HEARING TO REVIEW ACCESS TO HEALTHY FOODS FOR BENEFICIARIES OF FEDERAL NUTRITION PROGRAMS AND EXPLORE INNOVATIVE METHODS TO IMPROVE AVAILABILITY

HEARING

BEFORE THE

SUBCOMMITTEE ON DEPARTMENT OPERATIONS, OVERSIGHT, NUTRITION, AND FORESTRY OF THE

COMMITTEE ON AGRICULTURE HOUSE OF REPRESENTATIVES

ONE HUNDRED ELEVENTH CONGRESS

SECOND SESSION

APRIL 14, 2010

Serial No. 111-46



Printed for the use of the Committee on Agriculture agriculture.house.gov

U.S. GOVERNMENT PRINTING OFFICE

56–068 PDF

WASHINGTON : 2010

For sale by the Superintendent of Documents, U.S. Government Printing Office Internet: bookstore.gpo.gov Phone: toll free (866) 512–1800; DC area (202) 512–1800 Fax: (202) 512–2104 Mail: Stop IDCC, Washington, DC 20402–0001

COMMITTEE ON AGRICULTURE

COLLIN C. PETERSON, Minnesota, Chairman

TIM HOLDEN, Pennsylvania, Vice Chairman MIKE MCINTYRE, North Carolina LEONARD L. BOSWELL, Iowa JOE BACA, California DENNIS A. CARDOZA, California DAVID SCOTT, Georgia JIM MARSHALL, Georgia STEPHANIE HERSETH SANDLIN, South Dakota HENRY CUELLAR, Texas JIM COSTA, California BRAD ELLSWORTH, Indiana TIMOTHY J. WALZ, Minnesota STEVE KAGEN, Wisconsin KURT SCHRADER, Oregon DEBORAH L. HALVORSON, Illinois KATHLEEN A. DAHLKEMPER, Pennsylvania BOBBY BRIGHT, Alabama BETSY MARKEY, Colorado FRANK KRATOVIL, JR., Maryland MARK H. SCHAUER, Michigan LARRY KISSELL, North Carolina JOHN A. BOCCIERI, Ohio SCOTT MURPHY, New York EARL POMEROY, North Dakota TRAVIS W. CHILDERS, Mississippi WALT MINNICK, Idaho

FRANK D. LUCAS, Oklahoma, Ranking Minority Member BOB GOODLATTE, Virginia JERRY MORAN, Kansas TIMOTHY V. JOHNSON, Illinois SAM GRAVES, Missouri MIKE ROGERS, Alabama STEVE KING, Iowa RANDY NEUGEBAUER, Texas K. MICHAEL CONAWAY, Texas JEFF FORTENBERRY, Nebraska JEAN SCHMIDT, Ohio ADRIAN SMITH, Nebraska DAVID P. ROE, Tennessee BLAINE LUETKEMEYER, Missouri GLENN THOMPSON, Pennsylvania BILL CASSIDY, Louisiana CYNTHIA M. LUMMIS, Wyoming

PROFESSIONAL STAFF

ROBERT L. LAREW, Chief of Staff ANDREW W. BAKER, Chief Counsel APRIL SLAYTON, Communications Director NICOLE SCOTT, Minority Staff Director

Subcommittee on Department Operations, Oversight, Nutrition, and Forestry

JOE BACA, California, Chairman

HENRY CUELLAR, Texas STEVE KAGEN, Wisconsin KURT SCHRADER, Oregon KATHLEEN A. DAHLKEMPER, Pennsylvania TRAVIS W. CHILDERS, Mississippi JEFF FORTENBERRY, Nebraska, Ranking Minority Member STEVE KING, Iowa JEAN SCHMIDT, Ohio CYNTHIA M. LUMMIS, Wyoming

LISA SHELTON, Subcommittee Staff Director

CONTENTS

	Page
Baca, Hon. Joe, a Representative in Congress from California, opening state-	8-
ment	1
Prepared statement	3
Dahlkemper, Hon. Kathleen A., a Representative in Congress from Pennsyl-	
vania, opening statement	10
Fortenberry, Hon. Jeff, a Representative in Congress from Nebraska, opening	
statement	4
Prepared statement	6
Kagen, Hon. Steve, a Representative in Congress from Wisconsin, opening	7
statement Peterson, Hon. Collin C., a Representative in Congress from Minnesota, pre-	1
pared statement	11
Rush, Hon. Bobby L., a Representative in Congress from Illinois	10
Schmidt, Hon. Jean, a Representative in Congress from Ohio, opening state-	10
ment	8
Schrader, Hon. Kurt, a Representative in Congress from Oregon, opening	0
statement	9

WITNESSES

Concannon, Hon. Kevin W., Under Secretary for Food, Nutrition, and Con- sumer Services, U.S. Department of Agriculture, Washington, D.C.	12
Prepared statement	14
Ver Ploeg, Ph.D., Michele "Shelly", Economist, Economic Research Service,	
U.S. Department of Agriculture, Washington, D.C.	18
Prepared statement	19
Krieger, M.S., Eleanor "Ellie", Registered Dietitian and Host, <i>Healthy Appe-</i> <i>tite</i> , Food Network, New York, NY	30
Prepared statement	32
Rocco DiSpirito, Cookbook Author and Chef, New York, NY; accompanied by Vicki B. Escarra, President and CEO, Feeding America, Chicago, IL	39
Prepared statement	46
Prepared statement of Ms. Escarra	40
Submitted report	83
Wattermann, Randall, Founding Chairman, Member, Board of Directors, and	
Treasurer, Nebraska Food Cooperative, West Point, NE	51
Prepared statement	53
Brown, Jeffrey N., Founder, President, and CEO, Brown's Super Stores, Inc.,	
Westville, ŇJ	56
Prepared statement	58
Submitted report	88
Endicott, Diana, President and Farm to Market Coordinator, Good Natured	
Family Farms [™] ; Marketing Manager and Co-Owner, Rainbow Organic	
Farms, d.b.a. GNFF	61
Prepared statement	63

HEARING TO REVIEW ACCESS TO HEALTHY FOODS FOR BENEFICIARIES OF FEDERAL NUTRITION PROGRAMS AND EXPLORE INNOVATIVE METHODS TO IMPROVE AVAILABILITY

WEDNESDAY, APRIL 14, 2010

House of Representatives, Subcommittee on Department Operations, Oversight, Nutrition, and Forestry, Committee on Agriculture,

Washington, D.C.

The Subcommittee met, pursuant to call, at 10:05 a.m., in Room 1300, Longworth House Office Building, Hon. Joe Baca [Chairman of the Subcommittee] presiding.

Members present: Representatives Baca, Cuellar, Kagen, Schrader, Dahlkemper, Peterson (*ex officio*), Fortenberry, Schmidt, Lummis, and Lucas (*ex officio*).

Staff present: Claiborne Crain, Keith Jones, John Konya, Robert L. Larew, James Ryder, Lisa Shelton, April Slayton, Rebekah Solem, John Goldberg, Tamara Hinton, Pam Miller, Mary Nowak, Jamie Mitchell, and Sangina Wright.

OPENING STATEMENT OF HON. JOE BACA, A REPRESENTATIVE IN CONGRESS FROM CALIFORNIA

The CHAIRMAN. The Subcommittee on Department Operations, Oversight, Nutrition, and Forestry will come to order to review the healthy food for beneficiaries of Federal nutrition programs and to explore innovative methods to improve availability. I would like to welcome each and every one of you to our Subcommittee meeting this morning.

We will begin with opening statements, and I will begin with my opening statement and then call on the Ranking Member, Mr. Fortenberry, to make his statement and then ask any of the other Members if they would like to make an opening statement.

Again, I would like to welcome the Committee Members that are here and those that are testifying. Good morning, thank you for being with the Subcommittee.

I am really excited to continue our examination of how Federal nutrition policies can improve the health of our nation. Today we will discuss how access to wholesome, nutritious foods affects health, particularly among children and low-income populations. As we all know, the First Lady, Michelle Obama, has done a great job of bringing much-needed attention to childhood obesity problems in America. Her leadership and her dedication to improving the health of America's children sets a positive example for all of us.

Over the past 4 years, the Subcommittee has built a record to link the importance of nutrition and health. In 2007, we had a hearing that demonstrated the importance of the food stamp program, now called SNAP, to the health and long-term success of children.

Then in 2008, with the farm bill, we provided a record amount of funding for nutrition safety net programs like SNAP and food banks. We also made important changes to promote healthy eating. We funded pilot programs that will encourage the consumption of more fruits and vegetables by expanding the Fresh Fruits and Vegetables Snack Program to all 50 states. This morning I had the pleasure of meeting with Secretary Vilsack and addressed that issue as well; we need to continue to do further outreach in assuring that many of our schools do provide fresh fruits and vegetables.

Further, this Subcommittee has heard testimony on the widespread economic costs of obesity in the United States. We have learned that obesity costs our nation more than \$140 billion per year in health expenditures.

So, obesity affects the whole family, as well. Recently, I was watching *The Dr. Oz Show* on television, and he indicated in one of the programs that obesity is linked to breast cancer in 20 percent of women.

Earlier this year, we examined how the lost revenues due to poor participation in Federal nutrition programs affects our nation, with particular focus in my home State of California. Unfortunately, California has lost nearly \$7 billion—and I state \$7 billion—in economic activity every year due to poor SNAP participation. So we have to look at how we can get people to enroll in SNAP and put food on the table, especially at this bad economic time.

The State of California has not done as well as some of the other states in assuring that they take advantage of revenue that would be coming back to the state. California has a \$21 billion deficit. And I look at \$7 billion in lost revenues. Somehow we have to get that message to our Governor and the people in the State of California.

This past summer we were gracefully hosted by Mr. Fortenberry of Nebraska. We had a chance to see firsthand some of the innovative ways in which businesses and communities are promoting healthful living while saving money and improving the process. And I want to thank Mr. Fortenberry for having that hearing in Lincoln, Nebraska.

And today's hearing is a direct result of the hearing we had last year on obesity. In 2009, experts from the Centers for Disease Control and Prevention testified that the lack of access to healthy food significantly contributes to the obesity epidemic. Access to a variety of quality foods is an issue, and we acknowledged that in the farm bill with the inclusion of the Healthy Urban Food Enterprise Development Center. I am confident that this hearing will give us a better insight as to how to improve access, and I state, how to improve access to healthy food in communities across America. That is what we have to work on. How do we do that? Unfortunately, many Americans live in areas we call "food deserts" where they have limited or no access to nutritious food options. Even more Americans live in the so-called "food swamps," areas that lack access to healthy food, but are filled with fast food restaurants on every corner and stores carrying unhealthy snacks. And I am just as guilty as anyone, because I just went to In-N-Out Burger and I enjoyed that hamburger. But we have them all over the place.

How can we better educate underserved communities on the importance of healthy food? What can we do to make fruits and vegetables more accessible and affordable to impoverished Americans? And how can we best change the culture of our schools, homes, and even food industries so that we can influence behavior and attitude in a positive way?

How can we ensure that the food we provide for our families lives up to the highest safety standards possible?

These are some of the many questions that we hope will be discussed today. I look forward to hearing from Under Secretary Concannon on the USDA's efforts to promote healthy food access. In the farm bill, Congress asked the Department of Agriculture to report on access to nutritious foods. The report was completed last June and we are pleased to have the primary author of the report, Michelle Ver Ploeg on our first panel to discuss the findings this morning.

In addition to our government witnesses, I am pleased to welcome our second panel of witnesses. They are an impressive group of professionals and business people who understand very well the nuts and bolts of expanding access and awareness of healthy food. They are also skilled communicators and role models. It is one thing to understand what needs to be done, but to actually put these ideas into practice requires great creativity and talent.

Again, let me extend my personal thanks to all of our witnesses for being here and for the willingness to share their knowledge with us. We are a small Subcommittee with a very large interest in the health and welfare of the people in this country. And if we can be cost-effective in what we do and promote healthy lifestyles, that is important for us.

[The prepared statement of Mr. Baca follows:]

PREPARED STATEMENT OF HON. JOE BACA, A REPRESENTATIVE IN CONGRESS FROM CALIFORNIA

Good morning and thank you all for being here before this Subcommittee.

I am excited to continue our examination of how good Federal nutrition policies can improve the health of our nation.

Today, we will discuss how access to wholesome and nutritious foods affects health—particularly among children and low-income populations.

As we all know—First Lady Michelle Obama has done a great job of bringing much needed attention to the childhood obesity problem in America. Her leadership and dedication to improving the health of America's children sets

Her leadership and dedication to improving the health of America's children sets a positive example for all of us. Over the past 4 years, this Subcommittee has built a record that links the impor-

Over the past 4 years, this Subcommittee has built a record that links the importance of nutrition and health.

In 2007, we held a hearing that demonstrated the importance of food stamp program (now called SNAP) to the health and long term success of children.

Then, in the 2008 Farm Bill, we provided record levels of funding for nutrition and safety net programs—like SNAP and food banks.

We also made important changes that promote healthy eating.

We funded pilot programs that encourage the consumption of more fruits and vegetables.

And we expanded the Fresh Fruit and Vegetable Snack Program to all 50 states. Since that time, this Subcommittee has heard testimony on the widespread economic costs of poor nutrition in the United States.

We have learned that obesity costs our nation more than \$140 billion per year in health expenditures.

And earlier this year, we examined how lost revenue due to poor participation in Federal nutrition programs affects our nation-with a particular focus on my home State of California.

Unfortunately, California loses nearly \$7 billion in economic activity every year due to poor SNAP participation.

This past summer, we were graciously hosted by Mr. Fortenberry in Nebraska. We had a chance to see first-hand some of the innovative ways in which busi-nesses and communities are promoting healthful living, while saving money and improving lives in the process.

Today's hearing is a direct result of a hearing we held last year on obesity. Experts from the Centers for Disease Control and Prevention testified that a lack of access to healthy foods significantly contributes to the obesity epidemic.

Access to a variety of quality food was an issue we acknowledged in the farm bill with inclusion of funding for the Healthy Urban Food Enterprise Development Center.

I am confident this hearing will give us better insight in how to improve access to healthy foods in communities across America.

Unfortunately-many Americans live in areas we call "food deserts"-where they have limited or no access to nutritious food options. Even more Americans live in so-called "**food swamps**"—areas that lack access to

healthy foods, but are filled with fast food restaurants and corner stores carrying unhealthy snacks.

How can we better educate underserved communities on the importance of healthy foods?

What can we do to make fruits and vegetables more accessible and affordable to impoverished Americans?

How can we best change the culture of our schools, homes, and even the food in-dustry—so we can influence behaviors and attitudes in a positive way?

How can we ensure the food we provide for our families is home-grown, and lives up to the highest safety standards possible?

These are some of the many questions we hope to discuss today.

I look forward to hearing from Under Secretary Concannon on the USDA's efforts to promote healthy food access. In the farm bill, Congress asked the Department of Agriculture to report on access

to nutritious foods.

Their report was completed last June, and we are pleased to have the primary

author of that report, Michele Ver Ploeg, on our first panel to discuss the findings. In addition to our government witnesses, I am pleased to welcome our second panel of expert witnesses.

They are an impressive group of professionals and business people who understand very well the nuts and bolts of expanding access and awareness of healthy foods.

They are also skilled communicators and role models.

It is one thing to understand what needs to be done.

But to actually put those ideas into practice requires great creativity and talent. Again, let me extend my personal thanks to all of our witnesses for being here, and for their willingness to share their knowledge with us.

We are a small Subcommittee with a very large interest in the health and welfare of the people in this country

We are here to listen and to learn so we can make good policy choices. With that, I will turn it over to Ranking Member Fortenberry for his opening comments

The CHAIRMAN. With that, I would like to turn it over to our Ranking Member, Mr. Fortenberry, for his opening comments.

OPENING STATEMENT OF HON. JEFF FORTENBERRY, A REPRESENTATIVE IN CONGRESS FROM NEBRASKA

Mr. FORTENBERRY. Thank you, Mr. Chairman. And thank you for holding this important hearing today to explore the important issue of access to healthy foods. I want to also thank you for the invitation to join you in California earlier this year. I thought it was a very productive hearing.

And I cannot help but add that that burger that you had earlier, there is a one in five chance that it came from Nebraska. We produce 20 percent of the hamburgers and steaks in this country.

But within the larger discussion, I would like to focus on a particular market area that has enjoyed rapid growth in recent years, one that I find both exciting as a policymaker and a food consumer, the emergence of local food systems. Local food markets take shape in various forms—the community farmers markets, food cooperatives, direct-to-consumers sales, the community-supported agriculture networks and farm-to-school programs. In a few minutes, we will hear more about an innovative online food initiative in my own home State of Nebraska. But whatever their form, local food markets reconnect farmers and families, urban and rural communities, and people to agriculture, linkages that in many ways have been sacrificed in place of a modern market system.

Americans are increasingly interested in knowing about where their food comes from. This has created a large market opportunity for local agriculture producers and the growth of these local food systems and farmers markets have increased by almost seven percent in just the last few years. And the organics food market has had sales of nearly \$23 billion last year.

In my view, these market opportunities will only continue to grow, benefiting everyone in agriculture. Local food markets represent not only a growing market trend, they help meet multiple public policy objectives, as we will hear today. Buying and selling locally grown food creates economic opportunity by building new markets for ag producers, supporting healthy lifestyles by providing nutritious options and increasing good food access to consumers. And it also promotes good environmental stewardship.

Regarding economic opportunity, the economic potential of local food systems for farmers and communities is very significant. Economic analysis has shown that if consumers shifted just one percent of their purchasing power to buy locally grown products, farmers would see a gain of five percent in their income. And buying directly from a farmer sends 90 percent of the food dollar back to the farm.

Local economies also stand to gain significantly from local food systems. Right now, only about seven percent of local food dollars stay in the community. That number by comparison was 40 percent a century ago. Food dollars that stay in the community are spent in the community. From the bakery to the butcher shop to the hardware store, Main Street businesses in our local economies are strengthened when food is raised and sold locally.

Today, local food producers are not only farmers and livestock producers, they are also business people. Their agriculture entrepreneurship will help bring about rural revitalization. And local, state, and Federal policies should recognize, I believe, these efforts as a strategy for local economic recovery.

Second, let me touch on the issue of health and wellness. Local foods provide a fresh, healthy food option for consumers. As the Chairman mentioned in August, we held a Subcommittee field hearing in my hometown of Lincoln, Nebraska. It was called, *Hearing To Examine New and Innovative Ways To Improve Nutrition and Wellness Programs*. Local businesses, health and nutrition experts, talked about the value of wellness initiatives. And one of the witnesses gave testimony about the nutritional impacts of local foods and provided her experience with the very popular, Good Fresh Local dining program at the University of Nebraska in Lincoln. Good nutrition, health and wellness practices deserve to be an important part of structural healthcare reform.

Today we see an epidemic of chronic diseases across the country. And public health statistics and economic data show that 75 percent of all healthcare spending is related in some way to treating lifestyle-related chronic diseases. Seven out of every ten deaths in this country are caused by a chronic condition, largely lifestyle related. Perhaps better preventing, better managing, and, in some cases, even reversing these trends can occur through healthy lifestyle changes. And, of course, that is related significantly to nutrition.

Incentivizing health and wellness practices with good nutrition as a central focus, I believe, should continue to be a top priority of good healthcare reform. Local and regional food systems need to be a working solution to the challenges of better health and increase access of good foods, as well, to at-risk populations.

Third, let me touch briefly on the issue of environmental stewardship. Production of local foods promotes good environmental stewardship outcomes. The average produce in America travels 1,500 food miles before it is consumed. The American Farm Land Trust estimates that 1 million barrels of oil could be conserved each week if Americans ate just one meal consisting of locally grown foods.

So with that, Mr. Chairman, I look forward to hearing more about this in the upcoming discussion. And thank you once again for holding this important hearing.

[The prepared statement of Mr. Fortenberry follows:]

PREPARED STATEMENT OF HON. JEFF FORTENBERRY, A REPRESENTATIVE IN CONGRESS FROM NEBRASKA

Mr. Chairman, thank you for the opportunity today to explore the important issue of access to healthy foods. Within this larger discussion, I would like to focus on a particular market area that has enjoyed rapid growth in recent years—one I find exciting both as a policymaker and a food consumer: the emergence of local foods systems.

Local foods markets take shape in various forms—the community farmers market, food cooperatives, direct-to-consumer sales, community supported agriculture networks, and farm to school programs. In a few minutes we will hear more about an innovative online local foods initiative in my home State of Nebraska.

Whatever their form, local foods markets reconnect farmers and families, urban and rural communities, and people and agriculture—linkages that in many ways have been sacrificed in place of a modern market system. Americans are increasingly interested in where their food comes from and how it is raised. This has created a large market opportunity for local agricultural producers. The growth of local foods systems and farmers' markets have increased in number by almost seven percent since 2006, and the organic foods market had sales of nearly \$23 billion last year. In my view these market opportunities will only continue to grow.

Local foods markets represent not only a growing market trend; they help meet multiple public policy objectives. Buying and selling locally grown foods creates economic opportunity by building new markets for ag producers, supports healthful lifestyles by providing nutritious food options and increasing access of good foods to consumers, and promotes environmental stewardship.

Economic Opportunity

First, the economic potential of local foods systems for farmers and communities is significant. Economic analysis has shown that if consumers shifted just one percent of their purchasing power to buy locally grown products, farmers would see a gain of five percent in their income. And buying directly from a farmer sends 90 percent of the food dollar back to the farm.

Local economies also stand to gain significantly from local food systems. Right now, only about seven percent of local food dollars stay in the community. That number, by comparison, was 40 percent in 1910. Food dollars that stay in the community are spent in the community. From the bakery and butcher shop to the hardware store, Main Street businesses and our local economies are strengthened when food is raised and sold locally.

Today, local foods producers are not only farmers and livestock producers, they are businesspeople. Their agricultural entrepreneurship will help bring about rural revitalization, and local, state, and Federal policies should recognize their efforts as a strategy for local economic recovery.

Health and Wellness

Second, local foods provide a fresh, healthy food option for consumers. In August, Chairman Baca and I held a Subcommittee field hearing in my hometown of Lincoln. It was called "Hearing To Examine New and Innovative Ways To Improve Nutrition and Wellness Programs." Local business, health, and nutrition experts talked about the value of wellness initiatives. One of the witnesses gave testimony about the nutritional impacts of local foods and provided her experience with the popular Good Fresh Local dining program at the University of Nebraska. Good nutrition, health, and wellness practices deserve to be an important part of structural healthcare reform. Today we see an epidemic of chronic diseases across

Good nutrition, health, and wellness practices deserve to be an important part of structural healthcare reform. Today we see an epidemic of chronic diseases across the country. Public health statistics and economic data show that 75% of all healthcare spending is related in some way to treating lifestyle-related chronic conditions. Seven out of every ten deaths in this country are caused by a chronic condition, and the top four killers are heart disease, diabetes, cancer and strokes. These are largely lifestyle-related diseases. They could be prevented, better managed, and in some cases, even reversed through healthy lifestyle changes.

are largely lifestyle-related diseases. They could be prevented, better managed, and in some cases, even reversed through healthy lifestyle changes. But, according to recent statistics, the average American is now 23 pounds overweight. Obesity among young people has tripled since 1980. Obesity is a major risk factor that leads to the onset of these chronic conditions. Incentivizing health and wellness practices, with good nutrition as a central focus, should be a top healtheave privity. Another present heaving of this Subcommittee

Incentivizing health and wellness practices, with good nutrition as a central focus, should be a top healthcare priority. Another recent hearing of this Subcommittee examined Federal nutrition programs and their impacts on individual health and wellness and the challenge of growing obesity rates. We have work to do. Local and regional food systems need to be a working solution to the challenges of better health and increased access of good foods to at-risk populations.

Environmental Stewardship

Third, the production of local foods promotes good environmental stewardship. The average produce in America travels 1,500 food miles before it is consumed. The American Farmland Trust estimates that 1 million barrels of oil could be conserved each week if every American ate just one meal consisting of local foods weekly.

For each of these reasons—economic, health and nutrition, and environmental— I support the development of regional and local foods systems. I believe, in addition to the benefits I have mentioned, that there are creative ways in which local foods entrepreneurs and local foods supporters can help meet the challenges of access to good foods in underserved areas, rural and urban. I look forward to hearing more about this in the upcoming discussion. Mr. Chairman, thank you once again for choosing to explore this important matter.

The CHAIRMAN. Thank you, Mr. Fortenberry.

At this time I will turn to the Members in the order that they came in.

OPENING STATEMENT OF HON. STEVE KAGEN, A REPRESENTATIVE IN CONGRESS FROM WISCONSIN

Mr. KAGEN. Thank you, Mr. Chairman, for holding this very important hearing. I don't have a formal speech to give, but just to remind everybody that in the most recent farm bill that we worked so hard on, we secured \$30 million for an obesity study to educate our children on how important it is to be lean and think lean.

I would remind everybody that, as a physician, environmental pollution begins at the lips. If you don't take it in, it won't get on. Isn't that right, Jeff?

Mr. FORTENBERRY. Yes.

Mr. KAGEN. Every time we have this conversation with Jeff in the room, we kind of rib each other. He has beat me right now on weight loss.

Aside from the \$30 million, we also had programs in the farm bill that would enhance the opportunity for our local farmers to grow food locally and sell it locally and get it into our school system. I would hope that you would offer some comments today on some of those programs.

In northeast Wisconsin, eight percent of the people are on a Food Nutrition program, food stamp, or SNAP program. And our children at school, 35 percent of all children attending public schools in northeast Wisconsin would not be eating but for these essential and lifesaving programs.

Look how a generation has changed. When I went to school, we didn't have kitchens at school. We brought our lunch. We learned how to negotiate a baloney for a peanut butter and jelly. We got to know in our classrooms pretty—we didn't have burritos up in northeast Wisconsin, but we would be happy to sell them to you.

But we really have gone through a very significant change in our culture where the food is not always prepared by the parent or parents at home. So we have to understand that, sad as it may be for many children, if they didn't have a meal at school and Breakfast or Lunch Program, and during the summer, they simply wouldn't have the nutrition they need to gain the energy to have that education.

So, what we will find out is what we have already known; that our real opposition with regard to educating our population and our next generation about nutrition and the importance of being healthy and eating healthy, our real opposition is on Madison Avenue and in marketing. And I don't know that government can ever out-compete and win that marketing battle, but it doesn't mean we shouldn't be trying.

I thank you for appearing here today. I look forward to your testimony. I yield back.

The CHAIRMAN. Thank you very much.

Next I would like to call on Jean Schmidt.

OPENING STATEMENT OF HON. JEAN SCHMIDT, A REPRESENTATIVE IN CONGRESS FROM OHIO

Mrs. SCHMIDT. Thank you, Mr. Chairman. And thank you for holding this very important hearing today. I would like to thank, first off, all the witnesses who are here today to discuss an issue that has become very dear to my heart, and that is nutrition. I look forward to this hearing and hearing from all of you. I believe this is an issue that is finally getting the recognition it so deserves.

Obesity rates continue to rise at an alarming rate in the United States. Obesity is rapidly becoming the leading cause of preventable disease in America. We know that eating more fresh fruits and vegetables is a positive step towards a healthier lifestyle and reducing obesity. There are countless studies that show that diets rich in fresh fruits and vegetables lower the risk of heart disease, Type 2 diabetes, certain types of cancer, high blood pressure, and other diseases. Needless to say, there is a direct link between eating healthily and healthcare spending.

In the markups of the 2008 Farm Bill, I made it clear that I favor looking at what we could do to promote healthier lifestyles. I offered multiple amendments to the measure that were aimed at incentivizing programs and participants in the programs to purchase healthier foods with their program dollars.

And I would like to just have a little comment here. Unlike Congressman Kagen, I went to a school that did offer lunches. In fact, they didn't want you to pack lunches. They wanted you to eat their lunch. But it was a Catholic school. And at the time, we were on the cheese program, which was really butter and milk. So every day we got a butter sandwich that had about this much butter on it. Why? Because the Catholic schools got it for free. And the good nuns, not wanting to waste anything, wanted us to eat all that butter. To this day, I am not that much of a fan of a whole lot of butter. But needless to say, that was not a healthy lifestyle, and yet it was promoted because in an area where I grew up, that was a rather lower income area, having something for free was a very tempting filler for the school.

And that kind of an attitude, I do believe, transcends to some of our folks that have modest incomes, go to the grocery store, and have to make choices based on dollars, not necessarily on nutrition and healthy lifestyles.

So I look forward to this hearing. I look forward to its emphasis on promoting a healthy lifestyle and on what the implementation of the farm bill has produced. Thank you. I yield back.

The CHAIRMAN. Thank you very much, Jean.

Next, I would like to call on Kurt Schrader.

OPENING STATEMENT OF HON. KURT SCHRADER, A REPRESENTATIVE IN CONGRESS FROM OREGON

Mr. SCHRADER. Thank you, Mr. Chairman. Just a couple of comments. I had the opportunity during the break to visit some of my schools and hand out nutritious fruit and yogurt parfaits to some of the students trying to encourage good eating habits. And it was really fun and exciting. The sad comment is of course in this economy, more and more kids are on free and reduced lunch. Over 50 percent of my school districts are on free and reduced lunch programs. This is a very important issue for us.

Second, at some point, if the Under Secretary wouldn't mind, I would like him to comment, if he knows. There is a program in the Pacific Northwest, based out of Portland, Oregon, put on by ECONorthwest, which is called a food hub. It is a nonprofit organization. What they are trying to do is put retailers and sellers in touch with one another through the Internet about opportunities to buy and sell healthy, nutritious, grown-on-the-farm produce. It is particularly helpful for small farmers that can't make up a big lot to send to a huge grocery store. But if the grocery store is a little short for one reason or another, a restaurant or a school, this would be an opportunity for local farmers to match their produce into the needs of the community.

So it sounded like a really interesting—I think they have a membership thing. You join online for a nominal fee. But it sounded like a really exciting way of advancing what this Committee, this Congress, and this Administration is all about. Thank you, Mr. Chairman.

The CHAIRMAN. Thank you very much, Kurt.

Next I would like to call on Kathy Dahlkemper.

OPENING STATEMENT OF HON. KATHLEEN A. DAHLKEMPER, A REPRESENTATIVE IN CONGRESS FROM PENNSYLVANIA

Mrs. DAHLKEMPER. Thank you, Mr. Chairman. And I appreciate the witnesses today. I look forward to your testimony.

I was trained as a dietician. I believe I am the first dietician ever in Congress. When I was trained as a dietician back in the late 1970s and early 1980s, we didn't really talk about Type 2 diabetes in children. I was working diabetic camp for a number of years. I think it was about 1999, the first Type 2 diabetic child showed up at our diabetic camp. The next year there were four or five. And the number continued to increase. So I saw this trend happening. I think as I look back at the statistics, it was pretty close to what I saw in my little microcosm of diabetic care to what we saw across the country.

