly suitable in rural areas. More information and resources on these models can be found from the Healthy Food Access Portal at http://healthyfoodaccess.org/retail-strategies/grocery-stores-and-co-ops and the Kansas State Rural Grocery Initiative at http://www.ruralgrocery.org/resources/bestpractices.html, under “Models of Ownership.”

- **Educate partners on potential requirements and eligibility criteria** that address healthier eating in incentive programs. For example, California FreshWorks Fund’s program guidelines include requirements for healthier foods in the store and preferences for healthier checkout aisles and in-store promotions of healthier foods. More information is available at http://cafreshworks.com/wp-content/uploads/2014/01/cafwf_program_guidelines_072511.pdf.

- **Compile a list of state or local level contacts** that can provide technical assistance to new food retailers on applying for WIC and SNAP certification.

- **Provide information, linkages, and education** to stores and communities about how they can promote healthier food purchasing, preparation, and consumption.

- **Work with partners on how SNAP-Ed funding can be used** for programs or initiatives on in-store promotions of healthier eating at new grocery stores.

---

§ A Community Development Entity (CDE) is a corporation or partnership that serves as a mechanism for providing loans, investments, or financial counseling in low-income communities. CDEs are certified by the federal CDFI Fund and can receive New Market Tax Credit allocations once certified. More information is available at http://www.cdfifund.gov/what_we_do/programs_id.asp?programID=10.
Educational Tools for Healthier Shopping

Having a grocery store in a neighborhood is important to provide access to healthier foods and beverages. However, encouraging people to buy the healthier items is also important. A recent report from the Food Marketing Institute discussed that grocery stores help their customers shop for healthier foods by conducting activities such as cooking classes and store tours and employing in-store dieticians. Additionally, educational programs teach consumers how to shop for healthier foods and beverages. These programs can be tailored to customers who receive nutrition assistance program benefits. Educational materials available to public health practitioners include:

**Cooking Matters at the Store.** This program was developed by the national nonprofit organization Share Our Strength to help families make affordable, healthier choices at the grocery store. The program trains facilitators and provides guidance on conducting grocery store shopping tours that teach skills such as buying fruits and vegetables and comparing prices. Facilitators are provided with a free facilitator’s guide and free materials for tour participants that are available in English and Spanish. Available at [http://cookingmatters.org/](http://cookingmatters.org/).

**Supplemental Nutrition Assistance Program-Education (SNAP-Ed) Connection.** This is an online resource from U.S. Department of Agriculture for state and local SNAP-Ed providers. SNAP-Ed is a federal-state partnership that encourages state agencies to provide nutrition education to SNAP recipients so they can gain skills for making healthier food choices on a limited budget. Resources on this Web site include: recipes, tips on shopping for healthier foods using SNAP benefits (see “Eat Right When Money’s Tight”), and SNAP-Ed contact information. Available at [http://snap.nal.usda.gov/](http://snap.nal.usda.gov/).

**Aisle by Aisle.** Offered by North Carolina’s Eat Smart Move More program, this Web page hosts a video series and printable materials with tips for consumers on shopping for healthier foods and beverages. Available at [http://www.myeatsmartmovemore.com/AisleByAisle.html](http://www.myeatsmartmovemore.com/AisleByAisle.html).
Addressing Other Common Concerns for Grocery Store Development

Many factors influence whether a food retailer will move into a community, but ultimately grocers look for a location where they can sustain a profitable business. Companies must assess adequacy of the customer base and the investment and operating costs in order to make their decision to locate in an underserved area.37

Community development and regulatory processes, such as zoning and land use regulations, can affect grocery store development. Most zoning, land use, and operational policies are created and enforced at a city or county level, although sometimes state-level guidance or policies can influence what happens locally or regionally. As a public health practitioner you can provide information and support to local organizations and planners to help streamline developmental processes and alleviate other concerns.

Zoning and Site Development

Site acquisition and development can be a lengthy and expensive process for retailers and developers. Issues of concern include:

- Limited availability of appropriate sites.
- Rehabilitation costs to make sites suitable.
- Lack of adequate parking space or transportation.
- The time involved to complete the permit process.

Perceptions about Neighborhood Retail Markets

Developers and retailers may have legitimate concerns or erroneous perceptions about locating in an underserved area. Similarly, investors may see grocery store retail as a high risk investment—a perception that may be even higher in relation to low-income communities. They may be concerned that underserved areas:

- Lack target customers.
- Have customers with limited purchasing power.
- Have a low volume of automobile traffic.
- Have crime or safety issues.
- Lack physical or logistical infrastructure for the distribution of goods to a store.
- Have higher operating costs for certain standard services, such as rent, utilities, trash, recycling, security, or for hiring, training, and retaining qualified employees.
Action Items

As a public health practitioner, you may be able to address concerns about zoning, site development, and neighborhood perceptions with the following actions:

✔ **Identify programs in your state that promote and facilitate site renovation** through economic incentives and expedited permitting and zoning procedures. This could include connecting developers and retailers with existing revitalization or environmental projects, such as rehabilitation of a closed store or a blighted property. Projects that improve the aesthetics, safety, and sustainability of commercial corridors are a good fit for grocery store development, as grocery stores can draw a large number of people, boost the local economy, and incorporate more sustainable development practices. For example, in Madison, Wisconsin, Hy-Vee built a grocery store in an abandoned retail site and used several green strategies such as use of recycled or locally-sourced building materials; energy efficient heating, air conditioning, and refrigeration equipment.44

✔ **Highlight the use of incentives for grocery development.** There are examples of financial credits, abatements, or other incentives in offsetting start-up or operational expenses for grocery store development that you can provide. Two examples where local governments used these types of incentives are:

   - New York City developed the Food Retail Expansion to Support Health (FRESH) program, available for “grocery store operators renovating existing retail space or developers seeking to construct or renovate retail space that will be leased by a full-line grocery store operator.”

Continued
Eligible stores must fall within a designated underserved community. The FRESH program criteria include minimum requirements for perishable items and produce. Both zoning and financial incentives are offered, such as additional development rights, reductions in required parking, and tax deductions. More information is available at [http://www.nyc.gov/html/misc/html/2009/fresh.shtml](http://www.nyc.gov/html/misc/html/2009/fresh.shtml).

- The Department of Buildings in Chicago, Illinois, developed an expedited permit process for projects that incorporate green building strategies along with an incentivized fee schedule. This could apply to grocery store development that used green strategies as well as other types of businesses. You can learn more about the program at [http://www.cityofchicago.org/city/en/depts/bldgs/supp_info/overview_of_the_greenpermitprogram.html](http://www.cityofchicago.org/city/en/depts/bldgs/supp_info/overview_of_the_greenpermitprogram.html).

- **Consider the development of smaller full-service grocery stores** as an alternative to the standard large supermarkets when working on a grocery store development task force or committee with developers, retailers, planners, and other stakeholders. These stores usually have less inventory and variety than the large supermarkets, but still stock produce and other perishable foods. They also can have lower operating costs.

- **Work on cross-cutting strategies for healthier food retail** to ensure that adequate infrastructure is in place to accommodate grocery store development, such as transportation and distribution systems. Additional information is outlined in the Transportation and Distribution chapters.

- **Coordinate with state level partners** to integrate guidance on access to healthier foods and grocery store development into community comprehensive land use plans.**

---

**Comprehensive land use planning is a community-wide process that determines community development vision, goals, and objectives. The outcome of the process is known as a Comprehensive Plan, which guides local policy over the long term for a broad range of issues, such as land use, management of natural resources, housing, and recreation. More information is available at [http://urbanext.illinois.edu/lcr/comprehensiveplanning.cfm](http://urbanext.illinois.edu/lcr/comprehensiveplanning.cfm).**

---

Chapter 2: Grocery Stores
Grocery Stores in Action: Healthy Food Financing Initiatives

Healthy food financing initiatives encourage retailers to locate or renovate retail food locations in underserved areas through financing assistance. Many states have implemented these initiatives or are in the process of developing them, and similar work is moving forward at the federal level. Most often a task force is developed to explore the issue of grocery access in underserved areas of a state or region and to make recommendations for action. Public health practitioners can play an advisory role on these task forces and can provide data to inform the issues of minimal access to healthier foods and its public health consequences.

**Pennsylvania Fresh Food Financing Initiative.** The Pennsylvania Fresh Food Financing Initiative (FFFI) was the first legislatively-created state-wide initiative of this kind, with a financing program initiated through public-private partnerships. The Commonwealth of Pennsylvania, The Reinvestment Fund (TRF), The Food Trust, and the Greater Philadelphia Urban Affairs Coalition partnered to implement this grant and loan program to encourage grocery store development in underserved neighborhoods throughout the state. Initial funding from the state was subsequently matched through loans and other funding. This financing initiative has been modeled in various parts of the country. Results from the Pennsylvania FFFI are discussed in the Partnerships, Assessment, and Evaluation chapter. More information available at http://healthyfoodaccess.org/policy-efforts-and-impacts/state-and-local/pennsylvania.

**California FreshWorks Fund.** The California FreshWorks Fund (CAFWF) is a public-private partnership loan fund that has raised more than $250 million to increase access to healthier, more affordable food in underserved communities and to encourage economic development and innovations in healthy food retailing. Seed funding came from banking and philanthropic investors. There are nearly two dozen diverse partners collaborating on this program representing philanthropic, financial, government, retail, and community sectors. Modeled after the Pennsylvania FFFI, CAFWF works directly with grocers on developing new locations or improving existing places to purchase nutritious food. CAFWF has program guidelines that are designed to help retailers carry and promote a higher proportion of healthier foods and decrease access to undesirable foods, such as having at least one “junk-food-free” aisle. Information is available at http://www.cafreshworks.com/.

**New Jersey Food Access Initiative.** The New Jersey Food Access Initiative (NJFAI) is designed to help provide financing to grocery store developers and operators to build stores in underserved areas statewide. The NJFAI is supported through a public-private partnership that includes the New Jersey Economic Development Authority (EDA) and TRF. Additional supporting partners include the Robert Wood Johnson Foundation (RWJF); The Food Trust; the New Jersey
Departments of Labor and Workforce Development, Health and Senior Services, and Agriculture; and the New Jersey Food Council; among others. The EDA invested $3 million with TRF to create the Food Access Fund, which was then leveraged to seek other additional public and private investments.\(^49\) RWJF committed $12 million to support these efforts in 2012.\(^50\) The NJFAI funds supermarket initiatives, including loans for the various phases of grocery store development, such as land acquisition, construction and rehabilitation, and equipment.\(^51\) In collaboration with The Food Trust, EDA has engaged in education activities (including those directed to policy makers) about access to supermarkets and healthier foods. The NJFAI work began with the convening of the New Jersey Food Marketing Task Force, which made recommendations in the 2012 report *Expanding New Jersey’s Supermarkets: A New Day for the Garden State*.\(^50\) This report, along with more information on the NJFAI, is available at [http://healthyfoodaccess.org/policy-efforts-and-impacts/state-and-local/new-jersey](http://healthyfoodaccess.org/policy-efforts-and-impacts/state-and-local/new-jersey).

**Federal Initiatives.** Federal agencies are collaborating to fund work similar to the Pennsylvania FFFI. As part of the First Lady Michelle Obama’s Let’s Move! initiative and the Agriculture Reform, Food and Jobs Act of 2013 (the “Farm Bill”), the U.S. federal government is addressing limited access to healthier foods by providing expertise, funding, and other resources for programs that establish and support healthier food retail venues in underserved areas.\(^52,53\) Retail venues include grocery stores, corner stores, mobile food vendors, farmers markets, and community supported agriculture. Funded projects can focus on various aspects of the food supply chain, including retail, production, distribution, and marketing. More information on the federal initiative and work being done in states across the U.S. is available at [http://apps.ams.usda.gov/fooddeserts/](http://apps.ams.usda.gov/fooddeserts/) and [http://www.healthyfoodaccess.org/policy-efforts/region](http://www.healthyfoodaccess.org/policy-efforts/region).
Grocery Store Resources

Centers for Disease Control and Prevention

State Initiatives Supporting Healthier Food Retail: An Overview of the National Landscape provides public health practitioners, their partners, community members, and policy makers with useful information about the rationale for and characteristics of state-based healthier food retail legislation enacted in the last decade. Action steps that public health practitioners can use to inform, educate, and support improved access to healthier foods are also provided. http://www.cdc.gov/obesity/stateprograms/resources.html

The Pennsylvania Fresh Food Financing Initiative (FFFI) practice-tested intervention summary includes an evidence summary, core components, resources for implementation, and intervention materials that can be used by public health practitioners. http://www.cdc.gov/nccdphp/dnpao/programsta/nutrition.html

PolicyLink, The Food Trust, and The Reinvestment Fund

The Healthy Food Access Portal is a comprehensive Web site for information on strategy implementation, funding, policy efforts, and news about healthier food retail. The following resources are available from the portal.

Access to Healthy Food and Why It Matters: A Review of the Research was developed jointly by the Food Trust and PolicyLink and reviews more than 170 studies of healthier food access and its impacts. http://healthyfoodaccess.org/resources/library/access-to-healthy-food-and-why-it-matters-a-review-of-the-research

Harnessing the Power of Supermarkets to Help Reverse Childhood Obesity outlines conference proceedings of a 2010 meeting of public health leaders, food retailers and manufacturers, consumer product designers, and marketing professionals. This resource discusses how to make it easier for parents, caregivers, and children to select and purchase healthier foods in existing grocery stores, providing an alternative or complementary strategy to locating grocery stores in underserved areas. http://healthyfoodaccess.org/node/1230

Greening Grocery: Strategies for Sustainable Food Retailing assists developers and operators with using environmentally friendly building practices in grocery store development, and describes how these practices lower development and operating costs. http://healthyfoodaccess.org/node/943

ChangeLab Solutions

Getting to Grocery: Tools for Attracting Healthy Food Retail to Underserved Neighborhoods reviews the opportunities for and challenges of bringing grocery stores to underserved communities. The guide is designed to help both public health agencies and community stakeholders support development and retail efforts in low-income neighborhoods. http://changelabsolutions.org/publications/getting-grocery
Healthier Communities through Redevelopment: Rebuilding Neighborhoods for Better Nutrition and Active Living outlines steps and strategies associated with revitalizing blighted neighborhoods. The document is specifically written for public health department and agency staff who want to get involved in community redevelopment as a public health effort. [http://changelabsolutions.org/publications/healthier-redevelopment](http://changelabsolutions.org/publications/healthier-redevelopment)

**Wisconsin Department of Health Services**

The Check Out Healthy toolkit focuses on improving the food environments within and around food stores in communities. The audience for the toolkit includes local coalitions, community leaders, and public health practitioners. The toolkit addresses Wisconsin communities but has information useful for any state. [http://www.dhs.wisconsin.gov/physical-activity/FoodSystem/GroceryStores/Index.htm](http://www.dhs.wisconsin.gov/physical-activity/FoodSystem/GroceryStores/Index.htm)

**Kansas State University**

The Rural Grocery Initiative seeks to identify and develop models for sustainable retail sources of food for Kansas citizens living in rural areas. The Web site has a rural grocery toolkit including best practices, key research, surveys, grocery videos, and the proceedings from a rural grocery summit. [http://www.ruralgrocery.org/](http://www.ruralgrocery.org/)
General Strategy Overview

This chapter discusses the public health role in improving small stores in underserved areas to increase the accessibility and promotion of healthier foods.

Poor rural and urban areas often lack supermarket access, and residents of these areas must rely primarily on small stores for their food purchases. Small stores tend to stock items that have long shelf lives and are in high demand, such as pre-packaged processed foods, sodas, snacks, and alcohol, and they are generally more costly because of higher wholesale prices or lower volume of sales. In addition, small stores may dedicate less space to fruits and vegetables and may stock fewer varieties of fresh produce than supermarkets.

Initiatives that encourage small stores to offer high quality and affordable healthier foods and beverages (as encouraged by the Dietary Guidelines for Americans, 2010) can be used to improve access to healthier foods for community residents without a full service grocery store. These initiatives to create healthier small stores are usually implemented faster and at lower cost than development of new stores or supermarkets. They can involve activities such as making physical alterations to the store to increase stocking of healthier foods, marketing of healthier foods and beverages, providing technical assistance to store owners, or supporting stores owners around nutrition assistance benefit programs.

What are Healthier Small Stores?

Small independent or chain stores include corner stores, convenience stores, tiendas, bodegas, drug stores or pharmacies, general stores, dollar stores, small markets, small groceries, and gas stations. They are typically less than 5,000 square feet and many stock liquor, cigarettes, and snack foods, rather than produce and other healthier foods and beverages.

Small stores are considered to be healthier small stores when they stock a variety of high quality and affordable healthier foods and beverages that are within the recommendations of the Dietary Guidelines for Americans, 2010. 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. These stores are committed to maintaining space for healthier food items and many also promote healthier foods over other options available for sale.
Physical Improvements for Access to Healthier Foods

To help small store owners increase the availability and purchase of healthier foods and beverages, it is often necessary to make physical improvements to the interior and exterior environment of the store. Interior improvements can allow for stocking and selling healthier food products, such as display shelving, refrigeration and freezers, dry food storage, and heating and cooling equipment needed for food samples or prepared foods such as salads or sandwiches. Exterior improvements include repairing, remodeling, or restoring storefront areas to make them more attractive.

Promotion and Marketing of Healthier Foods

Small store interventions often include the marketing and promotion of healthier foods. Interventions can include adding shelf labeling or other point-of-purchase prompts to guide customers to healthier choices, advertising healthier foods, having lower price points for healthier items, or placing healthier options at eye level or in check out areas or other prominent places so they will be more likely to be selected for purchase. These activities may be part of a broader marketing strategy that involves product, placement, pricing, and promotion – the “four P’s” of marketing. For more information, see the call out box on Marketing and Promotion in Grocery Stores in the Grocery Stores chapter.

Accepting Nutrition Assistance Program Benefits in Small Stores

When small stores in underserved areas have healthier food options available, acceptance of nutrition assistance program benefits, like the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and the Supplemental Nutrition Assistance Program (SNAP), help low-income families afford the healthier food. In addition, many store owners may be interested in offering healthier food options as a way to become approved vendors for the nutrition assistance programs. See the call out box Federal Nutrition Assistance Program Benefits in Small Stores for a description of WIC and SNAP.

In 2009, the United States Department of Agriculture (USDA) implemented changes to the WIC food package that brought a wider range of healthier foods to WIC clients. The allowable food package now includes fruits, vegetables, and whole grain cereals and breads, as well as optional food substitution policies, such as substituting soy beverages and tofu for milk. WIC programs are administered by a state agency, such as the state health department, which may have additional stocking requirements in order for a store to participate as a WIC-certified vendor.
Federal Nutrition Assistance Program Benefits in Small Stores

Small stores can be approved vendors for federal nutrition assistance programs funded and administered through the United States Department of Agriculture (USDA), Food and Nutrition Service (FNS).

**Supplemental Nutrition Assistance Program (SNAP).** This program, previously known as Food Stamps, helps low-income families and individuals purchase food, including healthier items. Consumers receive SNAP benefits through their designated state agency in the form of Electronic Benefits Transfer (EBT) cards, which are much like bank debit cards. Cards can be used at any authorized FNS SNAP retailer. More information is available at [http://www.fns.usda.gov/snap](http://www.fns.usda.gov/snap/).

**The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC).** WIC benefits provide healthier food options to pregnant, postpartum, and breastfeeding women and to children up to age five who are considered at “nutritional risk.” Consumers receive benefits through their state, which are redeemable at any authorized WIC retailer. They use vouchers, checks, or EBT cards (depending on the state) to purchase approved foods. WIC Cash Value Vouchers (CVVs) are issued as part of standard WIC benefits specifically for the purchase of fruits and vegetables. More information is available at [http://www.fns.usda.gov/wic/](http://www.fns.usda.gov/wic/).

Working with Partners and Leveraging Resources

As a public health practitioner, you can work directly with partners to address issues that pertain to small stores. The *Partnerships, Assessment, and Evaluation* chapter has detailed information on partnering for healthier food retail initiatives. Additionally, there are a variety of potential partners that you can include to improve small stores in your state or region. You may want to include representatives of:

**Small Stores and their Representatives**

- State or local small grocer, corner store, and bodega associations.
- Small grocers, corner stores, bodegas, and ethnic markets.
- Corporate offices of convenience or other small store chains.

**Agriculture Offices**

- Cooperative extension agencies.
- USDA’s Office of Rural Development state offices.
Nutrition and Food Access Groups
- USDA’s Food and Nutrition Service (FNS) regional offices.
- Federal nutrition assistance programs at the state-level administering agency.

Planning and Development Groups
- Community planning and development departments.
- Planning groups that are involved in new urbanism and that have an interest in sustainable development in urban areas.
- Urban and rural cultural organizations committed to preserving retail characteristics in certain geographic areas, such as the rural country store or the urban bodega.

Community Groups
- Schools or youth groups.
- Hospitals, health management organizations, or clinics.
- Other community-based and community-driven organizations, including neighborhood associations, community centers, and faith-based organizations.

Action Items
As a public health practitioner, you can do the following to work with partners and leverage resources:

☑ Identify regions or communities that would benefit the most from a small store initiative and share findings of your assessment with other partners and stakeholders. Refer to the Partnerships, Assessment, and Evaluation chapter for additional information on assessment.

☑ Educate partners about initiatives that support small store improvements across your state. For example, some states have designated special programming and financing to address issues related to improving food and beverage options in small stores.38

☑ Convene or consult with state level administrators of WIC to explore the possibility for expansion of this program into more small stores. Interest or ability may vary from state to state due to caps on state allocations and reimbursements for nutrition benefits.