So I have been dealing with health and wellness issues and trying to treat those for years. So being a part of this new Congress— I am a new Member here. I wasn't here for the farm bill last time. I am very much looking forward to today's hearing and to working on the farm bill, going forward, and seeing what we can do legislatively and policy-wise on these huge issues.

We passed the healthcare reform bill not even a month ago. But if we don't take care of these health and wellness issues, particularly with our children and childhood obesity, we will never control the cost of healthcare in this country.

So I thank you very much, the witnesses. I thank the Chairman for holding this hearing today. I look forward to your testimony.

The CHAIRMAN. Thank you very much.

I know that we have Representative Bobby Rush here today. We have the rules that are set in place in reference to Members and that only Members of the Committee can sit at the dais, Bobby. So I am going to have to ask you, if you can, to comply with the rules. Bobby, if you can, there is no reason why you can't take that mic. And I will let you make a comment if you want at this point.

Mr. RUSH. Okay. That sounds good.

The CHAIRMAN. If there is no objection.

STATEMENT OF HON. BOBBY L. RUSH, A REPRESENTATIVE IN CONGRESS FROM ILLINOIS

Mr. RUSH. I want to thank you, Mr. Chairman. I want to express to you and all the other very outstanding Members of this Committee, I am here because I have a deep-seated commitment to the subject at hand. And I have had a lot of involvement in it. And I don't mean to burst in in any way or to be disrespectful of the Committee or of Members of the Committee. I was just here to observe and to learn more about what is being done across the board.

As you know, in my Congressional district in my state, we do have a number of "food deserts," and I have been working on this particular matter for a number of years. In the farm bill, I worked very closely with the Chairman of the full Committee in regards to getting some legislation and some language in the farm bill that would codify food deserts and also make food deserts-provide some grant money for those who were interested in this particular issue at the community level.

My activism in terms of my involvement in the 1960s I know most of you may not remember, but we were an-the organization I belonged to started a free breakfast for children program back in the early 1960s. This issue has been an issue that I am deeply concerned about. And I want to express my gratitude to you and Members of this Committee for holding this hearing.

I just want to say last week I had an occasion to visit Philadelphia. And I was with one of your witnesses here, Mr. Brown, and I also went to the Reading Terminal. And I was absolutely amazed at what was going on. I am just amazed. I am excited about it. I have met others that have come to Chicago. We are going to roll out the red carpet for him if he ever decides to come there. But I just tell you I am elated, and I am going to be here for as long as I can because I share a subcommittee. So I might have to skedaddle out of here. But again, Mr. Chairman, I thank you so much for just this opportunity to say a few words.

The CHAIRMAN. Thank you very much, Mr. Rush. I would ask all other Members of the Subcommittee to submit their opening statements for the record.

[The prepared statement of Mr. Peterson follows:]

PREPARED STATEMENT OF HON. COLLIN C. PETERSON, A REPRESENTATIVE IN Congress from Minnesota

Thank you, Chairman Baca for holding this hearing today. The problems of hun-ger and obesity are an ongoing concern for Members of this Committee, and under Chairman Baca's leadership, we have held several hearings that looked at the causes and effects of obesity. The 2008 Farm Bill included several provisions related to combating hunger and

obesity, including expanded programs to provide fresh fruit and vegetables to schools, the establishment of the Healthy Urban Food Enterprise Development Center, and a USDA study on food deserts, which we will be hearing more about from Under Secretary Concannon and Dr. Ver Ploeg today.

On the second panel, we have witnesses who are doing innovative things to ad-dress this challenge. Ms. Krieger and Mr. DiSpirito are both very prominent culinary experts who care deeply about fighting the obesity epidemic and are lending their star power to organizations that are increasing access to healthy food. Mr. Wattermann's Nebraska Food Cooperative, Mr. Brown's grocery stores and Ms. Endicott's farm are proving that developing markets to expand the availability of lo-

cally grown food can be profitable and socially responsible at the same time. First Lady Michelle Obama has taken a proactive role in establishing a national dialogue about what we must do to fight childhood obesity. She highlighted the need for everyone to bear responsibility for the health of our nation's children—individ-uals, organizations, communities and government must all work together on this important issue.

Ensuring that all Americans have access to an affordable, safe and abundant supply of healthy food is a goal we all share. On the Agriculture Committee, we are committed to doing our part, and I hope that today we'll hear from some of the organizations that are doing innovative work in communities to expand the availability of healthy foods, particularly in low income areas and food deserts.

I thank our witnesses for joining us today to talk about this important issue, and I look forward to their testimony.

The CHAIRMAN. With that, then, we will continue with the witnesses. I will just make an additional statement. We have talked about nutrition and health and the impact it has on our educational system. As we address Child Nutrition Act reauthorization this year, we are leaving behind a lot of our children, because without an appropriate diet, without appropriate food, it becomes very difficult for a lot of our kids to take the exams in schools. And that is why when they participate in these kind of lunch programs, it makes them healthier and better, and they are able to function and think better by eating healthy foods.

With that, I would like to again welcome the members who are testifying. I would like to first start off with Mr. Concannon. Please begin. You have 5 minutes, each of you. If you happen to see me lift the gavel, that means that we are nearing that time. And I probably will allow a few extra minutes as well. And then right after Mr. Concannon, then we will begin with Michelle Ver Ploeg who is an Economist at the U.S. Department of Agriculture. So, Mr. Concannon, you may begin.

STATEMENT OF HON. KEVIN W. CONCANNON, UNDER SECRETARY FOR FOOD, NUTRITION, AND CONSUMER SERVICES, U.S. DEPARTMENT OF AGRICULTURE, WASHINGTON, D.C.

Mr. CONCANNON. Good morning. And thank you, Mr. Chairman, Ranking Member Fortenberry, and Members of the Committee for this opportunity to discuss access to healthful foods in the nutrition assistance programs.

Improving access to foods, specifically healthy and nutritious food, is central to the Department of Agriculture's nutrition efforts. In each of our 15 nutrition assistance programs, it is important that we not only enroll as many eligible people as possible, but also ensure that retailers are available for participants to purchase healthy foods with SNAP benefits, formerly the food stamp program and WIC vouchers. Our most recent data show that most American households, nearly 89 percent are food secure; but that leaves 11.1 percent, or 13 million households, who were food insecure sometime during 2008. Of those, 4.7 million experienced very low food security at some time during the year. And when we say very low food security, make no mistake about what we mean. These are households that cut the size of meals, skip meals, or go whole days without food. Most would agree these families face hunger.

At the same time, we face an obesity epidemic among not only adults, but our children as well. As difficult as it is to believe, obesity and hunger do coexist; 68 percent of adult Americans are considered obese or overweight, while 16.9 percent of children are obese and 31.7 percent are overweight. These data leave no doubt that the need for improved access to healthy foods is evident every day across our country, and they underscore the need for sound nutrition guidance to nutrition assistance program participants and to the American public at large. As of September 30, 2009, there were 193,754 SNAP authorized retailers, an increase of 27 percent over the past 6 years. And those numbers continue to rise. In the near future we expect to release a new tool that will help clients find the SNAP authorized stores near their home or workplace, providing them with additional information to help access healthy food options.

Increasing the number of farmers markets authorized to accept SNAP benefits is another way to improve access to healthful foods. Farmers market participation in SNAP is a win-win situation for local farmers who expand their customer base and for participants who gain access to healthy produce. To weigh in on this effort, the President's budget for 2011 includes a proposed \$4 million to provide all farmers markets with SNAP EBT equipment. The 2008 Farm Bill authorized \$20 million to determine if incentives provided to SNAP recipients at point of sale increased the consumption of fruits, vegetables, or other healthful foods. At USDA we have called this the Healthy Incentive Pilots or HIP. And the USDA has designed a study to provide the rigor necessary to attribute any changes in fruit and vegetable consumption to the incentive.

The competitive solicitation for both the project evaluator and the project sites were recently released. Any effort to increase access to healthy foods must address program participation. Currently, 31 states use broad-based categorical eligibility to raise the gross income limits and raise or eliminate the asset test in SNAP. Through direct certification, children are eligible for free meals at schools because the households are approved for SNAP benefits and they are identified. Such efforts reduce the barriers to access, allowing more people in need of assistance to benefit from these programs.

The National School Lunch and School Breakfast Program reach children in virtually every school district in the nation. These programs currently provide nutritious meals to more than 31 million children and more than 101,000 schools each day. Improving the food choices that children have and what they actually make at school is central to our efforts to improve their diets and address the obesity crisis.

The reauthorization of the Child Nutrition Program presents us with a historic opportunity to combat child hunger and improve the health and nutrition of our children across the country.

The President is proposing an investment of \$10 billion in additional funding over 10 years. And we are sticking with the President. As I like to say, this is a very important opportunity.

The WIC Program currently serves 9.1 million pregnant and postpartum women and their infants and children. And there is lots of evidence to point to the efficacy of that program, both in terms of providing important targeted foods but also the long-term health effects on both children and their moms.

Finally, the President's 2011 budget provides \$400 million to bring grocery stores and other healthy food retailers to food deserts, both urban and rural. This effort, known as the Healthy Food Financing Initiative, is a partnership between the Department of the Treasury, the Health and Human Services Department, and the Department of Agriculture. And it is designed to eliminate food deserts within the next 7 years. The Healthy Food Financing Initiative will promote a range of interventions that expand access to nutritious foods, including developing and equipping grocery stores and other small businesses and healthy food retailers selling food in communities that currently lack these options.

In closing, the Obama Administration is committed to improving the Federal Nutrition Assistance Program by ensuring that those in need have access to program benefits, the knowledge to make wise food choices with those benefits, and accessible retailers carrying healthy food in their communities.

I would be pleased to answer any questions you may have. And, again, thank you sincerely for the opportunity to speak on these issues here today.

[The prepared statement of Mr. Concannon follows:]

PREPARED STATEMENT OF HON. KEVIN W. CONCANNON, UNDER SECRETARY FOR FOOD, NUTRITION, AND CONSUMER SERVICES, U.S. DEPARTMENT OF AGRICULTURE, WASHINGTON, D.C.

Good morning, and thank you, Mr. Chairman, Ranking Member Fortenberry, and Members of the Committee, for the opportunity to discuss access to healthful foods in the nutrition assistance programs.

As you know, USDA oversees 15 nutrition assistance programs, from the Supplemental Nutrition Assistance Program (SNAP), in which benefits are provided through electronic benefit cards used by participants to purchase foods at authorized retail stores, to programs like the Commodity Supplemental Food Program and Fresh Fruit and Vegetable Program, in which food is provided directly to the participants.

¹ Improving access to food, specifically healthy and nutritious food, is central to the Department of Agriculture's food and nutrition efforts. In each of our nutrition assistance programs, it is important that we not only enroll as many eligible people as possible, but also provide information to make sure that our clients know how to make healthful, nutritious food choices and, in programs like SNAP, ensure that retailers are available for recipients to redeem benefits.

Our most recent data shows that most American households—nearly 89 percent are food secure. But that leaves 11.1 percent, or 13 million households, who were food insecure at some time during 2008. Of those, 4.7 million experienced very low food security at some time during the year. And when I say food insecure, make no mistake that I mean they are hungry.

100d security at some time during the year. And when I say not insecure, many no mistake that I mean they are hungry. At the same time, we face an obesity epidemic among not only adults but our children as well. As unbelievable as it may seem, obesity and hunger do coexist. Sixtyeight percent of adult Americans are considered obese or overweight, while 16.9 percent of children are obese and 31.7 percent are overweight. Nearly ten percent of American health spending can be attributed to obesity. Clearly, these are critical public health issues, with significant consequences for our nation's future.

public health issues, with significant consequences for our nation's future. These data leave no doubt that the need for improved access to healthy foods is evident every day across the country. At the same time, they underscore the need for sound nutrition guidance to nutrition assistance program participants and the general public. People must have the knowledge and the desire to make a behavior change toward healthier lifestyles.

The reauthorization of the Child Nutrition Programs presents us with an historic opportunity to combat child hunger and improve the health and nutrition of children across the nation. The Obama Administration has proposed an investment of \$10 billion in additional funding over 10 years to improve our Child Nutrition Programs. This proposed investment would significantly reduce the barriers that keep children from participating in school nutrition programs, improve the quality of school meals and the health of the school environment, and enhance program performance. This is a once in every 5 year opportunity to modernize the core Child Nutrition Program (SBP), the Summer Food Service Program (SFSP), the Child and Adult Care Food Program (CACFP), the Special Milk Program (SMP), and WIC.

We can improve access to meals and explore new means of empowering communities to reduce food insecurity and hunger, especially among our children. We can make every school a place where nutrition and learning shape the food offered by improving the quality of meals, eliminating foods that do not support healthful choices, and expanding physical activity opportunities. We can help pregnant women, new mothers, and the youngest children receive the support they need for an optimally healthy start, and support working families using child care, by providing nutritious food for their children, to help them deal with the challenges of today's economy. This is the power of these programs—and the opportunity we share to harness that power for a better future.

The National School Lunch and School Breakfast Programs provide nutritious meals to 31 million school children in over 101,000 schools throughout the nation. Improving the food choices that children have, and that they actually make, at school are central to our efforts to improve their diets and address the obesity crisis. Work is already underway to improve the nutrition standards for the school meals programs, based on recommendations we received from an Institute of Medicine expert panel late last year that proposed more fruits, vegetables, whole grains and low-fat dairy products in school menus. To complement this effort, we are working with the Agricultural Marketing Service to examine ways to improve Farm to School efforts across the county. Our team is learning from successful school districts to see how they have matched local production with the needs of the school meal programs. If we can increase farm income and at the same time educate school children that food indeed comes from the farm and the farmer, we will have accomplished two important objectives simultaneously.

To help people make wise dietary choices, USDA's *MyPyramid.gov* provides dietary guidance and educational materials that help Americans improve their diet and become more physically active. MyPyramid helps Americans personalize their approach to choosing a healthier lifestyle that balances nutrition and exercise. It encourages them to improve their overall health significantly by making modest improvements to their diet and by incorporating regular physical activity into their daily lives. MyPyramid, which translates the recommendations of the Dietary Guidelines for Americans into accessible and useful information for the general public, continues to be a significant means of helping Americans take "Steps to a Healthier You."

Nutrition education is also provided in many of the nutrition assistance programs. For example, the goal of SNAP nutrition education, or SNAP-Ed, is to improve the likelihood that persons eligible for SNAP benefits will make healthy food choices within a limited budget and choose physically active lifestyles consistent with the Dietary Guidelines for Americans and MyPyramid. In partnership with the 52 SNAP state agencies that provide SNAP-Ed, nearly 100 organizations such as Cooperative Extension Service outlets, nutrition networks, health departments, and food banks, provide nutrition education through hundreds of projects. A study is currently underway to identify models of effective SNAP-Ed nutrition education and their impacts on nutrition related behaviors. In addition, FNS provides free nutrition education resources including a recipe finder with over 600 easy, tasty, and low cost recipes, materials designed for Spanish speaking mothers, and materials designed for older adults.

Participants in programs like SNAP need not only need the EBT cards to purchase healthy food and the knowledge to make healthy choices but they also need access to stores where healthy foods are plentiful. As of September 30, 2009, there were 193,754 firms authorized to participate in SNAP.

Currently, to be eligible to participate in SNAP, stores must sell food for home preparation and consumption and meet *one* of the following criteria:

(A) Offer for sale, on a continuous basis (any given day of operation), at least three varieties of qualifying foods in each of the following four staple food groups, with perishable foods in at least two of the categories: meat, poultry or fish; bread or cereal; vegetables or fruits; or dairy products.

(B) More than 50 percent of the total dollar amount of all things (food, nonfood, gas and services) sold in the store must be from the sale of eligible staple foods.

Over the past 6 years, the number of authorized firms has increased 27 percent. Over 85 percent of all benefits are redeemed at 20 percent of authorized stores, such as supermarkets and superstores that offer a substantial variety of staple foods including fruits and vegetables. In the near future, we expect to release a new tool that will help clients find the SNAP authorized stores near their home or workplace, providing them with additional information to help access healthy food options.

The Food, Conservation, and Energy Act of 2008, also known as the 2008 Farm Bill, authorized \$20 million for projects to evaluate health and nutrition promotion in SNAP to determine if incentives provided to SNAP recipients at the point-of-sale increase the consumption of fruits, vegetables, or other healthful foods. At USDA, we call this the Healthy Incentive Pilot project (HIP). The legislation requires that "[the] independent evaluation . . . use rigorous methodologies, particularly random assignment . . ." USDA will implement a randomized control evaluation approach which will allow for comparison between the groups that receive the incentive and those that don't in order to determine the impacts of HIP. This research design provides the rigor necessary to attribute any changes in fruit and vegetable consumption to the incentive. The evaluation will also assess HIP's impacts on the state SNAP agency and its partners and describe the procedures involved in planning, implementing and operating the pilot. The competitive solicitations for both the project evaluator and the pilot sites were recently released.

Increasing the number of farmers' market authorized to accept SNAP benefits is another way to improve access to healthful foods. It is a top priority at USDA. Farmers' market participation in SNAP is a win-win situation for local farmers who expand their customer base and for participants who gain access to healthy produce. In Fiscal Year 2009, over 900 farmers and farmers' markets were authorized to accept SNAP benefits, an increase of 25 percent over the prior year. FNS has a goal to authorize an additional 200 farmers' markets each year. To aid in this effort, the President's Budget for 2011 includes a proposal for \$4 million to provide farmers markets with SNAP EBT equipment.

Our sister agency, the Agricultural Marketing Service (AMS), offers the Farmers' Market Promotion Program which provides grants that encourage and support expansion of farmers markets. The authorizing statute requires at least ten percent of grant funds to be directed towards projects to support the use of EBT for Federal nutrition programs at farmers markets. This program has helped many markets overcome barriers to purchasing equipment and become SNAP authorized. To further support FNS's priority of increasing the number of SNAP authorized farmers' markets, we've recently made a number of improvements to streamline the process for farmers' markets seeking SNAP authorization. This new guidance re-

To further support FNS's priority of increasing the number of SNAP authorized farmers' markets, we've recently made a number of improvements to streamline the process for farmers' markets seeking SNAP authorization. This new guidance reduces administrative burdens on the state agencies while streamlining the authorization process for farmers' markets. This information is posted on our web page. Farmers' markets are often the center of the community and are an excellent venue for outreach and nutrition education. Farmers' markets offer a place to educate potential clients about the benefits of participation in SNAP. USDA encourages state SNAP officials to incorporate farmers' markets in outreach and nutrition education efforts.

Farmers' market incentive programs also encourage healthy eating. Such projects provide matching "bonus dollars" for purchases made with SNAP benefits. The incentives, funded by private foundations, nonprofit organizations and local governments, improve the purchasing power of low-income SNAP participants at farmers' markets so they can buy more fruits and vegetables and other healthy foods.

Farmers' markets play a key role in access to healthy foods in the WIC Farmers' Market Nutrition Program (FMNP) and in the Senior Farmers' Market Nutrition Program. During Fiscal Year 2008, 2.3 million WIC recipients and 964,000 seniors received coupons redeemable at farmers' markets. A variety of fresh, nutritious, unprepared, locally grown fruits, vegetables and herbs may be purchased with FMNP coupons. In addition, seniors can purchase honey. While the growth in authorized retailers and farmers' markets is a good sign that most SNAP recipients have access to food retailers, there remain issues to be ad-

While the growth in authorized retailers and farmers' markets is a good sign that most SNAP recipients have access to food retailers, there remain issues to be addressed. First and foremost, we need to ask to what extent those stores offer the healthy food choices that SNAP participants need and want. Second, we need better information to determine whether areas with *limited* access have *inadequate* access. Better measures of access, information on food prices, and data on the relative availability of all food types, not just healthy food items are needed to authoritatively describe food deserts. And, finally, how can we encourage changes to make healthy food more readily available in such areas? USDA stands ready to explore all of these areas through research, analysis, and eventually, policy, if needed.

areas through research, analysis, and eventually, policy, if needed. As I mentioned before, the Healthy Incentive Pilot is one effort that will contribute greatly to our knowledge in this area. If the incentive does entice more demand for healthful foods, it should increase the desire of retailers to stock such items. It is too soon to speculate what effect this might have on food deserts, but it is worth noting that such an incentive may well play a positive role.

The President's Fiscal Year 2011 budget makes available over \$400 million in financial and technical assistance to bring grocery stores and other healthy food retailers to food deserts. This effort is known as the Healthy Food Financing Initiative and is a partnership between the Departments of Treasury, Health and Human Services and Agriculture designed to eliminate food deserts within the next 7 years. The objectives of this effort are to increase access to healthy and affordable food choices in underserved urban and rural communities, help reduce the high incidence of diet related diseases, create jobs and economic development, and establish market opportunities for farmers and ranchers. The Healthy Food Financing Initiative will expand access to nutritious foods by developing and equipping grocery stores and other healthy food retailers in communities that currently lack these options.

At the same time, we look forward to the contributions of our partners in private industry and the advocacy community and to learning more about their creative approaches to addressing this problem. Improving access in the areas where choice is limited is a challenge, but it is one we must undertake if we are to solve our dual problems of food insecurity and obesity.

problems of food insecurity and obesity. In the Food, Nutrition, and Consumer Service mission area at USDA, our role is also to make sure that all low income people who are eligible are enrolled in the nutrition assistance programs to provide them with the supplement to their food budget that enables the purchase of healthy foods. As such, access to the Federal nutrition assistance programs remains a top priority.

budget that enables the purchase of healthy foods. As such, access to the Federal nutrition assistance programs remains a top priority. Despite record participation in SNAP, totaling more than 39 million participants in January 2010, there remain underserved populations—while the participation rate among all eligible was 66 percent in 2007, less than $\frac{1}{3}$ of eligible elderly participate and only 56 percent of eligible Hispanics participate. And this is why outreach remains a critical component of our access efforts. The most common reason that eligible people don't participate is because they don't know they are eligible. Therefore, in order to maximize participation in SNAP, USDA conducts direct marketing activities, and provides funding, and outreach materials as well as technical assistance to public organizations, including state SNAP agencies, as well as neighborhood and faith based organizations that conduct SNAP outreach and marketing efforts.

FNS has a multitude of free outreach materials, some designed specifically for seniors, and most available in English and Spanish to help people recognize their potential eligibility and raise awareness about the nutrition benefits of SNAP. Materials include brochures, flyers, posters, and radio and television public service announcements. An online pre-screening tool in English and Spanish lets the user know if they might be eligible for benefits and how much they might receive. FNS also operates a toll free number in English and Spanish that provides callers with information about the program. Each year, FNS uses radio advertising in English and Spanish, to reach low income people in underserved areas. Finally, FNS has awarded outreach grants to neighborhood and faith-based organizations to support development and implementation of promising outreach strategies to reach low income seniors and Latinos.

At the same time, we need to make sure that we simplify the application process, remove barriers to participation and provide the highest quality customer service. In SNAP, states have a variety of policy options available to improve access. Currently, 31 states use broad-based categorical eligibility to raise the gross income limits and raise or eliminate asset tests in SNAP. Such efforts make the program available to families with low incomes and modest assets as well as those with high expenses but gross incomes slightly higher than the normal gross income test. I strongly encourage all states to implement this policy. States are also using telephone interviews in place of face to face interview and tailoring the length of interviews to specific questions to reduce the burdens on clients and state staff

phote interviews in place of lace to face interview and caloring the length of interviews to specific questions to reduce the burdens on clients and state staff. Through direct certification, children who are eligible for free meals because their households are approved for SNAP benefits are identified. Annually, USDA reports to Congress on direct certification and have gained insight into what works best by talking to staff who manage direct certification in their state. From the most recent report which was issued in October 2009 we focused on those states who had the greatest improvement in the percentages of children who were directly certified and asked how they did it. We will be promoting these best practices and others through the direct certification grants (\$22 million) provided through the FY 2010 Agriculture Appropriations Act.

USDA also works hard to improve what we offer directly to program participants in the commodity programs. We have reduced the fat, sodium and sugar in the USDA foods being offered and will continue to make improvements on an ongoing basis.

The WIC food packages were recently revised to reflect recommendations by the Institute of Medicine (IOM) and more closely align with the 2005 Dietary Guidelines for Americans and infant feeding guidelines of the American Academy of Pediatrics. The changes, which promote healthier options for WIC participants by adding fruits, vegetables, and whole grains, and emphasizing low-fat milk, may also benefit the larger community by increasing the availability of nutritious food options in small grocery stores and corner stores.

In closing, the Obama Administration is committed to improving the Federal nutrition assistance programs and to assuring that those in need have access to program benefits, the knowledge to make wise food choices with those benefits, and that retailers are accessible so that participants have access to healthy foods in their communities. I would be happy to answer any questions you might have and, again, thank you for the opportunity to speak on this issue today.

The CHAIRMAN. Thank you very much, Mr. Concannon. Next I would like to call on Dr. Michelle Ver Ploeg.

STATEMENT OF MICHELE "SHELLY" VER PLOEG, PH.D., ECONOMIST, ECONOMIC RESEARCH SERVICE, U.S. DEPARTMENT OF AGRICULTURE, WASHINGTON, D.C.

Dr. VER PLOEG. Good morning. Thank you, Chairman Baca, Ranking Member Fortenberry, and Members of the Subcommittee for allowing me to testify today on the issue of access to affordable and nutritious food.

Increases in obesity rates and diet-related diseases are major public health problems. These problems may be worse in some American communities because they lack access to nutritious foods. It was this concern that led Congress in the 2008 Farm Bill to direct the USDA to conduct a 1 year study of food deserts or areas, especially low-income areas that have limited access to affordable and nutritious food. The USDA was directed to assess the extent of the problem, to identify causes and characteristics of areas that might be considered food deserts, to determine how limited access affects local populations and to outline recommendations to address the problem. The findings of the study were released in a report last June and can be found on the ERS website.

My testimony today will just summarize a few brief key findings of the report. To conduct the analysis of food deserts, a comprehensive database was developed that identified the location of supermarkets and large grocery stores within the continental U.S. Food access was estimated as the distance to the nearest supermarket or large grocery store. The analysis also examined households without vehicles and specific socio-demographic subpopulations drawn from the 2000 Census. Overall, the findings show that access to affordable and nutritious food is a problem for a small but significant share of the national population. Of all households in the U.S., 2.3 million, or 2.2 percent, live more than a mile from a supermarket and do not have access to a vehicle. An additional 3.4 million households, or 3.2 percent of all households, live between $\frac{1}{2}$ mile and 1 mile and do not have access to a vehicle.

Area-based measures of access show that 23.5 million people live in low-income areas that are more than 1 mile from a supermarket or large grocery store and that *low-income areas* are defined as areas where more than 40 percent of the population has income at or below 200 percent of Federal poverty levels. However, not all of these 23.5 million people are defined as *low-income*. If estimates are restricted, consider only the low-income people in low-income areas, then 11.5 million, or 4.1 percent of the total U.S. population, lives in low-income areas more than a mile from a supermarket.

A related concern is that poor households pay more for the same goods because they cannot access lower-priced retailers and thus rely on smaller, often higher-priced stores. To address this question, USDA analyzed the household level data on food items purchased by approximately 40,000 demographically represented households across the U.S. These data were used to examine differences in prices paid for the same food items across households with different income levels. Results show that low- and middle-income households are more likely to purchase food at supercenters where prices are lower. But results also indicate that the very poorest households, those earning less than \$8,000 a year, may pay between half a percent and 1.3 percent more for their groceries than households that earn slightly more; that is, households earning between \$8,000 and \$30,000, who tend to pay the least for groceries among all income groups.

Many studies find a correlation between limited access and lower intake of nutritious foods. These studies, however, are not sufficiently robust to establish a causal link between access and nutritional outcomes; that is, other explanations cannot be eliminated as a primary cause of lower intake of nutritious food. Access to affordable and nutritious food depends on supply, availability, and consumer demand.

Understanding the market conditions that contribute to differences in access to food is critical to understanding which policy interventions may be effective in reducing access limitations. If high development costs for stores limit supermarkets in some areas, these subsidy programs or restructured zoning policies may promote new stores. If consumer demand factors, like inadequate knowledge of the nutritional benefits of specific foods, contributes to differences in access, then a public health campaign may also be a preferred strategy.

Since the USDA report was released, ERS has developed a comprehensive mapping tool that allows users to examine food store availability and a number of other indicators of the food environment for each county in the continental U.S. This is called the Food Environment Atlas, and the Food Environmental Atlas is a recognition of how factors such as store proximity, food prices, food and nutrition assistance programs and community characteristics interact to influence food choices and diet quality.

The Food Environment Atlas assembles statistics on three broad categories of food environment indicators: food choices, health and well-being, and community characteristics. The online atlas currently contains 90 indicators of the food environment and is available to the public. Most of the data are at the county level. A user can select an indicator—for example, the prevalence of obesity and create a map showing variation in that indicator among counties across the U.S. or across the state. The atlas also allows users to get data on any and all county indicators for a particular county. The atlas is at the ERS website.

Again, I would like to thank you for the opportunity to appear before you today and I look forward to answering any questions.

[The prepared statement of Dr. Ver Ploeg follows:]

PREPARED STATEMENT OF MICHELE "SHELLY" VER PLOEG, PH.D., ECONOMIST, ECONOMIC RESEARCH SERVICE, U.S. DEPARTMENT OF AGRICULTURE, WASHINGTON, D.C.

Chairman Baca, Ranking Member Fortenberry, and Members of the Subcommittee, I would like to thank you for allowing me to testify before you today on the issue of access to affordable and nutritious food. Increases in obesity rates and diet-related diseases are major public health problems. These problems may be worse in some American communities because they lack access to affordable and nutritious foods. Previous studies suggest that some areas and households have easy access to fast food restaurants and convenience stores, but less access to supermarkets and larger grocery stores that provide more nutritious and varied selections. Differences in access may make some communities more reliant on stores and restaurants that offer fewer healthy food choices, such as convenience stores or food marts at gas stations. Limited access to nutritious food and relatively easier access to less nutritious foods may be linked to poor diets and ultimately to obesity and diet-related diseases.

Concerned that some households lack access to affordable and nutritious food, Congress, in the Food, Conservation, and Energy Act of 2008, directed the U.S. Department of Agriculture (USDA) to conduct a 1 year study of 'food deserts'. The USDA was directed to assess the extent of the problem of limited access, identify characteristics and causes, consider how limited access affects local populations, and outline recommendations to address the problem. The findings of the study are given in detail in a report entitled Access to Affordable and Nutritious Food: Measuring and Understanding Food Deserts and Their Consequences, which was released in June 2009 and can be found at http://www.ers.usda.gov/Publications/AP/AP036/. My testimony today summarizes the key findings of the report.