☑ Facilitate peer-to-peer networking events to develop or strengthen collaboration with small store networks or associations. Small store owners who have successfully incorporated healthier foods and beverages into their stores can become skilled peer-to-peer trainers because they understand common concerns and can share how they have overcome challenges.

☑ Regularly update partners and stakeholders on the progress of small store improvement activities across the state or region.

☑ Get community members and partners directly involved in training, technical assistance, Continued
or other events and activities. For example, invite a partner to host or participate in a store “re-opening” or an in-store promotional event for healthier foods and beverages.

☑️ Partner with schools or school districts to support healthier small stores surrounding schools and to address concerns about students purchasing food of low nutritional value on their way to and from school. For example, the Food Trust developed the Snackin’ Fresh program after finding that corner store purchases among school children before and after school of chips, candy, and sugar-sweetened beverages were frequently purchased and contributed about 350 kilocalories per purchase to their energy intake. This program works with schools, youth, and corner stores in Philadelphia to bring healthier snacks to neighborhoods. More information available at [http://thefoodtrust.org/snackinfresh/about.php](http://thefoodtrust.org/snackinfresh/about.php).

☑️ Facilitate connections with partners and funders to help owners of small stores with healthier food options purchase or lease Electronic Benefits Transfer (EBT) machines or other needed equipment.

---

**Small Stores in Action: Partnerships in the Healthy Corner Store Initiative in Providence, Rhode Island**

Led by the Environmental Justice League of Rhode Island (EJLRI), the Healthy Corner Store Initiative (HCSI) is a shared effort with multiple partners working together toward the goal of improving residents’ health by adding healthier options and variety to the food available at small markets, primarily in Providence and Pawtucket, RI. Partners have included: Kids First Rhode Island, Ready to Learn Providence, D’Abate Elementary School, the City of Providence Healthy Communities Office, and the Rhode Island Department of Health.

The HCSI developed out of EJLRI’s summer youth environmental program, the Community Environmental College (CEC), in 2009. In the first year, storeowners in South Providence were asked to participate in the program and two storeowners committed to participation, with a third storeowner in Pawtucket, RI approaching the HCSI to work with her store later in 2010. In its second year the program expanded to additional stores in Providence’s Olneyville and West End neighborhoods.

EJLRI’s youth leaders kicked off the initiative with a special Healthy Corner Store Iron Chef Competition in May 2010. With input and collaboration from partners, store makeover plans and materials were created and new products were purchased through community partners, including the Urban Greens Food Co-op and Confreda Farms in the program’s first year and through Roch’s Produce and Vistar in the program’s second year, which had a special focus on healthy snacks for kids. Since engaging stores one-on-one in 2010 and 2011 and evaluating the success and challenges of each store intervention, EJLRI and partners

Continued
have shifted focus to identify and implement policy changes that could support healthy
city-wide in partnership with the City of Providence’s new Healthy Communities Office.

EJLRI’s new year-round afterschool youth program, program, ECO Youth (Environmental
Community Organizers), is an outgrowth of the CEC summer program. Staff spent a year
giving nutrition workshops to area schoolchildren to promote the project. These efforts
have evolved into a new campaign geared to youth called SWAGG Snacks to shift youth
perceptions about healthy eating. While EJLRI and partnering community members have
been responsible for direct implementation of store activities, identifying supportive
city policies, and giving nutrition education to youth, the Rhode Island Department of
Health has provided technical assistance and guidance to support project goals, including
providing initial funding for development of the HCSI logo and some store promotional
materials. Kids First Rhode Island also provided technical assistance and other supports for
the project including connections with food distributors and area schools.

Providing Training, Technical Assistance, and Education

Training and technical assistance is critical when implementing changes for small stores. Small
store owners, managers of small store chains, and store owner associations may need information
on and assistance with various aspects of becoming a healthier small store, such as sourcing,
stocking and promoting healthier foods, accepting federal nutrition assistance program benefits,
and finding funding.

As changes to small stores are being made, it is important to inform community residents
where healthier foods and beverages are or will be available in their neighborhood and, if
applicable, that their WIC and SNAP benefits can be used. This can take the form of promotional
materials or educational campaigns that include taste tests, free samples, coupons, and limited
discount promotions.

Training and Technical Assistance to Store Owners

Training and technical assistance, particularly with program implementation and development
of marketing materials, may be helpful as small store owners begin to shift their practices toward
maintaining healthier inventories. For example, small stores may need assistance in sourcing
fruits and vegetables, which is challenging when only small amounts of produce are needed. Small stores may also need training and technical assistance around acceptance of nutrition
assistance program benefits, such understanding the WIC food package. While the changes to the
WIC food packages are showing increases in the availability of healthier products, complying
with the federal or state requirements can be challenging and require changes for small stores.
For example, store owners may need to modify their in-store promotion of foods, create
appropriate shelving or refrigeration space for the foods, or find appropriate sizes of foods in the
WIC package from distributors.
Action Items

As a public health practitioner, you can do the following to provide training and technical assistance to store owners:

- **Create or adapt instructional guides** (e.g., instructional manuals, replicable training guides, or train-the-trainer programs) on how small stores can sell and promote healthier food options. It may be most efficient to adapt existing guides and to work with local partners to draft guidance on how small stores can sell and promote healthier food options. See the Resources at the end of this chapter for existing guides. Keep in mind that:
  - Local groups may want to tailor materials for their own communities.
  - States have found that online training sessions and other alternatives to in-person sessions can be informative, easily accessible by owners and employees, and offered in languages other than English.65
  - Small store associations or other networks can help disseminate materials by hosting them on organizational Web sites or listservs.

- **Educate communities about programs** that could assist store owners with physical alterations to improve the overall store environment, such as the purchase or lease of equipment for stocking healthier food.

- **Collect and disseminate success stories or case studies** of small stores where improvements in healthier food options have resulted in improvements for the business and the community. Share these with communities and store owners and, when possible, pair dissemination of these stories with any training and technical assistance programs. Many stories are available at the Healthy Corner Stores Network Web page at [http://healthycornerstores.org](http://healthycornerstores.org), or you can highlight stories within your own state or region.

- **Use peer leaders to offer training and share success stories.** It may be compelling to hear successful store owners present how they were able to start selling healthier food options in their own stores.

- **Provide training and technical assistance** to store owners on topics such as:
  - Understanding healthier food and beverage product options.
  - Sustaining healthier food sales over time.
  - Modeling successful healthier small store ventures.
  - Obtaining healthier foods through small stores associations or buying groups (see the Distribution chapter for more information).
  - Becoming a WIC or SNAP authorized vendor.
  - Complying with WIC food package requirements, including addressing any distribution challenges that result from minimum stocking requirements (such as quantity, size, or brand) to become an authorized WIC vendor.

Continued
Achieving healthier food and beverage profitability, and marketing these items to customers.

Identifying potential partners to obtain funding and other resources. This could include creative ways to fund the start-up of initiatives and obtain resources that could help sustain initiatives over time.\textsuperscript{5,66}

\section*{In-Store and Community Marketing and Education}

To support small stores that sell healthier food options or to increase the demand for healthier food at stores that are beginning to sell them, it is important to develop healthier food promotions or education programs in the stores or in the communities around those stores. In-store and community marketing efforts typically include:\textsuperscript{66-69}

- Special or prominent displays that feature healthier food options. These can be placed within or outside the store, and can create a healthier shopping environment when highly visible, such as placed in the sales area at the front of the store.
- Shelf or product labeling that identified certain foods as “healthier” and that provides information on those products to customers.
- Community advertising and discount coupons for purchase of healthier foods.
- In-store promotion of healthier food options, including cooking demonstrations and taste tests.
- Community-wide events that can feature healthier foods, such as cooking competitions or other events through which store owners can promote healthier food purchasing and consumption.
Action Items

As a public health practitioner, you can do the following to provide training and technical assistance on in-store and community marketing and education:

☑ **Assist in the development of in-store marketing and promotional materials** and offer technical assistance to help store owners determine the messages that would resonate with their customers. For example, the Apache Healthy Stores project, funded by USDA and supported by the Johns Hopkins Center for Human Nutrition, uses multiple materials to help store owners connect with customers. The program provides intervention materials including educational displays on products that were developed with the approval and participation of tribal leaders. More information on this project is available at [http://healthystores.org/](http://healthystores.org/), along with information and intervention materials on several other corner stores projects.

☑ **Help develop materials** that store owners, small store associations, or community organizations can use or adapt to inform customers that WIC or SNAP benefits can be used to purchase healthier food options. For example, the Minnesota Department of Health developed and distributed marketing materials in four languages for retailers to use in promoting new “Fresh Choices” allowed by the revised WIC food package. Materials are available at [http://www.health.state.mn.us/divs/fh/wic/vendor/fpchng/posters.html](http://www.health.state.mn.us/divs/fh/wic/vendor/fpchng/posters.html).

☑ **Support production of community-wide marketing and advertising campaigns** to inform community residents that healthier foods and beverages are available. Use a variety of media, such as newspaper advertising and social media campaigns.

☑ **Establish recognition programs**, or the criterion for such programs, to promote small stores selling healthier food items.

☑ **Provide in-store promotions** targeted for consumers on topics such as healthier eating patterns as suggested by the *Dietary Guidelines for Americans, 2010* and tips for the preparation of low-calorie foods.
Small Stores in Action: Training and Technical Assistance Efforts

Supporting Small Stores through Technical Assistance in Minneapolis, Minnesota. In 2008, Minneapolis City Council passed a Staple Foods Ordinance which required that corner stores carry five types of fresh produce. A 2009 assessment conducted by the Minneapolis Health Department (MHD) found that 75% of stores were not meeting the requirements of the ordinance, and that the produce was often not visible to customers. Therefore, MHD implemented a technical assistance program to support the corner stores in implementing the ordinance. In 2010–2011, the program worked with nine stores in low-income neighborhoods. In 2012, the program was expanded to include 30 stores, through partnerships with community-based organizations. MHD supported the stores by assisting with product displays, store layout, signage, program promotion, tracking sales, and training on handling produce. Additionally, MHD worked with store owners and distributors or produce growers to help store owners procure affordable or local foods as well as providing owners with information on business development resources from the city. In return, the stores had to agree to several activities, including increasing healthier foods, displaying the foods and marketing materials, and participating in training. The program Web site provides assessment and evaluation tools used and reports that include implementation details, lessons learned, and evaluation results. Available at http://www.minneapolismn.gov/health/living/cornerstores. Additionally, a summary of the core program elements, evidence, implementation guidance, and potential public health impact are available from the CDC at http://www.cdc.gov/nccdphp/dnpao/programsta/nutrition.html.

Supporting Corner Stores and Bodegas in New York, New York. The New York City Department of Health and Mental Hygiene (NYC DOHMH) has worked with over 1,000 bodegas and nearly 100 supermarkets to increase the supply and marketing of healthier
items in the stores, such as fresh produce, whole grain bread, low-fat milk, and low-salt canned goods. NYC DOHMH supports the bodegas in many ways. Materials for promoting and displaying healthy items are provided, such as in-store displays, appropriate shelving and storage, and window advertisements. NYC DOHMH encourages and helps stores apply for permits to sell fresh fruits and vegetables outside of their store on the sidewalk, and has supported farm-to-bodegas components. NYC DOHMH also encourages stores to sell healthier foods in the deli and “grab-and-go” sections.

This initiative was originally called Healthy Bodegas but is now titled Shop Healthy NYC in order to encompass all types of food retail vendors. The initiative has a multi-level approach, working with stores to address inventory and placement/promotion, with customers to ensure product demand (via an Adopt a Shop Program), and with distributors to ensure stores have easy access to healthy foods (see the Distribution Strategies in New York, New York call out box in the Distribution chapter). The How to Adopt a Shop toolkit walks community members and organizations through the process of approaching and partnering with stores to support increased inventory, placement, and promotion of healthier foods. NYC DOHMH gives workshops to support use of the toolkit. Additionally, a Shop Healthy NYC!: Implementation Guide provides information on working with food retailers, food suppliers, distributors, and other community groups. The New York City How to Adopt a Shop guide and the implementation guide are available at http://www.nyc.gov/html/doh/html/living/shophealthy.shtml.

Addressing Other Common Concerns for Small Stores

In both rural and urban underserved areas, small store owners often face challenges around costs, profitability, competition, and consumer behavior. These factors can contribute to whether or not a store owner decides to participate in a healthier store initiative. For example:

- Small store retailers often have a tough time sourcing fresh produce and other healthier food options from distributors at a volume appropriate for the size of their customer base and the capacity of their storage and display areas.
- Store owners may not be able to offer competitive prices for healthier food items compared to larger stores, particularly when they are not able to purchase wholesale.
- Store owners may be hesitant to change their store format and products when facing competition of other retailers who may offer cheaper, less healthy products that have a longer shelf life and a higher profit margin.
- Store owners may perceive that there is insufficient demand for healthier items or that customers will not purchase the healthier items if the prices that the store has to charge are too high (due to the smaller volume of business), thus leading to low turnover of products and spoilage of produce.
Action Items

As a public health practitioner, you can do the following to address concerns about costs, competition, and consumer behavior:

✓ Assist with measures that help small store owners or managers source healthier options from distributors at affordable prices. The Distribution chapter provides action items to help all retailers gain access to improved distribution channels. Additionally, you may:

- Facilitate meetings or conversations with distributors so that they can understand and address state stocking requirements for authorized WIC or SNAP retailers.  
- Consider working with local farmers as a source for fresh fruits and vegetables, possibly getting a lower cost for small store retailers because they would be purchasing directly from the farmer. Alternatively, work with local farmers who may be interested in selling their produce at a farmstand outside of the store, such as on a sidewalk or in a parking lot. This can bring foot traffic to the store without the storeowner risking produce spoilage. Check zoning regulations to make sure that this is allowable in your area.
- Help store owners source and promote frozen and canned fruits and vegetables that are low in sodium, packed in water or juice, and have no added fat or sugar, as recommended in the Dietary Guidelines for Americans, 2010.

✓ Select stores to participate in pilot or other start-up programs whose owners are committed to implementing changes to improve availability of healthier food items within their communities.

✓ Explore partners who may be able to provide incentives to small stores that encourage them to sell healthier foods. There may be existing mechanisms available for incentives, such as waived or reduced permit fees or selling or leasing EBT equipment at reduced costs. For example, see the call out box Small Stores in Action: Incentive for Stocking Fruits and Vegetables in West Virginia Small Stores.

✓ Help store owners learn about customers’ interests in healthier foods and beverages by facilitating community meetings or focus groups of community residents to discuss healthier food preferences, or by implementing a community survey. This can help store owners get to know their customers and help build buy-in for store improvements. In addition, inform storeowners of:

- The types of healthier food options customers would like to see offered.
- How new customers may be recruited if healthier options are available.

✓ Ensure that the healthier food products you encourage are culturally desirable and appropriate, and that training or marketing materials are offered in languages and styles suitable for the retailers and for their customers.
Small Stores in Action: Incentive for Stocking Fruits and Vegetables in West Virginia Small Stores

As part of the Change the Future WV program, West Virginia’s Mid-Ohio Valley Health Department Board of Health passed an incentive policy that reduces costs of the Retail Food Permit depending on how much fresh produce is sold at the store. The stores receive a 20% reduction in the permit cost for each type of fresh fruit or vegetable offered (up to a 100% discount). Signage and technical assistance are provided to stores taking part in the program. There are now 34 stores in the Mid-Ohio Valley carrying fresh fruits and vegetables, compared to only 7 stores at baseline. More information can be found at [http://www.changethefuturewv.org/](http://www.changethefuturewv.org/) and in the document *Making the Healthy Choice the Easy Choice: Real-life Stories and Practical Tools from Change the Future WV* at [http://ctfwvresources.com/building-a-legacy.php](http://ctfwvresources.com/building-a-legacy.php).
Small Stores in Action: Washington State Department of Health Healthy Corner Store Initiative

Through its Communities Putting Prevention to Work (CPPW) funding, Washington State Department of Health (WA DOH) provided $40,000 (over a two-year period) to eight local health departments to develop and implement two projects, one of which was the Healthy Corner Store Initiative (HCSI).

For HCSI, each local health department implemented a three-phased project to improve up to two small or corner stores in low-income communities. WA DOH did not, however, start from scratch. Health department grantees were asked to use the Delridge Healthy Corner Store Toolkit for Community Organizers and Storeowners, previously created by the Delridge Neighborhoods Development Association and the Department of Urban Design and Planning at the University of Washington, to plan, implement, and evaluate projects. WA DOH engaged experts from the Delridge project to provide technical assistance to the grantees’ County Health Specialists, who were responsible for direct implementation.

During Phase One of the project, WA DOH asked grantees to develop project plans and meet specific milestones, including creating an advisory committee, conducting local assessments on customer preferences, and preparing a list of potential store partners. County Health Specialists then invited storeowners to participate in the HCSI. Most storeowners were enthusiastic about participating in the initiative, and one owner even temporarily closed his store for total refurbishing. Only one storeowner thought the community would not be interested in healthier food options. In this case, the County Health Specialist conducted a community survey and presented results to the storeowner showing that the community was indeed interested.

Because some participating store owners expressed an interest in acquiring certification for the Supplemental Nutrition Assistance Program (SNAP) and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), the WA DOH connected the County Health Specialists to the state WIC office so that the grantees could become familiar with the process and the paperwork required for the application process. Specialists then went on to help storeowners prepare their applications. The WA DOH also connected the County Health Specialists with regional WIC retail managers in the state to provide ongoing technical assistance to County Health Specialists and eventually store owners.

During Phase Two, grantees conducted store inventories, prepared project plans for work with the stores, and developed Memoranda of Understanding with storeowners. During Phase Three, County Health Specialists helped storeowners to prepare signage and other marketing materials.
One of the larger grantees (the Spokane Regional Health District) leveraged funding to help develop marketing materials. WA DOH connected smaller grantees to the Spokane Regional Health District staff, who then allowed the smaller counties to utilize the materials they created. Since the health department grantees provided assistance to store owners in securing funding, store improvements were made to the stores (such as displays, shelving, and produce prepping areas) and store owners began to stock fresh fruits and vegetables.

During implementation and evaluation of the initiative, WA DOH was active in networking and providing training and technical assistance to grantees. Specifically, they:

- Engaged partners that included: the University of Washington’s Center for Public Health Nutrition, Nutrition and Obesity Policy Research and Evaluation Network; Washington WIC Program; King County Healthy Eating Active Living Program; and the Washington Department of Social and Health Services.
- Provided technical assistance by hosting quarterly networking calls.
- Connected grantees with staff from the Washington Department of Economic Development regarding micro-loans for small storeowners.
- Created fact sheets about several healthy corner store projects in the communities.

Some of the corner stores involved in the project still offer healthier items even though the CPPW funding ended. Next steps include expanding the healthier food retail work in the state through CDC’s State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health funding and obesity prevention funding, and exploring state and local systemic approaches to healthier food retail. This would include activities such as incorporating healthy retail into community plans and working with state associations and large chains to increase promotion and availability of healthy foods.
Small Stores Resources

Centers for Disease Control and Prevention

The video, *Making the Business Case for Prevention: Healthy Corner Stores*, profiles two corner store owners in Louisville, Kentucky, and discusses how bringing healthier items into the stores is both improving the health of the community and increasing store profits. [http://www.youtube.com/watch?v=G_VkvizRZyg](http://www.youtube.com/watch?v=G_VkvizRZyg)

The *Baltimore Healthy Stores* and the *Minneapolis Healthy Corner Store Program* practice-tested intervention summaries include evidence summaries, core components, resources for implementation, and intervention materials that can be used by public health practitioners. [http://www.cdc.gov/nccdphp/dnpao/programsta/nutrition.html](http://www.cdc.gov/nccdphp/dnpao/programsta/nutrition.html)

Healthy Corner Stores Network (HCSN)

This Web site connects professionals and other stakeholders and provides resources for improving access to healthier foods. Multiple resources and networking opportunities are available including: a *Healthy Corner Stores Q&A* that provides basic and advanced information on corner stores and healthier foods; a *Tools* section with information on how to implement small store initiatives, such as toolkits, manuals, and tip sheets; a *Reports* section on recent studies, evaluations, and other reports; a list of project consultants; and a listserv. [http://healthycornerstores.org](http://healthycornerstores.org)

The *How to Work with Chains* Web page offers an example from Oregon of working with a regional chain of convenience stores, which may be particularly helpful when working at a state or regional level. They provide a tip sheet on *Why Work with Chains* and a starter kit with a sample presentation as well as many facts and figures to use when meeting with chain management. [http://www.healthycornerstores.org/how-to-work-with-chains](http://www.healthycornerstores.org/how-to-work-with-chains)

*Delridge Healthy Corner Store Project: A Toolkit for Community Organizers and Storeowners* is a toolkit coming from work in the Delridge neighborhood of Seattle, Washington. It identifies best practices from various small store initiatives around the country and includes: 1) a manual for community organizers who are coordinating a healthier corner store project; 2) a separate toolkit for storeowners who are taking steps to offer healthier food options; and 3) an appendix with tools and templates that can be used by multiple stakeholders for implementation and evaluation of small store improvement initiatives. [http://www.healthycornerstores.org/a-toolkit-for-community-organizers-and-storeowners](http://www.healthycornerstores.org/a-toolkit-for-community-organizers-and-storeowners)

*Healthy Corner Stores for Healthy New Orleans Neighborhoods: A Toolkit for Neighborhood Groups That Want to Take Action to Improve Their Food Environment* discusses food access in New Orleans, obesity in Louisiana, results from a New Orleans food purchase and preference study, challenges for small stores in offering healthier foods, and strategies for neighborhood advocates to improve access to healthier food through corner stores. The tools include a store survey, a store agreement, leaflets, and recipe cards. [http://www.healthycornerstores.org/wp-content/uploads/resources/NOLA_Healthy_Corner_Stores_Toolkit.pdf](http://www.healthycornerstores.org/wp-content/uploads/resources/NOLA_Healthy_Corner_Stores_Toolkit.pdf)
ChangeLab Solutions

Incentives for Change: Rewarding Healthy Improvements to Small Food Stores gives an overview of how communities can support small food retailers who want to make healthy changes to their businesses. A variety of incentives are discussed, including administrative, physical renovation, technical assistance, and customer outreach. [http://changelabsolutions.org/small-food-stores-incentives](http://changelabsolutions.org/small-food-stores-incentives)

Toward a Sustainable Model for Small-Scale Healthy Food Retail: Findings from NPLAN’s Healthy Corner Stores Symposium summarizes current important issues facing supporters of healthy corner store programs, discusses the strengths and weaknesses of current efforts, identifies additional research needs, and makes recommendations for supporting current promising practices. [http://changelabsolutions.org/publications/Corners-Stores-Symposium](http://changelabsolutions.org/publications/Corners-Stores-Symposium)

The Food Trust and Get Healthy Philly

The Sell Healthy Guide (available in English and Spanish) is geared towards store owners and program managers and assists them in learning how to sell healthier foods, increase sales, and attract more customers. It describes healthy products and displays, pricing and promotion strategies, and strategies to improve store appearance. [http://foodfitphilly.org/eat-healthy/healthy-corner-stores/](http://foodfitphilly.org/eat-healthy/healthy-corner-stores/)

Johns Hopkins School of Public Health, Center for a Livable Future, Healthy Stores Web Site

The Healthy Stores program began in 2000 with the Marshall Islands Healthy Stores program and now includes projects in five communities. Research and intervention materials for the Marshall Island programs, as well as the Apache Healthy Stores program and the Baltimore Healthy Stores program, are available on the Web page. The program Web site offers a variety of resources for nutrition and food access and provides several progress reports that detail project implementation and evaluation efforts. [http://www.healthystores.org](http://www.healthystores.org)
Chapter 4: **Farmers Markets**

Encouraging Farmers Markets in Underserved Areas
General Strategy Overview

This chapter discusses the public health role in developing new farmers markets and supporting existing markets, with an emphasis on providing nutrition assistance program benefits at the markets.

Farmers markets give people access to locally grown produce and provide farmers with locations to sell their products directly to consumers. They can provide direct and indirect economic benefits to a community, as well as foster a sense of community connectivity and shared space.73

Farmers markets may serve as an effective retail mechanism for offering healthier food options in underserved areas, including traditional and culturally appropriate foods. They can provide access to fresh fruits and vegetables74,75 and access is further improved when farmers markets are equipped with the ability to accept federal nutrition assistance program benefits. Accepting nutrition assistance program benefits increases consumption of fruits and vegetables among low-income individuals.76,77

Accepting Nutrition Assistance Program Benefits at Farmers Markets

Having the capacity to accept Electronic Benefit Transfer (EBT) cards at farmers markets is critical for accepting federal nutrition assistance program benefits. EBT cards allow low-income families and individuals who receive Supplemental Nutrition Assistance Program (SNAP) benefits to make purchases at the markets. Purchases may be made directly or via tokens or paper vouchers that can then be exchanged for goods. When working with farmers markets, keep in mind that there are costs involved in accepting EBT cards for markets or market managers, such as obtaining the point-of-sale terminal and related fees for its use. Additionally, farmers markets may need wireless internet access for EBT use.

What are Farmers Markets?

Farmers markets are places where farmers gather to sell their fresh produce and an array of other products, such as meat, fish, dairy, and baked goods. Most farmers markets operate at a specific location on a regular schedule, which is sometimes seasonal. While each participating farmer is an independent vendor, farmers markets are sometimes operated by a management entity (non-profit or otherwise) with legal and fiscal responsibility for the market.78 Many farmers markets also consider it part of their mission to promote the purchase and consumption of locally produced agriculture or provide a community gathering.79

The information and action steps in this chapter focus on increasing or improving farmers markets within the general community rather than at specific sites such as schools, hospitals, worksites, and other locations that cater primarily to a select group of patrons (such as employees). However, many ideas can be applied to farmers markets in any setting. Strategies for bringing local and regional foods to traditional retail stores, like corner stores, are discussed in the Distribution chapter.
Farmers markets may also accept Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) benefits through the Farmers Market Nutrition Program (FMNP), Senior FMNP, or WIC Cash Value Vouchers (CVVs). See the call out box on Programs at the U.S. Department of Agriculture Related to Farmers Markets for more information.

**Implementing Incentive Programs at Farmers Markets**

Incentive programs designed to increase redemption of federal nutrition assistance program benefits at farmers markets can be a critical means of sustaining farmers markets in underserved communities. Such programs allow farmers markets to grow their customer base by providing bonus or matching funds for redemption of SNAP or WIC benefits at markets. Evaluations of incentive programs in farmers markets have reported high redemption rates and attribute increased SNAP sales directly to this programmatic effort.\(^{80,81}\) Additionally, farmers have reported increased sales.\(^{80,81}\)

Nonprofit organizations can reinforce public health efforts by supporting incentive programs. One example is the Double Value Coupon Program that is implemented by the national organization, Wholesome Wave. Resources for this incentive program are available on Wholesome Wave’s Web site at [http://wholesomewave.org/](http://wholesomewave.org/). In addition, the Fair Food Network, another national nonprofit organization, manages Double Up Food Bucks and makes resources available through the program’s Web site at [http://www.doubleupfoodbucks.org/](http://www.doubleupfoodbucks.org/). An evaluation of these types of incentive programs across the country was conducted, and included Wholesome Wave, Fair Food Network, and two other incentive programs. Details of this evaluation are reported in *Healthy Food Incentive Cluster Evaluation 2011 Final Report* and are available at [http://www.fairfoodnetwork.org/resources](http://www.fairfoodnetwork.org/resources).

**Working with Farmers Markets in Underserved Communities**

When working with farmers markets and market managers in underserved areas, there are issues that public health practitioners may come across in relation to farmer profitability. When selling in low-income communities, farmers may need to price their products lower than the amount they could obtain in higher income areas. This means that farmers may need to sell large volumes of products in order to generate a reasonable profit. Alternatively, they could diversify their product mix to attract more customers. To earn fair profits, farmers market managers may need to extend the hours of operation at the market, or farmers may need to sell at multiple markets in different areas or combine selling at markets in underserved areas with being able to make a larger delivery to a nearby institution.

As a public health practitioner, you can work with state agencies administering federal nutrition assistance program benefits as well as other stakeholders to encourage programs and initiatives that support farmers markets in underserved communities. In particular, the United States Department of Agriculture (USDA) plays a prominent role in supporting and promoting farmers markets, including the use of EBT machines, through funding and programs (see call out box on Programs at the U.S. Department of Agriculture Related to Farmers Markets).
Programs at the U.S. Department of Agriculture Related to Farmers Markets

The U.S. Department of Agriculture (USDA) plays a prominent role in supporting and promoting farmers markets through competitive grants, data collection, research, and technical assistance. When working on farmers market strategies in your state or region, you may find it beneficial to collaborate with agricultural partners and those that administer programs and benefits from the USDA. These partners can bring expertise and practical experience to the table, and they may be aware of other financial and technical resources that are available to move initiatives forward.

**USDA-wide**

**Know Your Farmer, Know Your Food.** This initiative’s Web site is your best “one-stop shopping” for USDA programs and funding related to local and regional food systems because it pulls together information from across USDA. The overall Web site, as well as the *Know Your Farmer, Know Your Food (KYF) Compass* tool, offer information on existing programs, potential sources of grant funding, and case studies. The interactive map on the *KYF Compass* contains many data layers showing programs funded by USDA and other U.S. government departments, such as farmers market, food hub, and wholesale produce market data. Access Know Your Farmer, Know Your Food and the *KYF Compass* at [www.usda.gov/knowyourfarmer](http://www.usda.gov/knowyourfarmer).

**Agricultural Marketing Service**

**Farmers Market and Direct-to-Consumer Marketing Programs.** These programs support farmers markets and other direct-to-consumer marketing outlets through applied research, technical services, and grant support. The Web site provides information on federal funding opportunities for farmers markets and other direct-to-consumer markets for food products, along with numerous statistics and research on farmers market performance, operations, and trends. Available at [http://www.ams.usda.gov/AMSv1.0/farmersmarkets](http://www.ams.usda.gov/AMSv1.0/farmersmarkets).

**Farmers Market Promotion Program (FMPP).** The FMPP is an annual, competitive grant designed to enhance marketing opportunities for direct farm marketers and enhance availability of locally grown foods by supporting direct-to-consumer marketing channels, such as farmers markets, roadside stands, and community supported agriculture programs. Many types of organizations are eligible to apply, including producer associations, local governments, nonprofit groups, and tribal governments. You can locate program information at [http://www.ams.usda.gov/AMSv1.0/fmpp](http://www.ams.usda.gov/AMSv1.0/fmpp).

**Food and Nutrition Service (FNS)**

**Supplemental Nutrition Assistance Program (SNAP).** This program, previously known as Food Stamps, helps low-income families and individuals purchase food, including...
healthier items. Consumers receive SNAP benefits through their designated state agency in the form of Electronic Benefits Transfer (EBT) cards, which are much like bank debit cards. Cards can be used at any authorized FNS SNAP retailer, including some farmers markets. You can learn more about SNAP at farmers markets at http://www.fns.usda.gov/snap/ebt/fm.htm.

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) Farmers Market Nutrition Program (FMNP). The FMNP provides WIC recipients with supplemental benefits to purchase foods from farmers markets and participate in nutrition education. WIC serves low-income pregnant, breastfeeding, and postpartum women, as well as children up to five years of age who are found to be at nutritional risk. The overall goal of the FMNP is to provide fresh, nutritious, unprepared, locally grown produce through farmers markets and roadside stands to WIC recipients, and to expand the awareness of, use of, and sales at farmers markets and roadside stands. More information about the WIC FMNP is available at http://www.fns.usda.gov/wic/fmnp/fmnpfaqs.htm.

Senior Farmers Market Nutrition Program (SFMNP). States, territories, and federally-recognized Indian tribal governments receive SFMNP grants to provide low-income senior citizens with coupons to purchase eligible foods (such as locally grown fruits, vegetables, herbs, and honey) at authorized farmers markets, roadside stands, and community supported agriculture (CSA) programs. SFMNP details are available at http://www.fns.usda.gov/wic/seniorfmnp/sfmnpmenu.htm.

WIC Cash Value Vouchers (CVVs). WIC recipients also receive a Cash Value Voucher (CVV) to purchase fresh fruit and vegetables, issued as part of standard WIC benefits. In addition, some states authorize farmers to accept WIC CVVs, allowing for use at farmers markets. Additional information is available at http://www.fns.usda.gov/wic/benefitsandservices/foodpkgquestions.HTM#menu.

FNS and the National Institute of Food and Agriculture (NIFA) SNAP-education (SNAP-Ed). SNAP-Ed is a federal-state partnership that encourages state SNAP agencies to provide nutrition education to SNAP recipients so they can gain skills for making healthier food choices on a limited budget. This program is a partnership between FNS and NIFA, with NIFA providing leadership for education conducted through the land-grant system. SNAP-Ed was also recently restructured with enactment of the Healthy, Hunger-Free Kids Act of 2010; new guidance allows funds to be used for policy and environmental change strategies for obesity prevention, including healthier food retail strategies. You can find out more about the SNAP-Ed program at http://www.fns.usda.gov/snap/nutrition-education; and can access the current guidance for states as well as other resources at the SNAP-Ed Connection Web site: http://snap.nal.usda.gov/.
Working with Partners and Leveraging Resources

As a public health practitioner, you may work with various federal, state, tribal, and local agencies and organizations on issues pertinent to farmers markets. The Partnerships, Assessment, and Evaluation chapter has detailed information on partnering for healthier food retail initiatives. There are a variety of potential partners that you can include to start or sustain farmers markets in underserved areas of your state or region. You may want to include representatives of:

**Agriculture Offices and Growers/Producers**
- State farmers market associations.
- Local farmers market umbrella or cooperative organizations that manage several markets in an area.
- Farmers and farmers market managers and vendors.
- Cooperative extension agencies.
- USDA’s Office of Rural Development state offices.
- Federal, state, and community-based non-profits that operate programs focused on food access or farmers markets.

**Nutrition and Food Access Groups**
- Federal nutrition assistance programs at the state-level administering agency.
- USDA’s Food and Nutrition Service (FNS) regional offices.
- Private and non-profit food assistance programs, such as food banks, hunger and homeless prevention agencies, and faith-based organizations.
- State, regional, or local food policy councils.

**Business and Development Groups**
- Regional Development Commissions.
- Chambers of Commerce.
- Private vendors who sell or rent EBT hardware and who offer data management plans.

**Community Groups**
- Hospitals, health management organizations, or clinics.
- Other community-based and community-driven organizations, such as neighborhood associations, schools, and community centers.

**Government Agencies and Regulatory Groups**
- City and town planning departments.
- State and local agencies that regulate food establishments and services like environmental health or safety and sanitation.
Action Items

As a public health practitioner, you can do the following to work with partners and leverage resources:

✔ **Lead or support assessment and planning efforts** to identify communities that can benefit from development of a farmers market. If there are already farmers markets in underserved areas, you can help determine if those markets need additional support. You may also want to assess various components of how farmers markets function in different areas, such as reviewing redemption rates of federal nutrition assistance program benefits or incentives. Refer to the *Partnerships, Assessment, and Evaluation* chapter for additional information on assessment.

✔ **Assist in establishing a state or regional association of farmers markets.** This association can help you and your partners develop a plan for implementing strategies to support the development and marketing of farmers markets in your state or region.

✔ **Partner with hunger and poverty organizations** to identify and work on common priorities related to hunger relief and healthier food consumption.

✔ **Partner with state offices that administer federal nutrition assistance program benefits to:**
  
  ▶ Define collective goals, outline roles, and specify responsibilities in increasing the acceptance and use of federal assistance benefits at farmers markets.
  
  ▶ Discover areas of work where synergy or efficiencies can be gained by working collaboratively.

✔ **Educate partners about funding programs** that can be used to subsidize the purchase and management of hardware, software, data collection, and market innovations in farmers markets. For example, the USDA’s FNS has made funds available to expand availability of wireless technology in farmers markets not currently participating in SNAP, both through a contract with the National Association of Farmers Market Nutrition Programs (NAFMNP) and through SNAP state agencies. Additionally, technical assistance is available to support markets through the process of applying for and receiving EBT equipment. For more information, contact NAFMNP at [http://marketlink.org/](http://marketlink.org/) or contact your State SNAP office, [http://www.fns.usda.gov/snap/outreach/map.htm](http://www.fns.usda.gov/snap/outreach/map.htm).

✔ **Work with partners to determine ways in which wired or wireless technologies can work** for farmers markets. Consider novel locations or innovative solutions if technology is a barrier to development and operation. Farmers markets can also consider partnering with businesses that will allow use of their wireless or wired access during market hours.

✔ **Plan with your partners for the sustainability of incentive programs** at farmers markets in your state. This could include how the programs can continue after initial grant funding ends.
Farmers Markets in Action: Partnerships to Support Acceptance of Nutrition Assistance Program Benefits in North Carolina and Massachusetts

The Farmers Market Nutrition Programs Integration Project in North Carolina. The North Carolina Farmers Market Nutrition Programs Integration Pilot Project (FMNPIP) was a multi-site intervention involving many state agencies and partners. The program aimed to increase integration, program planning, cross promotions, marketing and nutrition education among three United States Department of Agriculture (USDA)-affiliated farmers market nutrition assistance programs in North Carolina: the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) Farmers Market Nutrition Program (FMNP), the Senior FMNP, and the 21st Century Farmers Markets Program (CFMP). CFMP is a program to equip and assist direct farm-to-market retailers, such as farmers markets, mobile mini-markets, farmer cooperatives, and Certified Roadside Farm Stands in accepting Electronic Benefit Transfer (EBT) cards for the Supplemental Nutrition Assistance Program (SNAP).

Seven farmers markets in seven counties of North Carolina were identified as having all three programs and were eligible to participate in the project. Linking the multiple government food assistance agencies and programs at the state and community level provided coordinated marketing and promotion of the programs, which helped educate the low-income consumers in mostly rural areas about the existence of farmers markets in their communities and that they could use more than one benefit at the farmers markets. Indirectly, the FMNPIP also sought to create behavior change (fruit and vegetable consumption) among this population and create sustainability of local farmers.

This project involved many partners in the North Carolina Department of Health and Human Services: it was coordinated by the Physical Activity and Nutrition Branch in the Division of Public Health, with support from the Nutrition Services Branch (also in the Division of Public Health), the Division of Aging and Adult Services, and the Division of Social Services. Project partners also included the North Carolina Department of Agriculture and Consumer Services and the statewide non-profit, Leaflight (who provides administrative support, training, and equipment to multiple farmers markets to be able to accept SNAP/EBT).

Continued
**Double Value Coupon Program in Massachusetts.** In Massachusetts, the Department of Transitional Assistance (DTA) and the Department of Agricultural Resources (DAR) work together to support and increase the use of SNAP benefits at farmers markets. With funding from DTA, Wholesome Wave, and the Harvard Pilgrim Health Foundation, DAR has helped subsidize the purchase or lease of EBT machines by farmers markets, and created an incentive program to increase SNAP redemption at farmers markets through the Double Value Coupon Program. In this program, customers purchasing locally grown fruits and vegetables from farmers markets receive a dollar for dollar match for the amount spent using SNAP, up to $10.00 per week. A description of the Massachusetts program results are highlighted in the *Partnership, Assessment, and Evaluation* chapter and materials are available at [http://wholesomewave.org/dvcp/](http://wholesomewave.org/dvcp/).

---

**Providing Training, Technical Assistance, and Education**

Coordinating training and technical assistance for stakeholders who operate farmers markets is an important role for public health practitioners, and there are activities you can do to support market management. Additionally, there are opportunities for training and technical assistance in the areas of marketing and education for farmers markets, which can be vital to their success.

**Providing Training, Technical Assistance, and Education to Support Market Management**

Stakeholders who support market management may include state farmers market associations, farmers market managers, and farmers. Topics for technical assistance, training, and education can include compliance with state or municipality regulations on health and food safety, increasing use of nutrition benefits in low-income areas, and addressing customer comments and concerns. To provide this technical assistance, you can make connections between state and local health and safety experts, farmers and food producers, farmers market managers, and state or regional farmers market associations.

**Action Items**

As a public health practitioner, you can do the following to provide training, technical assistance, and education to support market management:

- **Provide or coordinate technical assistance to state or regional farmers market associations** on increasing utilization of federal nutrition assistance program benefits at farmers markets, such as on planning or evaluating incentive programs. Lessons learned from other programs can be shared. For example, in New York City, program staff found that handing incentive vouchers (Health Bucks) to customers directly at farmers markets...
encouraged use of EBT and immediate redemption of Health Bucks, resulting in increased EBT sales at the markets.  

☑️ **Utilize the skills and knowledge of the association members and market managers** to assist with training and technical assistance efforts. You may want to assist in building communications infrastructure to promote information-sharing and peer-to-peer learning such as:

- Developing a Web portal.
- Hosting a regular call or meeting series.
- Developing a community of practice or knowledge management work group.
- Developing a mechanism to share communications and marketing products that can be customized for use by others.

☑️ **Provide or coordinate training and technical assistance** for market managers and other partners on topics such as:

- Working with underserved communities in outreach, education, and operation.
- Adopting new technology and enabling innovation.
- Ensuring food safety standards are understood and met at farmers markets (see call out box *Food Safety in Farmers Markets*).
- Creating mechanisms to accommodate consumer concerns regarding price, product, transportation, and operations.

☑️ **Collaborate with market managers** on reviewing the mix of products sold by vendors. Encourage inclusion of a greater number of healthier items, focusing particularly on maintaining a variety of fruits and vegetables early and late in the season.
Food Safety in Farmers Markets

Food safety and food handling are important issues for farmers markets. Public health practitioners can provide assistance to market managers or associations on understanding what food safety regulations apply to markets or individual vendors, including:

- Required and recommended production and transportation standards, such as those outlined in Good Agricultural Practices (GAP) or Good Handling Practices (GHP) audits from the United States Department of Agriculture (USDA). A farm can have a voluntary audit that reviews its agricultural practices, and can become certified that “fruits and vegetables are produced, packed, handled, and stored in the safest manner possible to minimize risks of microbial food safety hazards.” More information is available at [http://www.ams.usda.gov/AMSv1.0/gapghp](http://www.ams.usda.gov/AMSv1.0/gapghp).
- Required and recommended preparation and display standards for samples and taste tests.
- Required and recommended facility standards for value-added products like bread, soups, salsas, or pickled foods.
- Recommendations on product liability insurance.
- Emerging food safety requirements and regulations, particularly any coming from the Food Safety Modernization Act of 2010 from the Food and Drug Administration ([http://www.fda.gov/Food/GuidanceRegulation/FSMA/default.htm](http://www.fda.gov/Food/GuidanceRegulation/FSMA/default.htm)).