Methods

Economic analysis was conducted on the extent, determinants, and consequences of food deserts. A variety of data and methods were used to assess the extent of limited access to affordable and nutritious food. To conduct the analysis of the prevalence of food deserts, a comprehensive database was developed that identified the location of supermarkets and large grocery stores within the continental U.S. Food access was estimated as the distance to the nearest supermarket or large grocery store. The analysis was refined by examining households without vehicles and specific socio-demographic subpopulations drawn from the 2000 Census. The key determinants of areas with low access to supermarkets and large grocery stores were also analyzed.

Research also examined national-level data on questions of household food adequacy and access from the 2001 Current Population Survey. This information was complemented with national-level data on time spent traveling to grocery stores from the 2003–2007 American Time Use Survey. To consider the economic consequences of limited access, ERS also analyzed demand for certain nutritious foods for a sample of participants of the Supplemental Nutrition Assistance Program (SNAP) using data from the National Food Stamp Program Survey (NFSPS) of 1996/1997. Variation in prices for similar foods purchased at different store types was also estimated.

Measuring and Characterizing Areas With Limited Access

Overall, findings show that access to affordable and nutritious food is a problem for a small but significant share of the national population. Urban core areas with low access are characterized by higher levels of racial dissimilarity and income inequality. Lack of transportation infrastructure is the most defining characteristic of small towns and rural areas with low access.

Direct questions from a nationally representative survey of U.S. households conducted in 2001 show that nearly six percent of all U.S. households did not always have the food they wanted or enough food because of access-related limitations. More than $\frac{1}{2}$ of these households also lacked enough money for food. It is unclear whether food access or income constraints were relatively greater barriers for these households.

Households that live far from a supermarket or large grocery store and without easy access to transportation will have more limited access to affordable and nutritious food. Of all households in the U.S., 2.3 million, or 2.2 percent live more than a mile from a supermarket and do not have access to a vehicle. An additional 3.4 million households, or 3.2 percent of all households, live between $\frac{1}{2}$ to 1 mile and do not have access to a vehicle.

Area-based measures of access show that 23.5 million people live in low-income areas (areas where more than 40 percent of the population has income at or below 200 percent of Federal poverty thresholds) that are more than 1 mile from a supermarket or large grocery store. However, not all of these 23.5 million people are defined as low-income. If estimates are restricted to consider only the low-income people in low-income areas, then 11.5 million or 4.1 percent of the total U.S. population lives in low-income areas more than 1 mile from a supermarket.

Economic Consequences

A related concern is that poorer households pay more for the same goods because they cannot access lower-priced retailers and thus, are more likely to purchase their goods in smaller, higher-priced stores. Past research on food prices was unable to match data on prices paid with the households that actually make the purchases. As a result, prior work focused on inferring the linkages between prices paid and household characteristics.

The analysis conducted for this study uses proprietary household-level data that contain information on food items purchased by approximately 40,000 demographically representative households across the United States. These data on household food purchases were used to examine differences in prices paid for milk, ready-toeat cereal, and bread at supermarkets, convenience, discount, and other types of stores. Results show that consumers pay more for these goods at convenience stores than at supermarkets, holding constant characteristics of consumers such as income and education and characteristics of the products, such as size and fat content.

Other research, however, shows low- and middle-income households are more likely to purchase food at supercenters, where prices are lower. Results also indicate that while some of the very poorest households—those earning less than \$8,000 per year—may pay between 0.5 percent and 1.3 percent more for their groceries than households earning slightly more, households earning between \$8,000 and \$30,000 tend to pay the least for groceries, whereas higher-income households pay significantly more.

How food store access is related to food shopping behavior, food purchasing and the prices paid for specific foods was also examined. The results show that most lowincome consumers are able to access supermarkets, albeit with higher travel costs for those living farther away. For those with limited access to supermarkets, the results suggest that these consumers make fewer purchases of certain kinds of nutritious foods.

Dietary Behavior and Health Outcomes

Many studies find a correlation between limited food access and lower intake of nutritious foods. These studies, however, are not sufficiently robust to establish a causal link between access and nutritional outcomes. That is, other explanations cannot be eliminated as significant contributory causes of lower intake of nutritious food. A few studies have examined food intake before and after healthy options become available (either within existing stores or because new stores open). The findings are mixed—some show a small but positive increase in consumption of fruits and vegetables, while others show no effect.

Policy Considerations

Access to affordable and nutritious food depends on supply (availability) and consumer demand. Understanding the market conditions that contribute to differences in access to food is critical to understanding which policy interventions may be effective in reducing access limitations. Consumer behavior and preferences and other factors related to the demand for some foods may lead to differences in what foods are offered where. Food retailer behavior and supply side issues such as higher costs to developing stores in underserved areas may also explain variation across areas in which foods are offered and what stores offer them. If high development costs for stores limit supermarkets in some areas, then subsidy programs or restructured zoning policies may promote new stores in areas of low access. If consumer demand factors, like inadequate knowledge of the nutritional benefits of specific foods, contribute to differences in access by reducing demand, then a public health campaign may be a preferred strategy. Several local and state level efforts are underway that could provide the basis to understanding which types of interventions work best I would note, as well, that the President's FY 2011 Budget proposes a healthy food financing initiative to address the issue of food deserts. This initiative includes funds for USDA activities.

Food Access Research Continues at USDA

The current state of research is insufficient to conclusively determine whether some areas with limited access to certain kinds of food stores have inadequate access to nutritious food. Future research should consider improved methods to measure access levels, availability, and prices of foods faced by individuals and areas. The recently developed U.S. Food Environment Atlas at USDA provides a more comprehensive set of measures of access.

The basis of the U.S. Food Environment Atlas is a recognition that factors—such as store/restaurant proximity, food prices, food and nutrition assistance programs, and community characteristics—interact to influence food choices and diet quality. The Food Environment Atlas, developed by the U.S. Department of Agriculture, assembles statistics on three broad categories of food environment indicators.

- Food Choices.
- Health and Well-Being.
- Community characteristics.

The online Atlas currently contains 90 indicators of the food environment and is available to the public. Most of the data are on the county level. A user can select an indicator-e.g., the prevalence of obesity-and create a map showing variation in that indicator among counties across the United States or across a state. Atlas users can identify counties with a combination of indicators-for example, those with persistent child poverty as well as high numbers of residents with limited access to grocery stores. The Atlas also allows users to get data on any and all of the county-level indicators for a particular county. The Atlas can be found at the following website: http://www.ers.usda.gov/FoodAtlas/. Again, thank you for the opportunity to appear before you today, and I look for-

ward to answering any questions.

The CHAIRMAN. Thank you very much.

Again, I would like to thank both of the witnesses for their testimony

At this time, I will begin with asking questions. Each of the Members will be allowed 5 minutes. I now recognize myself for 5 minutes and then will recognize the Ranking Member and the other individuals, as I called them earlier, for questions. I will begin by first thanking Under Secretary Concannon again for being here this morning.

And I will begin with the first question. Do you think that the current criteria stores must meet in order to be eligible to receive the SNAP benefit goes far enough to ensure that these stores will carry fresh foods?

Mr. CONCANNON. Mr. Chairman, thank you for that question. As I mentioned in my testimony, there are now 193,000 stores across the country that have been approved to process benefits in the SNAP Program, and about 80 percent of those stores are a super-market that provides a wide variety of food products. So I have no concerns whatsoever about the supermarket portion of it. The 20 percent, a majority of stores, the smallest stores in the 20 percent as well, provide those range of foods, but I am concerned that it has been reported to me, at least anecdotally, that we have in some parts of the country, stores that are small and really just meet the minimum, but don't provide that much by range of options for the food groups. So, it is one of those items that deserves consideration in the upcoming reauthorization of the farm bill.

The CHAIRMAN. Thank you. And can you describe to the Subcommittee the operating process for the Healthy Food Financing Initiative proposed by the Obama Administration?

Mr. CONCANNON. Mr. Chairman, the Healthy Food Financing Initiative is one that is actually hosted at USDA and another one of the mission areas. But it is targeting—I can speak to it generally. It involves both the Department of Health and Human Services, the Department of the Treasury, and USDA. And there was a budget request pending for 2011 for \$400 million. And the intent of that \$400 million is to target food deserts across the country, cities as well as rural areas, reflecting, again, some of the targeting what the research here identified in terms of deserts. And this would be a combination of both grants, loans, incentives to create capacity over a period of years in these food deserts.

And as was mentioned in the testimony heard here this morning, often the smallest stores or the food deserts, people not only have a harder time to obtain food, but they may likely pay more for it when they can. It is an effort to really institutionally attack that issue.

The CHAIRMAN. Thank you.

Michelle Ver Ploeg, it seems clear from your testimony that the USDA study was unable to establish a causal link between limited food access and lower intake of nutritious food. But even without the concrete data, everyone in this room understands the importance of access to nutritious food.

In your opinion, how significant is the connection between the lack of access to healthy food and obesity?

Dr. VER PLOEG. Thank you for that question. As we know, about $\frac{1}{3}$ of the population of the U.S. is obese and another third is overweight. So clearly there is something bigger going on than just lack of access. However, for people that do lack access, it seems necessary that they—if we want them to eat healthier diets, it would be necessary for them to get those foods. So access, to me, is a necessary condition for improving people's diets, but it is not going to solve all of the problems of obesity in our country.

The CHAIRMAN. Access is one thing, but education is another. And so we need to address it from an educational perspective, because you can have access to nutritional foods, but if you must also be educated and know the impact of unhealthy foods. So do you have any ideas or comments in terms of how we can do the kind of outreach and education?

Dr. VER PLOEG. So one of the items that Under Secretary Concannon reported on was the Healthy Incentive Program that is not targeted to the general population but targeted to SNAP participants. And the idea behind that is to encourage promoting fruit and vegetable consumption by giving discounts. That is one way that could be used to promote healthier eating.

There are also public health campaigns. I know there is talk of labeling that could help people have better information on how many calories are in the foods they are consuming. Those are the sorts of things that would obviously change peoples choices and perhaps their demands for foods. And I should say price is always a big consumer demand determinant.

The CHAIRMAN. Right. Labeling becomes very important because of the products that you are buying. If people know what they are buying, and its origin, they can assess potential health affects. For example, our country has requirements that are a lot stricter than some of the other countries. Is that correct?

Dr. VER PLOEG. That is an area that is out of my realm of knowledge, so I will have to pass on that.

The CHAIRMAN. Mr. Concannon.

Mr. CONCANNON. Mr. Chairman, to your question, one, there are a number of activities focused in the educational arena that we are a part of, both targeted at SNAP recipients to so-called SNAP education aspects of it. But also our efforts with schools across the country, we are very mindful these days as the Child Nutrition Act is being reauthorized of the opportunity we have to influence children in the school years, and not limit that education to the hour or the half hour in the cafeteria, but to really impact the culture of the school.

The USDA has something called HealthierUS School Challenge, of which there are more than 600 schools that I visited in different parts of—not the 600, I visited about half a dozen of them, I should say, across the country. They are model schools where, again, the nutritional quality is of the highest, the fruits and vegetables that were referenced by one of the Members here this morning in attending a school in his area, but competitive foods are outlawed in those schools and there is a focus on exercise. So I have been in schools where, again, it isn't limited to the cafeteria. It is made part of the math program; how many calories in a particular food, how do you measure, how much volume in a portion of food, where it is part of the physical ed activities, where I have actually seen children and heard the teachers talking about food while kids are exercising and it was—they are all smiling faces.

It wasn't like visiting the Quantico Marine Base here, as I reflect on it. But even the art programs all focus on healthy foods.

So, it is the conjoining of education, of culture, all of these things. And we think children, to the extent that children—the analogy I often think of are the efforts to reduce smoking in this country. It wasn't any one single thing. It was a variety of initiatives that ultimately succeeded in reducing smoking.

I think, similarly on the issue of obesity, it is going to be access to healthier foods, more transparency, better education, lower amounts of processed foods and getting us to realize that bigger isn't necessarily better.

The CHAIRMAN. Thank you very much, Mr. Concannon. I know that I have a series of additional questions that I will submit for the record. And hopefully you will be able to respond later on to some of these questions.

But at this time, I would like to call on the Ranking Member, Mr. Fortenberry, from Nebraska.

Mr. FORTENBERRY. Thank you, Mr. Chairman. It wasn't a long time ago where many of us were in the 4–H Program. We pledged our heads to clearer thinking and our heart to greater loyalty, hands to larger service, and, guess what, health to better living. It is not too long ago when we all said that pretty much regularly, those of us who had the opportunity to be in that extraordinary program. I think it is important to remind ourselves that one of the most pervasive, as well as traditional USDA programs, is the Cooperative Extension Service. And as we try to unpack the operational mechanics of how we move forward, whether it is on education or new programmatic implementation—and I want to turn to the Healthy Food Financing Initiative shortly-the traditional structures of USDA—that USDA can provide. I think that is very important that we not lose sight of, particularly as we are looking at new initiatives that might in a time of real budgetary constraints have to be fitted in or resources shifted to them that may be better applied as we move forward.

In that regard, regarding the financing initiative, you covered a little bit of that ground, given the Chairman's question, and you anticipated, Mr. Chairman, in that regard. But I would like to hear a little bit more about how you perceive the implementation of that program to occur. You said grants, loans to build capacity to fill in the gaps of food deserts. But is this not all worked through yet? It is a broad policy framework that is under consideration. I would like to hear you unpack that further.

Mr. CONCANNON. Yes. Thank you for that question. My awareness of it and knowledge it of is just at the 50,000 foot level, if that. It is in a separate area of the USDA that is engaged in another mission area, not food nutrition *per se.* And I know that dialogue and those conversations are taking place between, again, the Treasury, the U.S. Department of Health and Human Services, and USDA. But I am not directly involved in that.

Mr. FORTENBERRY. But you see the USDA as being the primary driver of this and having the capacity to develop whatever loan program might develop or particular grant program, I assume?

Mr. CONCANNON. Yes. It is my understanding the budget request of that \$400 million, about \$150 million is associated with the USDA. The other \$250 million, a larger part of that is over in the Treasury Department, and then a portion of it also at Health and Human Services. So we really, with this kind of research of course, are informing the strategies that will be pursued, it is important to note. But the actual mechanics of implementation are areas in which I nor will our mission area be directly involved in that.

Mr. FORTENBERRY. It is important to use the hearing to highlight the point that we have extraordinary structures in USDA that are countrywide, in every county effectively in the country. And so there is always a tendency with a new idea to add it on. But perhaps fitting it within the current frameworks of what we already have may be an efficient use of what may very well be a powerful new idea to fill in these gaps of capacity.

Mr. CONCANNON. I think to that, Congressman—your question— I think the intent is clearly that, not to create a new structure within USDA. It is in Rural Development—is the mission area that I think will have primary responsibility in USDA. So there is not an intent on our part to create a new division *per se*.

Mr. FORTENBERRY. Thank you.

Let us turn quickly to, again, what has been touched on a bit, but the evidence that underserved areas will actually purchase more fruits and vegetables, given a supply of them, touch on the research that is available.

Dr. VER PLOEG. There is quite a bit of research that shows that areas that may be considered food deserts, there is an association between low purchase of healthy foods and living in those areas. We don't have great causal evidence that shows that might be more than an association. There is some evidence, from small studies where they opened up small stores or within a convenience store, have brought in some—just a shelf of precut vegetables and fruits—there are a few formative studies that show some encouraging signs, but those are very formative. The best evidence we have on supermarket openings comes from the U.K. So it may not be relative to the U.S., but it shows that in areas where a new store has opened, people have increased their consumption, but not by a great deal. That is the only evidence we have right now.

Mr. FORTENBERRY. Thank you, Mr. Chairman.

The CHAIRMAN. Thank you very much, Mr. Fortenberry.

I would like to call on the gentleman from Wisconsin, Mr. Kagen. Mr. KAGEN. Thank you, Chairman. And thank you both for coming here this morning to present us with your ideas and your concerns and what you have been doing. I have just a few questions.

In the farm bill, I put forward an amendment that was supported by the Republicans and the Democrats for \$30 million of funding for a Childhood Obesity Program. Before we can consider funding any of the requests that you have, can you please tell me what you have done with the \$30 million for the Childhood Obesity Program?

Mr. CONCANNON. I think we would have to get back to you, Congressman, because I am not familiar with it off the top of my head, and my colleague here said we will have to get back to you very directly.

I can speak generally on some of the strategies we have around reducing childhood obesity. One, I really want to make clear that there is—I have spent most of my career in state government I should say, but there is, I believe, unprecedented levels of cross Federal agency collaboration and cooperation underway. And we have persons detailed to us from the Centers for Disease Control in Atlanta where they have a major project on reducing—studying and reducing obesity. There has been much collaboration between the USDA, the FDA, the Federal Trade Commission and the CDC around the issue of marketing of foods to children between the ages of 2 and 17. And a report is forthcoming that will come to you, Members of Congress, by the 15th of July, as directed in that farm bill. So those are just some areas.

The HealthierUS Schools Challenge, we are very much in the middle of that. And the First Lady's program, Let's Move, has a number of elements that are both associated with transparency or educating parents about foods, but also encouraging activity.

As I am sure you know, the problem of obesity is not just a function of the foods we ingest, but it is how little exercise people use, and there is a worry about the number of so-called hours that children are now spending either before a screen or television screen or a computer screen that concern us.

So at a meeting I was at last Friday where Secretary Duncan from Education was present, he spoke to the concern of the diminished number of recess hours or activity hours that schools are experiencing these days. So it is some of both. So when we meet with schools, there is a requirement from the last farm bill for wellness policies in schools.

Mr. KAGEN. I understand that. I don't mean to have you occupy all of my time on that subject, but the answer you have given me is inadequate. I am happy that you are going to look into it. It was 2007, 2008. The money is there. The intent was there. And so you have the language, you have the appropriation, you have the money. And we would like to consider other programs. But, by golly, we are interested to know what you did with the \$30 million that was specifically targeted at this childhood obesity epidemic. Not during the current Administration, but this is several years ago.

So, thank you. And I am quite certain you are going to get back to me as rapidly as you can. Food has become not just an essential ingredient to life, but as an entertainment factor. And your real competition is—you are suggesting that the Administration is interested in crafting language that would limit the manner in which a business entity could market its goods to children; am I correct?

Mr. CONCANNON. That report is coming from 4—and the Federal Trade Commission is leading that effort. But we have been actively participating with them on it. We were very supportive of the—

Mr. KAGEN. Thank you very much. And in the interest of time, one of the other hurdles that our farmers have in terms of growing locally grown products and getting them into a school system is the price competition from the major food manufacturers who receive subsidies from the USDA and from our government. And it is very difficult for locally grown food to get into the school system because of that price competition.

I would hope at a further time you could give me some very specific ways in which you hope to move around that price barrier. And I will just remind all of you how difficult this is. In 1966, when I first entered politics, I was elected to be the most trusted person in my high school. I was the Student Council Treasurer. We had \$253. There was no committee. It was just me. So I took it upon myself to purchase for \$250 an Apple machine, and I put it in the hallway. Being a sophomore in high school, I went to track practice after a period, and all the seniors told me, "Kagen, forget about politics, man, we wanted a Coca-Cola[®] machine. Don't run for Student Council President."

So I ducked out of politics and then, some years later, left my medical practice and came to the House. So now I am going back into these schools and I am taking out the carbohydrates and putting back the fruits and vegetables. I know what is going to happen. People won't like the texture and the taste. And it is a very competitive marketplace out there. But I will work very hard with you to find a way in which we can make it easier for our locally grown foods to appear at the cafeterias in our schools. Please get back to me as rapidly as possible on the \$30 million that I secured in the farm bill for the Obesity Program.

I yield back my time.

The CHAIRMAN. Next, I would like to call on the gentleman from Oregon, Mr. Schrader.

Mr. SCHRADER. Thank you, Mr. Chairman. I would just like a response to the food hub question I talked about in my opening statement, to the extent that the Department is aware of that nonprofit initiative in the Northwest—because it is spreading regionally and if there are opportunities for similar partnerships to develop across the country. Are there matching dollars or incentives that could help broaden that program?

Mr. CONCANNON. I am not aware of that specific project in Portland. I am aware that Oregon is one of the leading states in the country on a variety of issues related to SNAP or to WIC, our nutrition programs. But there are and will be opportunities for programs like that to both be supported and to be disseminated in the Child Nutrition Act and in our budget that is before Congress.

There are proposals to fund the team, a national team, and to put resources with it for helping farm-to-school, as an example, to increase the access and to try to deal with some of the questions that have been raised on the logistics or ease of bringing these healthier foods into schools, as one example.

Mr. SCHRADER. As a new Member of Congress not as familiar with the SNAP Program as many others, and slightly aware that, obviously, there are certain foods you can buy with your EBT card and some not, I would assume that we are at a level of sophistication where we can actually require the foods that are purchased with that card to not be above a certain carbohydrate or fat level. Is that being looked at at all?

Mr. CONCANNON. Not at this time. The actual SNAP Program, the limitations on food are cooked food. Uncooked foods, the person may use their card for that. We think one of the most promising ways of dealing with the foods that SNAP recipients purchase—by the way, the evidence is they don't make very different purchases from the rest of us who may have more financial resources—is to both rely upon the SNAP education program and to see what happens in several of these pilots that Congress has funded for us where we are incenting—we are creating some incentives for people to buy healthier foods. Also in the budget that is before Congress for next year, the President has proposed \$4 million for us to be able to equip every farmers market in the country with wireless technology, because that is one of the major barriers to be able to use your EBT card, farmers markets that don't have electrification.

Mr. SCHRADER. Last question, actually, for Dr. Ver Ploeg. It would seem pretty clear from the study that you performed that access to supermarkets is not the issue. And that you referenced England's work also. So it seems to be behaviors and taste and that sort of thing.

So what would you suggest that we do to correct those behaviors or change the taste, if you will? Education seems fine, but until you have some financial incentives, I am not sure education alone is going to do it.

Dr. VER PLOEG. I would say that access is a problem for some. It may not be a large portion, but somewhere between two and four percent of households. Again, it may not be the biggest problem for obesity. But for those people, it is a problem.

And then with respect to policy, this is something that ERS—it is a research agency, so we are not really a policy agency. But I would say that education is important, price is important, and income is important for people.

Mr. SCHRADER. Thank you very much. I yield back.

The CHAIRMAN. Thank you very much, Mr. Schrader.

At this time I would like to call on the gentlewoman from Pennsylvania, Mrs. Dahlkemper.

Mrs. DAHLKEMPER. Thank you, Mr. Chairman. As I said in my opening statement, I have worked in a very intimate way with people on these issues over the years. I agree with you, Mr. Concannon, that this is going to take more than the U.S. Government to help solve this problem. It is a food industry issue, it is a school issue, it is a media issue, it is a parental issue, and government, and there are many other groups that are involved in this issue.

Let me ask you a little bit about industry role. I am on the Agriculture Committee so I talk to a lot of food industry individuals. Where do you see the industry role at this point, and are you in any conversations with industry about helping to solve this issue? We are all in this together. It is going to take us bringing everyone together to help solve this very large issue.

Mr. CONCANNON. Yes, Congresswoman, we agree. It is not just the purview and the responsibility of the government, *per se*, but industry has to help in this. These days, I am very mindful of the book that was published within the last year by the former FDA Commissioner that speaks to the history of processed foods in the United States from the 1960s to the present. I think one of the national newspapers, just within the last week, shows the percentage of processed foods that Americans eat compared to other countries. I think we were at the highest in that regard.

So there is much dialogue going on. I know the White House has dialogued with industry. I know our Department has dialogued with industry. The work that is underway, for example, with the report that is going to be coming to you around marketing of foodstuffs to children between the ages of 2 and 17 is a very important opportunity, because I reflect on my own experience just watching the Olympics here a couple of months ago. They would intersperse those Olympic activities with which burger chain was recommending or could sell larger burgers or bigger bags of fries. You are constantly bombarded. So, part of it is messaging, and part of it is the foodstuffs that are available to us.

I know the First Lady was quoted directly with saying to industry: Don't just produce foods that don't have as dense a calorie content, but promote those foods as well. Promote the foods that are healthier for people.

I think part of it is understanding. At a previous Congressional hearing, we had the Director of the Rudd Center at Yale read what sounded to me like a chemistry class, a paragraph, and he had just taken this off the back of a box of a very popular breakfast food. Even a conscientious parent trying to ascertain whether this is healthy for the child or not, unless you are really professionally trained as a nutritionist or a dietician or a chemist, you wouldn't know. I think industry has a major role to play.

Mrs. DAHLKEMPER. Well, that leads right into my next question, which is actually for Dr. Ver Ploeg. I am trained as a dietician, and sometimes when I see the calorie contents when I really have to search for it at times for certain items, I myself am shocked. I think I am pretty good at at least having a rough idea of how many calories are in food.

So have you done research—particularly, we just passed the healthcare bill, which is going to require restaurants to have calorie counts and nutrition information on the food that they serve have you done research to determine does that make a difference; what kind of difference does it make; what are the results of providing that kind of transparency?

Dr. VER PLOEG. I think we have some research that is ongoing, but we haven't completed it yet. It is actually an area that I am not an expert in, but I would be happy to get back to you and update you on what we are doing on that.

Mrs. DAHLKEMPER. I would appreciate that.

You mentioned transparency before, Mr. Concannon. I do believe that will help. But I worked in early intervention. I used to take moms to grocery stores which were very close to their home. But it really is an education piece here. They didn't get the education from their own parents that maybe some of us did, and they weren't educated in school regarding these issues. So it is a very complex issue. It is nothing we can solve with one piece of legislation. But I appreciate you coming forward today. I would also appreciate knowing where the \$30 million is on childhood obesity also.

Thank you very much. I yield back.

The CHAIRMAN. Thank you very much. I know that there are additional questions that we would all love to ask, but I know that we are running out of time. I would like to thank both of the panelists for coming in to testify. We will submit our questions in writing and hopefully you will respond back to them. So at this time, thank you very much.

We would like to call panel two, our next panel, to the table. At this time I would like to again welcome our second panelists to testify here this morning. I would like to start with the first witness. I will introduce her, and then after she speaks, we will introduce the next witness and then we will have some of the other Members introduce each of the following witnesses so this way it doesn't get lost in the shuffle when we introduce you all at this point. This way they will begin to speak.

The first witness that we have is Ellie Krieger. She is a *New York Times* best selling author and renowned registered dietician who specializes in nutrition and health communication. Thank you for being here today and at the reception last night. I enjoyed that reception as well. As host of the Food Network's *Healthy Appetite*, which I started watching as of last night—and maybe I should have been watching it more. But, Ellie, thank you for demonstrating that cooking healthy foods can be quick, easy, and delicious. It was delicious. Some of that food was good. It was just as good as that In-N-Out Burger that I had. She will also share unique strategies for eating well in challenging situations, such as this office. Ellie's can-do attitude has made her the go-to nutritionist in the media today. We are very pleased to have her with us. Thank you very much for taking time from your busy schedule to be here with us.

Ellie.

STATEMENT OF ELEANOR "ELLIE" KRIEGER, M.S., REGISTERED DIETITIAN AND HOST, *HEALTHY APPETITE*, FOOD NETWORK, NEW YORK, NY

Ms. KRIEGER. Thank you, Chairman Baca. Actually, my goal is to make healthy food as delicious as an In-N-Out Burger. So it can be done. Also, thank you, Ranking Member Fortenberry and Members of the Subcommittee. Thank you for your kind introduction. My name is Ellie Krieger, and I believe I have a uniquely multi-

My name is Ellie Krieger, and I believe I have a uniquely multifaceted perspective to offer you today. Professionally, as you mentioned, I am a registered dietician and host of Food Network's *Healthy Appetite*. I received my undergraduate and postgraduate degrees in nutrition from Columbia and Cornell Universities, and I served as an Adjunct Professor of Nutrition Education at NYU. I have also written three award-winning books on healthy living and cooking.

Personally, I have a 7 year old daughter, so I have the vantage point of a mom juggling the demands of real life. And I have the perspective of a community leader, as I have spearheaded the formation of a wellness committee at my daughter's school, PS 75, in New York City. Her school is a perfect example of a mixed-community urban school. It is Title I school; 60 percent of the students qualify for free lunch. And it is a demographic that reflects those most at risk for diabetes, obesity, and food insecurity.

The statistics on food scarcity are startling; 15 percent of all American homes faced food scarcity in 2008, and that is the highest number ever recorded. Nearly 17 million children confronted hunger. Studies show that children who suffer from hunger also suffer more often from colds, stomach aches, the flu. They are more likely to be hospitalized, have trouble in school, and, most significantly, more likely to become obese.

As we well know, poor nutrition is not exclusive to the food insecure. It is a growing national problem. In all, only two percent of our children eat a healthy diet, and an estimated 17 percent of children are obese. But obesity and food insecurity seem, on the surface, like opposite problems, one of excess and one of scarcity, but they are really integrally connected. Food insecure homes often rely on cheaper, high-calorie foods to stave off hunger.

The other day, I spent nearly a dollar on an organic apple, and I stopped to think if I were truly hungry and food insecure, would I maybe consider a different kind of dollar food menu item. I really might. But, luckily, these problems share a common solution: the broad and consistent availability of nourishing, affordable, highquality food, and educating people to make smart choices.

A cornerstone of nutrition education is not just to provide information, but to effect behavior change by reaching someone in their head, their heart, and their hands. That is with knowledge, motivation, and skills. I strive to do that through my show, *Healthy Appetite*, and all of my work. I hope that my show, along with other Food Network shows, can help reverse the loss of cooking skills among Americans and inspire them to prepare fresh, healthy foods at home.

Food Network and its parent company, Scripps Network Interactive, have taken a leadership role in promoting healthy eating. Through its websites and television programs, Scripps teaches people to cook, and also offers a wealth of educational materials. Food Network has partnered with Share Our Strength to create 14 Good Food Gardens, outdoor classrooms that educate families on the importance of fresh, nutritious food and inspire healthy eating habits for life.

Congress, of course, plays a critical role in promoting access to healthy food. Nearly one out of five Americans receives Federal food assistance, and 17 million children benefit from SNAP alone. Simply put, if it were not for government support and the actions of this Committee, we would have even more hungry and unhealthy children in this nation. So I am glad to see the Congress and the Administration are making Federal food programs healthier and more robust.

By raising the SNAP monthly allotment and promoting the purchase of fresh produce and healthier food alternatives, the Committee has taken an excellent first step toward better eating.

The upcoming renewal of the Child Nutrition Act is an excellent opportunity to further this work. As part of that renewal, Congress should adopt several substantive changes to the Food School Programs already being debated. I have supported setting national nutrition standards for all foods sold in schools and provided by schools, not just breakfast and lunch. We really need to strive to create a total environment of healthy living in the schools and set that example.

I believe we need training for school food service personnel on healthy food preparation. Getting out of the rut of using unhealthy packaged food takes a little knowledge and know-how, and I recommend training be done by qualified nutrition professionals.

I favor Federal funds for the creation of school gardens and additional farm-to-school programs. As the Food Network demonstrates, this type of experiential education is invaluable. It taps the head, heart, and hands in one fell swoop. I think, finally, Congress should enhance and expand the very important Summer Lunch Program.

To wrap up, I encourage looking at several other nutrition issues as well. Congress should provide incentives to schools to implement wellness policies. Unfortunately, many of these exist solely on paper. In our own wellness committee, we had no idea that New York City even had a formal wellness policy until we really started digging online. It shouldn't be that buried, in my opinion.

Congress should fund infrastructure improvements enabling schools to prepare these healthier foods. You would be shocked to see the closet-sized kitchen in my daughter's school. They have two burners and two ancient ovens, and they feed 700 children two meals a day. If we are going to make changes in school food, we have to ensure that those preparing the food, those on the front lines, if you will, have the facilities to do so.

Finally, the Federal Government should emphasize eating whole rather than processed foods. The numerical approach to healthy food, as we talked about looking at calories and food and carbohydrates, often leads people to eat processed food, while meeting the numerical definition of healthy, in the end are far less nutritious than whole foods. Educating people to take this macro approach to nutrition rather than a numerical approach, I believe, would be a tremendous step toward encouraging better food decisions.

So I truly appreciate the opportunity to appear before you today. Thank you very much. I look forward to your questions.

[The prepared statement of Ms. Krieger follows:]

PREPARED STATEMENT OF ELEANOR "ELLIE" KRIEGER, M.S., REGISTERED DIETITIAN AND HOST, *HEALTHY APPETITE*, FOOD NETWORK, NEW YORK, NY

Good morning, Chairman Baca, Ranking Member Fortenberry, and Members of the Subcommittee. My name is Ellie Krieger, and I believe I have a uniquely multifaceted perspective to offer you on the issue of childhood nutrition and wellness.

Professionally, I am a registered dietitian and host of Healthy Appetite on Food Network. I received my undergraduate and post-graduate degrees in nutrition from Cornell and Columbia Universities. I held the position of director of nutritional services at the prestigious La Palestra Center for Preventative Medicine, where I worked with a team of physicians, psychologists and fitness specialists to create a holistic obesity treatment program. And I was an Adjunct Professor of Nutrition Education at the New York University Department of Nutrition, Food Studies and Public Health.

In addition, I regularly speak at events around the country and have appeared as a guest expert on dozens of programs including *Today*, *CNN*, *Good Morning America*, *The Dr. Oz Show*, and others. I am a regular contributor to *Fine Cooking*, *Woman's Health* and *Food Network* magazines. And I have written three books on healthy living and cooking, Small Changes, Big Results; The Food You Crave; and So Easy: Luscious Healthy Recipes for Every Meal of the Week, two of which are New York Times best sellers and one for which I was honored with awards from the James Beard foundation and the International Association of Culinary Professions.

Personally, I have a 7 year old daughter, so I have the vantage point of a mom juggling the demands of real life while trying to raise a healthy family. And I also have the perspective of a community leader, as I have spearheaded the formation of a Wellness Committee in my daughter's school, Public School 75 in New York City. The first act of the committee was to sign the school onto the HealthierUS Schools Challenge, which I learned about during my participation in the healthy Kids fair on the White House lawn this past fall. My experience making changes at this grass roots level at my daughter's school

has given me an understanding of the issues we face like none of my formal edu-cation could have. Her school is a perfect example of a mixed community urban school. It is Title I school with about 60% of the students qualifying for free lunch. Its demographics are 49% Hispanic, 30% African American, 13% White and 7% Asian. It is a strong community school that depends on public resources, with a de-mographic that reflects some of our children most at risk of obesity, diabetes, and food insecurity. The decisions made in this room and in Washington D.C. directly impact the children there.

On the surface obesity, diabetes, and food insecurity seem like opposite prob-lems—one of excess and one of scarcity. But in reality they integrally connected. According to the Food Research and Action Center: "Households without money to buy enough food often have to rely on cheaper, high calorie foods to cope with limited money for food and stave off hunger. Families try to maximize caloric intake for each dollar spent, which can lead to over consumption of calories and a less health-ful diet."¹ These issues also share a common solution: the broad and consistent availability of nourishing, high quality, delicious food and the education and inspiration to help children and families make smart choices.

I. Hunger Is On the Rise in America

The statistics on food scarcity are well-known to the Subcommittee, but they re-The statistics on food scarcity are well-known to the Subcommittee, but they re-main startling in a country like the United States. According to the U.S. Depart-ment of Agriculture's 2008 *Household Food Security in the United States* study, 15% of all homes in the U.S. were "food insecure,"² which equates to nearly 17 million households. Of that 15%, 5.7% faced a very low level of food security (amounting to nearly 6.7 million households).³ According to USDA, the remainder of the 17 mil-lion households were able to avoid food shortages by eating a less varied diet, using while feed excitates a magnetic production that the feed it is a state of the stat public food assistance programs, or supplementing their household food items with items from food pantries or soup kitchens. Unfortunately, these numbers are starkly higher from 2007, and in fact they are the highest ever recorded by USDA since it began collecting data on food security in 1995.

State-by-state numbers offer little comfort. In California, over the last 3 years for which the USDA has released its food security data, (2006 to 2008) an average of 12% of households in the state were food insecure and 4.3% had very little food security each year. Over that same period of time, an average of 10.4% of Nebraska households were food insecure each year, with 4.0% facing very low food security. These are not isolated numbers. Over that same time, according to the USDA:

¹See http://www.frac.org/html/hunger_in_the_us/hunger&obesity.htm. ²Food security is defined as "consistent access to enough food for an active, healthy life for all household members at all times during the year." In real terms, food insecurity can mean running out of food without money to buy more, cutting portion sizes, or skipping meals. ³In households with very low food security, the food intake of some household members was reduced and their parenal acting patterns were discurbed because of the household's food insec

reduced, and their normal eating patterns were disrupted because of the household's food insecurity.

- In Minnesota, an average of 10.3% of homes were food insecure each year; 4.1% faced very low food security;
- In Oklahoma, an average of 14% of homes were food insecure each year; 5.9% faced very low food security;
- In Texas, an average of 16.3% of homes were food insecure each year; 5.7% faced very low food security;
- In Pennsylvania, an average of 11.2% of homes were food insecure each year; 4.2% faced very low food security;
- In Oregon, an average of 13.1% of homes were food insecure each year; 6.6% faced very low food security; and
- In Ohio, an average of 13.3% of homes were food insecure each year; 5.2% faced very low food security.

In fact, most states had an average of at least 10% of their households face food insecurity each year, with around 3% to 4% of those same homes facing very low food security. And nearly all of the states have seen those numbers grow to some degree since 1995.

These numbers can be expected to grow further as the data in future years meas-ures the full impact of the recession. We all are uncomfortably aware of how many people are out of work and have lost their homes. What is even more striking is the number of underemployed in America, who may face new food security challenges that they have not been used to in the past. I expect that the 2009 USDA numbers will show marked increases in food insecurity throughout the country, and potentially millions of additional homes may be considered to have very low food security.4

What is truly concerning to me, though, is the impact food insecurity has on our nation's children. Generally speaking parents will sacrifice their own food security to make sure that their children have enough to eat. Even so, USDA projected that in 1.3% of U.S. households in 2008 both adults and children suffered from inadequate food due to very low food security, up from 0.8% in 2007. In real numbers, 506,000 households in America could not provide enough food so that everyone living in that home—adult and child alike—could meet their basic nutritional needs. In 2008, nearly **17 million children** lived at risk of facing food security issues at some point during that year, **5.7 million children** were living in homes that faced very low food security for the adults in the home, and **1.1 million children** suffered from the direct effects of very low food security.

Food insecurity issues and hunger have a disproportionate impact on children, with effects well-documented by researchers. According to Share Our Strength, a na-tional organization that, in partnership with Food Network, works hard to make sure no kid in America grows up hungry, childhood hunger impairs kids' health in significant and long-lasting ways.5 Studies have shown that children who suffer from hunger are sick more often and are more likely to be hospitalized.⁶ They are more likely to come down with common ailments, like colds, stomachaches, and the flu. Most importantly for the future of the nation, children who suffer from hunger issues are more likely to suffer from childhood and adult obesity, and the harmful chronic consequences caused by obesity.7

Hunger also predisposes children to behavioral difficulties, and it impairs their ability to learn and perform academically.8 A lack of food can contribute to a child's lack of attention and inability to concentrate in a classroom. Children under the age

⁴In fact, the Food Research and Action Center (*www.frac.org*) just announced that in January of this year, almost 40 million Americans sought SNAP/food stamp assistance, over 450,000 more people than in January 2009. As of the end of January, one in eight Americans received food stamp assistance. ⁵Much of the following information is explored in more detail on Share Our Strength's

⁶See, for example, Cook, J.T., Frank, D.A., Berkowitz, C., Black, M.M., Casey, P.H., Cutts, D.B., Meyers, A.F., Zaldivar, N., Skalicky, A., Levenson, S.M., Heeren, T., Nord, M. Food Insecutivity is Associated with Adverse Health Outcomes Among Human Infants and Toddlers. J. NUTR., 134:1432–1438 (June 2004).

 ^{134:1432–1438 (}June 2004).
 ⁷The link between hunger and childhood obesity was examined in Casey, P.H., Szeto, K.L., Robbins, J.M., Stuff, J.E., Connel, C., Gossett, J.M., Simpson, O.M. Child Health-Related Qual-ity of Life and Household Food Security. ARCH. PEDIATR. ADOLESC. MED., 159: 51–56 (2005).
 ⁸See, for example, Hunger in Children in the United States: Potential Behavioral and Emo-tional Correlate, PEDIATRICS. Vol. 101 No. 1 p. e3 (January 1998); Jyoti, D.F., Frongillo, E.A., Jones, S.J. Food Insecurity Affects School Children's Academic Performance, Weight Gain, and Social Skills. J. NUTR., 135: 2831–2839 (December 2005); Food insufficiency and American school-aged children's cognitive, academic and psycho-social development. PEDIATRICS. Vol. 108, p. 44–53 (2001) p. 44–53 (2001).

of 3 who suffer from food security issues often cannot learn as much, as fast, and as well as other children of the same age. Children who do not regularly get enough food can suffer from behavioral and emotional problems, and teens who lack food security are more likely to have issues with their peers and have disciplinary problems at school. As a result, hungry children often achieve less than their peers and may be more likely to face the economic and social difficulties in adulthood that often lead to food insecurity. In many ways, hunger in children now becomes selfreinforcing for future generations.

Numbers are just that—numbers. Often by focusing just on the data, we can lose some perspective about what the numbers mean for the nation. Last year, 49.1 million Americans suffered from a lack of food security. And almost 25% of children went to school hungry in 2008.

II. Even Where Food Is Sufficient, the Nutritional Value of What Is Eaten Is Questionable

While hunger and food security have to be of primary concern to all of us, even those homes that are secure in their yearly food supply face problems. It is no secret that obesity continues to rise in America. Of immense concern is the rate of obesity among children, which is increasing exponentially. According to information provided by the Centers for Disease Control and Prevention,⁹ an estimated 17 percent of children and adolescents between the ages 2 and 19 are obese. Among pre-school age children (those 2 to 5 years old), obesity increased from 5% to 10.4% between 1976–2008 and from 6.5% to 19.6% among 6–11 year olds. Among adolescents aged 12 to 19, obesity increased from 5% to 18.1% during the same period. Children desity has significant here term offects for the parties. Arein example

Childhood obesity has significant long-term effects for the nation. Again according to data documented by the CDC, obese children and adolescents often remain obese into adulthood—"[O]ne study found that approximately 80% of children who were overweight at aged 10–15 years were obese adults at age 25 years. Another study found that 25% of obese adults were overweight as children. The latter study also found that if overweight begins before 8 years of age, obesity in adulthood is likely to be more severe." ¹⁰

While a number of factors that have contributed to this marked rise in childhood obesity, one significant factor is the change in the American diet. The consumption of processed foods and empty calories has increased, while the consumption of fresh fruit, vegetables, and lean meats has declined. Children now eat significant amounts of junk food as part of their diet, and consumption of high-calorie drinks has grown. Today's kids consume a diet high in saturated fat and sodium, but rarely eat enough fiber or whole grains to support a healthy lifestyle. It is no wonder that nearly one in three kids are overweight and one in five are obese.

Even where parents want to provide their family with the most nutritious meals possible, they face real challenges because they live in a food desert. A food desert is an area that lacks ready access to supermarkets or other large grocery stores that stock affordable and nutritious food. The growth of food deserts around the country is astounding. Nationwide, USDA estimates that 23.5 million people, including 6.5 million children, live in low-income areas that are more than a mile from a supermarket. Of the 23.5 million, 11.5 million are low-income individuals in households with incomes at or below 200 percent of the poverty line. Of the 2.3 million people living in low-income rural areas that are more than 10 miles from a supermarket, 1.1 million are low-income. Conversely, in many of these areas, there is ready access to less healthy food alternatives like fast food and convenience stores that stock processed foods high in fat and sugar.

The correlation between a lack of access to nutritious food and less healthy eating should not be ignored when considering how to promote better food choices. Only 2% of children currently eat a healthy diet (moderate in saturated and trans fat, sodium, and calories with recommended amounts of fruit, vegetables, whole grains, and low-fat dairy). Better nutrition, in the short term, has been shown to yield better academic performance, especially with regard to breakfast and can effect behavior. In the long term it is a cornerstone of a healthy lifestyle which can reduce the risk of diseases such as heart disease, cancer, stroke and diabetes which can ultimately be a great cost to our society.

III. Scripps Networks Interactive and Food Network Are Working to Combat Food Scarcity and to Promote Healthy Eating

There is no single solution to the problems of hunger and nutrition in America. It will take a combination of policy changes, private sector initiatives, and hard

⁹See http://www.cdc.gov/obesity/childhood/index.html.

¹⁰Id. (internal citations removed)

work to help Americans have access to adequate amounts of healthy, fresh food each day to support a balanced diet. It has taken decades to change how we eat, and it may take decades more to unlearn many of the bad habits we all have when it comes to food.

Education, though, is one of the fundamental keys to helping American families change their eating habits and approach to food. Through my show *Healthy Appetite* and through the Food Network website and magazine, I inspire people to eat nutritious, fresh foods by providing delicious, accessible recipes as well as tips for navigating restaurants and grocery stores and managing a healthy lifestyle. I strive to follow the USDA guidelines for all of my recipes and teach the perspective of balance and moderation as opposed to dieting and extremes. *Healthy Appetite* is fueled by a passion for delicious healthy food and shows you how to have the foods you love in a healthier way.

My hope is that my show, along with the other shows on the Food Network, can help reverse the seeming loss of cooking skills amongst Americans. As schools turn away from electives like home economics and families spend fewer meals at home eating together, it seems, at least from my perspective, like the nation has lost its cooking heritage. My hope is that my show and others can remind Americans that being in the kitchen is an asset both to themselves and to their families.

I was taught during my master's program in nutrition that the goal of nutrition education is not simply to provide knowledge but rather to affect behavior change. The most effective way to do that is to reach someone in the head, the heart, and the hands. That is, to address knowledge, motivation, and skills. People need to be educated about good food, good nutrition, and the value of having a diet rich in fresh whole foods. They also need to remember what it is like to love to eat well, be motivated to change their diet, and to be inspired to try new foods. Finally, people have to be taught how to prepare healthy foods in their own kitchens. I strive to incorporate all three of these goals into *Healthy Appetite*.

to be taught how to prepare healthy foods in their own kitchens. I strive to incorporate all three of these goals into *Healthy Appetite*. Food Network, and its parent company Scripps Networks Interactive, also are playing a key role in trying to change the eating habits of Americans. Scripps is the leader in family-friendly lifestyle programming and seeks to promote healthy food choices across its various TV channels and websites. Through its websites and television programming, Scripps serves as a resource for educational materials about healthy eating. At the same time, as people watch my show and others on Food Network, I hope that they are inspired by new and different recipes and are motivated to go into their kitchen and fix a meal. Finally, both Scripps's websites and Food Network shows teach people the skills necessary to prepare food at home—those same skills that seem to have been lost in recent years.

Food Network has several television shows devoted to exploring nutrition in the home and helping families create healthy meals with inexpensive and readily-available foods. Besides *Healthy Appetite*, many episodes of Rachael Ray's 30 *Minute Meals* focus on preparing vegetarian dishes and other meals that encourage people to incorporate fresh fruits and vegetables and other meals that encourage people to incorporate fresh fruits and vegetables and other mutritious whole foods into their daily meal plans. Likewise, *Boy Meets Grill* with Bobby Flay emphasizes lighter meal preparation by grilling and the use of fresh, local ingredients. In May, Scripps will launch a new network, Cooking Channel, which will include a new show hosted by Emeril Lagasse titled *Fresh Food Fast*.

On the web, where Scripps's food-related websites are the highest rated and most visited on the Internet (with about 13 million unique visitors each month), FoodNetwork.com and its sister website, HealthyEats.com, both provide a vast amount of information to promote better food choices and nutrition education. The Healthy Eating section of FoodNetwork.com features Meal Makeovers, which takes comfort foods and reinvents them with lighter ingredients and substitutions for healthier eating. Healthy & Fast, another section of the FoodNetwork.com website, features advice from dietitian Dana Angelo White and Food Network chefs on ways to prepare fast and fresh weekday meals. On HealthyEats.com, Food Network nutrition specialists provide consumers with the latest tips, nutrition news, low-calorie recipes and easy ideas for adding fresher, more wholesome foods to your life, including information on eating healthy during pregnancy and gluten-free eating. Food Network also partners with not-for-profit organizations as part of its com-

Food Network also partners with not-for-profit organizations as part of its commitment to promote food access and childhood nutrition. Share Our Strength is Food Network's national public affairs partner, with the two organizations joining together to create the Good Food Gardens initiative. The mission of the Good Food Gardens is to educate families on the importance of fruits, vegetables and other fresh, nutritious foods—key ingredients to ending childhood hunger. Using the Teich Garden Systems, Food Network's Good Food Gardens are educational, outdoor classrooms that offer children fun, hands-on gardening experiences that inspire healthy eating habits for life. Food Network has underwritten the creation of 14 Good Food Gardens across the country, with four more to be opened in 2010. Current Good Food Garden locations are:

- Boys & Girls Clubs of San Francisco, CA;
- Center for Community and Family Services, Altadena, CA;
- Care & Share Food Bank, Colorado Springs, CO;
- Joseph Arthur Middle School, O'Fallon, IL;
- West Side Elementary School, Greer's Ferry, AR;
- Children Aid Society, New York, NY;
- SEED School of Washington, D.C.;
- Theodore Roosevelt High School, Washington, D.C.;
- ArtSpace Charter School, Swannonooa, NC;
- Boys & Girls Club of Palm Beach, West Palm Beach, FL;
- Community School 211 The Bi-Lingual School, New York, NY;
- Fulton Houses, New York, NY;
- Harlem Children's Zone, New York, NY; and
- Naoma Donnelley Haggin Boys & Girls Club, Delray Beach, FL.

Beginning in 2010, Food Network and Share Our Strength will expand our educational partnership, developing initiatives to focus on three critical areas: (1) Oper-ation Frontline; (2) healthy school breakfasts; and (3) education on smart food choices with food stamps. Food Network is particularly happy to be a part of Oper-ation Frontline, a notable success for Share Our Strength. The program provides seven specialized curricula that cover nutrition and healthy eating, food preparation, budgeting and shopping. Operation Frontline's culinary and nutrition volunteers teach these high-quality, cooking-based courses at a variety of community-based agencies—including Head Start centers, housing centers and after-school programs-with neighborhood locations that make it easy for families to attend. Share Our Strength's data on the program reveal the value of nutritional education:

- 87% of Adults report improving their cooking skills after graduating from an Operation Frontline course, which means they're better equipped to make healthy meals for their families at home.
- 96% of kids who take Operation Frontline's Side By Side course enjoyed cooking alongside their parents during class, an important element in continuing to prepare and eat healthy meals together as a family and teaching necessary skills to future generations.
- After participating in Operation Frontline, at least 69% of adults said they were eating more fruit and vegetables than before the course.

IV. Congress Must Be Cognizant of Food Access and Nutrition Issues as It **Develops National Food Policies**

Congress plays an essential role in promoting access to healthy foods, particularly through Federal food assistance programs. Nearly one out of every five Americans uses one of the USDA's food assistance programs each year. According to USDA's own study of food security, 55% of all food insecure households receive food assist-ance from either the School Lunch program, SNAP/food stamps, WIC, or some combination of these programs. About 20% of food insecure homes also turned to food pantries to help supplement the food they had at home, and 2.6% ate one or more meals at a soup kitchen sometime during the year.

Federal food assistance programs are also vital to preventing hunger amongst children. Information gathered by Share Our Strength about how children use Federal food assistance programs is startling:

- Nearly half of American children will receive food stamp support in their lifetime.
- 17 million children benefit from SNAP assistance on average each month.
- An average of 9.2 million American women and children under the age of 5 received WIC assistance each month last year.

Simply put, if it was not for government support through these programs, we would

have even more hungry kids in this nation. The most important food support programs for children in this country are the National School Lunch and National School Breakfast programs. Again, according to data relayed by Share Our Strength, 19.5 million American children ate free or reduced-price lunches each school day last year. As with the indices of hunger discussed above, that number has been increasing; last year, 859,000 more children utilized the free or reduced-price school lunch program per day compared to 2008. 8.8 million children on average used the free or reduced-price school breakfast program each school day in 2009, but 10.1 million children across the nation who were eligible for free or reduced-price school breakfasts did not receive them last year, even though they received free or reduced-price school lunches. I am glad to see that Congress and the Obama Administration are taking

I am glad to see that Congress and the Obama Administration are taking proactive steps to make the school lunch program, and all of the Federal food support programs, healthier and more robust. The steps taken by this Committee to reform the SNAP/food stamp program through the Food and Nutrition Act of 2008 (part of the 2008 Farm Bill) were quite welcome. Unfortunately, low-income families often try to stretch their food budget by purchasing cheaper, more caloric foods that while filling, contribute to obesity and other problems that can be alleviated with a healthier diet.¹¹ By raising the SNAP/food stamp monthly benefit allotment and promoting the purchase of fresh fruits, vegetables, and healthier food alternatives, this Committee and the Congress have taken a good first step toward encouraging families to eat healthier meals and educate children about healthy eating. Additionally, the \$1 billion in the bill to provide support for the purchase of fruits and vegetables by schools will help to deliver fresh foods to students.

As the mom of a school-aged child, I am particularly happy that First Lady Michelle Obama has focused her attention on the epidemic of childhood obesity. I think her work to get the private sector to agree to set standards for what is sold to students at school is welcome, as well as her encouragement to those same companies to produce healthier foods and reveal more nutritional information to consumers. I am also very interested in the upcoming renewal of the Child Nutrition Act this year and applaud the Senate Agriculture Committee's action on the Healthy, Hunger-Free Kids Act of 2010 last month. I think that bill contains some very good ideas about how we should approach healthy eating in schools:

- The bill would set national nutrition standards for all foods sold by schools, not just meals. It also creates an incentive for schools to comply with heightened nutritional standards for their meals.
- The bill would provide additional training to school food service personnel on healthy eating.
- The bill would provide Federal support for the creation of school gardens to educate kids about fresh fruits and vegetables.
- The bill would also provide funding to schools to help them purchase fresh, locally-sourced produce to be used in school breakfasts and lunches.

I strongly support the move by the bill to set nutritional standards for all foods sold in schools, particularly for snack foods. Snacks now account for 27% of children's daily caloric intake and much of that is of low nutritional value. We should strive to create a total environment of healthy living in the schools, both curricular and extracurricular, by providing standards for vending machines, à *la carte* foods, snacks, and after-school offerings. I also really appreciate the Senate's work on the summer lunch program. It is important to provide healthy food assistance to school children throughout the year, and school summer lunch programs are often very under-utilized opportunities for kids to get healthy meals. I hope the Congress moves forward with this legislation this year.

I think that the Healthy School Meals Act of 2010, introduced by Representative Polis a few weeks ago, offers a few good ideas on childhood nutrition and food availability. Healthy eating should start young, and I think giving schools additional support to help them provide vegetarian meal options will expose kids to new, healthier foods. I also would encourage Congress and the Committee to look at several other issues related to food and nutrition when considering reforms to its food assistance programs:

- Congress should require or provide incentives for the employment of or consultation with qualified nutrition professionals to aide in implementing school food service and wellness policies. Congress also should consider providing incentives to schools and school districts to implement, assess, and enhance these wellness policies.
- Congress should help fund, or encourage states to fund, infrastructure improvements that will enable schools to prepare and store healthier foods and provide adequate movement space for children to be active.

¹¹The Food Research and Action Center has documented the relationship between hunger and obesity. See http://www.frac.org/html/hunger in the us/hunger&obesity.htm.

- Congress should support and enhance nutrition and physical education programs especially those that are experiential, inspirational and skill building, such as cooking workshops, food growing, farm visits, and similar events.
- Congress should encourage Federal food assistance programs, along with the U.S. Department of Agriculture, to emphasize the nutritional value of including whole foods in your diet rather than processed foods. Often we take a numerical approach to determining what is healthy by only looking at things like fat, sugar, and calories. Unfortunately, that numerical approach encourages people to continue to eat processed foods that, while meeting the numerical definition of what might be considered healthy, are far less nutritious than comparable whole foods. Educating people to take a macro approach to nutrition, rather than a numerical approach, would be a tremendous step toward encouraging much better food decisions.

I truly appreciate the opportunity to appear before you today on behalf of Scripps Networks and the Food Network. Together, we can make this country a healthier place to live. I look forward to your questions.

The CHAIRMAN. Thank you very much, Ellie.

Just to remind the rest of the members, I know that we have 5 minutes each, and I will allow a little liberty there in allowing you to go beyond the 5 minutes, because I know that you have taken the time to be here and this is very valuable information. I just wanted to remind you of that.

Next I would like to call on Vicki Escarra, President and CEO of Feeding America in Chicago, Illinois.

STATEMENT OF ROCCO DISPIRITO, COOKBOOK AUTHOR AND CHEF, NEW YORK, NY; ACCOMPANIED BY VICKI B. ESCARRA, PRESIDENT AND CEO, FEEDING AMERICA, CHICAGO, IL

Ms. ESCARRA. Good morning. Thank you, Mr. Chairman, and Members of the Subcommittee, for the opportunity to talk to you as well about the problem of healthy food access for millions of hungry Americans and how the Feeding America Food Bank Network is working on this problem.

I must begin by thanking you all, especially you, Mr. Chairman, for your leadership with the recent farm bill, really supporting healthy nutrition programs. So on behalf of our network, thank you.

With me today is Rocco DiSpirito. As a member of our entertainment council, Rocco is very interested in helping to end hunger in America. He is an award-winning chef, an author, and dietician for all Americans. He will tell you about some of the recent findings that we have released in our National Hunger Study that face and actually show the challenges that poor people face in achieving healthy diets.

I would like to just mention a few highlights before I turn it over to him, and that is that Feeding America is the largest hunger relief organization in the United States. It is also the largest charity that combines public and private partnerships. We are over 200 members. We support 61,000 agencies that reach 37 million Americans, 14 million children. We work with roughly one million volunteers.

A little bit about the Federal Commodity Assistance Program. It is essential to our network. We very much appreciate TEFAP and CSFP. Out of the almost 2.7 billion pounds of food that we delivered through our network last year, 25 percent of the food that we delivered came from Federal commodities. We also know and we have talked a bit today about the many low-income Americans who are eligible for SNAP don't participate in this critically important program. We see them every day in our pantries. You all know that. Rocco will talk more about that in just a moment. But a very interesting statistic is that we found that only 41 percent of our client households reported that they are participating in SNAP, while 88 percent were actually eligible. So there is big opportunity there. More than half of our food banks are doing aggressive outreach around SNAP programs.

SNAP is not the only program that suffers from gaps in coverage. Many poor children are without access to child nutrition programs when they are out of school: during summer, after school, weekends, extended holidays, and such. And so we, as well, are very supportive of what is before you all now with the Child Nutrition Act reauthorization bill and are very much supporting the President's commitment to end childhood hunger by 2015.

I know that we are all concerned about the kinds of food that people receive through nutrition programs and the Feeding America Network is doing our part. There is more to do in making sure that kids and working families across this country get healthy, nutritious food. In 2009, our food banks distributed over 430 million pounds of privately donated fresh fruits and vegetables.

It is interesting, because we did a piece of work with Boston Consulting that was just completed a month ago, that shows that over 5–6 billion pounds of produce are grown but not brought to market in this country. And so we are working very closely with private industry to get the dollars to get those fruits and vegetables to families that need them.

Before I conclude, I want to just touch briefly on the crisis our food banks are facing very soon. We are working very closely with USDA and with Congress to actually get more money around commodities. We are seeing declining dollars as a result of money that we saw from the stimulus package. And so more about that in the days ahead.

But, simply put, you all know that the Brookings Institute did an analysis with OMB and CBO that projects unemployment rates will stay between eight and ten percent for the next 2 years, so we are not going to see a decline in the need that is out there anytime soon.

Concluding thoughts: I would just say that food banks and our local feeding agencies are often the first to see the devastated faces of people who never imagined that they would be seeking help at food pantries, shelters, or soup kitchens. And so we want to thank you so much for having an opportunity to share with you our work and our facts today.

Thank you.

[The prepared statement of Ms. Escarra follows:]

PREPARED STATEMENT OF VICKI B. ESCARRA, PRESIDENT AND CEO, FEEDING AMERICA, CHICAGO, IL

Introduction

Thank you Mr. Chairman and Members of the Subcommittee for the opportunity to be with you today to talk with you about the problem of food access for low income populations and the role that food banks play in providing access to healthy and nutritious foods. I also want to thank you and your colleagues for your leader-

ship in the fight to end hunger in this nation. As you know, our network and those we serve are greatly dependent upon the nu-trition and commodity donation programs authorized by the Farm bill. We are very grateful to your Committee for the truly historic nutrition title in the last Farm bill (the Food, Conservation, and Energy Act of 2008), and for your on-going support for these critically important programs that help feed and nourish the hungry of this nation.

With me today is, Rocco DiSpirito, who is a member of our Celebrity Council. Rocco is a renowned and wonderful chef and a dedicated advocate in the fight to end hunger and promote nutritious and healthy diets for all Americans. Rocco will talk about his commitment to ending hunger, sharing some stories of people who have been served through our programs. He also will provide information on our hunger study and discuss some of the challenges that poor people face in achieving healthy diets.

I have submitted full written testimony for the record and will briefly highlight the major points of that testimony and then turn it over to Rocco for his remarks. If we are lucky, he may even share some of his gastronomic secrets.