Training materials and resources on food safety and handling as well as insurance and liability are available from multiple sources, including:

- **The Farmers Market Coalition.** Many food safety tools and trainings are available at [http://farmersmarketcoalition.org/education/resource-library/](http://farmersmarketcoalition.org/education/resource-library/).
- **Marketumbrella.org.** See the manual *From the Field to the Table* at [http://www.marketumbrella.org/marketshare/](http://www.marketumbrella.org/marketshare/).
- **The Food and Drug Administration Food Retail Protection Program.** This Web page offers links on topics such as codes, compliance, and training at [http://www.fda.gov/Food/GuidanceRegulation/RetailFoodProtection/](http://www.fda.gov/Food/GuidanceRegulation/RetailFoodProtection/).
- **Cornell University Department of Food Science.** This website provides education materials on GAP at [http://www.gaps.cornell.edu/educationalmaterials.html](http://www.gaps.cornell.edu/educationalmaterials.html).
- **The USDA’s National Institute of Food and Agriculture Cooperative Extension System.** The Cooperative Extension System can link you to contacts in the state that provide agricultural education among other services. All state Cooperative Extension offices are available at [www.csrees.usda.gov/extension](http://www.csrees.usda.gov/extension).
Farmers Markets in Action: Providing Technical Assistance to Tribally-Owned and Operated Farmers Markets Through the American Indian Healthy Eating Project

The University of North Carolina-Chapel Hill in partnership with seven American Indian tribes in North Carolina developed planning and policy strategies to improve access to healthy eating within Indian country.

Using community-based participatory research, this innovative project, funded by Healthy Eating Research (a national program of the Robert Wood Johnson Foundation), collected and analyzed qualitative, spatial, and policy data to identify the most promising environmental and policy strategies to advance healthy eating within the seven participating tribal communities.

To accelerate solution-oriented community changes around healthy eating, data and ideas were disseminated to tribal leaders in a toolkit known as *Tools for Healthy Tribes* in addition to online resources for developing farmers markets, community gardens, Pow Wow concessions, healthy retail and restaurant partnerships, and family and worksite activities.

Native and North Carolinian examples are emphasized including the Haliwa-Saponi Indian Tribe farmers market and community garden. Currently, these seven tribes along with four urban Indian organizations in North Carolina are developing, implementing, and evaluating community changes to promote healthy eating and active living through Healthy Native North Carolinians Network, which is supported through a capacity building grant from Kate B. Reynolds Charitable Trust.

Explore the *Tools for Healthy Tribes* toolkit along with more web-based resources specific to farmers markets, including information on food safety, at [http://americanindianhealthyeating.unc.edu/tools-for-healthy-tribes/](http://americanindianhealthyeating.unc.edu/tools-for-healthy-tribes/).
Providing Assistance with Direct-to-Consumer Marketing, Nutrition Education, and Community Marketing and Outreach

Public health practitioners can provide support to ensure that there is adequate direct-to-consumer marketing and outreach. You may want to support consumer education initiatives on fruit and vegetable purchasing, preparation, and consumption, such as how to plan a meal, buy fruits and vegetables on a limited budget, and prepare healthier meals using foods purchased at a farmers market. In addition, broader marketing and outreach can inform a community about the locations, hours of operation, and types of products available. In low-income communities, this can help address perceptions that farmers markets are mostly available in and appropriate for affluent communities. Broader marketing and outreach also provides information on accepted nutrition benefits and incentive programs, and encourages participants to use their benefits at farmers markets. For example, in New York City, farmers market managers employed several different methods to promote EBT/SNAP, including promotional handouts, posters at the farmers markets, community outreach, and newspaper or on-line advertisements and articles.86

USDA’s Farmers Market Promotion Program (FMPP) and SNAP-Ed programs provide funding for marketing and other education efforts at farmers markets (see call out box on Programs at the U.S. Department of Agriculture Related to Farmers Markets).

Action Items

As a public health practitioner, you can do the following to provide assistance with direct-to-consumer marketing and outreach, nutrition education, and community marketing and outreach:

- **Partner with staff at SNAP-Ed agencies** to offer consumer education on fruit and vegetable purchase, preparation, and consumption, or to collaborate on what farmers market activities could fit into the obesity prevention strategies now allowable through SNAP-Ed.

- **Partner with the staff at WIC FMNP and Senior FMNP agencies** or their education partners to support nutrition education to program participants.

- **Partner with staff at state offices that administer federal nutrition assistance program benefits** on data collection and analysis around participation and utilization of benefits at farmers markets. Share these and any other market data with farmers and market managers. Increasing the capacity of program administrators to capture real-time data may inform program planning as well as marketing and outreach activities.

- **Work with social service and faith-based organizations** to provide a direct link to consumers for marketing, outreach, and transportation efforts. For example, in New York state evaluators found that when community-based organizations (CBOs) distributed incentive vouchers (Health Bucks) directly, they saw an increase in awareness of the program and of farmers markets among customers who were less familiar with incentive vouchers or who did not visit farmers markets regularly. In addition, the CBOs were able to help link nutrition education and promotion activities.84

Continued
Develop marketing materials or assist farmers market managers in developing their own materials. Ensure the language and designs of materials are appropriate for the community being targeted. Developing materials that are consistent with a known and well-received brand can also resonate with your audience. Many state health departments, for example, are licensed to use the Produce for Better Health Foundation’s Fruits & Veggies—More Matters® brand.

Synthesize information for market managers or health educators from resources dedicated to nutrition information and dietary guidance such as USDA’s http://www.choosemyplate.gov and Produce for Better Health Foundation’s http://www.fruitsandveggiesmorematters.org.

Farmers Markets in Action: Incentive Programs and Consumer Education at Farmers Markets in New York, New York

The New York City Department of Health and Mental Hygiene (NYC DOHMH) has two farmers market programs that support customers in purchasing fruits and vegetables at NYC farmers markets: a nutrition assistance benefit incentive program and a nutrition education program. NYC DOHMH developed the Health Bucks initiative for NYC farmers markets. Health Bucks are worth $2 each and are distributed to eligible customers at markets and by community-based organizations in high need areas. Market managers at participating farmers markets who operate Electronic Benefit Transfer (EBT) terminals distribute Health Bucks to recipients of Supplemental Nutrition Assistance Program (SNAP) benefits as an incentive for them to purchase additional fresh produce. At these markets, SNAP consumers receive a $2 Health Buck for every $5 spent in SNAP benefits at the farmers market—effectively a 40% increase in purchasing power. Since the program began, the number of participating markets has grown rapidly from approximately 5 in 2005 to all 138 in 2012. The redemption rate of Health Bucks has also increased every year; in 2011, of the nearly 88,000 coupons distributed to SNAP users, 93% were redeemed. Evaluation results indicated that NYC farmers market managers had positive attitudes toward the SNAP/EBT and Health Bucks programs. Additionally, over 70% of farmers or vendors agreed that because they accepted Health Bucks, they made more money at the market and they sold more fresh fruits and vegetables.

The Stellar Farmers Market (SFM) program provides nutrition education at farmers markets in low-income areas of NYC. It is operated by the NYC DOHMH’s Food Access and Community Health unit, and is funded through the New York State Department of Health (NYSDOH). The SFM program hosts free nutrition workshops and cooking demonstrations at select markets to promote fruit and vegetable consumption and help consumers learn to plan and prepare healthier meals using local, seasonal produce. SFM nutrition educators...
use produce purchased at the market that day to complement the *Just Say Yes to Fruits and Vegetables* (JSY) program curriculum, which includes multiple nutrition education lessons. They also offer guidance to consumers on food safety and economical shopping. Information on the Health Bucks incentive and using EBT is presented at the workshops. The JSY program receives federal funding through the U.S. Department of Agriculture’s SNAP-Ed program and has local cost share funds provided from the NYSDOH and Hunger Prevention Nutrition Assistance. In 2011, SFM sponsored over 1,300 sessions and provided Health Bucks coupons to over 15,000 workshop participants through the SFM program. Ninety-two percent of these coupons were redeemed.87


**Addressing Other Common Concerns for Farmers Markets**

Specific issues commonly arise when developing farmers markets. Some of these issues may apply to farmers markets in general; others can be exacerbated in underserved areas. Public health practitioners can help address these concerns when planning and implementing farmers market initiatives.

**Farmers Market Management**

The management duties associated with a farmers market can be time-consuming and many farmers, producers, or other vendors may not be interested in assuming these duties. A market manager’s responsibilities include:88

- Recruitment and enrollment of farmers and vendors.
- Market operations (daily, seasonal, and yearly tasks).
- Management of finances (establishing a budget, securing financing, and collecting fees).
- Operation of EBT terminals.
- Oversight of compliance with rules and regulations.
- Community outreach, advertising, and promotions.
- Maintenance of grounds and equipment.

Many markets begin to manage with a volunteer coordinator, often a market vendor, and then hire a professional manager as the market grows or continues.89
Chapter 4: Farmers Markets

Zoning Issues

Most cities, counties, or jurisdictions have zoning laws that define how land is used. These land use laws may present a direct or inadvertent barrier for developing or sustaining farmers markets in underserved communities. The land use policies can also facilitate the utilization of public lands for activities like a farmers market. Most zoning codes divide a jurisdiction into residential, commercial, or mixed-use districts that determine how development and use of the land is regulated. If farmers markets operate in areas that are not zoned for commercial or mixed-use, they may be fined or closed down, even if they are not specifically prohibited.90

Community Awareness of Farmers Markets

Farmers markets may face challenges attracting and keeping customers in underserved markets, particularly during the start-up phase. Some common challenges arise because community members:

- May not be aware that a farmers market with affordable options is located in their community or may not know the days and hours of operation.
- May not know how to select or prepare foods sold at farmers markets. People may also not have the knowledge of how to take advantage of and adapt to seasonal variability.
- May not be aware that federal nutrition assistance program benefits are accepted or that incentive vouchers may be available.
- May not find the product mix appealing or adequate to meet their shopping needs or cultural preferences. Linguistic barriers might also inhibit people from trying new or unfamiliar foods or from shopping at a farmers market.

As for any retailer, marketing, promotion, and meeting customer demand can help farmers markets and vendors with sales. In addition, farmers markets in underserved communities may require some community involvement to ensure initial success and sustainability. Challenges may be avoided or overcome if the community feels a sense of ownership in the conceptualization, development, and maintenance of the markets. 78,91
Action Items

As a public health practitioner, you may be able to address concerns about farmers market management, zoning, and community awareness of markets with the following actions:

☑ Explore possibilities for supporting the capacity and sustainability of developing markets through market management. This could include funding programs such as the Farmers Market Promotion Program (see call out box on Programs at the U.S. Department of Agriculture Related to Farmers Markets) or considering alternate management infrastructures, such as rotation of management duties among vendors, establishment of an advisory board, or recruitment of dedicated volunteers.

☑ Summarize findings from health impact assessments†† and other practice-based evidence on how land use policies could affect the development of farmers markets in your target area and share with partners working on land use. For example, in Atlanta, Georgia, the Department of Planning and Community Development and the Mayor’s Office of Sustainability provided information to amend Atlanta’s zoning code to establish farmers markets as a permitted use in specific zoning districts, such as on commercial properties and church parking lots.

☑ Collaborate with community coalitions and other groups on planning and development of future farmers markets. You may want to start by conducting a survey to determine which communities are interested in shopping at a farmers market and which local businesses will support farmers markets. The Farmers Market Coalition has feasibility surveys for both consumers and businesses, as developed by the Farmers Market Federation of New York. Both tools are available at http://farmersmarketcoalition.org/types/surveys-evaluation-and-research/.

Farmers Markets in Action: Michigan Department of Community Health and the Michigan Farmers Market Association

The Michigan Department of Community Health (MDCH) identified farmers markets as a way to increase food access in low-income areas of the state. Starting with involvement in establishing and operating the Michigan Farmers Market Association, MDCH was also instrumental in forming an arm of the association known as the Food Assistance Partnership that provides support to community residents, farmers, and farmers markets. The Food Assistance Partnership exists to ensure that the state’s residents have access to locally grown healthier foods.

Local health departments first complete an assessment of food access in low-income areas and determine whether or not a farmers market would likely be successful in the community. MDCH then provides start-up funding for the market and helps farmers become members of the Michigan Farmers Market Association. MDCH works through the Food Assistance Partnership to ensure that farmers at the market have the ability to accept several payment methods. At a minimum, the market must accept cash and Supplemental Nutrition Assistance Program (SNAP) benefits through Electronic Benefits Transfer (EBT) to receive MDCH funding. MDCH supported the Food Assistance Partnership, through a grant and technical assistance, in developing a manual to assist markets with the purchase and use of EBT equipment. Information on requisite technology, associated fees, and resources was included.

In addition to SNAP, MDCH encourages the markets to accept debit and credit, as well as Project FRESH (Farm Resources Expanding and Supporting Health) coupons (Michigan’s version of the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) Farmers Market Nutrition Program (FMNP)). MDCH also works with the Office of Services to the Aging on accepting Market FRESH benefits (Senior FMNP in Michigan) and with the WIC program on having Cash Value Vouchers (CVV) accepted at farmers markets. WIC recipients who participate in Project and Market FRESH are also eligible for nutrition education programming and resources. The Food Assistance Partnership provides resources to consumers through the Michigan State University Extension, such as a Michigan Availability Guide, a produce purchasing guide, and various cookbooks.

Through the Food Assistance Partnership, data are collected on the use of SNAP benefits at the farmers markets. MDCH developed an evaluation protocol for Michigan farmers markets and, through the Community Grants Program, collect data on:

- The number of markets that have EBT access.
- The number of markets that are using the equipment.
- The number of markets that have been established.
To round out its involvement, the MDCH also conducts surveys at farmers markets, asking residents how much they spent in the market, how they paid for produce, and if they are eating more fruits and vegetables than before using SNAP benefits at the market.

Evaluation results demonstrated an increase in the number of farmers markets throughout the state. In 2009 there were 200 markets overall, with 30 accepting SNAP benefits. In 2013, these numbers increased to 300 markets overall and 128 of them accepted SNAP benefits. From 2009 to 2013, SNAP sales increased from $297,078 to $1,207,522 at Michigan farmers markets. Evaluation results, tools, a link to the Accepting Bridge Cards at Michigan Farmers Markets manual, and other information are available from the Michigan Farmers Market Association at http://mifma.org/snap/ and http://mifma.org/food-assistance-partnership/for-market-managers/.

### There’s an App for That: Accepting Nutrition Assistance Program Benefits with a Mobile Technology Application

A public-private partnership between the Michigan WIC Program and the Novo Dia Group resulted in the development of an application for the iPhone, iPad, or iPod Touch that supports the acceptance of nutrition assistance program benefits at farmers markets. The application, called Mobile Market+™ allows authorized farmers markets to process SNAP, WIC, FMNP, and CVV transactions. This farmers market project began in 2009 when the Michigan WIC EBT program recognized the need to improve their clients’ access to fresh produce available at various farmers markets across the state. In the summer of 2012, the technology was deployed across 26 farmers markets in Michigan.

In 2013, Novo Dia Group partnered with Fair Food Network to allow merchants to both process EBT transactions and allow enrolled customers to automatically participate in the state’s Double Up Food Bucks incentive program, all on one device. The software is now available nationwide and is used in the National Association of Farmers Market Nutrition Programs MarketLink program, which aims to increase the acceptance of SNAP at farmers markets nationally through a contract with the United States Department of Agriculture.
Farmers Market Resources

**United States Department of Agriculture (USDA)**

The *Supplemental Nutrition Assistance Program (SNAP) at Farmers Markets: A How-To Handbook*, jointly published by USDA's FNS and Agricultural Marketing Service, provides how-to guidance on accepting SNAP benefits at farmers markets, including topics such as how to install EBT systems at farmers markets, how to become an FNS SNAP retailer, and how to have successful SNAP EBT at farmers markets. [http://www.ams.usda.gov/AMSv1.0/getfile?dDocName=STELPRDC5085298](http://www.ams.usda.gov/AMSv1.0/getfile?dDocName=STELPRDC5085298)

Other resources from USDA on farmers markets are provided in the call out box *Programs at the U.S. Department of Agriculture Related to Farmers Markets*.

**Farmers Market Coalition**

The *Farmers Market Coalition Resource Library* is a database of resources for multiple audiences including public health practitioners. Farmers, market managers, and researchers can search by key word, audience, or author. Topics include food safety and handling; funding and grants; insurance, liability, and licensing; market start-up and development; state association development; and surveys, evaluation, and research. Available resources were developed by a variety of individuals, organizations, agencies, and academic institutions. [http://farmersmarketcoalition.org/education](http://farmersmarketcoalition.org/education)


*Real Food, Real Choice: Connecting SNAP Recipients with Farmers Market*, authored by the Community Food Security Coalition and the Farmers Market Coalition, examines strategies to increase SNAP use in farmers markets and the barriers faced by farmers and low-income consumers. The report concludes with a road map for change, which features primary and secondary recommendations for different audiences. [http://farmersmarketcoalition.org/real-food-real-choice](http://farmersmarketcoalition.org/real-food-real-choice)

**Marketumbrella.org**

This Web portal hosts multiple resources through the Market Share section, including lessons learned and best practices for markets in various formats, manuals for market management, “field notes” or initial research findings from the field, and “green” papers on specific market topics, policies, and practices. [http://www.marketumbrella.org/marketshare/](http://www.marketumbrella.org/marketshare/)

**Project for Public Spaces**

*Farmers Markets as a Strategy to Improve Access to Healthy Food for Low-Income Families and Communities* reports findings from a study examining the characteristics of farmers markets...
that successfully attract low-income shoppers. The study also assessed the challenges that prevent low income individuals from shopping at nearby farmers markets, and the effects of youth-oriented farmers market programming. [http://www.pps.org/blog/new-report-on-farmers-markets-low-income-communities/](http://www.pps.org/blog/new-report-on-farmers-markets-low-income-communities/)

*Farmers Market Policy: An Inventory of Federal, State, and Local Examples* offers an assessment of farmers market policies found in the United States and guidelines for evaluating the effect of these policies and identifying ways they can be improved. [http://www.pps.org/pdf/FarmersMarketPolicyPaperFINAL.pdf](http://www.pps.org/pdf/FarmersMarketPolicyPaperFINAL.pdf)

*Seven Steps for Creating a Successful SNAP/EBT Program at your Farmers Market* is a Web page that provides helpful tips for implementing SNAP/EBT programs at farmers markets, including information on assessing capacity, finding funding, and developing partnerships. A condensed version is available on the Web page, and a more detailed handbook can be downloaded. [http://www.pps.org/reference/seven-steps-snap-ebt-market/](http://www.pps.org/reference/seven-steps-snap-ebt-market/)

**Washington State Farmers Market Association**

The *Washington State Farmers Market Manual* helps communities, farmers, and citizen groups develop and operate community farmers markets. There are sections on steps for starting a farmers market, best practices in market management, and reevaluating markets for continuous improvement. Additionally, the *Washington State Farmers Market Management Toolkit* provides helpful information, tips, and templates to farmers market managers, board members, volunteers and other organizers to support them in running a farmers market. [http://www.wafarmersmarkets.com/marketmanagement.html](http://www.wafarmersmarkets.com/marketmanagement.html)

**Maryland Hunger Solutions**

Accepting *Federal Nutrition Assistance Benefits at Farmers Markets in Maryland* provides a state example of guidance to farmers markets on implementing a token-based wireless EBT and debit/credit payment system to accept SNAP benefits at farmers markets. It also includes information on accepting other federal nutrition assistance benefits such as the WIC Farmers Market Nutrition Program. [http://www.mdhungersolutions.org/farmersmarkets/index.shtm](http://www.mdhungersolutions.org/farmersmarkets/index.shtm)
Chapter 5: Mobile Food Retail
Encouraging Healthier Mobile Food Retailers to Operate in Underserved Areas
General Strategy Overview

This chapter discusses the public health role in developing initiatives to encourage healthier mobile food retailers to operate in underserved areas.

Some states and communities are supporting the development of mobile food retail in order to get healthier foods and beverages into areas where residents may not be able to access permanent food retail venues. Because mobile food initiatives are generally less resource intensive than other healthier food retail approaches, public health practitioners may seek to implement them when funding is limited or when longer-term initiatives are just getting underway. Healthier mobile food retail initiatives are also a favorable option because they can create economic opportunities for individual entrepreneurs.  

What is Healthier Mobile Food Retail?

Mobile food retailers are comprised of a variety of vendors who sell food out of a moveable vehicle, such as a truck, cart, trailer, kiosk, or stand. Food delivery services can also be considered another form of mobile food retail.

Healthier mobile food retailers typically offer their customers healthier options such as fresh or cut fruit and vegetables, water or low-fat/skim milk, and whole grain foods. However, municipalities may specifically define healthier food options for mobile vendors, such as allowing only whole fruits and vegetables or explicitly defining nutritional criteria.

Mobile Farmers Markets and Produce Markets

Mobile retail strategies that focus on the sale of local and regional food are sometimes called “mobile farmers markets.” These mobile retailers are able to move to various locations easily to sell the food they have collected from producers. Some of these retailers are able to accept Supplemental Nutrition Assistance Program (SNAP) benefits. For example, Real Food Farm in Baltimore, Maryland (http://www.realfoodfarm.org/get-food/mobilemarket/) uses a mobile farmers market to increase food access into food desert areas of Baltimore. They accept Electronic Benefits Transfer (EBT) for SNAP from their customers, and have used a double coupon incentive program for the SNAP clients. In the Washington, D.C. area, Arcadia’s Mobile Market (http://arcadiafood.org/programs/mobile-market) is a “farm-stand-on-wheels” bringing local, sustainably produced farm products to underserved areas. The market accepts all forms of food assistance benefits, has a “Bonus Bucks” incentive program that doubles the purchasing power of food assistance benefits, and provides nutrition education.
When developing programs for mobile food retail, keep in mind that mobile food retailers will incur initial and ongoing costs, such as the purchase and maintenance of a vehicle to store, prepare, and distribute food; licensure of the vehicle; registration of the business with appropriate agencies; and vehicle and product storage (parking and refrigeration). Healthier mobile food retail programs that provide incentives, such as subsidies or reduced fees, may help defray some of the ongoing costs mobile vendors face and can be used to help mobile retailers provide healthier food options to consumers in underserved areas.