As President and CEO of Feeding America, I am pleased to be able to share with you information on the many creative and innovative ways that our 200 food banks provide access to nutritious foods for over 37 million people served by more than 62,000 local charitable feeding organizations.

Food Banks and the Access Challenge

Addressing food access is an integral part of the mission of Feeding America food banks. In addition to food boxes and congregate meals at pantries, soup kitchens and shelters, our network reaches out into local communities as well through mobile pantries, community gardens, senior centers, afterschool and out-of-school programs. The main sources of Federal support for food banks are The Emergency Food As-

sistance Program (TEFAP) and the Commodity Supplemental Food Program (CSFP). Though only a small part of our overall food distribution, food provided through these programs provides the firm foundation for most of our anti-hunger efforts. These programs make it possible for our network to distribute millions of pounds of nutritious foods to the food pantries, shelters, soup kitchens, and senior nutrition programs. They also support the farm economy by providing an outlet for surplus or price supported commodities.

Feeding America food banks are the largest user of commodities provided through The Emergency Food Assistance Program (TEFAP). This program provides a consistent source of food that allows many feeding agencies to keep their doors open, and as noted below, helps us leverage private, charitable donations to significantly expand the total amount of food and resources we are able distribute through our food bank network.

In FY 2009, Feeding America food banks distributed a total of \$2.2 billion worth of food to local charitable feeding agencies; approximately \$436 million of this total came from commodities bought with The Emergency Food Assistance Program (TEFAP) and the Commodity Supplemental Food Assistance Program (CSFP) fund-

ing. The reliable Federal support provided for nutrition programs and policies allows our network to tap into a wide array of private donations and partnerships with cor-porate donors and sponsors that help to stretch Federal dollars many times over.

Last year the Feeding America network distributed over 2.6 billion pounds of food to hungry people. Federal commodities made up about 25 percent of this total; donato hangry people, rederat commodities made up about 25 percent of this total, dona-tions to local food banks brought in some 33 percent; national partnerships provided 28 percent and we purchased some 15 percent of all the food distributed. This shows the multiplier effect that a relatively small investment of Federal commodities can have, and demonstrates a remarkably high return for the millions in this country

who rely on food banks and their community feeding organizations. In addition to providing nourishment to those in need, our network is heavily in-volved in promoting and helping hungry people to access other nutrition programs, like SNAP, Child Nutrition, and WIC.

Filling the Gaps

Low rates of participation in the Supplemental Nutrition Assistance Program (SNAP) are another area where food banks are working to improve access. Recognizing the enormous importance of SNAP to meeting the goal of ending hunger, our network has invested heavily in efforts to help our eligible clients gain access to SNAP benefits. As the Committee well knows, too many people who are eligible for SNAP benefits are not receiving them. USDA data show that about $\frac{1}{3}$ of those who are eligible for SNAP do not participate in this program (the proportion is much higher for elderly).

Our own data from the recent study of Feeding America clients (*Hunger in America*, 2010) confirms low rates of participation among potentially eligible households. According to this study, 88 percent of households served by our food banks reported incomes below 130% of the Federal poverty level, the income cut-off for SNAP eligibility. Yet, only 41% of our client households were participating in SNAP.

Our food banks are committed to addressing this problem by conducting outreach and working with local Federal, state and local SNAP agencies to offer on-site application assistance to clients struggling with the difficult and time-consuming process of qualifying for these critically important benefits. Food bank workers and volunteer are receiving rigorous training to help potentially eligible families learn about SNAP and its benefits. They offer on-site assistance to help clients fill out applications so that they can be quickly certified by public agencies and receive SNAP benefits. We hope that our SNAP partnership with USDA and with state and local authorities will continue, and that it can be expanded through waivers and other methods to help more eligible households secure SNAP benefits.

Many of our food banks are expanding efforts to fill the gaps in child nutrition and other programs, as well. With support from the Federal child and adult care food program, our network operates afterschool nutrition programs for children in low-income areas. These Kids Café® programs offer nourishing snacks or meals and activities that keep children safe after school. More recently, we have undertaken efforts to reach poor children through weekend nutrition or BackPack programs that provide nutritious meals for poor school children to take home on weekends. Much more needs to be done to improve access to healthy foods for the millions of low income children when schools are out of session and child care facilities are not available to them.

Safe and Nutritious Food

Quality is a priority for the Feeding America network of food banks. They work hard to ensure that the food which is bought or donated and distributed to those in need is safe and nourishing.

Food banks strive to design food packages and meals that are balanced, nourishing and protein rich. In addition to providing healthy foods, our network helps educate clients about nutrition and the value of a healthy diet. This work includes education and instruction from registered dieticians and community nutritionists, as well as distribution of recipes and hands-on cooking lessons for adults and children. Utilizing grant awards for innovative programs, food banks are developing creative ways to instruct clients about the value of good nutrition and how to incorporate healthy eating into their diets with limited resources. SNAP nutrition education funding also is being utilized to develop instructional classes on healthy eating and cooking for families that qualify for SNAP benefits.

Over the years we have expanded storage capacity and refrigerated trucks to increase distribution of fresh foods, especially fruits and vegetables. This allows our food banks to intensify efforts to raise donations of, and funding for greater quantities of fresh produce. Our commitment to the cause of healthy eating is demonstrated by the extraordinary increases in the amounts of fresh produce distributed by network food banks.

Over the past 10 years, the volume of privately funded and donated fresh fruits and vegetables that Feeding America food banks distribute to the needy has nearly tripled—growing from 150 million lbs. in 1999 to over 430 million lbs. of fresh produce in 2009. Accompanying this are community garden projects and leasing arrangements with local farmers to harvest their food products.

Finally, our national office closely monitors product recalls and issues recall alerts to food banks immediately when there is a USDA or industry food product recall. In every case, food banks and affiliated agencies go through their inventory to remove and destroy recalled products. This may sound simple, but it involves a significant investment of time and effort when the food product, like the recent peanut recall, is contained in a variety of end products like cereals, nutrition bars and other foods.

Commodity Distribution Programs

TEFAP: As you know, the 2008 Farm bill contained a substantial increase in mandatory funding to buy commodities for TEFAP. This increase helped offset erosion in the value of funding for commodities that had been frozen at the same level for the previous 5 years. More significantly, it offset much of the loss in bonus commodity donations that had been falling dramatically for several years and which emergency feeding agencies had come to rely upon.

The funding increase in the new Farm law was a blessing and helped emergency feeding agencies replenish their declining stocks, at least for awhile. By FY 2009, however, as economic conditions continued to worsen and more and more people were seeking food assistance, emergency feeding agencies again were facing food shortages. The Congress included \$100 million in additional funding for TEFAP commodity purchases for FY 2009–2010 in the American Recovery and Reinvestment Act (ARRA). This has enabled many emergency feeding agencies to continue serving the growing numbers of people coming to them for help.

In 2010, economic conditions, although improving, are not expected to significantly alter the bleak unemployment figures, which continue to hover around 10% nationally and much higher in hard hit regions of the country. The additional commodities bought with the ARRA funding will run out early this April. Meanwhile, changes in the farm economy and a cap on the use of Section 32 funds for bonus commodity purchases are expected to substantially reduce bonus commodity donations to TEFAP. Bonus commodities provided for emergency feeding programs in FY 2010 are expected to be about \$181 million, less than half the FY 2009 level, and are projected to fall even lower in FY 2011.

There is no indication that the numbers of people coming to food banks for help (already at record levels) will abate while unemployment remains high, which most economists predict will be the case for some time to come. Many food banks and emergency feeding agencies already are struggling and well may be facing the prospect of empty or seriously depleted food stocks by the end of the year if no additional commodities are forthcoming.

tional commodities are forthcoming. Feeding America estimates that an additional \$250 million in commodity assistance is needed to cover the TEFAP commodity shortfall this year and to ensure that service can be maintained for the rest of this fiscal year. We recommend that the Congress approve this "emergency funding" as quickly as possible and hope that the House Agriculture Committee will support this proposal. **Infrastructure Grants:** The Administration budget request proposes to zero out the \$6 million in funding for TEFAP infrastructure grants that were authorized by the 2008 Farm bill and finally funded by FY 2010 agriculture appropriations. These grants, just recently announced by the Administration for FY 2010, are critically important to help food hanks with the costs of maintaining and improving their facili-

Infrastructure Grants: The Administration budget request proposes to zero out the \$6 million in funding for TEFAP infrastructure grants that were authorized by the 2008 Farm bill and finally funded by FY 2010 agriculture appropriations. These grants, just recently announced by the Administration for FY 2010, are critically important to help food banks with the costs of maintaining and improving their facilities and equipment and ensuring safe food storage and handling. Many of our food banks, particularly those located in rural areas are struggling to update their facilities and equipment. Efforts to increase the amount of fresh fruits and vegetables for distribution are hindered by outdated refrigeration and storage units. Moreover, the poor economy in many regions is handicapping efforts to raise sufficient private funding for capitol improvement projects. We hope that the Committee will support the continuation of funding for these projects when the House takes up FY 2011 agriculture appropriations legislation.

Commodity Supplemental Food Program (CSFP): More than $\frac{1}{3}$ of Feeding America food banks operate CSFPs in states approved for this program. We are pleased that your Committee has long-supported the CSFP, which is critically important to so many needy elderly and young mothers and children. The addition of new states to this program last year has opened the way for many more hungry people to receive the nourishment they need. It is our hope that caseloads in states with programs can be increased and that over time more states and localities will be able to offer CSFPs. The decline in bonus commodities available to this and other nutrition programs is worrisome, and we hope that this does not impede progress in reaching the many people, especially seniors, who require the nutritious supplemental food packages provided by the CSFP.

Innovative Programs for Children

Child Nutrition programs are the foundation upon which to build a nation where all of our children have access to the nutritious foods essential to help them learn and thrive and lead healthy and productive lives. It is critically important that comprehensive child nutrition reauthorization legislation be enacted this year, and that enough funding be provided to make this happen.

Too many low-income children in this country are unable to access child nutrition programs when they need them. For example, only 2.2 million children participate in the Summer Food Service Program, which is targeted to children living in lowincome areas. This compares to some 19 million low-income children receiving free and reduced price school lunches during the school year. Summer food and child care feeding programs are handicapped by excessive sponsor requirements, proscriptive eligibility rules and administrative and paperwork burdens that limit access to these programs and reduce cost efficiencies. At a time when state and local governments are struggling with budget cutbacks, these administrative barriers hinder sponsorship of Federal nutrition programs that could help millions of children without adding fiscal burdens to states and communities. Recognizing the many gaps in our child nutrition programs, our food banks are

Recognizing the many gaps in our child nutrition programs, our food banks are extensively engaged in promoting and feeding children through innovative child nutrition programs. Along with providing food to over 14 million children through our food pantries, shelters and soup kitchens, our food banks operate more than 1,600 Kids Cafés[®] serving more than 115,000 children each year. These after school programs are able to operate with support from the Child and Adult Care Food program and private donations. They are run in a wide variety of local settings like Boys and Girls clubs, churches, community centers, and schools. Kids Cafe[®] programs had their origin in Savannah, Georgia, in 1989 after two young brothers were found late one night in a housing project community kitchen looking for something to eat.

More recently, our food banks have taken on the issue of gaps in our child nutrition programs by initiating weekend feeding programs for low income children. These programs, commonly known as BackPack programs, operate in partnership with local schools and community agencies and provide child-friendly, non-perishable, nutritious foods for children to take home on the last day before a weekend or school holiday. BackPack programs originated in Little Rock, Arkansas after a school nurse contacted the local food bank to ask for help when she noticed that many children were coming to her on Mondays complaining of stomach aches and dizziness. There now are more than 140 Feeding America members and partner organizations operating 3,600 BackPack programs that serve more than 190,000 children.

The Administration FY 2011 proposes to increase funding for child nutrition programs by \$1 billion annually (or \$10 billion over 10 years) to make changes to these programs that will help achieve the President's goal of ending childhood hunger by 2015. Feeding America fully supports the President's ambitious and achievable goal and budget proposal.

Feeding America recommends that changes to child nutrition programs be accomplished this year to expand their quality and reach to all children, and that these changes fill the gaps in current services for low-income children. Our priorities call for (1) expanding the reach and quality of foods for hungry children in schools, child care, After school and summer sites; (2) providing start-up funding and outreach to increase the number of Summer Food Service programs in unserved and underserved areas; (3) funding innovative programs, like the BackPack Program, to help hungry children when they do not have access to nutrition programs, and (4) better coordinating programs and streamlining and simplifying rules that prevent or hinder the operation of child nutrition programs.

We hope that the Agriculture Committee of the House will support new funding to make the needed improvements to child nutrition programs so that all of our children can grow and learn and lead healthy and productive lives.

Concluding Thoughts

Food Banks and local feeding agencies often are the first to see the devastated faces of those who never imagined that they would be seeking help at a food pantry, shelter, or soup kitchen. The charitable sector has truly stepped up to try and serve the growing numbers of those in this nation who are hungry. Nonetheless, as we learned in the Great Depression and are reminded of in the current Great Recession, charity alone cannot meet the need. The government and charitable sector must work together and Federal nutrition

The government and charitable sector must work together and Federal nutrition programs must be the solid foundation upon which to finish the work of finally ending the scourge of hunger in this nation. No one in this country should have to wonder where their next meal will come from, or how they will afford to buy nutritious foods for their families.

Thank you so much for allowing me to present this testimony. I hope you will not hesitate to contact me or my colleagues in our Washington policy office if we can be of assistance in helping you and the President finally put an end to hunger among children and for all of those living in out great nation. I will be happy to answer any questions you may have.

The CHAIRMAN. Thank you very much.

Before we go on, I would just like to state that Rocco, in 2003–2004, had an NBC reality show, *The Restaurant*, and was a contestant on the seventh season of ABC's *Dancing with the Stars*. So some of us are very envious of that. My wife watches it every Monday night. I said maybe I should be out there dancing with the

stars then she would be watching me. Thank you very much. He also appeared as guest judge on Bravo's *Top Chef* and NBC's *Biggest Loser*. With that, Rocco.

Mr. DISPIRITO. Thanks for establishing my impressive credentials. Before I get started, I just want you to know that In-N-Out Burger is one of the only quick-serve restaurants that happens to use a couple of fresh ingredients. So don't feel too bad about your choices. They are actually pretty good.

Thank you for having me here today to share my thoughts about the challenge of food access for low-income Americans and food bank programs. I am a chef and author of several cookbooks; most recently, one directed at making healthy food choices. I am shocked and appalled by the number of people in this nation who are hungry and unable to secure the nourishing foods that most of us take for granted.

In 2008, over 49 million people were found by the Department of Agriculture to be food insecure, or hungry. That is an increase of 13 million, or two percent, above the 2007 figures. It represented 16.4 percent of the civilian population, and included 17 million children. These findings were before the huge spike in unemployment occurred in 2009, so God only knows what we are dealing with now.

Feeding America and food banks have been struggling with this alarming rise in hunger. I have seen it myself. I have been to the food banks in New York and I have met the lovely people who are their clients. They are actually running out of food now. There was a time when they didn't run out of food, and now they are.

Let me share a few facts from their national study, *Hunger in America*, 2010. The study looks at the numbers of people using food banks in 2009, but it is about much more than numbers; it puts a face on hunger in 2009 of the 37 million people that sought food assistance from Feeding America food banks. Children made up nearly 14 million, as we said earlier, of all food bank clients, a 50 percent increase since 2005. Among racial and ethnic groups, the greatest increase in terms of number of people was among adult Hispanic clients.

More than 11 million of the adults served by food banks were unemployed, 3.2 million of them for just less than a year; 41 percent of households reported that a member received SNAP benefits. Recipients reported a variety of reasons why they needed emergency food assistance. Among them were difficulty choosing between buying food and paying for utilities, heating, or medical bills. That is 6.7 million households. Having to choose between medicine or medical care and food, five million households; buying food or making the rent or mortgage payments, these are not choices any of us would like to make.

And the real people behind these numbers—I will identify them by first names only—Lisa and David and their two young kids needed food bank assistance when they lost their family business and couldn't get by on David's low-wage job. Candy and James had their home foreclosed on after Candy lost her job. Crystal, a college student, needs food from the pantry for herself and her brother to pay the rent and stay in school. Healthy eating is a challenge for all Americans, especially for the low-income people and families. Busy schedules too often make fast foods the easy menu choice, particularly when parents are not at home for meals. The location of a grocery store, as we talked about earlier, variety of and food prices can limit access to healthy foods.

Understanding nutrition and the right foods and how to prepare them is also a factor in poor diets. But the most serious problem for low-income families is that their limited income and resources prevent them from having access to the food they need. As the USDA experts have reported, many low-income people have diets that fall short of the recommended servings of fresh fruits, vegetables, whole grains, and low-fat dairy products.

Feeding America food banks are engaged in efforts to increase the amount of fresh fruits and vegetables. In 2009, network food banks distributed over 430 million pounds of donated fresh produce, nearly triple the level distributed in 1999. They are also developing nutrition and education programs that stress the importance of fresh produce, whole grains, dairy, and good health. I have actually participated in a couple of them. And I have to say that the clients were very eager to learn about cooking, preparation of nutritious foods. And we are very excited about it.

I think we should expand nutrition education and instruction as an essential way to help people access and consume the right foods. Feeding America food banks have developed innovative and creative programs across the country to help families learn how to make the best use of the foods they receive. They are also offering instruction on the importance of nutrition to health and how to use limited food dollars and SNAP benefits to achieve a balanced diet.

I have a lot more thoughts but I know we are running out of time. I just wanted to end with this. U.S. hunger costs America \$126 billion a year. According to some people, we can end this problem for \$33 billion a year. Hungry children learn less effectively. Hungry adults have more difficulty getting jobs and keeping them. Hunger causes diseases that cost tens of billions of dollars; 49 million Americans who are food insecure spent \$13 less a week on food than the non-hungry. That is the \$33 billion shortfall.

Thank you so much for allowing me to offer my thoughts today. I appreciate it.

[The prepared statement of Mr. DiSpirito follows:]

PREPARED STATEMENT OF ROCCO DISPIRITO, COOKBOOK AUTHOR AND CHEF, NEW YORK, NY

Introduction

Good morning, and thank you for inviting me to share my thoughts about the important topic of the hearing you are holding today. As you know, I am a chef and author of several cookbooks that offer recipes for health and flavorful eating. I am also a citizen of this country who is shocked by the number of people in this nation who are hungry and unable to secure the healthy and nourishing foods that so many of us take for granted.

I am a strong proponent of healthy foods and good nutrition, and I find it difficult to reconcile the fact of the alarming obesity rate in this country with the data showing that there are so many hungry people. But as we all know, obesity is about more than poor food consumption and there is more than just one villain in this story. Changing one's diet cannot take the place of exercising; nor can plunking down at a television, or computer or game terminal for hours on end. Moreover, I know that eating healthy requires challenges that many in this nation, rich and poor, find difficult to meet. For those who are without the means to achieve adequate amounts of food, the challenge may be nearly impossible. Vicki and her colleagues at Feeding America have helped me understand the problem of food access as it relates to those served by the network food banks. They also have outlined the special challenge this presents for low-income populations whose diets require greater amounts of fresh fruits, vegetables, whole grains, and low fat dairy that may be difficult to find or afford.

The findings of the recently released Study, *Hunger in America*, 2010 provides national and local date on those seeking help from Feeding America food banks and their local charitable feeding agencies. It helps to inform us about the causes for poor access to nutritious foods. The following are some of the findings of this study.

Hunger in America, 2010

The worsening economy and an unemployment rate hovering at ten percent nationally and higher in some areas brought a sudden and dramatic rise in the number of people seeking food assistance from the Feeding America food bank network. Many of those coming to food banks in recent months never imagined that they would be seeking food assistance at their local pantries and soup kitchens. In fact, many are first time users, or people who formerly volunteered at the local food pantries of food banks. Many hope that their emergency situation will be temporary, and for some this is true but, many others will continue to need help for themselves and their loved ones as they struggle with chronic illness or disabilities, falling wages, fixed incomes, and/or inadequate social security and other benefits. The homeless continue to need help from shelters, soup kitchens and food banks. Their number is growing to include a whole new class of people who have been caught in the downward spiral of housing foreclosures, lost jobs, high mortgages and rent, and heavy debt loads.

The Feeding America study, completed this year (*Hunger in America*, 2010) confirms the unprecedented growth in demand for help from food banks and their agencies. This study found that in 2009 food banks and their local affiliates were serving some 37 million people, an increase of 46% over the study findings for 2005 (*Hunger in America*, 2006). Children made up 13.9 million of food bank clients, a fifty percent increase above the number of children served in 2005.

Among racial and ethnic groups, the greatest population group increase—66%— was among Hispanics, with numbers rising from 1.8 million in 2005 to 3 million in 2009.

Over 11 million of those served by food banks in 2009 were unemployed—with 3.2 million of them unemployed for less than 1 year, and less than half (41%) of household members reported that someone in the household received SNAP benefits.

When queried about the reason for needing food assistance:

- 6.7 million households reported difficulty choosing between buying food and paying for utilities or heating bills;
- 5 million households reported having to choose between medicine or medical care;
- 5.7 million households reported the choice between buying food and making rent or mortgage payments;
- 4.3 million households reported at least one member in poor health;
- 3.5 million reported not having health insurance for a family member; and
- 6.7 million reported having unpaid medical or hospital bills.

Unlike a lot of other hunger studies, the Feeding America Hunger study is about much more than numbers. It puts a face on hunger, and it is a face that many of us can recognize.

Many of those needing help from food pantries are young families, like Lisa and David and their two children. They lost the family business and couldn't make ends meet even after David found a low-paying job. They needed the local food pantry in the Boston area to supplement their SNAP benefits until David got a promotion and wage increase.

Candy and James, a middle aged couple, started going to St Paul's Place in Maryland about 10 months ago after Candy lost her job and they had to leave their home because of foreclosure.

Mary, a senior citizen from Wyoming is diabetic and has spinal arthritis. Despite this, she cuts her own wood to save on utilities. Mary's Social Security doesn't cover her medical, household and food expenses. She needs the Salvation Army food pantry food box to stretch her grocery budget so she can get the food she needs to stay healthy. Crystal, a college student in Arkansas studying to be a nurse needs food provisions from the local food pantry for herself and her brother so she can pay the rent and stay in school.

Katherine, a working mother with two children needs help from the local food pantry in Oklahoma where she gets food and clothing to help her cover heavy medical expenses for her two children, both of whom suffer with serious medical conditions.

Daniel is 5 years old and the youngest of a family of eight. He and his family came to the local church pantry in Colorado in 2008 because it offered a safe place to play and have a meal. Daniel's father is recently unemployed and his mother is putting herself through school by working at a discount store.

Robin and Russ of Iowa and their four children lost everything when their home was washed away in the Midwest floods of 2008. The emergency shelter set up by a nearby school helped them with a place to stay and they received food and emergency food stamps to help get them through.

Leanna is a grandmother and volunteer. She relies on the food bank for those times when her disability check and SNAP benefits can't cover monthly expenses.

Zoey, a young mother of four and her husband lost their rental home after hurricane Gustav. They live out of a motel room and turn to a local soup kitchen for warm meals and bags of food.

Ginger, a single mother of four in Idaho needed help from the Women and Children Only shelter after her abusive husband left her and her children with no car and \$10.77. She is starting her own business in the evenings and works during the day at the local Department of Education.

Edward, has a chronic illness and is raising four children. His modest disability pay and food stamps are not enough to feed the family and he receives groceries from the local food pantry run through the San Antonio Food bank.

Angelina is 88 years old and the sole caregiver for her husband of 67 years who has leukemia and diabetes and needs medications and a special diet that is nearly impossible to afford. When their fixed incomes can't cover the mortgage, insurance and utilities, Angelina gets help from St. Theresa's Food Pantry in Rhode Island.

Lavern, a divorced mother raising six children, lost her construction job and relies on Reaching Out Community Services Food Pantry in New York to supplement her monthly social security and SNAP benefits and meet high rent and utility bills.

Steve and Judy, a retired couple, rely on Logan Food Pantry's monthly food distribution to make ends meet when their social security and disability checks don't cover their high medical bills.

The tragedies behind these stories often find hope in the food pantries, shelters, and soup kitchens across the country. And, I am very humbled to be able to speak on behalf of the Feeding America network and the millions of those that they serve.

Food Access and Healthy Eating

As a chef and long time proponent of healthy living, I am a strong advocate of helping people to maintain balanced and nutritious diets and to consume meals that are both healthy and appealing. For many young families and working parents it is hard to find the time for shopping and food preparation. Competing school, work, and other activities and schedules often make fast foods the easiest menu choice. This does not have to be so if families have the wherewithal to buy enough food, understand its nutritional value and long term health benefits and know how to prepare and cook meals. This is a big IF for low-income families. The challenges for them are much greater. They have limited resources to pay for housing, utility and medical and other necessities, which often win out in competition against food spending.

Moreover, for many low income households, the location of a grocery store can be a challenge along with the often limited variety of fresh foods available for sale and the higher food prices in neighborhoods that only have small grocery and convenience stores. Many low wage earning families are working night and weekend shifts, or several jobs that limit the time they have to spend on buying and preparing meals. Finally, too many people lack knowledge and access to information about the practical aspects of achieving a healthy diet. Too often, people are told what not to eat, but less often what they should eat, what foods to buy, and how to prepare them. **Nutrition Education:** Expanding nutrition education and instruction is an important way to help people access and consume "the right foods." Feeding America food banks are developing innovative and creative programs throughout the country to help families learn how to make the best use of the food they receive, the importance of nutrition to health, and how to use limited food dollars and SNAP benefits to achieve a balanced diet.

The Food Bank of Delaware employs two Registered Dieticians with SNAP Nutrition Education funds. A Calcium Banking module teaches children and adolescents the benefits of including calcium rich foods in their diets. Children are given deposit tickets for "bone banks" that reflect the number of servings of dairy foods a child consume each week. A favorite of mine is The "Kids In the Kitchen" lesson, which gives children chef hats and teaches them how to prepare their own smoothies and fruit and yogurt parfaits. Children also learn how to follow a recipe and measure ingredients.

As part of its SNAP outreach work, Food Finders Food Bank in Lafayette, Indiana has developed a partnership with Purdue University, which provides for a 3 week community nutrition rotation by students who work and learn about barriers to SNAP participation and increase awareness of the importance of nutrition. The program incorporates recipes for foods distributed by food pantries. In Texas, the Tarrant Area Food Bank's SNAP outreach staff partners with state

In Texas, the Tarrant Area Food Bank's SNAP outreach staff partners with state Health and Human Service Commission to conduct SNAP outreach and develop and distribute nutrition education materials to help SNAP recipients understand the value of healthy eating.

As public awareness of the link between diet and health has grown along with the disturbing increase in obesity, growing numbers of food banks are engaging dieticians and nutritionists to help clients with their diets. Kids Cafés[®] provide nutrition education for children in afterschool care, BackPacks contain instructional material on nutrition and proper food handling, and programs provide healthy diet instructions for those with medically related dietary needs. Increasingly local community feeding agencies offer recipes and cooking classes.

These and many other food bank programs are ensuring that in addition to receiving food packages, the people they serve receive information and instruction about how to stretch their food dollars, understand the importance of good nutrition, the amounts of specific foods they should consume for a balanced diet, and recipes for healthy eating.

Income, Access, and Affordability: The recent USDA-ERS, report discussed at this hearing found that 11.1 million low income people were living in low-income areas located more than 1 mile from a supermarket, or so-called Food Deserts. In rural and small town areas the report found that the most defining access problem was lack of transportation infrastructure to get to grocery stores.

While location and access to grocery stores is an issue, the ERS report suggests that it is less of a problem than lack of money. Their report found that while 6% of all U.S. households reported they did not have food they wanted or needed because of access problems—more than half reported that this was because they lacked money for food.

Although food prices in this country are among the lowest in the world, the variation in food prices among foods and even for the same food can vary according to the location. In general, supermarkets and large grocery store food prices are lower than those of small grocery and convenience stores. But even among supermarkets, food prices can vary substantially, as reported by the ERS.

Food Costs Vary Across the United States (Source: AMBER WAVES, Nov. 2008, Can Low Income Americans Afford a Healthy Diet?)

City/State	Half Gallon whole milk	Head, Iceberg Lettuce	29 oz. can of peaches
Highest Lowest	(Boston) \$2.51 (Pittsburgh) \$1.45	(D.CVA) \$1.79 (Jackson, MS) .90	(San Fran., CA) \$2.47 (San Antonio, TX) \$1.39
Los Angeles-Long Beach, CA	\$2.34	\$1.28	2.24
San Antonio, TX	1.88	.99	1.39
Pittsburgh, PA	1.45	1.19	1.85
Jackson, MS	1.98	.90	1.57
Ames, IA	1.71	.92	1.55
Cincinnati, OH	1.90	1.02	1.69
Atlanta, GA	1.75	1.24	1.63
Springfield, MO	1.86	.97	1.93

Filling the Gaps

Numerous Federal nutrition programs have gaps that food banks and emergency agencies try to fill. In some cases benefits are not adequate; in others administrative requirements and excessive application and eligibility requirements are barriers.

I am not an expert on the SNAP program, but it seems clear that benefits for many are not adequate for achieving a healthy and nutritious diet. The examples from the Hunger Study that I cited about why people needed food bank help illustrate the point that many SNAP benefits do not last through a month.

I cannot help wondering if the basis for determining the benefit levels and food plan for achieving a healthy diet is not part of the problem. I understand that SNAP benefits for those with some income are reduced on the basis of data from 50 years ago that showed American households spent 30 percent of their income on food. The current comparable figure is closer to 10%. If this is the case and if benefits need to be reduced to reflect American food spending habits, it seems to me that the more current lower percentage reduction makes more sense. Speaking of children, I also am troubled by the fact that so many poor children

Speaking of children, I also am troubled by the fact that so many poor children are unable to access child nutrition programs during periods when they are out of school, or after school. Vicki's testimony refers to the millions of low-income children who do not have access to Summer Food Service Programs when schools are not in session. Many poor children also go without nutritious foods on weekends and holidays when schools are not in session. Fewer children have access to the nutritious foods provided by child care food programs because sponsors are finding it difficult to operate programs under the unnecessarily complex and confusing administrative requirements. Removing these barriers seems to me an easy solution to this problem.

Finally, I applaud all efforts to improve people's understanding of the relationship between good nutrition and good health. Nutrition education is extremely important and I hope that funding will continue for programs to help people understand the value of a balanced and nutritious diet and how to achieve it.

Concluding Thoughts

I believe that all Americans should be able to eat healthy and enjoy their food. That is why I have written about "Real Life Recipes," and authored the book, "Now Eat This! 150 of America's Favorite Comfort Foods, All Under 350 calories."

For me, cooking is a passion and food is the exciting ingredient. For many, however, cooking is a chore and obtaining enough food is a challenge. This is especially true for those without the resources and time to spend finding the right foods to improve their diets. While we may not be able to address all of the reasons why people do not have access to healthy foods, we do know that a major reason is insufficient income and resources. Given this, it seems reasonable to improve nutrition programs so that those with limited means can enjoy the same benefits of healthy and nutritious foods as you and I. More knowledge about food and its safe handling and preparation is needed as well, especially among those with limited incomes who cannot afford to make bad choices.

Our nutrition programs can do more to educate children and their parents on the value of nutrition and how to achieve a healthy diet on a limited budget. The SNAP program can do more to make sure that benefits truly reflect modern consumption and food expenditure patterns and give people the information they need to make healthy choices. Finally, our food banks need Federal support to obtain the nutri-

tious foods essential to a balanced diet, and the capacity to safely store and distribute them.

I hope that the Committee will continue to work to examine Federal nutrition programs with an eye toward improving the ability of families to obtain the nutritious foods and the knowledge about a healthy diet that is essential to a healthy life.

Thank you again, for inviting me to testify before your Subcommittee on this important issue. I will be glad to answer any questions you might have.

The CHAIRMAN. Next, I would like to call on Mr. Fortenberry to introduce our next witness.

Mr. FORTENBERRY. Thank you. I would like to welcome Mr. Randy Wattermann from West Point, Nebraska. Randy represents the Nebraska Food Cooperative. He is the founding Chairman and the current Treasurer of the Cooperative. He is a former Board Member and Treasurer of the Nebraska Sustainable Agriculture Society. Randy also is the owner of a family business in West Point, and his previous professional experience is in the field of banking, and is currently in software technology.

Randy Wattermann holds a bachelor's of science with high honors in agriculture and managerial economics from the University of California-Davis. Again, he is from West Point, where I was privileged to attend a big meeting last Saturday. I would like to welcome you, and we look forward to your testimony.

STATEMENT OF RANDALL WATTERMANN, FOUNDING CHAIRMAN, MEMBER, BOARD OF DIRECTORS, AND TREASURER, NEBRASKA FOOD COOPERATIVE, WEST POINT, NE

Mr. WATERMANN. Thank you, Congressman Fortenberry, and thank you, Chairman Baca, for inviting us. And following along the In-N-Out theme, when I go back to visit my family in California, I always make sure to visit an In-N-Out Burger at least once. It is good.

is good. Thank you for the introduction. I do live about an hour and half north of Omaha, in rural northeast Nebraska, on a farm. So I have a different perspective, having come from California. We have been there now 12 years. So I have both the urban and the rural perspective.

Early in 2005, at the Nebraska Sustainable Agriculture Society's Annual Conference, a group of Nebraskans, both farmers and consumers, listened to Robert Waldrop, President and Founder of the Oklahoma Food Cooperative, give an inspiring address regarding his local foods vision and the experiences of the startup of his coop 3 years earlier in Oklahoma. So from that beginning, our group in Nebraska was motivated to meet over the next year as a steering committee to flesh out a vision for a Nebraska version of the Oklahoma Food Cooperative. Then a year later in 2006, we were incorporated. In July of 2006, the first delivery cycle was initiated and Nebraska's online, year-round farmers market and local food distribution service was launched.

From that initial order cycle that contained ten orders totaling \$326, the NFC has continued to grow to where our recently completed cycle in April was 169 orders, sales over \$10,000. Over the past year, we crossed the \$100,000 mark, and Oklahoma is over the million dollar mark. So it does work to bring together buyers and sellers of local foods. So what exactly is our purpose at the Nebraska Food Cooperative? Our mission statement says: To foster a local food community, promote a culture of stewardship by cultivating farmer-consumer relationships, promoting the enjoyment of healthful food, increasing food security through diversity, and enhancing overall rural sustainability.

So our goal is to create the market, bringing together buyers and sellers in a way that would otherwise not take place. In a rural state such as Nebraska, where the populace is spread out over large distances, it becomes problematic for direct-market producers to be physically present at farmers markets each week in the population centers of Omaha and Lincoln. You can't be both places at once. Instead, what we have done is provide a method to list items available for sale online and provide a method for transporting and distributing those products when they are purchased. In doing this, we are kind of reestablishing the semblance of the food distribution infrastructure that existed decades ago—local products consumed locally.

So how does the co-op work? Once a month during the winter season, and then on a biweekly basis during the growing season, the order window opens to start off the delivery cycle. During the 1 week order window, shoppers peruse items online by each producer. And not only are there item descriptions and there are pictures available, but a questionnaire that is completed by each producer that has items for sale so that they can transparently provide the information to the shoppers. They can make informed decisions as to which producers, which items for sale best match with their individual standards, priorities, needs, budgets, *et cetera*.

Once that 1 week order window comes to a close, the producers then create a printout of all the items that have been ordered from them. They print the routing labels from the software online, and those goods are prepared for safe and appropriate transport on delivery day to one of NFC's hubs. Once those are checked in at the hubs, volunteers—this is a volunteer organization—sort them by storage type—frozen, dry, refrigerated—and get them ready for the customers to pick up.

Increasing food security through diversity is one of the goals that we have. Increasing the number of local food sources, increasing and regaining the knowledge of how to feed ourselves locally enhances food security.

While the vast majority of food consumed by Nebraskans, I understand, is, unfortunately, imported from other areas of the country, having these alternate supply sources and delivery methods protects against a future food security emergency in the country or region. It also increases the viability of the rural Nebraska economy, especially as fuel and transportation costs continue to rise.

As the NFC's producers grow in quantity and in the stability of our supply, the Cooperative looks for collaborating with local institutional buyers. Right now we are more retail-oriented, but we are talking to institutional buyers and we have a few customers. But we are wanting to increase to places like school districts, nursing homes, restaurants, similar entities, to increase their awareness of and willingness to consider purchase of locally produced meats, vegetables, fruits, and other value-added products. Congressman Fortenberry mentioned the Good, Fresh, Local Sustainable Food Project by the UNL, University of Nebraska-Lincoln's dining services. That is a great example of this. I can go into that later in questions.

In the urban areas of the state, we continue to look for opportunities to partner with organizations that reach out to some of the underserved populations. One example is Community CROPS in Lincoln, Nebraska, which works to create urban garden plots for immigrants and other area residents, and then the Food Co-op acts as one outlet for those producers to be able to market some of the product they raise.

We also work with Together, Inc., of metropolitan Omaha to create local food baskets which are donated to families in need.

In Nebraska, outdoor farmers markets are limited by weather to the May to October time frame. With our model we build on that, making many local goods available year-round. As the supply increases of produce, which is seasonal, we hope to have availability of other frozen and canned products throughout the winter months. Some of our near- and mid-term challenges evolve around transitioning from an all-volunteer organization to one with a sustainable business model. Towards that end, we are looking at hiring a part-time general manager to oversee the growth and organization of the Cooperative, once sufficient funding can be identified. I think I will just leave it at that.

In spite of the challenges we have, we know people want to know more about our food. They want to know where it is coming from, who is growing it. And the added benefit of supporting a local economy by keeping a larger share of money circulating closer to home is another motivating factor, as is increasing our food security.

Thank you very much.

[The prepared statement of Mr. Waterman follows:]

PREPARED STATEMENT OF RANDALL WATTERMANN, FOUNDING CHAIRMAN, MEMBER, BOARD OF DIRECTORS, AND TREASURER, NEBRASKA FOOD COOPERATIVE, WEST POINT, NE

Nebraska Food Cooperative—Past, Present, Future

Early in 2005, at the Nebraska Sustainable Agriculture Society's annual conference, a group of Nebraskans—farmers and consumers alike—listened to Robert Waldrop, President and founder of the Oklahoma Food Cooperative (*www.oklahomafood.coop*), give an inspiring address regarding his local foods vision, and the experiences of the start-up of the Co-op 3 years earlier. (Mark Hutchison, through the University of Nebraska, Lincoln's Food Processing Center had conducted some surveys and had arranged for Mr. Waldrop to come and speak. Mark also continued to provide invaluable insight and guidance during the Co-op's formative years.)

From that beginning, the group was motivated to meet over the next year as a steering committee to flesh out a vision for a Nebraska version of the Oklahoma Food Cooperative. A year later, the Nebraska Food Cooperative (NFC) was incorporated. In July of 2006, the first delivery cycle was initiated, and Nebraska's online, year-round farmers' market and local food distribution service was launched!

From the initial order cycle that contained ten orders totaling \$326, the NFC has continued to grow to the point where the recently completed delivery cycle on April 8, 2010, totaled 169 orders and sales were over \$10,700. So what, exactly, is the NFC's purpose? Our mission statement is "To foster a

So what, exactly, is the NFC's purpose? Our mission statement is "To foster a local food community and promote a culture of stewardship by cultivating farmerconsumer relationships, promoting the enjoyment of healthful food, increasing food security through diversity, and enhancing overall rural sustainability."

Our goal is to create a market—bringing together buyers and sellers in a way that would otherwise not take place. In a rural state such as Nebraska, where the popu-

lace is often spread out over large distances, it becomes problematic for direct-market producers to be physically present at farmer's markets each week in both Omaha and Lincoln, where the main population centers are located. Instead, by providing both a method to list items available for sale and a method for transporting and distributing those products that are purchased, the NFC has created a vehicle for re-establishing a semblance of the food distribution infrastructure that existed decades ago—local products consumed locally!

So how does the co-op work? Once a month during the winter and on a biweekly basis during the growing season, an "order window" opens to start off a "delivery cycle." During the 1 week order window, shoppers peruse online the items offered for sale by each producer. Not only are item descriptions and pictures available, but a questionnaire completed by the producer describes their operations, their philosophies, and their practices. NFC's goal is to transparently provide information to each shopper, so they can make informed decisions as to which producers, and which items for sale, best match with their individual standards, priorities, needs, budget, *etc.*

Once the 1 week order window comes to a close, the producers then create a printout of all the items ordered from them, and they print routing labels for each customer's goods. These goods are then prepared for safe and appropriate transport on delivery day to one of NFC's hubs, or are picked up by NFC's driver if they are located on or near the existing delivery circuit.

Once the goods are checked in, volunteers sort them by storage type (frozen, refrigerated, dry, etc.), by pick-up locations, and by customer name. The orders are grouped and delivered to the various pick-up points in Omaha, Lincoln, and surrounding area, and in the evening the customers who placed orders stop by to pick up and pay for their orders (payment via Paypal is also an option). Within several days after the delivery cycle is completed, NFC mails payments to all of the producers for their sales that month. Both shoppers and producers pay a 10% invoice fee which funds NFC's operations and overhead. While we are incorporated as a forprofit cooperative, at this time our goal is to cover expenses plus any capital needs, rather than looking to make a profit at the Co-op level.

Membership in NFC is available in several options:

(1.) Voting (must be Nebraska resident): \$100.00 for one share of common stock—plus \$20.00 annual fee thereafter.

(2.) Non-voting: \$40.00 annual non-voting member fee.

(3.) Visitor: No membership fee but \$6.00 visitor fee will be added to each order.

Members can be producers or shoppers both!

As described in the mission statement, increasing food security through diversity is one of NFC's goals. Increasing the number of local food sources, and increasing/ regaining the knowledge of how to feed ourselves locally enhances food security. While the vast majority of food consumed by Nebraskans is, unfortunately, imported from other areas of the country, having alternate supply sources and delivery methods protects against a future food security emergency in the country or region. It also increases the viability of the rural Nebraska economy, especially as fuel and transportation costs continue to rise over the long term, which causes foods trucked in from distant areas of the country to increase in cost.

As NFC's producers grow in quantity and in the stability of their supply, the cooperative looks forward to collaborating with local institutional buyers such as school districts, nursing homes, restaurants, and other similar entities to increase their awareness of and willingness to consider purchase of locally produced meats, vegetables, fruits, and other value-added products. In Nebraska, the University of Nebraska, Lincoln's Dining Services has shown great leadership in this area with the development of its extremely popular "Good, Fresh, Local" Sustainable Food Project. Periodically throughout the school year, themed events are planned in the dining commons that focus on Nebraska producers and the local products they provide. This increases awareness among the college students of the importance of supporting local farms and eating fresh, healthy foods. In the urban areas of the state, NFC continues to look for opportunities to partner

In the urban areas of the state, NFC continues to look for opportunities to partner with organizations that reach out to under-served populations. One example is Community CROPS, located in Lincoln, Nebraska, which works to create urban garden plots for immigrants and other area residents. NFC serves as one outlet for those producers to be able to market the products they raise. We've also worked with Together, Inc. of Metropolitan Omaha to create local foods baskets, which are donated to families in need.

In Nebraska, outdoor farmers markets are limited by weather to the May–October timeframe. With NFC's model, many local goods are available year-round, and as supply increases, we look forward to the availability of frozen and/or canned produce being available during the winter months.

Some of our near- and mid-term challenges revolve around transitioning from an all-volunteer organization to one with a sustainable business model. Towards that end, we are looking at hiring a part-time general manager to oversee the growth and organization of the cooperative, once sufficient funding can be identified. Currently, NFC operates with two "hub" locations, one in Lincoln, and one in Omaha, where producers drop off their orders for further routing and distribution

Currently, NFC operates with two "hub" locations, one in Lincoln, and one in Omaha, where producers drop off their orders for further routing and distribution to final pick-up points. We have outgrown the capacity of the two locations, and are contemplating the lease/purchase of warehouse space in a rural community between Lincoln and Omaha, thereby consolidating the distribution into one larger center, while at the same time providing additional benefit to the local rural economy. Looking forward, we hope to be able to expand our service westward, with much interest currently being shown in the Kearney area.

We continue to collaborate with other organizations that are supportive of reestablishing a local foods production and distribution infrastructure. Challenges include raising sufficient equity capital to fund planned growth, identifying and paying for the human resources needed to execute NFC's plans and vision, and managing the continuing challenges that producers face in complying with the increasing regulatory burdens associated with the production of food of all kinds—even on a small scale.

In spite of these challenges, demand for local, fresh, and healthful products continues to outpace supply. People want to *know more* about where their food comes from, and who is growing it. The added benefit of supporting the local economy by keeping a larger share of money circulating closer to home is another motivating factor, as is increasing our food security. The future for NFC looks bright, and we look forward to enjoying the fruits of

The future for NFC looks bright, and we look forward to enjoying the fruits of our success!

The CHAIRMAN. Thank you very much, Mr. Wattermann, for your testimony this morning.

Next, I would like to call on the gentlewoman from Pennsylvania to introduce our next witness. Mrs. Dahlkemper.

Mrs. DAHLKEMPER. Thank you, Mr. Chairman, Ranking Member, Members of the Subcommittee, I am pleased to introduce our next witness, a fellow Pennsylvanian, Mr. Jeffrey Brown.

Mr. Brown is a fourth generation grocer. He is President and CEO of Brown's Super Stores, Inc., a growing ten store supermarket chain trading under the ShopRite banner. His company employs 2,100 associates and has been recognized as one of the best places to work by the *Philadelphia Business Journal* and the *Philadelphia Inquirer*, to only name a few.

Mr. Brown is an officer and Member of the Board of Directors at the Philadelphia Youth Network, a Member of the Board of Directors for the Pennsylvania Food Merchants, and on the Boards of both the New Jersey Food Council and the Philadelphia Urban League. Furthermore, he was recently recognized by the National Grocers Association as the 2010 recipient of the Thomas K. Zaucha Entrepreneurial Excellence Award, a top national honor in the grocer industry. He has been cited for his expertise in solving the food desert crisis challenging so many low-income communities today.

Last, he is the founder and Chairman of Uplift Solutions, a 501(c)(3) public nonprofit formed to assist governments, nonprofits, and food businesses in resolving food desert and related challenges.

It is with pleasure that I introduce Mr. Jeffrey Brown.

The CHAIRMAN. Jeffrey, before you speak, I just wanted to also state, I know Bobby Rush is here, and he complimented what you are doing. I met with Secretary Vilsack this morning at 8 a.m., and he spoke very highly of you and your program. He says that is a model that should be used everywhere throughout the United States. So I was quite pleased to hear him, and I told him you are going to be a witness here this morning.

STATEMENT OF JEFFREY N. BROWN, FOUNDER, PRESIDENT, AND CEO, BROWN'S SUPER STORES, INC., WESTVILLE, NJ

Mr. BROWN. Thanks for the feedback. What you are going to find out is we are very dedicated to being right with all of you, solving this food desert crisis.

With that being said, thank you, Mr. Chairman, and distinguished Members of the Subcommittee, thank you for inviting me to testify today.

Just a little background on the problem. Millions of low-income Americans have inadequate access to fresh food at competitive prices. We have already spoke that that is pretty much how you define a food desert. This situation has resulted in their obesity and the epidemic of their obesity being much greater than our country's current problem of obesity.

I want to emphasize that this food desert situation is real. I have seen it firsthand and have spent a good part of my career trying to solve this problem in Philadelphia. The Pennsylvania Fresh Food Financing Initiative is a program that has widely been recognized as the most effective effort in ensuring that all communities have access to healthy food at competitive prices. The food desert problem is being solved in Pennsylvania, and I really do believe that this is a solvable problem for our whole country.

The solution: I think a National Healthy Food Financing Initiative would not only solve the food desert problem, but would be a tremendous boost to our economy, as all of these new supermarkets would employ people, would employ people to construct them and service them and work the stores, certainly something we could use today. The program would shift food consumption towards fresh food, things like fruits and vegetables, chicken and fish. And those foods would be grown by our own American farmers.

So this is an idea that has so many paybacks for our country. We already spend so much public money on trying to address these very problems, but without allowing so many of the low-income consumers a way to use what we have given them effectively, a lot of what we have spent doesn't really solve the problem. I am concerned if we don't fix this problem there will be a continued deterioration of our health as a country, and the financial burden of that on our healthcare system will certainly affect every American.

When I talk about how to solve this problem, I think you need to start out with the social problems, besides food access, that exist in many low-income communities. They are a burden on the citizens, but they are also a burden on the businesses that try to serve the citizens. Such problems as violence, drugs, excess high school dropout rates, all add to the challenge of correcting this problem.

One of the complications of operating a successful supermarket in this type of community is it usually requires customization that many supermarket operators are currently unfamiliar with and not organized to accommodate. The result of these constraints is that inner city communities and lower-income rural communities, as well, frequently pay the most for food. It is disturbing. The smaller stores offer it at very high prices, as I said. In my own personal experience being involved in the communities of the people I have served, I have learned a great deal about how to operate successfully in the very communities that many other supermarkets have been unable to operate, and, at the same time, contribute to positive social change.

A close relationship and understanding of each community is critical for our mutual success. Just to give you a little background, our employees are all unionized. Our pay scale is the same in urban lower-income communities as suburban communities. We provide health benefits and other benefits after a vesting period. We hire the majority of all of our staff locally and have developed innovations in hiring and training to include employees that were formally incarcerated, which is another challenge in a lower-income community. We employ about 250 people in each of our urban stores.

Since the creation of the Fresh Food Financing Initiative, the four stores we have added have added 1,000 jobs to the City of Philadelphia, directly related to having this program. Some of these workers are working for the first time in their life, and, as sad as it may seem, sometimes they are working for the first time in their family's recent history.

I am now committed to helping solve this problem of food deserts nationally. I have had hundreds of people from across the country, including Secretaries of Agriculture and Commerce visit my stores. Investors, state and city officials, and community people from across the country have also been our guests.

In order to further our efforts, last year we launched a public 501(c)(3) nonprofit called Uplift Solutions. Uplift Solutions provides technical advice and training to governments, nonprofits, food retailers, and manufacturers interested in getting on board to help us solve this problem. It also is developing new innovations to solve some of the social issues that make operating a grocery store so difficult in these communities.

We are currently developing an in-store health clinic that would offer services to help our clients make better eating choices and get them authorized for the public assistance programs that they are qualified for but often never sign up for, like SNAP. I believe once they are signed up, their chance of having a more productive diet would increase quite a bit.

As far as our recommendations, I recommend a bipartisan approval of the Healthy Food Financing Initiative and related 2011 budget. On a technical matter, I suggest modifying new market tax credits, which is part of the Healthy Food Financing, not to be subject to alternative minimum tax, similar to how historical tax credits work, because it makes a very big difference in the amount of actual resources you have to solve the problem.

I also suggest that the Department of Labor provide some flexible training dollars to help the new supermarkets that get created from the Healthy Food Financing to train their new employees so they are equipped to keep those jobs and be successful.

Thank you for your time and interest in solving our country's food desert challenge. I look forward to answering your questions; especially some of the things that were questioned even in the earlier panel, I might be able to shed some additional light in. I also want to encourage you to call upon me if I can serve in any other way to help solve this problem and even to come visit me in Philadelphia and let me show you what we do. Thank you.

[The prepared statement of Mr. Brown follows:]

PREPARED STATEMENT OF JEFFREY N. BROWN, FOUNDER, PRESIDENT, AND CEO, BROWN'S SUPER STORES, INC., WESTVILLE, NJ

Mr. Chairman and Distinguished Members of the Subcommittee, thank you for inviting me to testify. My name is Jeffrey Brown. I am President and CEO of Brown's Super Stores, Inc, and a proud fourth generation grocer who brings years of experience in the food business to our discussion today. My family operates ten supermarkets trading under the ShopRite banner in the Philadelphia region. We employ 2,100 people with locations in both suburban and inner city Philadelphia. In addition to my role as CEO, I am on the Board of Directors of Wakefern Food Corporation, the wholesale, marketing, and distribution arm for ShopRite supermarkets. I have partnered and worked with the Pennsylvania Fresh Food Financing Initiative (FFFI), which has been recognized widely as the most effective effort at ensuring that all communities have access to quality food. Moreover, I bring an entrepreneurs view of how to solve the issue of 'food deserts,' which I define as neighborhoods with inadequate access to fresh food at competitive prices.

Inadequate access to fresh food at competitive prices. I want to emphasize three things. First, the problem of food deserts is real. Second, it is a problem that is being solved in Philadelphia and can be solved throughout the United States. And finally, the solution to this problem will have positive impacts on our economy and more importantly, on the health of our citizens. In my testimony today I will: explain some of the historical constraints to success in cities; speak about how the Pennsylvania program has worked; explain why a cupity food merket is a generating algoment in no building the generating fabric out generating the solution of the solution of the solution of the solution.

In my testimony today I will: explain some of the historical constraints to success in cities; speak about how the Pennsylvania program has worked; explain why a quality food market is an essential element in re-building the social fabric and economy of many inner city and rural communities; and ask for your support of a national Healthy Food Financing Initiative, based on the Pennsylvania model.

Barriers to Urban Markets

There are a variety of reasons that supermarkets left many urban areas. As families migrated to the suburbs, retailers followed to pursue attractive modern retail developments. Available land in suburbs allows for larger stores at competitive rents, free parking for customers and a well-educated workforce. Conversely, real estate and insurance costs in urban areas are higher and training an unprepared workforce is more difficult. Social problems we read about everyday such as violence, drugs, and high school dropout rates, also effect a grocer's ability to operate a successful business. There is also a belief by some businesses and lenders that urban investments will fail, as many have in the past. Finally, there has often been a lack of information about the opportunities in the city, including familiarity with new, immigrant populations; an understanding of how much income there really is that goes to food consumption and, an appreciation for the possibilities of adapting suburban store models and inventory to this new context.

The result of these constraints is that inner city communities are frequently served only by small stores unable to offer the variety of fresh foods that most of us take for granted. They offer food and other goods at very high prices, resulting in the poor paying the most and being restricted to a diet primarily made of processed foods that tend to be higher in calories. As a result, some of our country's poorest citizens living in these food deserts, have become sick and obese placing additional costs on the healthcare system, and making it even more difficult to rise above the challenges of poverty. This is not a sustainable social situation. The goal of the FFFI was to understand this problem and work with retailers throughout the state—urban and rural—to solve the problem in a more socially optimal way.

The Pennsylvania Fresh Food Financing Initiative

I along with other supermarket operators met with state Representative Dwight Evans from the Pennsylvania Assembly and Jeremy Nowak, from The Reinvestment Fund (TRF), to brainstorm about how this challenge might be overcome. We eventually mapped out the FFFI and I became the first to test the program opening a store in Southwest Philadelphia. This location had failed by a previous food retailer due to gun violence in front of the store and other community challenges. Today this store is successful, and I have become a true believer in this program and its potential to improve our country.

FFFI is a collaboration of public, private, and civic institutions created initially through the organizing efforts of The Food Trust. The result was a public-private partnership where the Commonwealth of Pennsylvania invested an initial \$30 million grant that was matched with \$90 million of private money raised by TRF. The match came from a variety of sources including banks, investments through Federal New Market Tax Credits, equity from the entrepreneurs, and even some philanthropic resources.

Since 2004, the year of the FFFI launch, the program has approved financing for 81 stores ranging from full-service 70,000 square foot supermarkets to 900 square foot shops; and from traditional entrepreneurs to co-ops and farmer's markets. This has resulted in projects whose total development costs exceed \$150 million, adding 1.5 million square feet of new development, creating approximately 4,800 full and part-time jobs, and improving the fresh food access to more than 400,000 people. There are four things that account for the success of the program:

(1) **Smart Subsidy:** Based on the analysis of development cost obstacles, particularly in the inner city, FFFI provides both flexible debt financing and small subsidy grants. The grants were used to write down certain costs that entrepreneurs could not reasonably incur. These costs included such things as workforce training and land assembly.

(2) Flexible Financing: FFFI provides a range of financing products from leasehold improvements and equipment loans to acquisition and construction financing for both short term and permanent uses. The financing is shaped around the need of the entrepreneur and the requirements of other financing entities involved in the project. While access to capital was less of an issue 5 years ago when the program began, it has become a more significant issue today, even for established, multi-store operators.

(3) **Market Expertise:** The manager of the program—TRF—is one of the nation's top community investment institutions. They are an experienced business and real estate finance underwriter. They approached FFFI as any good investor would and consequently they have built a very strong track record of business sustainability. This strong record can only be built by identifying and supporting strong supermarket operators that can adapt their business models to underserved communities.

(4) **Impact Transparency:** The program has been careful to count what they finance in terms of job creation, commercial real estate value, and total development costs. It has undertaken studies on the impact of supermarkets on local housing values, cost issues related to urban stores, and the location of employees that receive retail jobs at the stores. My stores have participated fully in these studies in order to help highlight our success and educate others from the many challenges we all face.

The Pennsylvania FFFI has provided financing for four of my stores. They have enabled me to provide high quality goods and services to communities that were not available prior to my entry.

A National Healthy Food Financing Initiative

The Pennsylvania FFFI has been cited as an innovative model by the U.S. Centers for Disease Control and Prevention, the National Conference of State Legislatures, Harvard's Kennedy School of Government, and the National Governors Association. All of us in Pennsylvania are proud that the First Lady has pointed to our efforts in Pennsylvania as a model that she wants to replicate, as part of her antiobesity effort. Access to fresh food is clearly one important part of ensuring a healthier country, particularly at a time when we are worried about the cost of healthcare and providing quality food alternatives is essential.

A national program can build on the demonstrated successes of Pennsylvania. Today there are a variety of states—Louisiana, Illinois, New Jersey, and New York to name a few—that are already initiating similar programs. A national effort could support those local efforts with flexible capital. I am pleased that President Obama has called for \$400 million in the Fiscal Year 2011 budget—spread across Treasury, USDA and HHS—to support local efforts. This effort has broad support by civic groups, economic development agencies, and the retail trade associations. TRF recently developed a model that determined approximately 23 million Ameri-

TRF recently developed a model that determined approximately 23 million Americans are living in communities without access to high quality fresh food, the majority of which live in low-income communities. TRF officials tell me that based on the metrics from the Pennsylvania experience, each billion dollar Federal commitment, if matched by an equal private sector investment, has the potential to result in the following:

 Improved access to healthy food for more than 15.3 million people living in low/ moderate income Census tracts.

- The creation or improvement of more than 2,100 stores.
- The creation or rehabilitation of nearly 50 million square feet of retail space.
 The creation and retention of 29,000 full-time and 119,000 part-time jobs.

The Brown's Super Stores Experience: Building Community Assets

As I became more involved in the life of the communities I serve, I have learned a great deal about how we can operate a successful business and also create positive community change through listening, showing respect, and offering high quality products and service. A close relationship with each community is critical to our mutual success.

If you were to visit my store on 52nd and Jefferson Streets in West Philadelphia you would think that you were in a high-end market. Our stores have extensive varieties of fresh produce, meats, and fish, and we sell our products at the same price and quality standards as our suburban locations. The workers are well trained and courteous, with union jobs offering the same pay scale as our suburban stores and providing benefits after a short vesting period. We hire the majority of our staff locally and have developed innovations in hiring and training to include employees that were formerly incarcerated. Our company also makes an effort to purchase merchandise from local suppliers, including assisting many local minority entrepreneurs in starting businesses to supply us with the unique merchandise our customers prefer. We employ about 230 people in our West Philadelphia store, many working for the first time and some working for the first time in their family's recent history. The entry of our store, which is on the site of a former industrial brownfield, enabled the development of a Lowes Home Improvement store on the same site, along with dozens of other retail stores. This store is a profitable and has improved the lives of tens of thousands of its customers, employees and the surrounding community.

UpLift Solutions: A New Resource to Help Overcome Food Desert Challenges Nationally

I am now committed to helping solve the problem of food deserts nationally. I have had hundreds of people from across the country, including the Secretaries of Agriculture and Commerce, visit my stores. Investors, philanthropists, city officials, and community people from across the country have also been my guest at one or more of my urban locations.

In order to further our efforts, last year I launched a public 501(c)(3) nonprofit organization called UpLift Solutions (*www.upliftsolutions.org*). Uplift provides technical advice to governments, nonprofits, and food retailers/manufacturers interested in helping to solve this problem. It is also developing new innovations that can solve related social problems often found in low income communities. These include programs to help improve safety and well being of community members. We are currently developing an in-store health clinic offering behavioral modification services and social services to help our clients make better decisions to improve their health and get the support of government sponsored benefits (like SNAP).

Recommendations to the United States Congress

The team that invented and successfully implemented the FFFI in Pennsylvania, including TRF and myself, worked with the White House staff to develop the national program championed by The First Lady Michelle Obama and incorporated in the President's 2011 proposed budget. We recommend the following:

- Bipartisan approval of the Healthy Food Financing Initiative and related 2011 budget. This involves the 2011 budgets for the Treasury, USDA and HHS.
- Modify New Market Tax Credits so they are not subject to alternative minimum tax, similar to how historic tax credits currently function for income tax purposes. This change will result in NMTC becoming more valuable.
- Modify the Labor budget to allow for some flexible training dollars to fund startup training for new supermarket employees in low income communities, created by the healthy food financing initiative. These employees require significantly more training to get them to desired standards.
- Create a budget in either USDA or HHS for flexible social venture funding for innovative projects that have the potential to increase our progress in solving food desert, related unhealthy eating behavior or the lack of access to healthcare, delivered thought expanded supermarkets servicing low income communities. Our in-store clinic concept is a good example of the kind of project that could improve the health of low income Americans very effectively.