Working with Partners and Leveraging Resources

Public health practitioners may play varied roles in encouraging mobile food retailers to operate in underserved areas and to carry healthier food options. In most instances, a variety of partners are required to create and sustain a mobile food retail program from inception to implementation.

The Partnerships, Assessment, and Evaluation chapter has detailed information on partnering for healthier food retail initiatives. Additionally, there are a variety of potential partners that you can include to encourage healthier mobile food retailers to operate in underserved areas of your state or region. You may want to include representatives of:

**Government Agencies and Regulatory Groups**

- State and city agencies on economic development and labor force training.
- State and local agencies that regulate food establishments and services like environmental health or safety and sanitation.
- Planning groups and other organizations who may regulate permitting of vendors or signs for vending.
- Food and Drug Administration, Food Retail Protection Programs.
- Law enforcement and the legal community.

**Agriculture Offices and Growers/Producers**

- U.S. Department of Agriculture's (USDA) Office of Rural Development and Food and Nutrition Services state or regional offices.
- Food producers or suppliers.
- Cooperative extension agencies.
Business Groups and Entrepreneurs

- Small Business Association.
- Groups that fund micro-enterprise or other relevant funding streams.
- Individual entrepreneurs who are interested in or are currently operating a healthier mobile food business.
- Private companies such as mobile vending or online delivery companies.

Nutrition and Food Access Groups

- Federal nutrition assistance programs at the state-level administering agency.
- Private and non-profit organizations focused on food access or food assistance.

Action Items

As a public health practitioner, you can do the following to work with partners and leverage resources:

- **Lead or support assessment and planning efforts** to identify communities that can benefit from healthier mobile food retail services. Mobile food retail may be most viable in areas where few permanent retailers are located and where transportation is a challenge for community residents, or where there is a need to augment offerings from other retailers. Refer to the Partnerships, Assessment, and Evaluation chapter for additional information on assessment.

- **Convene partners who are interested in mobile food retail** as a means to bring healthier food options to communities. Think about organizing a sub-group from a larger collaborative group, like a food policy council, to focus on mobile food retail.

- **Build or support programs with partners that encourage new mobile retailers** to come to underserved areas and offer healthier foods and beverages. In addition, support programs that encourage existing mobile retailers to expand their services into underserved neighborhoods or to increase the variety of healthier food options offered. Consider an interdisciplinary approach to programs where health promotion may not be the primary focus, such as one that focuses on small business entrepreneurship.

- **Educate stakeholders about the potential health benefits** of increasing access to healthier foods and beverages in underserved areas and about state and local programs or policies that may help support healthier mobile food retail.

- **Partner with private entities to facilitate innovative, cost-saving approaches** to barriers. For example, renovating vehicles or carts for storing and displaying fruits and vegetables facilitates vendors overcoming the barrier of having inadequate equipment for selling produce.
Mobile Food Retail in Action: Peapod and Neighbor Capital Team Up to Deliver Produce to Chicago’s Food Deserts

Peapod, an online grocery delivery service, and Neighbor Capital, a social enterprise firm, have collaborated on the Healthy Families Project to explore solutions to issues related to food deserts in Chicago communities. The partners first worked with a research firm to identify the areas of greatest food retail need. They then connected with community leaders to identify and address issues of internet access and education, a basic requirement for feasible grocery delivery services. Peapod subsequently subsidized a special produce package at discounted prices to residents in areas of need via community pick-up sites, while internet access and education activities continued. A promotion of “The Best Fruit of the Season Offering” included 10 pieces of varied fruit for $2.99, a discount of 40% for residents in underserved neighborhoods. To enhance the program, the Healthy Families Project offered free samples and provided information to the community about job opportunities with Peapod. Although different from a traditional mobile food retail model, this project has a similar flexibility in bringing healthier items into communities.

Providing Training, Technical Assistance, and Education

Training, technical assistance, and education for local public health practitioners, mobile entrepreneurs, and communities is a crucial component of promoting mobile food retail as a mechanism for increasing access to healthier food options in underserved communities.

General training and education can be offered to a broad group of partners and stakeholders to promote the concept that mobile retailers can help supply healthier food options to underserved communities. Additionally, training and technical assistance can be offered to prospective, new, or existing healthier mobile food retail vendors on topics such as start-up requirements, operational issues, and participation in healthier food retail programs. Public health practitioners can work with partners in these efforts to ensure that healthier mobile food retail programs are broadly understood and supported by all stakeholders.
**Action Items**

As a public health practitioner, you can do the following to provide training, technical assistance, and education to support healthier mobile food retail:

- **Coordinate with state and local agencies that are developing programs** that designate some mobile food vendors as healthier retailers. You may want to assist program staff in developing appropriate criterion for participating retailers or provide them with nutritional data to help them develop program guidelines.

- **Educate communities** about how mobile food vendors can increase the communities’ access to healthier food options. You can also describe how programs that subsidize, waive, or reduce permit fees for vendors selling food items that meet nutritional standards can potentially increase the number of healthier food vendors.

- **Encourage the use of micro-loans** from economic development agencies to offset the initial purchase of vehicles or enhancements to existing vehicles for healthier food vending.

- **Help communities assess which model of mobile food retail would be most appropriate** for their specific underserved area. For example, a more traditional “cart” model works in densely populated urban areas, whereas a weekly delivery of fresh produce to a community location may be favorable in rural areas where residents must travel long distances to a grocery store.

- **Offer training or educational resources** for healthier mobile food retail programs with prospective, new, or existing vendors on topics such as:
  - The areas with limited healthier food options and untapped market potential that vendors may want to consider as possible locations to operate and sell their products.
  - Licensing requirements for various municipalities in which the vendor is considering.
  - Sources of produce from local farmers or from distributors that will sell to vendors at wholesale prices.

- **Offer training on how mobile food vendors can accept federal nutrition assistance program benefits** such as Supplemental Nutrition Assistance Program (SNAP) benefits, or refer them to program administrators.

- **Coordinate with state and local agencies** that have regulatory or compliance responsibilities for food safety to:
  - Ensure that compliance officers, like city inspectors or local law enforcement, are aware of incentive programs that give certain privileges to participating retailers, such as roaming privileges or approval to operate near schools.
  - Identify mechanisms for vendors to receive food handling training and certification. For example, many mobile vendors participate in certification programs such as those available from ServSafe.

Continued
Coordinate with local university extension programs to develop business and marketing courses that can be offered to healthier mobile food retailers.

Inform community organizations of grant opportunities that could help fund healthier mobile food retail activities.

Mobile Food Retail in Action: Technical Assistance to Healthier Mobile Food Retail Programs in Detroit, Michigan, and New York, New York

**Michigan Neighborhood Food Movers in Detroit.** In order to provide healthier food options to Detroit residents, Michigan’s governor developed the Neighborhood Food Movers Program. The governor’s office called on the Michigan Department of Community Health (MDCH) to participate by serving in an advisory capacity for the program. Because the program was a governor’s initiative, it sparked the interest of multiple stakeholders and community partners. A $75,000 grant for a micro-loan program kick-started the program. That and other funding allowed Michigan mobile food retail companies to obtain low-interest loans to participate in the program.

Participating vendors bought and maintained their own trucks, had set routes and times, and offered culturally appropriate foods for their customers. Michigan Neighborhood Food Movers prioritized locally-grown produce over other distributors and often sourced from the Detroit Eastern Market, a distribution or food hub model (see the Distribution chapter for more on food hubs).

For their participation, mobile food vendors were educated on how to run a small business, prepare a business plan, and source and price produce. During this training and technical assistance initiation, vendors selected routes in neighborhoods with the least access to healthier foods and the greatest financial need. When setting prices, vendors seriously considered what consumers in communities could afford and recognized that the retail mark-up had to be competitive to attract customers.

Continued
The governor’s office and community partners created a manual which walked potential vendors through the processes of:

- Business planning.
- Market (neighborhood) identification.
- Business registration and licensing.
- Loan application.
- Supply acquisition.
- Produce purchase and storage.
- Accepting Supplemental Nutrition Assistance Program (SNAP) benefits through Electronic Benefits Transfer (EBT).

Key lessons learned from Michigan’s Neighborhood Food Movers program include the following:

- Bringing diverse and non-traditional partners to the table encouraged innovative programming.
- Helping entrepreneurs put a business plan in place ensured a commitment and competence among vendors to get healthier food options to the most underserved communities.
- Ensuring that a variety of payment options are in place, including SNAP/EBT, allowed consumers to maximize their benefits and retailers to increase their revenue.

**Green Carts in New York City.** In March 2008, New York City passed a law to create 1,000 mobile vending permits specifically to sell only fresh, whole, unprocessed fruits and vegetables in designated underserved areas of the City. In its initial years, apart from the usual work of establishing new permits, waiting lists and inspections, the Green Cart Initiative was supported by a $1.5 million grant from the Laurie M. Tisch Illumination Fund. The grant funded micro-loans and technical assistance for Green Cart retailers, as well as branding, marketing, and outreach to encourage residents of the Green Cart areas to purchase fresh produce from the carts. A total of 501 permits were issued from 2008 to 2011.

To support Green Cart efforts, the New York City Department of Health and Mental Hygiene (NYC DOHMH) hosts a web portal that describes the program and requirements for vendors, and provides information on free training resources and promotional materials for consumers and community members, such as the *Eating Street Smart* brochure. NYC DOHMH also helps vendors obtain wireless EBT terminals in order to accept SNAP benefits. More than 70 Green Carts currently have EBT terminals, and plans are to double the number of vendors with EBT capability. More information regarding the evaluation component of the Green Carts program is included in the *Partnerships, Assessment, and Evaluation* chapter. Additional information on the program can be found at [http://www.nyc.gov/greencarts](http://www.nyc.gov/greencarts).
Addressing Other Common Concerns in Healthier Mobile Food Retail

Zoning restrictions and regulatory processes can sometimes inhibit rather than enable mobile food retailers to operate or expand in certain locales. In addition, some retailers may have perceptions about mobile food retailers that could cause friction around a healthier mobile food retail program. Public health practitioners can help address these concerns when planning and implementing healthier mobile food retail initiatives.

Zoning and Regulatory Processes

Rules and regulations related to mobile food retail may vary by state, and by county or city within a state. Some rules and regulations will be permissive, encouraging and even incentivizing mobile food retail, while others will be restrictive or not address the issue at all. Some states, cities, and counties also have regulations about where mobile vending can or cannot take place, how many hours mobile vendors can operate in a day, and how long mobile vendors can remain in one place.  

Perceptions

Mobile food vendors may be viewed as unwelcome competition by other food retailers because they may offer more produce or healthier beverage options, may have higher quality produce, or may be more convenient to customers. They may also be able to set lower prices because they do not bear other typical retail costs, such as rent and electricity. In addition, mobile retail operators who do not participate in healthier retail programs may feel that other vendors are being provided resources, and thus a competitive advantage, over their businesses.
Action Items

As a public health practitioner, you may be able to address concerns about zoning restrictions, regulatory processes, and perceptions with the following actions:

- **Summarize findings from health impact assessments** and other practice-based evidence on how existing municipal codes and zoning regulations support or hinder mobile food retail and share with partners working on land use. Educate decision makers about simple ways to address key barriers.

- **Provide models in which vendors who sell only healthier items** are granted special permits to operate in certain locations, such as outside of schools and recreational facilities.

- **Work with healthier mobile retailers on how to complement existing retailers**, such as small stores. For example, healthier mobile retailers may be able to offer a different product line than other retailers.

- **Work with partners to resolve or mediate concerns** about mobile food retail as an effective food business model that can bring healthier options to communities.

---

Mobile Food Retail in Action: Healthier Mobile Food Retail in Neighborhoods, Cities, and Parks

The Veggie Mobile in the Capital District of New York. Since 2007, The Veggie Mobile™, a traveling market operated by Capital District Community Gardens (CDCG), has been delivering fresh, affordable produce to childcare centers, senior independent-living communities and low-income neighborhoods throughout three counties in upstate New York. The program's startup costs were funded by a combination of individual donations and grants, including a five-year grant from the New York State Department of Health's Hunger Prevention and Nutrition Assistance Program. The Veggie Mobile’s™ daily operations are managed by a team of CDCG staff members and devoted volunteers. Since 2011, CDCG has been connecting even more communities to fresh food with their second mobile market, the Veggie Mobile Sprout. The Veggie Mobile™ runs on biodiesel fuel, and both markets meet their electrical needs with solar panels. Both markets are also equipped with an Electronic Benefits Transfer (EBT) machine to allow redemption of Supplemental Nutrition Assistance Program (SNAP) benefits. CDCG is a 38 year-old non-profit that nourishes healthy communities by providing access to fresh food and green spaces for all. You can learn more about CDCG's mobile produce markets at [http://www.cdcg.org/programs/veggie/veggie/](http://www.cdcg.org/programs/veggie/veggie/).

Food Peddlers in Chicago, Illinois. Chicago's specialized Food Peddler designation allows for retail vendors to sell whole, uncut fruits and vegetables from “a wagon, pushcart, handcart, pack or basket.” Although Food Peddlers are not allowed to prepare or sell any other food items, they are granted a reduced permit fee of $165 (compared to $275 for Mobile Food Dispensers). Seniors, veterans, and people with disabilities pay only an $88 fee to become Food Peddlers. The City of Chicago provides more information on this program at [http://www.cityofchicago.org/content/dam/city/depts/bacp/general/Peddlers%20License%20Fact%20Sheet.pdf](http://www.cityofchicago.org/content/dam/city/depts/bacp/general/Peddlers%20License%20Fact%20Sheet.pdf).

Healthier Food Vendors in Parks in Kansas City, Missouri. In Kansas City, mobile food retailers who operate in parks are regulated by the Kansas City Parks and Recreation Department. With the stated goal “to increase access to healthier food and beverage alternatives,” the Parks and Recreation Department offers scaled permit discounts for mobile retailers who meet criteria for “Healthier” and “Healthiest” categories based on the percentage of healthier items for sale. To be a “healthier” food vendor, 50% of the items for sale must adhere to the nutrition guidelines set out by the Parks and Recreation Department; for “healthiest” food vendors, 75% of stock must meet the criteria. In return, “healthier” food vendors receive a 50% reduction in the cost of their Parks and Recreation vending permits, and “healthiest” food vendors gain roaming permits, allowing retailers to operate in up to three parks on one permit.
Healthier Mobile Food Resources

**ChangeLab Solutions**

ChangeLab Solutions provides multiple web-based products that outline policy strategies for various mobile healthier food retail initiatives.

*Mobile Vending Laws in the 10 Most Populous U.S. Cities* is a table that outlines mobile food retail laws in 10 cities and includes applicable nutrition incentives, operational regulations, and licensing fees. [http://changelabsolutions.org/publications/mobile-vending-10-cities](http://changelabsolutions.org/publications/mobile-vending-10-cities)

*Creating a Permit Program for Produce Cart Vendors* is a fact sheet that describes the benefits of produce cart vending in communities. [http://changelabsolutions.org/publications/permit-produce-cart-vendors](http://changelabsolutions.org/publications/permit-produce-cart-vendors)

*Healthy Mobile Vending Policies* is a fact sheet that outlines and provides examples on how mobile vending regulations can promote healthier food retail access in underserved communities. [http://changelabsolutions.org/publications/mobile-vending-policies](http://changelabsolutions.org/publications/mobile-vending-policies)

**PolicyLink, The Food Trust, and The Reinvestment Fund**

The *Healthy Food Access Portal* provides a variety of resources to support implementation of healthier food retail strategies. The Web page on mobile markets offers success stories, resources, and strategies. [http://www.healthyfoodaccess.org/retail-strategies/alternative-markets](http://www.healthyfoodaccess.org/retail-strategies/alternative-markets)

**Arcadia**

Chapter 6: Transportation
Improving Transportation Systems for Healthier Food Retail
General Strategy Overview

This chapter discusses the public health role in developing safe and viable transportation options for people to travel to healthier food retail venues.

Individuals who do not own cars are dependent on public transportation (such as buses and trains) as well as non-motorized modes of transportation (such as walking and biking). These dependent individuals often face challenges in getting to food retailers where they can purchase healthier food items. Challenges include not being able to walk or not having the time to walk long distances to food retail venues, managing bags of groceries on a bus, or having to get rides with friends or neighbors. Thus, those with transportation challenges may rely on less healthy food options that are cheaper and more readily available.

Transit dependent individuals:

- Have little or no access to an automobile and are frequently low income. People of color, the elderly, young people, and people with disabilities often live in households without available vehicles.
- Tend to live in communities lacking access to affordable healthier food retail options and adequate transit services.
- May have to ride several transit lines to reach the nearest affordable grocery store or may be required to switch to a different mode of transportation. These transfers may be costly in terms of money, time, and energy.
- Are typically able to purchase only the amount of food they can carry with them during any single trip on public transportation, and are limited to non-refrigerated items if trips are particularly long.

More affordable and accessible transportation options provide easier travel to retail stores with healthier food options. Enhancing transportation systems may facilitate the reduction of health disparities, in part, by improving transportation access to clinics and pharmacies in addition to healthier food retail venues. Improved transportation systems can also increase general mobility and physical activity, decrease traffic collisions, and improve air quality. Additionally,
communities may see economic benefits through new jobs and connected neighborhoods. Public health practitioners can address transportation issues as a cross-cutting method for improving access to healthier food retail.

**Working with Partners**

As a public health practitioner, you will need to collaborate with partners when addressing transportation issues in communities with low access to healthier food retail.

The *Partnerships, Assessment, and Evaluation* chapter has detailed information on partnering for healthier food retail initiatives. Organizations that have the oversight of and expertise on transportation and related issues include:

**Transportation and Planning Groups**
- State Departments of Transportation (DOT).
- Metropolitan Planning Organizations (MPO).\(^\text{59}\)
- Regional Transportation Authorities.
- Urban or Regional Planning agencies or organizations.
- Transportation service companies, such as taxi and shuttle services.

**Food Retail Groups**
- Food Retail Associations.
- Corporate representatives of chain retailers.
- Government agencies.
- City governments.

**Non-governmental Organizations**
- Service organizations that assist special populations, such as senior citizens or those with disabilities.

When considering transportation initiatives, note that transportation planning typically happens at a state, regional, or local level. However, funding usually is allocated from the federal government and administered by state agencies, such as DOT. This means initiatives may need to follow federal requirements for planning and implementing activities. It also means that you and your transportation partners can take advantage of national goals or direction that encompasses healthier food retail initiatives.

\(^{59}\) A Metropolitan Planning Organization (MPO) is a requirement for states or regions spending federal highway or transit funds in urban areas. MPOs plan, program, and coordinate federal highway and transit investments. (Source: Association of Metropolitan Planning Organizations, [http://www.ampo.org/index.php](http://www.ampo.org/index.php). Accessed February 26, 2013.)
**Action Items**

As a public health practitioner, you can do the following to collaborate with partners on transportation issues:

- **Identify regions or municipalities of greatest need** for improved transportation access and resources and share results with partners.

- **Educate staff at relevant agencies** about the potential health benefits of developing healthier communities as a part of transportation planning, such as through Long Range Transportation Plans or Transportation Improvement Programs.

- **Explore how federal requirements affect regional, state, or local level planning**, and how they can create opportunities for working on healthier food retail initiatives. For example, the current federal transportation law, Moving Ahead for Progress in the 21st Century Act (MAP-21) from the U.S. Department of Transportation Federal Highway Administration, has goals that include economic vitality of metropolitan areas and increasing safety for non-motorized users. More information is available at [http://www.dot.gov/map21](http://www.dot.gov/map21).

- **Educate partners on where healthier food retail projects are underway** and where there may be an opportunity to address transportation needs or problems.

- **Educate partners about programs that address transportation challenges** for low-income individuals. For example, the Low Income Flexible Transportation (LIFT) Program in the San Francisco Bay Area funded creative transportation projects for low-income residents that enhanced access to jobs, childcare, and fundamental services. More information is available at [http://www.mtc.ca.gov/planning/lifeline/lift.htm](http://www.mtc.ca.gov/planning/lifeline/lift.htm).

- **Coordinate public education campaigns promoting the use of transportation resources** for purchasing healthier food.

- **Aid partners in procuring grants** and other forms of funding for efforts designed to improve transportation to healthier food retailers, including letters of support.
Transportation in Action: Partnership and Assessment in the Twin Cities (St. Paul and Minneapolis), Minnesota

In 2008, Minnesota Department of Health (MDH) was awarded the Community Health Project Related to Brownfield/Land Reuse grant from the Agency for Toxic Substances and Diseases Registry (ATSDR). The purpose of the project was to conduct a baseline assessment of indicators related to community health for a new Central Corridor Light Rail Transit (CCLRT) route. This route has now opened as the “Green Line” and it connects the downtown areas of Minneapolis and St. Paul, a distance of 11 miles.