Thank you for your time and interest in solving our countries food desert challenge. I look forward to answering your questions and I invite you to come visit us in Philadelphia and see our operation first hand.

The CHAIRMAN. Thank you, Mr. Brown.

Next, we have Diana Endicott, Farm to Market Coordinator, Good Natured Family FarmsTM, Bronson, Kansas.

STATEMENT OF DIANA ENDICOTT, PRESIDENT AND FARM TO MARKET COORDINATOR, GOOD NATURED FAMILY FARMSTM; MARKETING MANAGER AND CO-OWNER, RAINBOW ORGANIC FARMS, D.B.A. GNFF, BRONSON, KS

Ms. ENDICOTT. Thank you, Chairman Baca and Members of the Committee, for providing me the opportunity to be here today. My name is Diane Endicott and I am the President and Farm to Market Coordinator for Good Natured Family FarmsTM. My husband Gary and I own and operate a 400 acre organic farm in Bronson, Kansas, located about 80 miles south of Kansas City. Our farm consists of beef cattle, hay and grain crops, tomato greenhouses, and we also own and operate a USDA federally inspected meat processing plant.

I am here today to share with you how Good Natured Family FarmsTM has grown to include more than 150 local family farms, selling \$4 million of local farm fresh foods to Ball's Food Store's 29 supermarkets located in Kansas City. In addition, how we are creating our dream of making local farm fresh foods making them available and affordable to vulnerable communities and children at risk.

Good Natured Family FarmsTM is an alliance of 150 family farms. The farms range in size from truck gardens and five head of cattle to thousand acre orchards and 200 head cattle ranchers. Some of the farms are third- and fourth-generation family farms, and others are young beginning farmers.

Good Natured Family FarmsTM is also the brand for the alliance. The 150 family farms grow and produce a full line of local fruits and vegetables, all natural meats, farmhouse cheeses, farm fresh milk, local honey, free range eggs, tofu, jams and jellies, and other farm foods. Our market for these farm fresh foods is a Kansas City, locally owned and operated, third generation, 29 store supermarket chain called Ball's Food Stores. The creation of the Good Natured Family FarmsTM brand and our sound partnership with Ball's Food Stores has established an effective model to bring locally grown foods from small family farms to the mainstream supermarket shelf.

The farm to supermarket shelf is a long way. From production, grading, processing, packaging, aggregation, distribution, to marketing, pricing, quality, and food safety, the challenges are many and too numerous to cover here. I will focus on two areas that help to ensure our success. First, Good Natured Family Farms[™] alliance is, first and foremost, about the farmers. We keep as much of the food dollar at the farm as possible. Therefore, each of the farms own and operate the facility where their locally grown food is processed and packaged, or they use a small-sized local processing facility. For example, the fruits and vegetables are washed, graded, and packed on the farm.

The dairy farmers own and operate their milk and cheese processing plants. And our farm processes all of the beef for the all-natural beef co-op. In addition, the farmers maintain ownership of the product from the farm to delivery at the supermarket warehouse.

Second, and equally important, Ball's Food Stores owns and operates a warehouse in Kansas City. This allows the farmers to deliver their products to one central location, where Ball's central warehouse distributes the local foods to the 29 supermarkets. Good Natured Family FarmsTM provides the brand identity, coordination, quality standards, food safety, pricing, labeling and other logistical needs. Good Natured Family FarmsTM alliance had sales of \$4 million in 2009. In addition to keeping 150 family farms viable, we helped generate 30 jobs in small-scale rural processing plants.

Now we are ready to use this model and provide the same local farm fresh foods to Kansas City's vulnerable communities. To achieve our goal, the Kellogg Foundation and the USDA's Small Business Innovative Research is funding our project called Good Food + Good Business = Food Futures. Good food is defined as green, healthy, fair and affordable. The grants help us conduct outreach, education, and logistics to effectively reach vulnerable communicates.

The project has three methods to make locally grown food available and affordable to vulnerable communities in Kansas City's inner urban core. First, we are partnering with inner city neighborhood churches to create the Good Food Box. This is a box of farm fresh foods delivered to church members on a weekly basis. Payment can be made using nutrition assistance programs such as SNAP and WIC.

Second, we are teaming up with inner city businesses, such as Hallmark Cards, to expand our workplace wellness Community Supported Agriculture Program.

Third, we are expanding our Farm to School Program, called BistroKids, at Head Start Center's Title I schools.

The process to make the food affordable is what we call the art of the supply chain: Own the warehouse and distribution and shorten the supply chain. By going directly to the consumer, distribution ad retail margins can be adjusted, allowing us to reach vulnerable communities.

The main hurdle Good Natured is working on to overcome is the purchase of a refrigerated warehouse and distribution center in Kansas City's inner city Green Impact Zone. Ball's central warehouse is at full capacity. Therefore, in order to grow, Good Natured Family Farms[™] will need to have an additional warehouse and distribution facility. The dilemma is getting financing for the bricks and mortar. To help us with this, we are in the process of applying for a USDA Rural Development Business and Industry Loan and seeking other loans and/or grant funds for startup operational costs.

The warehouse and distribution bottleneck is being experienced by many local farms and marketing groups across the country. A for-profit producer and employee-owned and operated local food warehouse and distribution center in Kansas City's urban Green Zone will, number one, provide jobs in the urban core; two, allow the farmers to keep more of their food dollar; three, provide a bridge to connect the urban and rural communities; and, most importantly, will start the transformation of a food system to one that supports the health and well-being of our most vulnerable communities and children at risk.

I want to thank you for allowing me to share our story with you. I hope it will shed some light on the need of local food warehouses and distribution centers to make local farm fresh foods available, accessible, and affordable to our most vulnerable communities.

We are also attaching a document for the record, including a graphic describing Good Natured Family Farms[™] Local Supply Network from production to consumption; a description of our vulnerable community program's outreach; and information about a vision for a warehouse for local food distribution in the Kansas City Green Impact Zone. Thank you.

[The prepared statement of Ms. Endicott follows:]

PREPARED STATEMENT OF DIANA ENDICOTT, PRESIDENT AND FARM TO MARKET COORDINATOR, GOOD NATURED FAMILY FARMSTM; MARKETING MANAGER AND CO-OWNER, RAINBOW ORGANIC FARMS, D.B.A. GNFF, BRONSON, KS

Good morning, Chairman and Members of the Committee. Thank you for addressing such a timely and important topic of the access and availability of healthy food to our families most in need. My name is Diana Endicott; I am the President and farm to market coordinator of Good Natured Family FarmsTM (GNFF). My husband, Gary, and I own and operate a 400 acre organic farm in Bronson Kansas, located 80 miles south of Kansas City. Our farm consists of beef cattle, hay and grain crops, tomato greenhouses, and we also own and operate a USDA federally inspected meat processing plant. I am here today to share with you how Good Natured Family FarmsTM has grown to include more than 150 local family farms selling \$4 million of local farm fresh foods to Balls Food Stores 29 supermarkets located in Kansas City. In addition, how we are creating our dream of making our local farm fresh foods available and affordable to vulnerable communities and children at risk. Good Natured Family FarmsTM is an alliance of over 150 local family farms. An

Good Natured Family FarmsTM is an alliance of over 150 local family farms. An alliance is an interconnected network of family farms to pursue common goals and to meet critical business needs while remaining independent family farms. Under the Good Natured Family FarmsTM alliance umbrella there are various business forms, including; cooperatives, Amish and Mennonite communities, individual family farms, family farms who have pooled their resources together to form corporations or LLCs, and even nonprofits. The 150 family farms range in size from truck gardens and five head of beef to 1,000 acre orchards and 200 head cattle ranches. Some of the farms are third and fourth generation family farms and others are young beginning farmers.

Good Natured Family Farms[™] is also the brand for the alliance. The 150 family farms grow or produce a full line of fruits and vegetables, all-natural meats, farmhouse cheeses, farm fresh milk, local honey, free range eggs, tofu, jams and jellies, and other farm fresh foods. Our market for these farm fresh foods is a Kansas City locally owned and operated third generation 29 store supermarket chain 'Balls Food Stores'. The creation of the Good Natured Family Farms[™] brand and our sound partnership with Balls Food Stores has established an effective model to bring locally grown food from small family farms to mainstream supermarket shelves.

From the farm to the supermarket shelf is a long way. From production, grading, processing, packaging, aggregation, distribution, to marketing, pricing, quality, and food safety; the challenges are many and too numerous to cover at this time. I will focus on the two areas that have help ensure our success. First, Good Natured Family FarmsTM alliance is first and foremost about the farmers. We keep as much of the food dollar at the farm as possible. Therefore, each of the farms owns the facility where their locally grown food is processed and packaged or uses a small-size local processing facility. For example, the fruits and vegetables are washed, graded and packed on the farm, the dairy farmers own and operate their milk and cheese processing plants, and our farm processes all of the beef for the beef co-op. In addition, the farmers maintain ownership of the product to the point of delivery to the supermarket warehouse. Second, and equally as important, Balls Food Stores owns and operates a warehouse in Kansas City. This allows the farmers to deliver their prod-

ucts to one central location where Balls Central Warehouse distributes the local foods to their 29 supermarkets. Good Natured Family FarmsTM provides the brand identity, coordination, quality standards, food safety, pricing, labeling, and other logistical needs.

The Good Natured Family Farms[™] alliance had sales of \$4 million in 2009. In addition to helping keep 150 family farms viable, we helped generate approximately 30 jobs in small scale rural community processing plants.

Now, we are ready to use this model and provide the same local farm fresh foods to Kansas City's vulnerable communities. The W.K. Kellogg Foundation is funding our project called Good Food + Good Business = Good Futures; good food is defined as green, healthy, fair, and affordable.

To achieve our goal to make good food accessible to the vulnerable community and children at risk the W.K. Kellogg Foundation and USDA SBIR is funding our project called Good Food + Good Business = Good Futures; good food is defined as green, healthy, fair, and affordable. The project has three methods to make locally grown food available and affordable to vulnerable communities in Kansas City's inner urban core.

First, we are starting a program to identify opportunities to match local family farm producers and consumers living in those food deserts. We are partnering with Ivanhoe Neighborhood Council and creating the Good Food Box—a program that will empower the faith-based community to work with Good Natured Family FarmsTM and distribute Good Food to their congregation.

Second, we are teaming-up with Hallmark Cards to expand our Community Supported Agriculture, and their employees joining the CSA may choose to sponsor Good Food Boxes for a limited number of families living in vulnerable communities.

Third, we are expanding our Farm to School program at Plaza de Niños where BistroKids' talented staff worked with Guadalupe Center and Family Conservancy to bring Good Food to Head Start children.

The main hurdle Good Natured Family Farms[™] alliance is working to overcome is the purchase of a refrigerated warehouse and distribution center in Kansas City's Green Impact Zone. Balls Central Warehouse is at full capacity; therefore, in order to grow, Good Natured Family Farms[™] will need to have an additional warehouse and distribution facility. We are in the process of applying for the USDA Rural Development Business and Industry Loan and seeking other loan and/or grant funds for startup operational cost.

To commercialize and make the Good Natured Family Farms[™] program economically sustainable, we have been blessed to have the support of several USDA grants and loans. Our main support is the often overlooked Small Business Innovative Research program (SBIR). In addition, we have utilized USDA SARE, USDA VAPG, and Kansas Agriculture Product Development loan program.

However, the dilemma is these USDA programs and the Kellogg Foundation does not provide grants or loans for bricks and mortar. This warehouse and distribution bottleneck is being experienced by many local farm and marketing groups across the country. A producer and employee owned and operated local food warehouse and distribution center in Kansas City's urban green zone will provide jobs in the urban core, allow the farmers to keep more of their food dollar, provide a bridge to connect the urban and rural communities, and most importantly start the transformation of a food system to one that supports the health and wellbeing of our most vulnerable communities and children at risk.

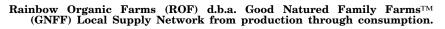
I want to thank you for allowing me to share our story with you. I hope it will shed some light on the need of local food warehouse and distribution centers to make local farm fresh foods available, accessible, and affordable to our most vulnerable families.

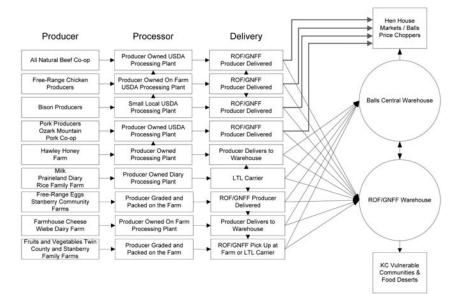
Please visit *http://ngfn.org/resources/research-1/innovative-models/* and see what the Wallace Center has published about our work. Also, additional information can be found at (*http://goodnatured.net*) and (*www.henhouse.com*).

We are also attaching a document for the records including a graphic describing GNFF local supply network from production to consumption; a description of our vulnerable communities program; and information about our vision for a warehouse for local food distribution at the Kansas City Green Impact Zone.

Thank you!

ATTACHMENT





Good Natured Family Farms[™] Bringing Good Food to vulnerable communities in Kansas City metropolitan area

What's Good Food? We like the definition of the WK Kellogg Foundation which says that Good Food is "healthy, or food that promotes the physical, mental and spiritual well-being of individuals, families and communities; and is green when produced in a manner which maintains or improves the quality of land, water, air and other ecological factors; fair while minimizing the chance that anyone along the production line being exploited for its creation; and – of course, is affordable in a way that is priced so that people of all socioeconomic backgrounds are able to purchase it

and have access to it. Then, we add our own criteria which is fundamentally important, food that is local and fresh. Our partnership with Balls Foods with Buy Fresh Buy Local say it all, we bring BFBL Good Food to the consumers from a 200-mile radius from the Greater Kansas City.

GNFF is starting a program to identify opportunities to match local family farm producers and consumers living in those food deserts. We are partnering with Ivanhoe Neighborhood Council and creating the Good Food Box – a program that will empower the faith-based community to work with Good Natured Family FarmsTM and distribute Good Food to their congregation.



Hallmark Eco Team CSA Ambassadors prepare to hand out CSA bags.



Deputy USDA Secretary Merrigan visits with faith-based community while enjoying local food in the middle of the winter in Kansas City.

GNFF is also teaming-up with Hallmark Cards to expand our Community Supported Agriculture, and their employees joining the CSA may choose to sponsor Good Food Boxes for a limited number of families living in vulnerable communities.

GNFF and BistroKids are expanding the Farm to School program at Plaza de Niños where BistroKids' talented staff worked with

Guadalupe Center and Family Conservancy to bring Good Food to Head Start children.

Good Natured Family FarmsTM, while continuing providing Good Food for Balls Foods and for Hen House Markets CSA, is also is also working with Sysco to bring Good Food to Kansas University food services. All of those combined-programs delivering Good Food to middle class and to vulnerable communities make the financial sustainability of this model to carry on, and be sought by others across the nation.



Just visit http://ngfn.org/resources/research-1/innovative-models/ and see what to others are talking about GNFF work.

For further contact about the WKKF Good Food + Good Business = Good Futures (Good Food for KC) project, please contact:

Diana Endicott, President and Founder of GNFF: <u>allnatural@ckt.net</u> Otavio Silva, Executive Director of The Food Conservancy: <u>sustainability2020@kc.rr.com</u>



Chef K prepares a healthy meal at Plaza de Niños as part of GNFF Farm to School program.

66



Good Natured Family Farms is a regional aggregator and distributor of local fresh produce and food products to the Greater Kansas City area. Good Natured Family Farms is an alliance of approximately 200 independently owned local family farms. Our mission is to support a healthy farming and food supply system directly from the rural community to the urban community opening many opportunities in between.



Buy Fresh Buy Local

Good Earth . Good Food . Good Life GNFF vulnerable communities programs are also supported by Hen House Markets, USDA SBIR and WKK Foundation Good Natured Family Farms is focused on supporting vulnerable families, children and communities.

67

The CHAIRMAN. Thank you very much, Ms. Endicott.

At this time we will begin with a series of questions. I will recognize myself. Each of the other Members will have 5 minutes to ask a question as well. I will begin with Ms. Krieger.

Thank you for your thoughtful testimony. It is critical to have an example of healthy dieting and cooking in the mainstream media. And we are all thankful for the lessons you have shown and have taught millions of viewers not only from the nutritional standpoint, but for teaching us how to cook. Some of us have never cooked before. By watching your show, at least one can learn to cook. I think our significant others would appreciate it if we did do more of that cooking in a healthy way.

With that, I would like to begin by asking the first question. It seems that you have a very comprehensive show on the Food Network. How do you suggest that we educate and pass on information on nutrition you and the network offer to people without access to cable network or Internet?

Ms. KRIEGER. Well, Internet is available at libraries, of course, so that is always a possibility.

But, I mean, so offering this programming essentially is what you are asking—

The CHAIRMAN. Yes, to—

Ms. KRIEGER.—but for people who don't have access.

The CHAIRMAN. Access to a cable network. You have a great program, but a lot of them don't have access to it. So what do you suggest that we do?

Ms. KRIEGER. Right. I mean, not being an executive of the Food Network, I can't really answer how they would distribute their programming in those venues.

But we can, sort of, take those inspiring cooking lessons and bring them to schools as part of the nutrition education and get families involved on that level, having parents and kids cooking together and using cooking as an education tool, as a hands-on experiential education tool. So, yes, we are doing that with the farms in the schools. And Food Network has these Good Food Gardens at Share our Strength.

But even bringing this hands-on passion, it is about—and one of the things that television does very well is inspire passion, inspire people to act. I think we can bring that passion into this handson activity to help inspire children to eat healthfully. I know my daughter, when I cook with her, she wants to try it. She wants to have her dad try it. She is excited about it.

I think harnessing that passion for cooking that people have from the media or wherever they have seen and bringing that into the schools where it is really—and other programs, other community programs.

The CHAIRMAN. Okay. Ellie, you mentioned your daughter. Given your hands-on experience at your daughter's school, what, if any, obstacles have you encountered that we as a legislative body can address?

Ms. KRIEGER. Yes, thank you for asking that.

I was really amazed to be at this ground level and see what is it taking to make changes in her school. I think really I am shocked at the facility, the lack of facilities to prepare healthy food. I actually offered to donate a steamer to the school, and there is just no room for it because the kitchen is the size of a walk-in closet.

And I feel like we really need to look at that whole chain when we are asking these people—now they are not going to open up, maybe, a bag of something and just put it on a tray and bake it. They are going to be asked to peel vegetables or do other food prep techniques. There may be different storage facilities. I think those sort of facilities are very important to consider. Some schools have more than others. She is at an older school; the building is very old. But I think that is one thing.

And then, also having professional expertise to help implement some of these nutrition policies and education, so that we can say, all right, we want however many hours of nutrition education in the schools or we would like people to start their wellness policies, but who is doing this? And so, in her school, we are fortunate enough—I am a nutrition professional and cook, and, actually, another one of the other parents who is on the nutrition committee, the wellness committee, is a professor of nutrition at Columbia. And we are putting our hours into this. What do schools do that don't have that kind of human resource?

And so I feel that, even if there were district-wide nutrition wellness professionals, cooks, some combination of health professional, to help facilitate these changes in the school, because you have to have the people to do it.

The CHAIRMAN. Okay. Thank you.

And I know that we all have a lot of questions, and I am going to ask my next question for Rocco.

In your experience as a chef, working around people and food, what are the best ways for us as a society to get people, especially those in underserved communities, to better invest in what type of food they eat and how these foods are prepared?

Mr. DISPIRITO. I think, as Ellie mentioned, schools are a great opportunity. I have participated in a number of in-school programs, from Days of Taste to other ones where you get chefs like me—and there are a lot of us who are willing to go in and teach people how to cook. It is what we do for a living. It is what we love to see. It makes us happy to watch other people cook and eat. I think there are thousands of chefs just like me and just like Ellie who would be willing to go in and teach kids how to cook.

I work with Dr. Oz. You mentioned him earlier. He has a HealthCorps, and he hosts *Teen Iron Chef*, and it is one of the most exciting things that has happened to these kids. And I see tremendous eagerness on the part of children to learn how to cook, a willingness to experiment with vegetables and fruits. And, with some ingenuity, chefs like us can actually disguise some of the fruits and vegetables and turn them into interesting foods for these kids.

I think that they can bring those lessons home to their parents. I think a lot of times the kids that we are talking about have parents that are working, both parents that are working or a singleparent home. And those parents need to relearn the culture of cooking for your family. And it can come from, sort of, the bottom up, the children to the parents, instead of the other way around. You know, cooking for another human being is one of the nicest gestures you can make. There are very few things that you can do that show how much you care and love and want to nurture someone than to feed them something. You know, a baby is born, the first thing that happens is it gets fed. And to think that in such a wonderful country that there are people who don't have that opportunity every single day is really heartbreaking.

I know part of it is the education on cooking and what is nutritious and how do you prepare nutritious meals. But the other half of that is getting the food to the people who need it. So I am a big fan of volunteering, and I know all of my peers are, as well, and volunteer consistently.

I think what we would love to see is a bigger program that we can all be a part of that maybe is government-sponsored and run, starts with the Federal Government, a national kind of program that we can all be a part of. Because there are a lot of local, small, individual things going on, and there might be an economy of scale and a benefit to the country as a whole if there were a larger organization that we could all give our time to.

Does that answer your question?

The CHAIRMAN. Yes. Thank you very much.

And I know that I have run out of time, so at this time I will call on Mr. Fortenberry of Nebraska.

Mr. FORTENBERRY. Great. Thank you, Mr. Chairman.

Thank you all for your very insightful testimony and your passion for this very important topic. If I don't get to ask you all a question, I am grateful for your input here. It has been a very good hearing thus far.

Ms. Krieger, let me also direct a first comment to you, as well. I also have a 7 year old daughter. I think you would be pretty proud to know that, as I was scrambling to get out of the house yesterday to catch a flight fairly early, at 7 a.m., she looked up at me and—she was in the kitchen, and she said, "Daddy, can I cook an egg for you?" So that is not to credit anything to me; that is my wife's good management of the household.

But, nonetheless, families are busy. I think there is a growing awareness, I know there is a growing awareness and a desire among many people to eat more healthfully and embrace a more holistic lifestyle, particularly in terms of nutrition. But there is always a constraint on time, and then there is the drive-through, and good intentions sometimes get diverted.

Make a little bit of this practical, if you can, some just easy, practical formatting changes for lifestyle distinctions any of you might want to add. If any of you have any other comments in that regard, it might be helpful.

Ms. KRIEGER. I think we make it more complicated than it needs to be. Simple food is delicious food. So if you take a piece of salmon and you put it on the grill and it takes 4 minutes to cook and you sprinkle some lemon juice on it, that is a healthy start to your dinner, with a side of broccoli that has been steamed and maybe sprinkled——

Mr. FORTENBERRY. Does it have to be broccoli?

Ms. KRIEGER. No. Well, what is your favorite vegetable? Whatever it is. Fresh green beans or cherry tomatoes cut up, drizzled with a little bit of olive oil.

The CHAIRMAN. Remember, Rocco said disguise it.

Ms. KRIEGER. And, actually, I sometimes sneak vegetables in, but I think we don't give our children enough credit. One nutrition education plan that I have organized is—and I actually had the fortune to bring to the front lawn at Michelle Obama's Healthy Kids fair was, "Eat the rainbow every day." So if we don't tell our kids, "Eat your vegetables" or "You might not like them, but eat them because they are good for you," if we take this approach of exploring food texture, taste, some you are going to like, some you not, your tastes might change. Eat the rainbow every day, and take this passionate approach to it—that translates to them. I have seen that firsthand. So there is that.

But, one of the things I do is give pantry lists, for example. Keep this in your pantry; then when you are in a pinch, you can create a healthy meal in 10 minutes with these items. Say, some whole grain pasta and some frozen shrimp and a can of low-sodium tomatoes. You can make a wonderful meal. So it doesn't have to be complicated.

And breaking it down, absolutely. And that is what these classes, theoretically, should really be doing. And, actually, I neglected to mention a program that I think is a wonderful program, Operation Frontline[®]. The Food Network is now partnering with Share Our Strength. And this is exactly what they are doing. They are doing programs in the community centers, in schools, with families, children and parents, and they are bringing this passion for cooking, teaching these skills with affordable, readily available foods. And then what they are doing is, ultimately, the data is really showing an increase in consumption of fruits and vegetables, an increase in cooking at home. I think these programs can make a really big difference. I think we have a good, kind of, start with this Operation Frontline[®].

Mr. FORTENBERRY. Excellent. I think your pointing out that only two percent of the children have a healthy, balanced diet in spite of all of our efforts is a very important finding from the hearing.

Let me turn quickly to Randy Wattermann.

Again, Randy, thank you for being here. You talked about the growth of the Nebraska Food Cooperative. But growth, in terms of trajectory of sales, do you have some ideas of what we are looking at here? And then how do you advertise or make consumers, as well as producers, aware of the potential linkages that can occur there?

Mr. WATTERMANN. Sure. The Oklahoma model was about 3 years ahead of us, and so we looked to them for our trajectory. So we are at \$100,000 now, and they are at about a million now. So we hope to continue on our trajectory, probably at a little bit slower pace because we are all-volunteer, even the board. You know, we don't have somebody that is being able to put their full time to it. We have looked into grants and things. And one of the more difficult things is to actually find a live person to run something. So instead, we have to do the piecemeal approach, which is fine. I mean, we are growing, we are happy with it. But that is where our trajectory is going.

As far as getting the word out, we measure every single registration that comes in as to how are people hearing, how are people signing up, how are people registering to become a member. And online searches is the number one thing. I mean, there are people looking for "local food, Nebraska" and we come up. I mean, we are not even at the point where we are trying to be proactive in our search engine optimization or anything like that. We are just out there, and they are finding us.

But then the standard things are articles in the local newspaper, just continuing to network with people in different organizations in Omaha and Lincoln to let everybody know that we are out there.

Mr. FORTENBERRY. Great. Okay. Thank you.

Quickly, Ms. Endicott, you gave a fascinating overview of this new form of cooperative that you have developed with the family farm network, the Good Natured Family FarmsTM.

You talked about the barrier in terms of a stocking facility or warehousing facility. But talk about the barriers for a smaller farm that might want to participate in such a new market concept, but in terms of setting up its own processing facility.

Ms. ENDICOTT. A couple of things is: Number one is being able to understand the rules and regulations that they need to meet. And then the second thing would be, after they understand the needs, the requirements, it would be access to capital, especially in the rural areas. Our banks are set up to not fund that type of agriculture. It is a greater risk type of agriculture, type of processing or value-added agriculture.

So I think that those would be the main two, would be understanding the rules and regulations and then access to capital, specifically with our banking system not being set up to fund those kinds of endeavors.

Mr. FORTENBERRY. Do you find a growing interest among smallas well as medium-sized farmers, even potentially large farms, in undertaking such a new value-added type of enterprise?

Ms. ENDICOTT. Across the board, yes. Even some of the larger, what we call mid-tier-range farms, when it gets into processing, access to capital is continuing to be—even with, like, the Business and Industry Loans with Rural Development, even the Federal, the guaranteed loans, there still is hesitance out there in the rural communities, especially in the Midwest. I mean, I am speaking for our area. We are not on the East Coast or the West Coast, but in the Midwest there is a reluctance because we are grain and cattle.

Mr. FORTENBERRY. Are you seeing the growing demand, though, as mitigating that risk potential?

Ms. ENDICOTT. We have the market. The market demand is there. I still continue to think that access to capital is going to continue to be a problem. I have not really seen any change in access to capital.

Mr. FORTENBERRY. All right. Thank you very much.

The CHAIRMAN. Thank you.

I know that if we have a chance to ask a second series of questions, we will go around and ask some additional questions. So, at this time, I would like to call on the gentlewoman from Pennsylvania, Mrs. Dahlkemper.

Mrs. DAHLKEMPER. Thank you, Mr. Chairman.

During the first panel, I made a comment that it is going to take all of us together to solve these eating, food, wellness issues. And we have the media, we have private enterprise, we have the agriculture industry, we have a nonprofit—well, I guess you are a forprofit in your cooperative; is that true, Mr. Wattermann?

Mr. WATTERMANN. Well, yes, we are operating like a nonprofit, but we are a—

Mrs. DAHLKEMPER. Well, anyway, it is going to take all of us to come up with the solutions to move ahead.

I do have a few questions.

Mr. Brown, I am from Pennsylvania. There may be a lot of people in this room who don't really understand Pennsylvania. I live in Erie. So I am farther away from Philadelphia than I am here in Washington to Erie. So it is quite a distance. I will come down, though, to visit your stores. I am looking forward to that.

The PA FFFI, the Fresh Food Financing Initiative. I know that it has been an issue—it has been around for, what, 3, 4—

Mr. BROWN. Seven years.

Mrs. DAHLKEMPER. Seven years, okay. Well, in my area of Pennsylvania, nobody is really participating. And it seems a lot of, kind of, north of I-80, I guess I will say, the northern tier of the state is not participating as much.

What do you see as the issues with that? And, as we would possibly look at going Federal with this type of program, what would be the issues?

Mr. BROWN. Well, it is interesting, there are obstacles to making this work, and some of the obstacles aren't related to the money itself. There could be assistance that people need, and that is one of the reasons we set our nonprofit up, is to go and look at what the obstacle goals are and see if we can't figure out a way to overcome them.

The other thing is coordination of everyone's effort is a big issue. The Federal program that is considered, resources are coming from three different agencies or departments of the government. And it is important we figure out how to coordinate everything in a central point, because, again, grocers are hesitant to do this. And if we can, let's say, for example, let the CDFI be the ultimate coordinator with the goals that we all have in mind, they could try to help.

And I know that, in Pennsylvania, Representatives and Senators have called me and said, "Hey, I am in an area that doesn't have any stores, has a big food desert. Can you come up and take a look?" And I have worked through Representative Evans and others to see if we can't figure something out. I know in Pittsburgh we were able to get a store in an area that didn't have one before.

So I think that the one key learning of this is, there are a lot of obstacles to do this and there aren't a lot of experts. But we are trying to build up the capacity to provide that implementation expertise that is needed and why your area didn't get what it was needed, in my view. Mrs. DAHLKEMPER. I appreciate that. And I appreciate you beginning that nonprofit and being there to assist others in this endeavor.

I want to talk to Ms. Escarra a bit about the Feeding America, Second Harvest Food Bank, which I used to know. And, as I know, you changed your name recently. Actually, Sister Christine Vladimiroff is from my hometown of Erie, and she was Executive Director there for a while. So I am very familiar with your organization. And we have a very large Second Harvest Food Bank in my hometown of Erie that serves quite a few different counties.

You talked about the Federal commodities, and let me just ask you about that. As you are looking forward, what changes would you like to see in terms of being able to provide healthier foods, increasing the food that you have available to you, in terms of Federal policy?