MDH worked with several community organizations, regional planners, and state and local agencies to evaluate the CCLRT area. With input from Twin Cities’ community members, MDH determined a set of indicators, or “counts,” to track the impact of health-related changes resulting from the construction of the CCLRT. MDH titled the assessment Healthy Communities Count! One of the counts, access to healthier foods, was measured by counting the number of people living within 500 meters of a grocery store (a 10-minute walk for most people) compared to the number of people living within the same distance of a store that sells prepared meals. Findings from the baseline evaluation showed that 64% of people live within walking distance of a grocery store, and 80% of people live within walking distance to a store with prepared meals. You can learn more about this project at http://www.health.state.mn.us/divs/eh/hazardous/lighttrail/intro.html.

Activities to Improve Transportation Systems

There are many ways to make changes to transportation systems that support healthier food retail. The activities highlighted in this guide are:

- Promote walking and biking accessibility.
- Enhance traditional public transit services.
- Offer shuttle services.
- Support car sharing and carpooling.

Promoting Walking and Biking Accessibility

Walking and biking are practical transportation options to consider for those without access to motorized vehicles or public transportation. Walking and biking may be the only means they have for reaching healthier food retail. In addition, many people may prefer to walk or bike to food retailers, especially if they are close, convenient, and safe to reach. Walking and biking can have health benefits as well.
Sidewalks, street crossings, and street lighting. It is important to be able to walk to and from food stores safely, particularly for those who lack a car and cannot rely on public transportation. Pedestrians need well-maintained sidewalks, proper street lighting, and safe street crossings. Customers also need to be able to safely access a store from the street or parking lot. Without these measures, pedestrians may be at risk for traffic injuries or crime when walking to nearby stores.

Safe and secure biking. Improving biking routes is another strategy for transport to and from food retailers. To make biking safer and easier for residents, communities can adopt a variety of bike friendly features for busy streets in and around communities where healthier food retailers are located.

Bike-Friendly Features

The bike-friendly features described here can be implemented on their own, or as part of a Complete Streets design:

- **Bike Lanes** provide a designated space on the street for bicyclists to use. They help to prevent accidents and injuries, and allow for smoother flow of traffic.
- **Sharrows or Shared Lane Markings** indicate to motorists and bicyclists that these street lanes are to be shared and bicyclists are allowed to take the entire lane if desired.
- **Wider Street Lanes** help bikes and cars coexist on the road by making it easier for cars to pass bicyclists without having to cross into another lane of traffic. These streets can also be designated as shared lanes.
- **Bike Paths** are off street paths or trails that allow bicyclists to travel in a space designed for bicycling without the risk of motor traffic accidents.
- **Curb Cuts** provide a safer and easier transition between sidewalks and the street by cutting out a small ramp from the curb.
- **Bike Racks and Bike Lockers** allow bicyclists to lock their bikes and store them temporarily in a secure area designated for bikes.

Design recommendations for some of the features above can be found at [http://nacto.org/cities-for-cycling/design-guide/](http://nacto.org/cities-for-cycling/design-guide/).

Complete streets. Complete Streets is a planning and design approach that aims to enable safe access for users of all transportation modes. Complete Streets policies involve designing street networks to improve safety for walking, biking, driving, and using public transportation. Implementing a Complete Streets approach provides those who cannot drive or afford cars with safe and convenient access to points of interest, such as grocery stores and other healthier food retail venues. Some communities may take on land use policies that improve the current landscape but do not involve full adoption of Complete Streets. For more information, visit the Smart Growth America Web site at [http://www.smartgrowthamerica.org/complete-streets/complete-streets-fundamentals](http://www.smartgrowthamerica.org/complete-streets/complete-streets-fundamentals).
Action Items

As a public health practitioner, you can do the following to promote walking and biking accessibility:

- **Lead an assessment of a community’s walkability or bikeability** in relation to healthier food retail access. Do this with support from local partners such as community organizations, pedestrian or bicycling groups, and crime and safety advocates.

- **Work with local city authorities such as departments of public works or transportation** to identify areas around healthier food retail establishments that would benefit from new sidewalks, sidewalk repair, new street lighting, or new street crossings.

- **Talk to staff at DOTs, MPOs, and other planning agencies** to find out if any complete streets policies are in development or existence in your state. Provide information on how a Complete Streets approach to community design can improve access to healthier food retail, particularly important in underserved neighborhoods.

- **Assist in developing relationships** between community organizations, cycling clubs, food retailers, and Departments of Transportation, Public Works, or Recreation to make biking routes to food retailers safer.

- **Consider the safety of customers accessing retail establishments via walking and biking** when planning for healthier food retail initiatives. Help partners include the safety for all travelers when designing stores or reviewing zoning policies. Features such as building setbacks, building orientation to the street, and parking lot design can all influence pedestrian accessibility.

Transportation in Action: Complete Streets in New York, New York

New York City offers an example of city planning that integrates elements of urban infrastructure and design with public health concerns. The Active Design Guidelines resource was developed through partners that included: the New York City Departments of Design and Construction, Health and Mental Hygiene, Transportation, and City Planning and the Office of Management and Budget. City departments also worked with university-based experts and practicing architects to produce the Active Design Guidelines. This document is a manual of recommendations and strategies for designing buildings, streets, and urban spaces with an eye toward increasing physical activity and other healthier lifestyle behaviors. For example, the guidelines recommend the development of supermarkets and full-service grocery stores near places of work and residence to promote healthier diets.

Enhancing Traditional Public Transit Services

Public transit services often provide the greatest opportunity for community members without cars to travel within, to, and from their neighborhoods. Improving these services for community members is important to make shopping for food easier.

Additional transit access points. Working with partners to create additional points of access to local transit systems can help reduce the time it takes for people to get to a public transport station or stop. Specific service improvements that would assist people accessing healthier food retail stores include:

- Creating more access points on a direct transit line to accommodate passengers.
- Designing local bus lines that can feed into existing stops for express transit lines, allowing for quicker travel to healthier food retail locations from multiple points of entry.
- Extending transit lines further into communities that have less access.

High frequency transit services. It is also important to consider the frequency of stops during transit schedules. For example, if buses or train stops are erratic or infrequent, passengers may have a challenging time getting to healthier food retailers in a timely fashion. A greater frequency of stops can cut down on wait times and make it easier for patrons who miss a bus or train because they don’t have to wait as long for the next one to arrive.

Transportation in Action: New Downtown Routes in Los Angeles, California

The Los Angeles Department of Transportation modified two of its DASH Downtown bus routes in 2007, and added additional bus lines with stops between two major Metro plaza stations. The additional lines expanded service to South Park residents and gave customers direct access to Ralph’s Fresh Fare Supermarket and other nearby stores. At its opening in 2007, Ralph’s was the only local full-service supermarket serving residents in the downtown area. The new routes operate seven days a week.

Direct transit routes to healthier food retailers. Established transit routes and operating services may not correspond with the locations or hours of food retailers or the shopping times convenient for many residents. This is particularly true when transportation systems are designed primarily to focus on residents commuting long distances to and from work rather than on shopping trips within their immediate community. Transit users may also have to make several connections to get to a food retailer, making their food shopping trips inconvenient and time consuming.
Designing new, direct routes to existing food retail locations can improve the accessibility of healthier foods and beverages. Furthermore, it is important to consider the location of existing public transportation when developing new food retail outlets, including farmers markets. It is preferable to have transit lines stop within a reasonable walking distance from the entrance to the healthier food retail store or farmers market.  

Transportation in Action: Bus Routes to Grocery Stores

**The Grocery Bus in Austin, Texas.** The publicly run Grocery Bus line in Austin's Eastside was designed specifically to take residents from a low-income Latino community lacking sufficient healthier food retail options to supermarkets in other neighborhoods. It was established in 1996 in response to a study by the Sustainable Food Center (SFC), which reported both a dearth of competitively priced supermarkets in the Eastside area, and a need to establish affordable transportation programs to neighboring supermarkets. The Grocery Bus, developed through collaboration between Austin’s Capital Metro transit system, Austin/Travis County Food Policy Council, community members, and supermarkets, was applauded for its convenience and savings and was assimilated into the regular transit system.  

**Metro Transit in Madison, Wisconsin.** In Wisconsin, the city of Madison Metro Transit *Ride Guide* provides customers with detailed route information. The guide lists the bus routes for many popular destinations, including more than 20 area grocery stores, and then shows these destinations on individual route maps. Metro Transit has an electronic trip planner through Google Maps, and has mobile apps to plan your trip and track your bus. The *Ride Guide* is available at [http://www.cityofmadison.com/metro/schedules/](http://www.cityofmadison.com/metro/schedules/) and the trip planner and apps are available under the “Plan Your Trip” tab.

**Reduced cost of public transit.** Cost is an important factor for most individuals when it comes to the use of public transportation systems. Making transportation affordable for low-income families can facilitate its use and make it easier for residents to make multiple trips to and from grocery stores or other food retailers.  

Various options to reduce public transit costs for low-income or transit dependent communities that have lower access to healthier food options include:

- Free rides for individuals with a receipt from an authorized healthier food retailer.
- Agreements with local grocers and other healthier food retailers to pay for transit tickets or passes for low-income customers shopping in their businesses.
Reduced fares to healthier food retail venues for customers who use Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and Supplemental Nutrition Assistance Program (SNAP) benefits, subsidized by the transit system or other government agency.\textsuperscript{117}

Special transit lines that are free to the public and designed to bring residents to and from farmers markets or retail stores with healthier food options.

**Action Items**

As a public health practitioner, you can do the following to enhance traditional public transit services:

- **Work with transportation agencies to assess and identify transit lines** to healthier food retailers. Encourage additional, direct, or more frequent stops to make healthier food retailers more accessible to travelers.

- **Encourage food retailers or community organizations to consider transportation programs** that subsidize public transit for food shopping in underserved communities.

- **Help publicize any enhancements** made to existing public transit routes that increase access to healthier food retail establishments, such as full service grocery stores or farmers markets.

- **Collaborate with transportation officials** to create a guide or other materials for transit riders that shows where grocery stores are located on transit routes.
Offering Shuttle Services

Shuttle services may be operated by a public entity, such as a city government or publicly owned transit authority, or by private businesses. They offer a more targeted approach to transportation by providing service to a particular community or population.

Food shopping shuttles. Shuttlcs designed specifically to operate directly between residential neighborhoods and food retailers can help make grocery shopping easier and faster by:

- Having enough room for adult passengers, their children, and several bags of groceries per passenger.
- Operating at times during which more passengers make food purchasing trips.
- Providing direct home service, in which a person could make a reservation to be picked up from home for food purchasing and then returned home afterward.

Community partners can develop a food shuttle program with input from community members on how the program will operate and when and where the shuttle would run. Also, chain and independent grocery stores and food markets can charter their own shuttles to pick up and drop off patrons at their stores. Merchants sometimes set minimum purchasing requirements for customers who use these services, but should be aware that these requirements, if set too high, may prevent lower income customers from using the service.

Transportation in Action: Shuttle Services in Los Angeles, California

Shoppers Van Shuttle Service, operated by Numero Uno Market, is a key component of the supermarket chain’s innovative marketing strategy. By offering the shuttle service free to customers who spend a minimum of $30, the company has capitalized on the transit dependency of local residents while offering them a valuable service. Three Ralph’s supermarkets in Los Angeles also contracted with a shuttle van company to provide free rides home to customers who spend at least $25 at the store.

Paratransit services for special populations. Paratransit services are important for populations with special needs, such as senior citizens or people with disabilities, who may have difficulty accessing public transportation or be unable to drive themselves. These services typically pick up and drop off their passengers at individual residences, senior homes, or disability care centers. Specialized shuttles may be necessary, and often the shuttle driver or an attendant will need to assist passengers getting on and off the shuttle and help carry bags into their home.
Transportation in Action: Getting Seniors to Market in Chelsea, Michigan

In this small city in southeast Michigan, the Chelsea Area Transportation System (CATS) collaborated with the Chelsea Farmers Market to furnish senior citizens with transportation to the farmers market. On Saturday mornings, the CATS bus stops at three local senior centers to pick up senior residents and deliver them to the market. The seniors have an hour to shop before the bus picks them up for their return trip to the senior centers.124

Action Items

As a public health practitioner, you can do the following to support shuttle services to healthier food retail:

- **Work with city governments and transportation agencies to identify populations** that could benefit from easier access to healthier food retail via shuttle services.

- **Encourage food retailers to develop their own shuttle programs** in areas with low access to their stores. Consider meeting directly with store owners to develop individual programs or connect with corporate officials of a grocery chain.

- **Work with grocery retailers to promote shuttle services** in the communities that would most likely benefit from them.

- **Collaborate with senior and disability organizations to explore transit solutions** that connect them to healthier food retail, such as local senior centers or area agencies on aging. If administrative funds are available from the state agency, the state’s Senior Farmers Market Nutrition Program (SFMNP)*** may be able to support a transportation component

*** The SFMNP is a U.S. Department of Agriculture (USDA) program that awards grants to states, U.S. territories, and federally-recognized Indian tribal governments to provide low-income senior citizens with coupons to purchase eligible foods (such as locally grown fruits, vegetables, herbs, and honey) at authorized farmers markets, roadside stands, and Community Supported Agriculture (CSA) programs. More information is available at [http://www.fns.usda.gov/sfmnp](http://www.fns.usda.gov/sfmnp).
to make it easier for seniors to access farmers markets and use their SFMNP benefits. Share your assessment findings and the potential health implications with these organizations and agencies.

☑️ **Explore emerging programs to enhance transportation options for special populations**, like time banking. Time banking is a service exchange concept where individuals accumulate credits for services instead of money and are able to exchange accumulated credits for other services, like transportation. You can learn more about innovative programming for seniors and other populations at the National Center on Senior Transportation at [http://seniortransportation.easterseals.com/](http://seniortransportation.easterseals.com/).

---

### Supporting Car Sharing and Carpooling

Carpools and car sharing programs allow community residents to share resources and help one another conveniently and efficiently travel to food retail locations in order to shop for food. These programs may:

- Develop informally as community residents organize regular group trips to the local food stores or farmers market.  
- Be formally organized and use a community owned or shared van to take individuals to and from the food markets.  
- Be particularly relevant in rural settings where there are few to no public transportation services.  
- Rely on church groups or informal community networks.

---

### Action Items

As a public health practitioner, you can do the following to support car sharing and carpooling:

☑️ **Encourage faith and community organizations in underserved areas** to develop car sharing or carpool programs to make food shopping easier.

☑️ **Provide interested organizations with information** on how to establish car sharing and carpooling programs.

☑️ **Ensure that car sharing options are feasible for low-income individuals.** For example, requiring a credit card for participation in a car sharing program may present a barrier for low-income individuals or families. Another option would be to subsidize membership and other fees for qualified participants.

☑️ **Check insurance and liability issues** before engaging in car sharing or carpooling programs.
Transportation Resources

**Centers for Disease Control and Prevention**

CDC’s Division of Nutrition, Physical Activity, and Obesity undertakes evaluability assessments to better understand innovative initiatives and policies being implemented in states and communities. There are “Spotlights” from the assessments on active transportation initiatives that summarize program functions and accomplishments and provide considerations for those wanting to implement similar initiatives. [http://www.cdc.gov/obesity/stateprograms/resources.html](http://www.cdc.gov/obesity/stateprograms/resources.html)

The National Center for Environmental Health provides a Web page describing the connections between transportation and health. The topics of physical activity/obesity, injury levels, air pollution, social capital and mental health, and environmental justice/social equity are discussed, and resources are provided. [http://www.cdc.gov/healthyplaces/healthtopics/transportation/default.htm](http://www.cdc.gov/healthyplaces/healthtopics/transportation/default.htm)

**The Convergence Partnership**

The Convergence Partnership commissioned PolicyLink and The Prevention Institute to develop both of the following documents.

*Healthy, Equitable Transportation Policy: Recommendations and Research* provides a comprehensive understanding of various transportation equity and access issues for low-income communities. One chapter focuses on transportation with respect to food access. [http://www.policylink.org/find-resources/library/healthy-equitable-transportation-policy-recommendations-and-research](http://www.policylink.org/find-resources/library/healthy-equitable-transportation-policy-recommendations-and-research)

*The Transportation Prescription: Bold New Ideas for Healthy, Equitable Transportation Reform in America* offers suggestions about opportunities for creating or revitalizing transportation systems that promote health and health equity. The concepts in the report are derived from a more in-depth examination of the ideas in the book, *Healthy, Equitable Transportation Policy: Recommendations and Research*. Each chapter and the entire text can also be found online at [http://www.policylink.org/find-resources/library/the-transportation-prescription-bold-new-ideas-for-healthy-equitable-transportation-reform](http://www.policylink.org/find-resources/library/the-transportation-prescription-bold-new-ideas-for-healthy-equitable-transportation-reform).

**Robert Wood Johnson Foundation: Childhood Obesity Program**

*Community Design for Healthy Eating: How Land Use and Transportation Solutions Can Help* is a brief report on how land use design and transportation systems have impacted food access. A few brief examples are provided to demonstrate how some communities have addressed these issues. [https://folio.iupui.edu/bitstream/handle/10244/561/communitydesignhealthyeating.pdf](https://folio.iupui.edu/bitstream/handle/10244/561/communitydesignhealthyeating.pdf)
Design for Health

*Planning Information Sheet: Promoting Food Access with Comprehensive Planning and Ordinances* provides excerpts from various city sustainability plans that attempt to address food access issues using multiple methods, including improved transportation resources and access. [http://designforhealth.net/food-access/](http://designforhealth.net/food-access/)

*Planning Information Sheet: Integrating Health into Comprehensive Planning* is a tool to help planners and public health professionals integrate health into comprehensive plans, including transportation issues. It provides a variety of different planning options that relate to basic health issues such as safety, physical activity, accessibility, and mental health. [http://designforhealth.net/integrating-health-into-comprehensive-planning/](http://designforhealth.net/integrating-health-into-comprehensive-planning/)

American Planning Association

*American Planning Association: Complete Streets Project* offers resources related to complete streets planning and policy development, including an inventory of 80 complete streets policies that have been developed in state and local areas. A comprehensive set of resources related to complete streets is also provided. [http://www.planning.org/research/streets/](http://www.planning.org/research/streets/)

TransForm

*Creating Healthy Regional Transportation Plans* helps public health and transportation professionals connect the built environment and health outcomes. The report outlines how planning is an opportunity to shape the built environment in ways that produce desirable health outcomes. [http://www.transformca.org/resource/creating-healthy-regional-transportation-plans](http://www.transformca.org/resource/creating-healthy-regional-transportation-plans)
Chapter 7: Distribution
Improving Distribution Systems for Healthier Food Retail
General Strategy Overview

This chapter discusses the public health role in sourcing and distributing healthier foods for retail venues, including local or regional foods.

Accessing affordable healthier foods is challenging for some retailers. Distribution methods may not work optimally for small store owners and mobile food vendors who typically stock only small quantities of a few types of products.\(^5,6^3\) Because of this operational model, small store and mobile food retailers often do not have the purchasing power to get fresh produce or other healthier products at a wholesale price. Instead, they often obtain food products from warehouse club stores or other large food retailers, resulting in a mark-up of price that is then passed to the customer.\(^6^3\) If stores are able to buy in bulk, the low turnover of produce can lead to older and lower quality fruits and vegetables.\(^5\)

Grocery store retailers, primarily those of small and non-chain grocery stores may also face obstacles in working with food distributors to source healthier foods. Many distributors offer a limited range of product types, requiring use of multiple distributors to maintain the necessary assortment of food items.\(^5\) Additionally, some distributors may not carry desired specialty or culturally appropriate foods.

Distribution systems can be modified to harness the power of multiple buyers or to take advantage of regionally or locally grown produce, among other options. Public health practitioners and their partners can help improve distribution of healthier food products to retailers so that consumers in underserved areas have access to healthier foods.

What are Distribution Systems?

Food distribution systems are the mechanisms by which food moves from the producer (such as a farmer) to the customer. Although there are many inter-connected elements in food distribution systems, the primary components related to healthier food retail are transportation, storage, and marketing. Other facets of distribution related to healthier food retail include processing and packaging.

Policies, regulations, and codes govern the various components of food distribution systems and can affect healthier food retail strategies in a number of ways. Commerce regulations for moving food products between states can create barriers for small retailers trying to source local or regional foods from neighboring states. Health and safety codes for preparing and packaging fresh foods may allow healthier mobile food retailers to sell whole but not cut produce. Regulations on the number and types of foods that a store must stock to become a certified vendor for federal nutrition assistance benefit programs may motivate retailers to seek distribution systems that carry a greater number of healthier food options.
Working with Partners

As a public health practitioner, you may help coordinate efforts that address distribution issues at a state, regional, or local level. The Partnerships, Assessment, and Evaluation chapter has detailed information on partnering for healthier food retail initiatives. To address issues around distribution to food retailers, you will need to collaborate with partners such as:

**Agriculture Offices and Growers/Producers**
- State Departments of Agriculture.
- State or regional organizations that represent producers, such as groups supporting local farmers or fruit and vegetable growers.
- Local or regional producers.

**Distributors and Buyers**
- Buyers and distributors, including those that work with restaurants and institutions.
- Retail owners and managers.

**Planning Groups**
- Local and regional planning agencies, such as Regional Planning Commissions.
- Business and economic development organizations, such as a Chamber of Commerce or Community Development Corporation.

**Action Items**

As a public health practitioner, you can do the following to collaborate with partners on distribution issues:

- **Identify state, regional, or local distribution routes and networks** as well as underserved areas where distribution systems are lacking. If available, review foodshed assessments available for areas in your state, as they usually include a discussion of how the food distribution system works for that area. If no assessment is available, consider conducting one with your partners.

- **Help retailers determine what sorts of specialized products** customers might desire and locate distributors who carry those products.

- **Help determine if there are distributors who are able to process and package produce** and other foods in sizes or forms that are easy to sell in various store formats. For example, find distributors who can wash, cut, and package fruits and vegetables in snack sizes or as salads for corner stores.

- **Convene retailers having problems acquiring healthier food products** with farmers, distributors, or other retailers that have overcome barriers to healthier food acquisition.
Explore opportunities for cooperative buying with restaurants or institutions, such as hospitals and schools. Cooperative buying can allow a food retailer to obtain healthier foods from distributors that generally do not deliver to retail locations.

Provide training to retailers on issues such as sourcing from local producers, developing a buying contract, and putting together an appropriate order given the retailer’s customer base, desired product mix, and storage capabilities.

Participate in public education programs promoting the use and purchase of local and regional food products.

Work with administrators of Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and Supplemental Nutrition Assistance Program (SNAP) in your state to ensure certified vendors have distributors who can provide healthier products.

- For WIC, it is important that distributors be able to comply with the revised regulatory requirements for WIC-Eligible Foods (for both types and packing sizes of food). Information on the WIC package is available at http://www.fns.usda.gov/wic/benefitsandservices/foodpkg.HTM.

Aid in procuring grants and other forms of funding for efforts designed to improve distribution to healthier food retailers, including securing letters of support for partners.

Distribution in Action: Partnerships in the Healthy Corner Store Program in Washington, D.C.

The District of Columbia (D.C.) Department of Health provided funding to D.C. Hunger Solutions who collaborated with the Korean-American Grocers Association (KAGRO) and other community organizations to develop a Healthy Corner Store Program in underserved neighborhoods. Phase I of the Healthy Corner Store Program was conducted from October 2007 through September 2008; Phase II was conducted from October 2008 through September 2009.

During Phase I, an assessment of 21 corner stores in selected neighborhoods was conducted to determine the availability, cost, and quality of healthier foods and beverages offered, as well as whether or not the stores accepted Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and Food Stamp benefits (the forerunner to Supplemental Nutrition Assistance Program (SNAP) benefits; still in place at the time of the assessment). Interviews with store owners revealed that:

- Customers wanted more options for fresh and healthier foods.
- Store owners wanted to supply healthier foods to their customers.
- Corner store retailers could not purchase healthier foods at wholesale prices, and often had to purchase these foods at retail prices.
To address the distribution issues identified in the assessment, the D.C. Hunger Solutions and the Healthy Corner Store Program had many recommendations. Two related to distribution were:

- Developing cooperative buying agreements between large food purchasers and small stores, schools, and restaurants.
- Working with distributors of corner stores to identify healthier food options that can replace stock of high calorie snack foods.¹²⁶

During Phase II, the Healthy Corner Store Program worked with participating store owners to pilot two distribution models for sourcing fresh fruit and vegetables. In the first model, stores placed orders with an area nonprofit, Healthy Solutions, which purchased and distributed fresh fruits and vegetables to pick-up sites and market stands. D.C. Hunger Solutions staff and volunteers picked up the orders at a designated location and delivered them to participating stores for resale. In the second model, the Mid-Atlantic Gleaning Network (MAGNET) purchased gleaned produce from farms and sold them directly to low-income individuals at local farm stands (gleaned fruits and vegetables are slightly blemished or unripened at the time of the commercial harvest but are still edible). MAGNET also purchased gleaned fruits and vegetables to deliver directly to four corner stores. In both models, store owners were given a $150 stipend from the Healthy Corner Store Program with which they could buy the fruits and vegetables.¹²⁷

Although the D.C. Healthy Corner Store Program experienced both challenges and successes with each model, results of the program are promising. Both Healthy Solutions and MAGNET are continuing to work with the small stores with which they have built a relationship in order to refine the pilot program. However, additional capital and time to become financially stable are necessary for the programs.¹²⁷ You can find out more about the lessons D.C. Hunger Solutions learned in the pilot at [http://www.dchunger.org/publications/](http://www.dchunger.org/publications/).

Further work in distributing fruits, vegetables, and healthier snack items to small stores was supported through the 2010 FEED (Food, Environment, and Economic Development) D.C. Act, such as launching an affordable wholesale delivery service. The legislation aimed at decreasing food deserts and increasing the abilities of District residents to eat a healthier diet.¹²⁸ More information on D.C. Hunger Solutions Healthy Corner Store Program can be found at [http://www.dchunger.org/projects/cornerstore.html](http://www.dchunger.org/projects/cornerstore.html).
Activities to Improve Distribution Systems

There are many ways to make changes to distribution systems that support healthier food retail. The activities highlighted in this guide are:

- Improving existing distribution systems for independent and small store retailers.
- Creating or supporting small store buying groups.
- Connecting local food producers to distributors and retailers.

Improving Existing Distribution Systems for Independent and Small Store Retailers

There are many ways to work with the existing distribution systems to get healthier foods to independent and small store retailers. Some of these might involve small changes and others may use more unconventional approaches. You can work with prime or broadline distributors, who supply a wide variety of grocery items, or more specialized distributors, such as those who supply only produce.

Working with distributors to increase availability of healthier foods. This method involves working with the existing companies that distribute foods in order to help stores acquire healthier foods and beverages such as low-sodium soups, whole grain bread, low-fat milk, and fresh produce. Sourcing healthier items, from distributors can be difficult for most small and independent stores. Distributors may not stock these items, realize that there is a demand for them, or have the necessary equipment for distributing perishables. The store owners may also be unsure which foods are healthier than others. Working with distributors to increase the amount of healthier food items available and to market these items to stores can help stores obtain the healthier items they are looking for.

Slipstreaming. One method for working with large distributors is slipstreaming, in which small orders are added to orders from larger purchasers, such as grocery stores or restaurants. This is an option that smaller retailers can use to purchase healthier products at the same wholesale prices that larger retailers receive. Both the larger food retailer and the food distributor would need to coordinate the slipstream orders.

Supermarket-small store collaboration. This method of working with large distributors involves a collaborative effort between small stores and larger retailers, such as a supermarket. For this method, a larger food retailer provides a consistent stock of healthier food options via “mini-markets” or branded displays in smaller stores. This allows the smaller retailers to offer quality, healthier products and the larger retailer to gain customers and sales.
Action Items

As a public health practitioner, you can do the following to improve existing distribution systems for independent and smaller store retailers:

- **Bring stakeholders together to discuss** how the state’s traditional distribution network can be modified to accommodate purchasing needs of smaller retailers.

- **Help plan and manage initial efforts** to improve the existing distribution system.

- **Assess the demand for healthier products from retail venues** and work with distributors to offer these items, particularly in ways that minimize risk to store owners. For example, it can be helpful for distributors to provide a discount on the first purchase of a healthier item or to offer healthier items for sale in smaller quantities.

- **Develop marketing tools with distributors** to help retailers know which items are healthier such as placing a symbol next to healthier foods and beverages in a distributor’s ordering system (see Distribution Strategies in New York, New York call out box).

- **Support ancillary activities to promote the work of an improved distribution system**, such as acknowledgement programs, direct-to-consumer marketing, or evaluation.

---

Distribution in Action: Distribution Strategies in New York, New York

Shop Healthy NYC is an initiative of the New York City Department of Health and Mental Hygiene (NYC DOHMH) that aims to increase access to healthier food and to engage residents and organizations to support sustainable food retail change in their community. Shop Healthy NYC, launched in 2012, was developed based on the health department’s intensive work with more than 1,000 retailers since 2005 in the most high-need communities of the city, and targets multiple types of retailers: bodegas (or corner stores), supermarkets, farmers markets, and Green Carts (mobile fruit and vegetable vendors). The Shop Healthy intervention model includes three key components to impact both supply and demand: 1) direct outreach to food retailers to increase stock and promotion of healthy foods, including an intensive component requiring stores to meet specific criteria; 2) outreach to engage community constituents to support participating retailers and increase neighborhood access to healthy foods; and 3) collaboration with distributors and suppliers to facilitate wholesale purchases and widespread promotion of healthy foods. This collaboration with distributors and suppliers includes working with local distributors to identify healthier items to retailers. The NYC DOHMH developed a

Continued
Creating or Supporting Small Store Buying Groups

Small retailers may have difficulty gaining the interest of large distributors due to their small product volumes. By forming buying groups with other small store owners, these retailers may collectively have enough purchasing power to attract business from food distributors. Buying groups can purchase large volumes of produce and then divide the bulk orders as needed.

A large number of small food retailers may be required to match the buying power of a full-service supermarket chain. An estimate by Bay Area Economics found 50 small stores were needed to match the volume of one supermarket in their region. Buying groups require cooperation among members but some small store owners may be hesitant to formally associate with other small store retailers whom they see as competition. However, a buying group model can be adapted to specific retailer needs.

Action Items

As a public health practitioner, you can do the following to create or support small store buying groups:

- **Conduct an assessment** of whether or not retailers would be interested in participating in a buying group. Although small store owners are likely to be most interested, grocery stores and supermarkets may also be interested, particularly if they have problems with accessing local producers, quality fresh products, or specialty items.

- **Connect food retailers interested in forming a buying group** to purchase healthier foods from wholesale distributors.

- **Inform partners of strategy options** (such as offering tax exemptions) that further the development of small store buying groups, and promote or reward distributors entering into purchasing agreements with the buying groups.
Connecting Local Food Producers to Distributors and Retailers

Food producers and distributors are economically motivated to find markets for their products. Connecting producers and retailers to distributors in a state or region can support regional production of healthier food items, assist small farmers and retailers, and contribute to economic improvements in underserved communities. Developing a distribution network or system for local or regional producers may result in:

- An expanded customer base and increased revenue for local producers.
- A wider variety of affordable products available for retailer purchase.
- Competitively priced quality produce and other healthier foods offered to customers.
- The attraction of customers who prefer to support local farms by purchasing locally produced goods.

Distribution systems that connect producers to retailers can vary by number of producers, distributors, and retailers involved; scale of implementation; or amount and type of local products to be distributed. This variation can be seen in the models of distribution systems for local and regional foods that are described below. Most of these systems fall under the category of regional food hubs, which connect local producers to retailers via a centralized distribution facility. One other model is provided that directly connects local producers to retailers, usually on a smaller scale.

**Regional food hubs.** The U. S. Department of Agriculture (USDA) defines a regional food hub as a business or organization that actively manages the production, aggregation, distribution, and marketing of locally and regionally grown food. A key element of the food hub model is coordination of supply chain logistics. Food hubs can provide technical assistance, food transportation, and brokerage services, and some provide important infrastructure functions, such as facilities for storing and processing of produce and other foods. Food hubs are operated by staff who have the business management skills needed for the various tasks associated with all of these functions and services. Food hubs allow producers to gain access to a wider range of markets, such as institutions, restaurants, and grocery stores, and can provide the consumer with consolidated access to a large number of local and regional farmers.

You may come across a virtual food hub model, where an online system connects local producers and buyers. Benefits of virtual food hubs include fewer costs associated with accessing local foods due to the automation of some business services, the ability to sell or purchase items at any time, and creating networks that allow access to smaller producers that were otherwise difficult to reach. Examples include FoodHub (http://food-hub.org/) that works out of six western U.S. states, or Bountiful Baskets Food Co-op (http://bountifulbaskets.org/), a volunteer-run organization that delivers local, affordable produce baskets and more to sites in states across the U.S. Some companies offer platforms or software to facilitate the development of an online marketplace for local foods, such as Local Orbit or Lulus Local Food.

Another model similar to food hubs is a traditional wholesale market. This model generally focuses on leasing space to produce wholesalers and others, such as the Philadelphia Wholesale Produce Market (PWPM). The PWPM’s main facility has over 650,000 square feet of space where independent produce distributors sell a wide variety of produce. See http://www.pwpm.net/index.php for more information.
Distribution in Action: Food Hubs

The following three examples demonstrate the range of activities that can be encompassed in regional food hubs. A working list of existing food hubs across the U.S. can be found at http://www.ams.usda.gov/AMSv1.0/foodhubs

Appalachian Harvest, a Regional Food Hub in Rural Virginia. One example of a food hub comes from southwest Virginia. Appalachian Sustainable Development (ASD), a nonprofit organization, provides training and technical assistance to local farmers in order to increase organic specialty crops. Through the Appalachian Harvest program, ASD manages the marketing and distribution of locally raised produce supplied by a network of 40-70 certified organic and conventional farmers.

ASD staff works with buyers to understand product and volume demands, and then the network of farmers collectively plan crop production based on these demands. ASD provides direct technical support to farmers to enhance farming practices, obtains Good Agricultural Practices (GAP) certification and organic certification, and meets quality requirements. Farmers bring their produce to a 15,000 square foot central facility for sorting and packaging before being shipped. The produce is then distributed as far north as Maryland and as far south as Georgia, primarily to grocery store chains and produce brokers.

The brand has over 30 core products, annual sales around $1,250,000, and a consistent demand that outweighs available supply. Although Appalachian Harvest has received a great deal of capital through foundation grants and individual contributions, it eventually plans to become a for-profit subsidiary to improve its capital base. More information can be found at http://asdevelop.org/programs/appalachian-harvest/ and in the report Moving Food Along the Value Chain: Innovations in Regional Food Distribution at http://www.ams.usda.gov/AMSv1.0/getfile?dDocName=STELPRDC5097504.

Good Natured Family Farm, a Regional Food Hub Serving the Balls Foods Retail Chain in Kansas City, Kansas. Good Natured Family Farm (GNFF) is a natural food umbrella brand for products supplied by an alliance of over 150 farms and businesses in the surrounding region. Food products from these farmers are sold locally and distributed exclusively to Balls Food Stores (Hen House Markets and Price Chopper Stores). The GNFF brand, which started out supplying only beef and tomatoes, has grown to include a whole host of fresh foods and products such as honey, milk, cheese, eggs, chicken, fruits and vegetables, and jams and jellies. The partnership between GNFF and Balls Foods provides a steady sales outlet for producers and allows for increased flexibility in price negotiation between farmers and retailers. GNFF staff handles price negotiations and product marketing with Balls Foods, as well as production coordination and product deliveries.

To address the logistics of product distribution, the local farms transport their food to the Balls Food Stores central warehouse or, in some cases, Balls Foods picks up...
food from the farms. Balls Food Stores also handle the delivery of food, except meat, to their grocery stores. GNFF delivers beef and chicken directly to each store. To ensure consistent quality, GNFF partnered with Kansas State University to develop a U.S. Department of Agriculture (USDA) Quality System Certification and a Quality System Verification program for small livestock and poultry, respectively. GNFF is one of the first producer groups selected by the USDA to implement USDA Group GAP certification certification for small-scale family farms growing and packaging fruits and vegetables on their farms.

The branding of local food products has benefitted both Balls Food Stores and GNFF. The two partners share the costs for promoting the brand to consumers, with GNFF handling the packaging and labeling and Balls Foods overseeing advertising and in-store displays. They have also benefitted from the local implementation of the national FoodRoutes Network’s “Buy Fresh Buy Local” campaign. GNFF, through its partnership with Balls Foods, has reported tremendous success and hopes to continue growing the brand, focusing on long-term financial viability.137

**Market Mobile, a Regional Food Hub Delivering Local Foods in Rhode Island and Massachusetts.** Because local restaurants had expressed an interest in buying from local producers, Farm Fresh Rhode Island, a non-profit organization, piloted a new program called Market Mobile. Initiated in 2009 with support from Rhode Island’s state health and agricultural departments, the program started to facilitate buying relationships between producers, institutions, and other buyers. Market Mobile generated over $1.5 million dollars in sales from over 60 local food producers to more than 260 customers in 2012, including to independent grocery stores, corner stores, farm stands, schools, and worksites.

Farmers post their pricelists online twice a week, and Market Mobile customers receive e-mail notices regarding product availability and order placement deadlines. Farmers and other producers are notified of orders and work to harvest and supply the products to fulfill the orders over a 1-2 day period. Orders are delivered to customers throughout the state, and in neighboring areas like Boston, twice a week. With a warehouse, walk-in refrigerators and freezers, a cold packing room, and a conveyor belt, Market Mobile estimates it provides 50,000 families locally produced food each week. More information can be found at [http://www.farmfresh.org/hub/](http://www.farmfresh.org/hub/).
Linking producers and retailers. The model of farmers selling their products directly to local small stores or grocery stores can increase profitability and customer demand for stores. Local produce can have a longer shelf-life. Therefore, there is less lost profit from spoiled food for the store, and customers will return for high-quality produce. This model also decreases the need for an intermediary to coordinate distribution or other logistics. While some stores, especially those equipped for perishable items, can sell local produce and other local food items on standard shelving or in-store displays, other stores may find less risk in using mechanisms such as an individual farm stand or Community Supported Agriculture (CSA) located on the sidewalk or parking lot by the store, and may benefit from the increased customer traffic these markets would attract.

Distribution in Action: Produce Packs in Warren County, NC

Researchers from the University of North Carolina (UNC) at Chapel Hill Center for Health Promotion and Disease Prevention (HPDP, a CDC-funded Prevention Research Center) piloted a program in collaboration with Working Landscapes, a community-based organization in Warren County working to link local farmers to new markets. This effort was spurred from conversations with the state director for the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) who articulated the challenges related to redeeming WIC Cash Value Vouchers (CVVs) at grocery outlets. CVVs are issued as part of standard WIC benefits specifically for the purchase of fruits and vegetables. Produce can only be purchased for specific dollar amounts through CVVs; if the total amount of produce purchased is less than the amount of the CVV, change is not given and the excess value is lost.

The “produce pack” program was designed to bring fresh, local produce to consumers, particularly those who use CVVs. The project team collaborated with farmers in rural Warren County, NC, to create packs of produce that are priced to correspond with CVV dollar increments. These packs make the process of selling produce to customers easier, especially CVV clients, as they do not need to be bagged, measured, or weighed. The project launch was supported with a branding and marketing campaign, and the products were sold in an independent grocery store and two corner stores over a 10-week pilot period.

The project was funded with an Economic Innovation Grant from the North Carolina Rural Center for Economic Development. A partnership with the Warren County WIC Office in the Warren County Health Department allowed for marketing and outreach to their clients. Additional partnerships have formed around this project and funding has been sought to expand to a larger geographic area. The project team and partners are also discussing how this approach can support a larger U.S. Department of Agriculture project and other farmers market and corner store efforts in the state in order to create economic opportunities in rural areas of North Carolina. Information on the project can be found at http://hpdp.unc.edu/research/projects/foodworks/.
**Action Items**

As a public health practitioner, you can do the following to connect local food producers to distributors and retailers:

- **Provide marketing or communications support to retailers and producers**, promoting the concept of local or regional produce for consumers.

- **Coordinate the start-up of a food distribution network** that brings local or regional produce to retailers, including identifying potential partners for funding.

- **Facilitate discussions between food distributors and food producers on:**
  - Available state and regional products and impacts on supply (such as seasonality).
  - The resources and solutions required by distributors to improve their food distribution networks.

- **Help facilitate direct sales from producers to retailers** by connecting retailers with groups that represent local foods (e.g., small, local farmers, food or farming cooperatives, or community gardening programs). This could involve working with managers of chain stores who can place local produce in multiple stores, or working with multiple store owners in order to harness their collective buying power in purchasing food from local farmers.

- **Connect small farmers to small stores** interested in serving healthier foods, especially fresh fruits and vegetables. This could include:
  - Hosting or facilitating direct meetings between groups of small stores and groups of small food producers to help both stakeholders find ways to share resources and support one another.
  - Creating a database or other resource that includes information about farmers and retailers who are looking to make a connection.
Distribution in Action: Fresh Choices in Minnesota’s Small Stores

Spurred by the leverage created through historic changes to the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) food package in 2009, the Institute for Agriculture Trade and Policy (IATP) launched an innovative supply chain model to connect small stores in Minnesota authorized by WIC with a steady supply of fresh, culturally appropriate produce. IATP first conducted research to identify the existing distribution patterns and associated economics in how food products reach small stores (defined as those with one or two cash registers) in the region. IATP found that most small corner stores in the region were being served by a relatively small number of prime distributors. IATP also discovered that while these prime distributors were adept at delivering less-perishable grocery items, most did not have an effective system in place to manage the procurement and distribution of fresh produce. Compared to the distribution of non-perishable items, produce distribution is uniquely challenging in that it relies on different (and often global) supply chains and procurement expertise, and requires specialized warehousing and handling expertise to maintain product quality.

Given these challenges, IATP worked with allied businesses to re-conceptualize how corner stores could be linked with a reliable, year-round supply of culturally appropriate produce offerings. IATP and a produce distribution partner, with whom IATP has worked in the past, approached two prime distributors (one regional and one national) who serve small WIC-authorized stores in Minnesota. Jointly, they crafted a system for running fresh produce from the produce distributor through the prime distributors’ existing system to participating stores. Recognizing the smaller footprint and lower product turn-over among small stores, a “right-sized” program was also developed that allows stores to purchase small pack-sizes (e.g., six oranges or avocados) that better meet their needs and avoid waste. Ultimately, more than 50 different “right-sized” products have been made available.

Using this innovative approach, retail owners can now order fresh produce using the same ordering, billing and delivery mechanisms they have previously used with the prime distributors. A “ghost inventory” system enables store orders to be consolidated by the prime distributors, who then place an order with the produce distributor who actually holds an extensive inventory of fresh produce. The produce distributor then fills the orders and delivers the produce to the prime distributors’ main distribution centers. The prime distributors deliver fresh produce to individual stores using the same refrigerated trucks and routing system as their other products. The Minnesota example is unique in that no parallel procurement, ordering, shipping, or invoicing
system had to be created for stores to access the fresh produce. The “ghost inventory” system helps reduce associated risks for the prime distributors by minimizing the time that they hold fresh product in their facilities and keeping the expertise needed to procure fresh produce at the produce distributor level.

The Minnesota Department of Health (MDH) collaborated with IATP on early work with corner store operators. The work included trainings and using focus groups to explore operators’ concerns about selling, storing, and handling fresh produce, customers’ taste preferences, and their stores’ promotional needs. MDH also collaborated with IATP to co-design related promotional materials for corner store retailers, such as posters and shelf labels, in four languages. These promotional resources were designed to help stores promote the availability of fresh produce, and are available at http://www.health.state.mn.us/divs/fh/wic/vendor/fpchnq/index.html.

Initial results indicate that most WIC-authorized small stores have been able to meet the minimum variety of fresh produce items required under Minnesota’s stocking requirements and that consumers are purchasing fresh fruits and vegetables made available through the “right-sized” program. As importantly, the program and the relationships between allied businesses have been sustained with minimal facilitation by IATP and without the infusion of additional outside funding. The produce distributor and two prime distributors made the products available to approximately 500 small stores in Minnesota, including approximately 200 of Minnesota’s 500 certified WIC vendors that have either one or two cash registers. The model has also expanded into parts of Wisconsin and Michigan. A summary of the core program elements, evidence, implementation guidance, and potential public health impact are available from the CDC at http://www.cdc.gov/nccdphp/dnpao/programsta/nutrition.html.

(Excerpts used with permission from the Center for Training and Research Translation, University of North Carolina at Chapel Hill.)
Distribution Resources

Healthy Corner Stores Network (HCSN)
This Web site connects professionals and other stakeholders, provides resources for improving access to healthier foods, and describes efforts in corner stores around the United States and Canada. The “Distribution” portion of the Web site provides information about working with small stores to source local produce and working with distributors to get healthier food options in small stores. [http://www.healthycornerstores.org/tag/distribution](http://www.healthycornerstores.org/tag/distribution)


ChangeLab Solutions
Providing Fresh Produce in Small Food Stores: Distribution Challenges & Solutions for Healthy Food Retail provides a variety of potential strategies for addressing the challenges of sourcing and marketing fresh produce at affordable prices. [http://changelabsolutions.org/produce-distribution](http://changelabsolutions.org/produce-distribution)

Making the Link Between Stores and Suppliers is a webinar about addressing challenges in the distribution of fresh and healthier foods to corner stores. Innovative strategies including food hubs, cooperative purchasing, and agreements with distributors are covered. [http://changelabsolutions.org/publications/making-link-between-stores-and-suppliers](http://changelabsolutions.org/publications/making-link-between-stores-and-suppliers)

D.C. Hunger Solutions
Creating Healthy Corner Stores in the District of Columbia: Healthy Corner Store Program - Phase One Research Results and Recommendations is a case study on a program in Washington D.C. that addresses hunger and food access issues by providing access to fresh produce in small stores. The case study describes an assessment process that explores in-store marketing and placement, storage and supply of perishable foods, and distribution and access to affordable produce. Lessons learned, limitations and challenges, and model programs are provided. [http://www.dchunger.org/publications/](http://www.dchunger.org/publications/)
Successfully Selling Fresh Produce in Washington, D.C. Corner Stores outlines Phase Two of the Healthy Corner Store Program. During Phase Two of the D.C. Healthy Corner Store Program, D.C. Hunger Solutions recruited stores and worked with them to assist with stocking, promoting, and selling healthier food options. Phase Two of the program ran from October 2008 through September 2009. This second case study outlines many partners and processes that were used to help get healthier food items, mainly produce, to participating stores. [http://www.dchunger.org/publications/](http://www.dchunger.org/publications/)

**National Good Food Network (Winrock International)**

This network of food system stakeholders includes producers, buyers, distributors, advocates, investors, and funders. The goal of the network is to create a community dedicated to improving and increasing sourcing and access to good food. The network Web site facilitates access to peers and partners, and provides practical information and resources. A dedicated Web page includes various resources and links to more information about food hubs. [http://www.ngfn.org/resources/food-hubs](http://www.ngfn.org/resources/food-hubs)

**United States Department of Agriculture (USDA)**

The Food Hubs Web page by USDA’s Agricultural Marketing Service provides the USDA’s perspective on food hubs along with information, resources, news, and research regarding food hubs. A listing of established food hubs across the country and the *Regional Food Hub Resource Guide*, released by the USDA in 2012, are available. The *Resource Guide* is a collection of information and resources about developing or participating in a regional food hub. The guide outlines the role that food hubs can play in regional food systems, their operation as an innovative business model, and the economic contributions they make to local communities. Funding opportunities, best practices, and additional strategies for developing regional food hubs are also included. A follow-up report, *The Role of Food Hubs in Local Food Marketing*, was released in 2013. [http://www.ams.usda.gov/AMSv1.0/foodhubs](http://www.ams.usda.gov/AMSv1.0/foodhubs)

**California Center for Cooperative Development (CCCD)**

The CCCD has brought together Regional Food Hub representatives to discuss the potential for a state-wide food hub. In addition to information available on the site regarding food cooperatives, materials from the Regional Food Hub session are posted at [http://www.cccd.coop/events/RFHN_home/RFHN_agenda](http://www.cccd.coop/events/RFHN_home/RFHN_agenda), including meeting proceedings, state-wide assessment results, and an action plan.

**Public Health Seattle-King County**

*Farm to Table: Assessing Delivery Models for Childcare and Senior Meal Programs* provides results from pilot testing of several models for procuring and delivering local fruits and vegetables to senior meal and childcare programs. The project was funded through CDC’s Communities Putting Prevention to Work. Information on these delivery models could be helpful in the retail setting, including a community food hub, virtual food hubs, and farm aggregation. [http://www.agingkingcounty.org/docs/F2T_AssessingDeliveryModels.pdf](http://www.agingkingcounty.org/docs/F2T_AssessingDeliveryModels.pdf)


28. Centers for Disease Control and Prevention. Developing an effective evaluation plan: Setting the course for effective program evaluation. Atlanta, GA: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health; Division of Nutrition, Physical Activity, and Obesity; 2011.


33. Obadia J, Damon L, Webber D. *Supplemental nutrition assistance program benefits at Massachusetts farmers’ markets: Program evaluation*. Massachusetts Department of Agricultural Resources; 2011.


38. Centers for Disease Control and Prevention/Division of Nutrition Physical Activity and Obesity. *State initiatives supporting healthier food retail: An overview of the national landscape*.


60. United States Department of Agriculture/Food and Nutrition Service. Special Supplemental Nutrition Program for Women, Infants and Children (WIC) revisions in the WIC food packages rule to increase cash value vouchers for women. 2009, 74.


68. Custer S. *Healthy Corner Stores for Healthy New Orleans Neighborhoods: A Toolkit for neighborhood groups that want to take action to improve their food environment*. Congressional Hunger Center; 2009.


83. Kim G. *Boston Bounty Bucks: Increasing access to and affordability of fresh fruits and vegetables for SNAP participants*. The Food Project; 2010.


103. City of Chicago/Chicago Department of Business Affairs and Consumer Protection. Chicago’s guide to restaurants and retail food establishments: Retail Food Establishment License (4-8, 7-40).

105. Hobson J, Quiroz-Martínez J. *Roadblocks to health: Transportation barriers to healthy communities*. Transportation and Land Use Coalition; Center for Third World Organizing; People United for a Better Oakland (PUEBLO); 2002.


113. Ortega J. *Car sharing in the United States: Helping people transition from welfare to work and improving the quality of life of low-income families*. Community Transportation Association of America.


115. Minnesota Department of Health/Environmental Health Division. *Healthy Communities Count!: Indicators of community health along the Central Corridor Light Rail Transit (LRT) route*. 2010.


117. Vallianatos M, Pasciuto G, Swanson M, Shaffer S. *Bringing people to good food and good food to people: Enhancing food access through transportation and land use policies*. Urban & Environmental Policy Institute/Occidental College, Community Redevelopment Agency of Los Angeles, and Esperanza Community Housing Corporation; 2011.


121. City of Los Angeles Department of Transportation. *Los Angeles Department Of Transportation reroutes DASH Downtown to better serve the growing South Park area*. 2007.


124. Vallianatos M, Shaffer A, Gottlieb R. *Transportation and food: The importance of access (A policy brief of the Center for Food and Justice, Urban and Environmental Policy Institute)*. Urban and Environmental Policy Institute, Occidental College; 2002.
125. Swingley S. *The Northside Healthy Eating Project: Transportation access to affordable fresh produce*. University of Minnesota, Humphrey School of Public Affairs; NorthPoint Health & Wellness Center; and The Center for Urban and Regional Affairs; 2011.


Appendix: Examples of Evaluation Questions, Indicators, and Data Sources for Healthier Food Retail Strategies
### All Retail Environments

<table>
<thead>
<tr>
<th>Example Evaluation Questions</th>
<th>Evaluation Type</th>
<th>Potential Indicators</th>
<th>Potential Data Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was the action plan implemented as intended?</td>
<td>Process</td>
<td>Stakeholders engaged for planning and implementation&lt;br&gt;Assessment, planning, and programmatic activities completed&lt;br&gt;Level of community support, such as organizations involved or champions engaged&lt;br&gt;Level of resources or funding available to implement action plan&lt;br&gt;Educational or marketing materials developed or distributed related to the strategy or initiative</td>
<td>Surveys/interviews with stakeholders&lt;br&gt;Activity records or progress notes&lt;br&gt;Meeting minutes or other documentation from community meetings or events&lt;br&gt;Monitoring and tracking records for distribution of program materials&lt;br&gt;Media tracking or clipping service</td>
</tr>
<tr>
<td>Was there sufficient support (community, financial, industry) for the strategy or initiative?</td>
<td>Process</td>
<td>Community support obtained for activities, assessed by community input on knowledge of and attitudes about the activities&lt;br&gt;Funding received or provided for activities&lt;br&gt;Business sector/retailer support obtained for activities, such as participation in planning sessions</td>
<td>Key informant interviews with community leaders&lt;br&gt;Funding agency application records&lt;br&gt;Meeting minutes or other documentation from community meetings or industry events</td>
</tr>
<tr>
<td>What barriers and facilitators were experienced in the planning and implementation of the initiative?</td>
<td>Process</td>
<td>Barriers, such as: State or city regulations&lt;br&gt;Community and food retailer perceptions&lt;br&gt;Zoning issues&lt;br&gt;Facilitators, such as: Community support&lt;br&gt;Programmatic guidelines&lt;br&gt;Adequate distribution systems and sourcing of healthier foods</td>
<td>Activity records or progress notes from council meetings or public sessions&lt;br&gt;Meeting minutes or other documentation from planning boards or community meetings&lt;br&gt;Legislative and regulatory archives&lt;br&gt;Market surveys or reports from food retailers&lt;br&gt;Surveys/interviews with retailers, distributors, producers, or customers</td>
</tr>
<tr>
<td>How were barriers reduced and facilitators maintained or increased?</td>
<td>Process</td>
<td>Evidence of reduction in barriers, such as: Decrease in regulatory barriers&lt;br&gt;Change in perceptions of market potential&lt;br&gt;Development of adequate infrastructure&lt;br&gt;Evidence of maintenance or increased facilitators, such as: Funding or financial incentives or support for initiative&lt;br&gt;Creation of distribution hubs or other centralized systems&lt;br&gt;Modified distribution systems&lt;br&gt;Access to transportation to and from retail environment</td>
<td>Activity records or progress notes from council meetings or public sessions&lt;br&gt;Legislative and regulatory archives or databases&lt;br&gt;Market surveys or reports from industry&lt;br&gt;Administrative data from financial institutions or distributors&lt;br&gt;Surveys/interviews with retailers, distributors, producers, or customers of the retail environment&lt;br&gt;Meeting minutes or other documentation from planning boards or community meetings</td>
</tr>
</tbody>
</table>

†††The evaluation type in this column represents a common categorization for the questions presented. However, some of the evaluation questions may be either process or outcome depending on the program’s specific selected strategies and goals.
<table>
<thead>
<tr>
<th>Example Evaluation Questions</th>
<th>Evaluation Type††</th>
<th>Potential Indicators</th>
<th>Potential Data Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did retailers have access to healthier food options from distributors?</td>
<td>Process, Outcome</td>
<td>▸ Retailers with access to distributor with healthier products</td>
<td>▸ Retailers survey</td>
</tr>
<tr>
<td></td>
<td></td>
<td>▸ Number of distributors with healthier food options that sell to stores in the targeted area</td>
<td>▸ Archival distribution data from purchase logs or delivery records</td>
</tr>
<tr>
<td></td>
<td></td>
<td>▸ Pilot programs to modify existing distribution systems</td>
<td></td>
</tr>
<tr>
<td>Did the accessibility (availability, quality, and affordability) of healthier food increase at retail locations in target areas?</td>
<td>Outcome</td>
<td>▸ Healthier food options available in retail environments</td>
<td>▸ Purchasing and stocking data</td>
</tr>
<tr>
<td></td>
<td></td>
<td>▸ Linear shelf space dedicated to healthier foods and beverages</td>
<td>▸ Retailer surveys</td>
</tr>
<tr>
<td></td>
<td></td>
<td>▸ Comparable pricing of healthier options to less healthy options</td>
<td>▸ In-store or retailer observations</td>
</tr>
<tr>
<td></td>
<td></td>
<td>▸ Nutrition assistance benefit program availability</td>
<td>▸ Market data on standard pricing of healthier foods and beverages</td>
</tr>
<tr>
<td>Was there a change in marketing practices for food in target areas?</td>
<td>Process, Outcome</td>
<td>▸ Evidence of community marketing of healthier vs. less healthy food items, such as:</td>
<td>▸ Direct observation of marketing promotions in community and retail locations</td>
</tr>
<tr>
<td></td>
<td></td>
<td>▸ Storefront advertising</td>
<td>▸ Monitoring and tracking records for distribution of program materials</td>
</tr>
<tr>
<td></td>
<td></td>
<td>▸ Shelf labeling and other food signage</td>
<td>▸ Media tracking or clipping service</td>
</tr>
<tr>
<td></td>
<td></td>
<td>▸ Prominent placement of healthier items</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>▸ In-store events and promotions for healthier vs. less healthy food items</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>▸ Community events and promotions for healthier vs. less healthy food items</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>▸ Educational or marketing materials developed for or distributed to retailers</td>
<td></td>
</tr>
<tr>
<td>Was there a change in the buying behavior of customers at retail locations in the target area?</td>
<td>Outcome</td>
<td>▸ Healthier food purchases</td>
<td>▸ Sales data</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>▸ Customer surveys</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>▸ Retailer surveys</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>▸ Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and Supplemental Nutrition Assistance Program (SNAP) administrative data</td>
</tr>
<tr>
<td>Were there any community development or economic outcomes in target areas associated with the healthier food retail initiative?</td>
<td>Outcome</td>
<td>▸ Sales for other businesses in community</td>
<td>▸ Economic Development Corporation administrative data sets</td>
</tr>
<tr>
<td></td>
<td></td>
<td>▸ New businesses created</td>
<td>▸ Community Development Corporation administrative data sets</td>
</tr>
<tr>
<td></td>
<td></td>
<td>▸ Jobs created</td>
<td>▸ Business surveys</td>
</tr>
<tr>
<td></td>
<td></td>
<td>▸ Employment rates</td>
<td>▸ Community surveys</td>
</tr>
<tr>
<td></td>
<td></td>
<td>▸ Training programs</td>
<td>▸ Department of Labor administrative data</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>▸ Direct observation</td>
</tr>
</tbody>
</table>
### Grocery Stores

<table>
<thead>
<tr>
<th>Example Evaluation Questions</th>
<th>Evaluation Type</th>
<th>Potential Indicators</th>
<th>Potential Data Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was there progress towards the implementation of incentive programs for development of grocery stores in target areas?</td>
<td>Process, Outcome</td>
<td>Evidence of progress towards grocery store development, such as:&lt;br&gt;  - Zoning incentives&lt;br&gt;  - Permitting incentives&lt;br&gt;  - Tax incentives&lt;br&gt;  - Funding program established&lt;br&gt;  - Funds allocated</td>
<td>Activity records or progress notes from council meetings or public sessions&lt;br&gt; Administrative data from financial institutions or local planning boards&lt;br&gt; Legislative and regulatory archives</td>
</tr>
<tr>
<td>Was there an increase in the number of grocery stores in target areas?</td>
<td>Outcome</td>
<td>New grocery store projects in target areas&lt;br&gt;  - Planned&lt;br&gt;  - In progress&lt;br&gt;  - Completed</td>
<td>Documentation or direct observations of grocery store locations&lt;br&gt; Data sets of food retail locations&lt;br&gt; Administrative data from municipality office, such as blueprints submission</td>
</tr>
</tbody>
</table>

### Small Stores

<table>
<thead>
<tr>
<th>Example Evaluation Questions</th>
<th>Evaluation Type</th>
<th>Potential Indicators</th>
<th>Potential Data Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Were programmatic activities successful in recruiting and supporting small stores to participate in improvement projects?</td>
<td>Process, Outcome</td>
<td>Stores receiving public or private funding&lt;br&gt; Stores making modifications to the store environment&lt;br&gt; Stores offering healthier food options&lt;br&gt; Stores applying for, being approved for, and maintaining WIC/SNAP authorization&lt;br&gt; Store owners and managers participating in buying associations or other groups&lt;br&gt; Store owners and managers receiving training and technical assistance</td>
<td>Store owner surveys&lt;br&gt; Programmatic monitoring, tracking, and reporting records&lt;br&gt; In-store observations&lt;br&gt; Administrative data from WIC/SNAP&lt;br&gt; Participation (training, meetings) logs</td>
</tr>
<tr>
<td>Did small stores carry healthier food options?</td>
<td>Process, Outcome</td>
<td>Healthier food options available&lt;br&gt; Ratio of space/inventory dedicated to healthier foods and beverages&lt;br&gt; Comparable pricing of healthier options</td>
<td>Purchasing and stocking data&lt;br&gt; Retailer surveys&lt;br&gt; In-store or retailer observations&lt;br&gt; Market data on standard pricing of healthier foods and beverages</td>
</tr>
<tr>
<td>Were there changes in customer purchasing behaviors once healthier products became more available?</td>
<td>Outcome</td>
<td>Customer knowledge and attitudes about healthier options in small stores&lt;br&gt; Customer purchases of healthier options&lt;br&gt; SNAP and WIC redemption rates</td>
<td>Customer surveys&lt;br&gt; Sales data&lt;br&gt; Store owner surveys&lt;br&gt; WIC/SNAP administrative data</td>
</tr>
</tbody>
</table>

---

## Farmers Markets

<table>
<thead>
<tr>
<th>Example Evaluation Questions</th>
<th>Evaluation Type</th>
<th>Potential Indicators</th>
<th>Potential Data Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was there sufficient programmatic support to help farmers markets become established in target areas?</td>
<td>Process, Outcome</td>
<td>Farmers markets in target areas, Farmers markets that have increased in size or sales, or increased the days/hours of operation in target areas, Farmers market organizers or managers participating in associations, and training and technical events</td>
<td>Observations of farmers market locations and frequency, Farmers market data from U.S. Department of Agriculture Food Environment Atlas, Training participation records, Activity records or progress notes</td>
</tr>
<tr>
<td>Was there an increase in farmers markets that have Electronic Benefit Transfer (EBT) machines or that accept WIC Farmers Market Nutrition Program (FMNP) coupons?</td>
<td>Outcome</td>
<td>Farmers markets with ability to accept SNAP and WIC, SNAP and WIC transactions at farmers markets</td>
<td>SNAP administrative data, WIC FMNP administrative data, Direct observation</td>
</tr>
<tr>
<td>Was there an increase in customers/sales at farmers markets in target areas?</td>
<td>Outcome</td>
<td>Customers at farmers markets, Community awareness of farmers markets, Sales at farmers markets, Redemption rates of SNAP incentive programs</td>
<td>Market surveys, Customer surveys, Sales data, SNAP administrative data</td>
</tr>
</tbody>
</table>

## Mobile Food Retail

<table>
<thead>
<tr>
<th>Example Evaluation Questions</th>
<th>Evaluation Type</th>
<th>Potential Indicators</th>
<th>Potential Data Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was there sufficient programmatic support to recruit mobile food retailers to participate in healthier food retail programs?</td>
<td>Process, Outcome</td>
<td>Availability of financial incentives, Reduction in regulatory barriers, Provision of training/technical assistance to mobile retailers</td>
<td>Activity records or progress notes, Training/technical assistance attendance records, Legislative and regulatory archives, Retailer surveys</td>
</tr>
<tr>
<td>Example Evaluation Questions</td>
<td>Evaluation Type</td>
<td>Potential Indicators</td>
<td>Potential Data Sources</td>
</tr>
<tr>
<td>------------------------------</td>
<td>-----------------</td>
<td>----------------------</td>
<td>------------------------</td>
</tr>
<tr>
<td>Was there an increase in the number of healthier mobile food retailers in target areas?</td>
<td>Outcome</td>
<td>Applications for permits, Mobile retailers selling in target areas, Mobile retailers participating in special programs</td>
<td>Administrative data on vendor permits, Direct observation of community, Waiting list for permits, Applications for program participation</td>
</tr>
<tr>
<td>Was there an increase in healthier food options provided by existing mobile food vendors?</td>
<td>Outcome</td>
<td>Retailers with healthier food options, Ratio of healthier food options, Sales of healthier foods and beverages</td>
<td>Retailer surveys, Food inventories, Sales data</td>
</tr>
</tbody>
</table>