Ms. ESCARRA. So, I would begin by saying that we have worked really hard to have a good relationship with USDA, and have one and are thankful for that. As I mentioned, there is so much produce that currently is grown but not produced. And so we are working closely with them to get more fresh fruits and vegetables into our network. You know, close to 500 million pounds went in this past year. But there is a huge opportunity with regard to that.

I also mentioned that we saw a nice increase, clearly from the work that was done by Congress on the farm bill with USDA. But also I saw some increases right at \$250 million with the stimulus package. Our food banks will really need that assistance as that money is starting to come down, all of which provides a very, for the most part, shelf-stable, good, healthy food for families that need it.

Just a quick closing, kind of, comment to answer your question. I feel a real need to say this. You know, there are 17 million children, almost one in five children in this country today are living with food insecurity. That is a national crisis. It is one that I can tell you we take really seriously. And so, trying to find a way to not only provide healthy food to them but to provide access to them is a critical issue on our agenda.

The final thing I wanted to mention, in line with Ellie, is we are doing a piece of work with *Sesame Street* which really gets at the question that was brought up earlier around families that don't have access to TV. *Sesame Street* is doing a full media campaign in working with many of us that will get food out, targeted at children between 0 and 5, families that support them, caregivers, grandparents. But it goes across all media—print, out of home, radio, television.

And I can tell you, I have two daughters; my kids grew up with *Sesame Street*. It is a great brand. It really is going to get at food insecurity, nutrition, and obesity all at once, because they are all connected.

Mrs. DAHLKEMPER. Well, thank you very much. And thank you for mentioning those 17 million children. Because we can talk about percentages, and maybe it doesn't seem that high. But when you talk about 17 million children in a country as wealthy as we are, it just should never be.

But thank you very much to all the witnesses.

The CHAIRMAN. Thank you.

And, again, I want to thank all of the witnesses.

I have some additional questions I would like to ask. I would like to start with Mr. Brown.

You know, in Pennsylvania, the Fresh Fruit Financing Initiative seems to have found a concrete way to tackle the issue of food deserts. And I am pleased to hear this. This is a business model that the White House is interested in expanding on a national level.

Can you explain for the Subcommittee, what are the standards the FFFI currently has in place to ensure that businesses that apply for financing are committed to providing healthy, nutritional, fresh fruits?

Mr. BROWN. A big part of success is the design, and it is the simplicity of the design and the flexibility of it. What the state did was pick a CDFI they trusted that had good judgment and said, "Go find the operators that can be sustainable and successful but also deliver, not only fresh food, but the ones who will have the best impact on the local communities they serve without the existence of a lot of hard rules."

And so, the reinvestment fund, the CDFI in Pennsylvania went and looked for projects. And if they didn't believe the entrepreneur was going to be successful, or they didn't believe the entrepreneur was going to care about the community, they didn't choose that project. And when we look at a national initiative, I think the whole success is based on picking the right CDFI and having them understand the concept of what we want to get done.

The reason I think that is so important is because this is so complicated that flexibility is so important to doing this. And if the CDFI we picked did things we don't like, we should fire them and get someone new for the subsequent budget year, and hold them accountable to get us the results we want.

The CHAIRMAN. Okay. Thank you.

This is a question I have for all of you. Any of you that want to jump in and give an answer, I would appreciate that.

Unfortunately, most SNAP recipients have a limited amount of benefits, and we all know that, each month they must stretch in order to provide enough food for their households. So they buy a lot of starch food. This means that they have less healthy options. I know many of our SNAP recipients would love to buy fruits and vegetables if they could more easily afford them. And think of all the seniors out there who would want more fresh blueberries to help their memory.

So my question for you is a big one. What can we do to make nutritious food, especially fresh fruits and vegetables, more affordable?

Mr. BROWN. Why don't I start out?

One of the things I would like to see is, I would like to be able to work with the USDA a little closer and to experiment with some ideas. I think we could come up with a way to do that besides fresh fruit financing. But I have to say, fresh fruit financing, a national program, would certainly do that. Because what we sell fresh fruit and vegetables for, meats and poultry and whatnot, a lot cheaper than any other option they have ever had before, because we are a large grocery store that is built to do volume. We need to sustain our model, do enough volume. And we do that through having competitive prices.

So I really do think that, as these thousands of grocery stores that we are missing get built, you are going to see the prices of these commodities come way down.

The CHAIRMAN. And many of our seniors would like to participate, but they know very well they are limited based on their income—fixed income—and the dollars that are available. And they are trying to stretch, because, as it was stated earlier, some of them are having to pay their mortgage, their payments, their electricity bill, prescription drugs that they have. And all of a sudden we are trying to say, all right, seniors, we want you to maintain a healthy environment because, if not, then the cost of the burden falls back on us in the health area, because ultimately we end up paying, as taxpayers, one way or the other.

Would anybody else would like to address that?

Mr. BROWN. I would like to just add one more comment. I am sorry if I interrupted anyone.

There was a question about whether we saw a causal relationship between people's health and their obesity, if there are any studies or facts that existed. And I just wanted to let you know that PolicyLink issued a study of all the studies. And it ends up, over 20 years, there are 132 studies that documented a causal relationship between the lack of having a grocery store with competitive prices and people's weight.

And so I would like to submit for the record their work, which I think is probably the ultimate authority today on this issue. So we have this here for you guys.

The CHAIRMAN. Okay. Thank you.

[The document referred to is located on p. 88.]

Ms. ESCARRA. So, I have two points I would like to make.

The first is I would like to really answer the question from the back-end first, and that is that $\frac{2}{3}$ of the Americans that live in this country that qualify for SNAP—only $\frac{2}{3}$ are actually signed up. There is another third that we really need to do more to get them involved in benefits.

Because if you look at the benefits, they have certainly improved with the latest farm bill and the stimulus package, but still a family of four that is living right at 130 percent of the poverty line, which is what qualifies for SNAP, is really making about \$28,000 a year and they get benefits of about \$325 a month. So stretching those dollars is important.

I won't get into the economic return to the economy because it is one of the more positive stories. But the thing that I would offer is, we need to get more corporate involvement in helping us really bring that produce in to communities that need it. And we have a lot of corporations today that are interested in partnering with us. As the hearing began, this is not a situation that is going to take place with any one entity working; it is going to take all of us working together. More and more corporations are stepping up to bring produce to families that need the help.

The CHAIRMAN. Okay. Thank you.

And here is a question that I would like to address to all of you. Any one of you can answer this.

As we all know, nutrition education and modeling of healthy eating behavior in our schools is vitally important to winning the fight against child obesity. We now see most of our children—of course, we have talked earlier about the lack of exercise, the lack of activity that is going on within the schools.

But what, in your opinion, is the most necessary policy change that we must have—and I state "that we must have"—in the upcoming Child Nutrition Act reauthorization to help end the childhood obesity crisis in America? Because it is a crisis. And we know that, ultimately, it is costing an awful lot in health dollars.

Any one of you that would like to address that?

Ellie?

Ms. KRIEGER. Yes, thank you.

I think one key thing is education, as you say. And there really is no formal nutrition education right now that is in any kind of cohesive form. It is very, sort of, catch as catch can. And I know new legislation is coming out, is being contemplated or—I am not sure exactly what stage it is at, but mandating the nutrition education, that a certain number of hours be implemented.

And there are many, many nutrition programs out there that have been formed at an academic level, education curricula that weave in science education. Because learning about cooking, learning about nutrition, learning about food is learning about science, it is learning about math. So it is not like we even have to tack this on as an extra, "Okay, we need 50 hours of this also," for the teachers to implement. But there are many available curricula that already weave it into science education, to math education. And so it can really be woven in in that way and taken advantage of.

And then we really need the people who are going to do this. How do we implement the education? Do we just tell teachers now, "Okay, teach this also"? So, I would really love to see nutrition professionals being used more in schools, in school settings. Maybe not one per school or making a big commitment there on that level, but at least district-wide or something like that, that can help train teachers to do these curricula, organize cooking classes, help train the food service personnel, someone who knows how to do these things that can bring it all together to make, what I said in the beginning, is a whole healthy environment for our students.

We can't just change the lunch but then give them a snack that is completely inappropriate, which is happening at my daughter's school today. It is driving me crazy. So it is in this sense a whole, holistic approach, a whole school approach.

The CHAIRMAN. Right. But, Ellie, do we implement it at the elementary level, the intermediate or the secondary level?

Ms. KRIEGER. As soon as possible.

The CHAIRMAN. I mean, because there are changes and transfers. There are kids that come from one place or another. And so, they are missing out on the nutrition. So you may have a program that is structured—and earlier it was said that we should have national nutritional standards that should be applied. And then how do we apply those? And what kind of national nutritional standards do we need to develop? And how do we incorporate those into the educational system in developing master plans to allow the teaching, whether it is at the elementary level or even pre-school level and then on into the elementary and then into the intermediate and then secondary level?

Ms. KRIEGER. I think it is very clear that habits form early. The research is very strong in this area. I don't have the exact numbers at my fingertips, but what you eat when you are 4 years old is what you are probably going to be eating when you are an adult. And what you eat when you are 8 years old, it just increases the probability of what you are going to eat later in life.

So the sooner we can expose children to different foods, to the glory of food, without even giving them early-age, obviously, facts and figures, just getting them tasting, getting them involved, getting them to be exposed, that is going to make a tremendous difference. And then later, obviously, incorporating it into other kind of curricula.

Ms. ESCARRA. May I add one more thing?

The CHAIRMAN. Sure.

Ms. ESCARRA. And that is, I think it is three parts. I think it is education. I think it is better access to good, healthy food. I think written into the bill has got to be a part around physical activity.

The CHAIRMAN. Thank you.

Go ahead.

Ms. ENDICOTT. Yes, I am sorry. I might add that the school lunch reimbursement rate, no matter what we want to do, we have to be able to have the funding to purchase the food. We all can agree that fresh food is more expensive to purchase right now. So immediately we need to look at the school reimbursement rate. I know in our Farm to School program, we have to have it subsidized.

And then also, just to refer back to the earlier question that you asked about the seniors having access, in Kansas City we don't have the great opportunity to have supermarkets in our food desert urban areas. So what we are doing in the intermediary part is partnering with churches. Because you have the food supply chain, and that chain has a cost, from the farm all the way to the consumer. And the only way to make that food affordable is to take some dollars out somewhere. And so what we are basically doing is taking the food from the farm into the churches and then allowing them to disperse it with their WIC and EBT cards, their SNAP programs.

So we are trying to have a more direct supply, and that way we can kind of cut the distribution costs and the retail markup. And that would be kind of an intermediary until we get the supermarkets into the urban core.

The CHAIRMAN. Okay. Thank you.

Would anybody else like to respond?

Mr. WATTERMANN. If I can make one quick comment, I wanted to follow up on something that Ellie said earlier on, describing her elementary school's kitchen and how inadequate it was. And this is just an example of something that actually worked. And it goes back to the University of Nebraska, Lincoln, dining services. They had the will to want to prepare good, fresh food for their students, the college students. But literally, as she described, I mean, theirs wasn't that small, but they had no more equipment nor know-how of how to take food from scratch and make it into something good.

Nebraska had a small grant program that worked. It actually enabled them to buy the equipment. They identified it, they bought it. And now they have the equipment to be able to take food from the farm and turn it into food that they can feed to the students. So it works. And that is a concrete example I wanted to share.

The CHAIRMAN. Thank you.

I know that my time has expired. So I am going to call on Mr. Fortenberry, the Ranking Member. Mr. FORTENBERRY. Well, again, thank you all for appearing.

Just two quick questions.

Mr. Wattermann, Mrs. Lummis from Wyoming had to leave, but she had a question for you. I told her that I thought it was doubtful, but she asked if the Nebraska Food Cooperative was able to accept SNAP benefits.

Mr. WATTERMANN. Not at this time. We have talked on the seniors being able to buy at farmers' markets with our representative in Lincoln, and I guess we are not eligible because we are kind of nebulous. We are not a physical farmers' market. We are kind of an Internet farmers' market. So I guess there is something we run afoul of there. And, honestly, we are open and willing to do that but don't know where to go.

Mr. FORTENBERRY. Well, okay. That is a good answer, actually. It is one of the barriers that are out there.

And, quickly, let me turn again to Ms. Endicott. Regarding the Farm to School program, Representative Kagen, who is not here, but from Wisconsin, and myself offered an amendment to the last farm bill, and it is in the farm bill, that allows for an institutional buying preference for local foods. It is my understanding regula-tions are still being written around that, but, nonetheless, that should be an assistance to the earlier comments that you made.

Ms. ENDICOTT. Yes.

Mr. FORTENBERRY. But can you provide us with some more details on how you got started in that regard?

Ms. ENDICOTT. My husband and I sold our landscaping business in Dallas, Texas, and we moved to Kansas City to take over the family farms. And we started selling food to our local supermarket. And over the past-

Mr. FORTENBERRY. Specifically the school program.

Ms. ENDICOTT. Oh, specifically the school part. I am sorry

The school part was-basically, we had a program called Bistro Kids that was a chef selling and preparing food to private schools. And we were the food provider for that program, specifically into upscale private schools. And then we had the idea-we had been working with the Kellogg Foundation, and I said, well, what we need to do is we need to take this program and we need to bring it into Title I schools.

And so, with their assistance of a planning grant, we were able to go into the Head Start schools and actually replicate the same, identical program. We were not able to afford to do it the entire week, so we had what we called Fine Dining Fridays, which included more than just the food. It was all about the tablecloths and local flowers.

And then the Kansas University Medical Center came along and they said, "Oh, we see what you are doing. We would like to study this." And so they probably have one of the first studies out that has just been completed on behavioral outcomes from this type of work.

That is pretty much how we got started. And now we are hoping to go into the second year and expand the program.

Mr. FORTENBERRY. How did the children react?

Ms. ENDICOTT. It was very, very good. We had a little bit of a problem with outreach to the parents. And the idea is to carry this program home. So what we ended up doing—and, again, the supermarket came to our rescue and helped us provide the product that—for example, spaghetti squash. So what we would do is not only serve spaghetti squash but we had an educator in the classroom that would talk about spaghetti squash. A farmer would come and talk about the squash. And then we would actually—and probably the most beneficial part of this is we were actually able to send squash and a recipe home.

For example, chestnuts, roasting chestnuts in the winter. We were actually able to send the product that—one of the key products, local products, we were actually able to send it home.

Corn on the cob—I thought everyone understood corn on the cob. I mean, I didn't know that people did not eat corn on the cob during July. And so we had a process of taking the corn, and bagging 12 ears of corn up, and sending it home with the kids with instructions on how to do it. And the kids got to shuck the corn.

So it was very obvious that it has to be two-part: educating the kids, but then more, also equally important, is actually providing food for the kids to take home so they could have that home component. That seemed to be very successful.

Mr. FORTENBERRY. Well, that is one of my favorite times of the year, and my family's as well, when we get that locally grown sweet corn coming in.

Ms. ENDICOTT. Some of the kids had never had corn on the cob. It had always come out of a can.

Mr. FORTENBERRY. That is very interesting.

Well, we have gone way over time, so I am going to stop my questions and commentary there. But, again, thank you all for your passion in this regard and your contribution to public service by appearing here today, but also in terms of what you are doing back home to implement the broader ideas here that we want to see our country embrace.

So thank you, Mr. Chairman.

The CHAIRMAN. Thank you very much, Mr. Ranking Member.

I am going to take the privilege and ask one more question. And this is to Rocco.

You know, the First Lady talked openly about the small changes that she made in the way her family ate to achieve some long-term results. We all know that many changes are difficult and it requires individual commitment.

On that point, the Federal Government may not be effective in trying to promote personal change. As a food expert, what is your sense of what it is going to take, outside the government program, to promote change on individual levels, as far as healthy eating is concerned?

And, Ellie, you may try to answer that, too, as well.

Mr. DISPIRITO. I think we are talking about the same thing. It is grassroots, it is community, it is volunteerism, it is everyone who cares, everyone on this panel asking their friends, family, neighbors to spread the word.

I think you will find that children are especially eager to learn from people they perceive to be experts. I know if you are on television and you are cooking, they are very eager to learn from you, and you can make a big impact. I think the government could tap into the group of chefs in the media and form a coalition, and we would be happy to travel from school to school and implement a program where we would introduce kids to great nutrition and teach them what a vegetable looks like and what a potato looks like, and their parents as well.

I applaud that second part of your effort because getting it back to the home is really important. Because we have definitely skipped a generation when it comes to understanding cooking, ingredients. And a lot of parents today can't teach their kids what we would hope to start at home.

Earlier we were talking about when it should start. It should start at home in infancy. I don't think that a lot of—I think that capacity is missing with a lot of American homes right now.

So, this kind of thing is really where it needs to start. But we could always use a little help from you guys.

The CHAIRMAN. Ellie, do you want to say anything else to that or not?

Ms. KRIEGER. I think the idea of the small changes makes it very accessible to people. People perceive this idea that they have to change their diet as this, like, massive—I mean, we have a big job to do in terms of the obesity epidemic as a whole. But on a personal level, it does not have to be this massive cloud of change that has to topple your life and you have to do a 180° turn now. Really, small changes make a huge difference.

So if people suddenly introduce fresh fruit into their lives or one new fresh vegetable into their lives and then pull back on some processed foods, that can make a difference. And I think that winds up being kind of contagious and snowballing into this "I can do this" perception and attitude. And then that leads to the next change.

And so I think that using this idea of, "if you do these few things, you can make a difference in your life," as opposed to making people think that they have to change everything all at once.

The CHAIRMAN. Okay. Good.

You know, I just thought of an idea that we maybe will look at, too, as well as a national program through the media network, is having it available to where—I know that it is difficult for each of our education institutions to hire nutritionists and other individuals, but having a program that can be tied in directly through educational programs through all of our schools during a certain period of time, where we actually will have someone demonstrating and talking about healthy foods, and tying it in directly. That is a thought or an idea. With that, I know that we can elaborate and talk a lot more on this particular subject. But, again, I want to thank the Ranking Member for his interest in this, because, as I stated before, we have had other hearings on this topic, but we also wanted to approach it from the view of health and also from the cost factors. It is pay now or pay later. And we will pay later for the things that we neglect to do now, things that would save our taxpayers X amount of dollars. I know that the Ranking Member has a very great interest in this now, as well.

And, with that, before I adjourn, I want to thank each one of our witnesses for participating in this hearing today and for your thoughtful testimony. I appreciate your knowledge, your ideas, your experience—and I hope that Congress will find the best policy solutions possible to improve access to, and education about, healthy food.

We all know the seriousness of the obesity crisis our nation is facing, and we must continue to be innovative and learn as we move forward to address these important public issues.

Again, I want to thank all of you. And I want to thank the Members who took the time to be here, as well.

And, with that, before we adjourn, under the rules of the Committee, the record of today's hearing will remain open for 10 calendar days to receive additional materials and supplementary written responses from witnesses and any questions posed by Members.

This hearing of the Subcommittee on Department Operations, Oversight, Nutrition, and Forestry is adjourned.

Again, thank you very much.

[Whereupon, at 12:42 p.m., the Subcommittee was adjourned.] [Material submitted for inclusion in the record follows:] REPORT SUBMITTED BY VICKI B. ESCARRA, PRESIDENT AND CEO, FEEDING AMERICA

Monthly Commodities Report—March 2010

Prepared for Feeding America

By Dr. Kenneth C. Clayton

Introduction

This monthly report provides Feeding America and its affiliated organizations with information regarding the current and forthcoming market climate for agricultural commodities commonly considered for USDA "bonus" purchases and information concerning "bonus" purchases by USDA.

Market Outlook for "Bonus" Commodities

Summary: Total red meat and poultry production is expected to decline marginally in 2010. At the end of February 2010, total frozen red meat and poultry inventories were up two percent from January 2010, but, more importantly, down 13 percent from a year earlier.

Red meat production, including beef and pork, is expected to continue to decline in 2010. Wholesale red meat prices are forecast to move higher in 2010. Frozen beef supplies at the end of February were more than 7.5 percent lower than a year earlier, marking the lowest monthly inventory since July 2005. Pork inventories in February remained 17 percent below a year ago.

Poultry production, including chicken and turkey, is expected to increase slightly in 2010. Wholesale prices are forecast to increase by 2–4 percent. Frozen chicken stocks in February were 3.5 percent lower than at the same time last year. Frozen turkey supplies were 25 percent below year earlier levels. Table egg production is forecast to grow only modestly in 2010, with wholesale prices increasing by 7–13 percent.

Milk and dairy product production are expected to continue their decline in 2010. Dairy prices at the farm level are forecast to increase, with dairy product prices following a similar upward trend.

Fresh and processed supplies of late summer and fall fruit, including apples, pears, peaches, and tart cherries, remain relatively plentiful. Although Florida oranges suffered weather-related production losses, orange juice supplies are expected to decline less significantly given existing inventories, imports, and dampened demand. Fresh navel and Valencia orange production in California is up substantially. Weather problems in Florida, Texas, and, to a lesser extent, California have been disrupting winter fresh vegetable production, particularly tomatoes, snap beans, green beans, lettuce, sweet corn, and bell peppers, although production is gradually resuming.

Meat Products: Overall, red meat production (beef and pork) declined by nearly two percent in 2009, and is expected to come down by almost that same amount in 2010. As a further gauge of red meat market supplies, cold storage inventories on February 28, 2010, were down slightly from the previous month and over 13 percent below the previous year.

U.S. *beef* production fell over two percent in 2009 and is forecast to drop by more than one percent in 2010. Frozen beef inventory at the end of February 2010 was down six percent from late January, and down eight percent from the same time a year earlier. Domestic demand for beef continues to be affected by the pace of economic recovery, particularly as it relates to restaurant sales, and may impact higher quality cuts of meat differentially. Beef export demand is expected to improve in 2010. With a tightening beef supply and expectations of increased demand, cattle prices that declined by over ten percent in 2009 are expected to rebound by over eight percent in 2010.

Pork production declined by 1.5 percent in 2009 and is expected to fall by 2.5 percent in 2010. Pork production in February 2010 was down three percent from both the preceding month and the same period a year earlier. Frozen pork supplies as of February 28, 2010, were five percent higher than a month earlier, but 17 percent lower than at the same time last year. Shorter-term winter weather disruptions in transportation coupled with longer-term reductions in the hog herd, reduced pork inventories, and positive domestic and export market demand prospects have resulted in higher hog prices that will likely carry well into 2010.

Poultry Products: Poultry meat production (broiler chicken and turkey) fell by nearly five percent in 2009, and is forecast to increase by only less than one percent in 2010.

Broiler chicken meat production is expected to increase by just over one percent during 2010, with small gains in the first three quarters of the year and a somewhat larger production increase in the fourth quarter. Prices are not expected to in-

crease during the first half of the year as reduced exports are likely to push more poultry products onto the U.S. domestic market. With growth in production, albeit limited, and falling exports, inventories are anticipated to be higher throughout 2010, but still lower than in 2008. At the end of February 2010, cold storage inventories of chicken products were down one percent from the preceding month and nearly four percent from a year earlier. Limited production increases, modest inventories, and slowly increasing domestic demand based on improving economic conditions will cause wholesale prices to gradually rise in the latter half of 2010, up by nearly six percent over the course of the year.

to its win cluster wholes are pieces to gradually filse in the latter han of 2010, up by nearly six percent over the course of the year. *Turkey* meat production in 2009 was down nearly ten percent from 2008, and is expected to decline another four percent in 2010. Cold storage holdings of turkey meat were up a seasonal 14 percent at the end of February 2010 compared to the previous month, but down a substantial 25 percent compared to a year earlier. Wholesale prices for turkey meat in 2009 were down nine percent from 2008, but are expected to be some 2–7 percent higher in 2010.

Table egg production was slightly higher in 2009, and is expected to increase modestly again in 2010. Production is forecast to be above 2009 levels in the first threequarters of the year, and about the same in the fourth quarter. Wholesale table egg prices in 2009 were nearly 20 percent lower than a year earlier, but are expected to increase by 7–13 percent in 2010, being highest in the first half of the year.

Dairy Products: The reduction in the size of the U.S. dairy herd, begun last year, is expected to continue in 2010. However, favorable feed costs will support a continuing effort to increase output per cow in 2010, resulting in a small increase in production. Coupled with an anticipated increase in domestic and export demand for dairy products, dairy product stock levels are likely to be lower by year's end.

Federal Government stocks of butter are expected to decline significantly during 2010, cheese stocks will continue small, and only limited stocks of nonfat dry milk will be accumulated.

Cheese and butter prices in 2010 are expected to strengthen by some 16 to 24 percent as milk production continues to fall, cheese and butter production declines, cheese and butter inventory levels are drawn down, and economic recovery proceeds. Cold storage stocks of cheese were ten percent higher on February 28, 2010, than they were a year earlier; butter stocks were down three percent.

Fruit: Monthly fruit prices to growers in February 2010 compared to a year earlier were generally higher. Grower prices for all grapefruit were up 78 percent, fresh grapefruit up 42 percent, all oranges up 17 percent, fresh apples up nearly 25 percent, and fresh strawberries up 21 percent. Notable exceptions included fresh oranges (*i.e.*, California and Texas) that were down almost nine most percent and fresh pears down over 17 percent. U.S. monthly retail prices were higher in February 2010 than for the same period

U.S. monthly retail prices were higher in February 2010 than for the same period in the previous year for grapefruit (nearly 11 percent) and strawberries (over ten percent). Comparative prices for the same timeframe were lower for navel oranges (nearly five percent) and red delicious apples (over three percent). The overall U.S. *citrus* crop for 2009/10 is expected to be 11 percent lower than

The overall U.S. *citrus* crop for 2009/10 is expected to be 11 percent lower than last season, making it the smallest crop in the last 3 years and the second smallest crop in 21 years. Adverse weather and declining acreage in Florida are principally responsible, causing reduced oranges for juice (down 19 percent from last year and 23 percent from 2 years ago) and reduced grapefruit production. Orange juice production (95 percent of Florida orange crop) is expected to be down 22 percent from a year ago, and the lowest production in 10 years. However, the combination of large juice stocks plus increased imports will mean the total orange juice supply will be down a smaller 13 percent from last year, only two percent less than 2 years ago, and actually up eight percent from 3 years ago. Orange (Valencia and navel) production is expected to be higher in California (up 16 percent) and Texas, meaning a greater supply of fresh oranges. U.S. production of tangerines and mandarins is forecast to be higher in California and Florida.

Marketing of the 2009 U.S. *apple* crop—which was 2.5 percent larger than the 2008 crop—has progressed significantly. As of February 28, 2010, fresh apple stocks were down 18 percent from a month earlier and eight percent below levels at the same time in 2009. Of particular note are the over $\frac{4}{5}$ of apple stocks held in longer-term controlled atmosphere storage (rather than regular storage) that are ten percent below similar stock holdings a year ago. Of the three states with the largest quantities of apples in storage, Michigan's stocks are up by 88 percent compared to February 2009, New York is up by seven percent, and Washington is down by 16 percent.

The U.S. *pear* crop in 2009 was up by well over seven percent from 2008, the third largest crop produced since 2001. Pears being held in cold storage on February 28,

2010, were down 30 percent from the previous month indicating market movement; however, cold storage supplies were still 18 percent higher than a year earlier.

U.S. *peach* production was almost five percent greater in 2009 than it was in the previous season.

Overall, frozen fruit stocks at the end of February 2010 were eight percent larger than a year earlier, although down eight percent from the previous month. Inventories of frozen tart cherries, red raspberries, strawberries, and blackberries (bulk and juice) were more than ten percent higher than levels a year earlier.

Vegetables: U.S. production of the 21 major fresh market vegetables has been trending downward—by two percent in 2008, 1.6 percent in 2009, and forecast to fall another 0.5 percent in 2010. The three largest fresh market crops, in terms of production, are onions, head lettuce, and tomatoes, combining to account for 42 percent of total production. Production of eight selected processing vegetables in 2009 was up 11 percent from the preceding year. The three largest processing crops in terms of production are tomatoes, sweet corn, and snap beans, accounting for 93 percent of the eight processing vegetables.

Overall frozen vegetable inventory was eight percent higher on February 28, 2010, than a year earlier. Frozen stocks of baby lima beans, cauliflower, cut corn, and mixed peas and carrots were more than 20 percent above prior year levels. Asparagus, broccoli spears, green peas, and spinach were up ten percent or more.

agus, broccoli spears, green peas, and spinach were up ten percent or more. **Potatoes:** Although potato production in 2009/10 was down by over two percent, potatoes in storage on March 1, 2010, were up 11 percent from a year earlier, and four percent higher than March 1, 2008. March 1 storage of potatoes accounted for 44 percent of fall 2009 production, three percentage points above the previous year's share of production being held in storage at that same date. Potato use, including shrink and loss, was two percent below March 1, 2009, and down nine percent from 2008. Processing use to date for the 2009/10 season is down seven percent from last year, and down 14 percent from 2 years ago. **Peanuts:** Peanut production in 2009 was 30 percent lower than in 2008, more on per with production in 2007. Petruger 2010

Peanuts: Peanut production in 2009 was 30 percent lower than in 2008, more on par with production in 2007. February 2010 peanut stocks (farm level, in-shell, and shelled) were seven percent lower than the previous year. Reflecting the weakened U.S. economy, demand for peanut butter has been strong and production of peanut butter during August 2009–February 2010 was seven percent higher than for the same period a year earlier. USDA distribution of peanut butter through its child nutrition and other food assistance programs was up by 17 percent for August 2009–February 2010 compared to the same period in 2008–2009.

Status of USDA "Bonus" Purchases and Requests

Purchases are proceeding on the \$101.7 million in bonus buys previously announced in Fiscal Year 2010, including \$40 million for pork products and \$61.7 million for fruit and vegetable products (including tart cherries, dried plums, apple products, fresh potatoes, peaches and mixed fruit, frozen blueberries, and fresh and canned pears).

Industry requests for purchases of potatoes, clingstone peaches, dates, figs, and cranberry products are reportedly under active consideration. There seems to be continued reticence at USDA to make bonus purchases of animal protein products that could be distributed to schools and/or household recipients.

A significant increase in purchase activity is anticipated by the Agricultural Marketing Service over the next month or 2. This will primarily involve purchases for the schools to meet the statutory requirement that 12 percent of Federal support be provided in the form of commodities.

Status of Section 32 Funds

With regard to the availability and use of Section 32 funds, there are three principal points of interest: (1) USDA's decisions regarding use of already appropriated FY 2010 funds; (2) the President's proposed FY 2011 budget for USDA; and (3) Senator Blanche Lincoln's recently proposed legislation "Healthy, Hunger-Free Kids Act of 2010" to reauthorize child nutrition programs.

Use of FY 2010 Appropriation—There are three issues to be noted with respect to FY 2010 Section 32 funds for bonus commodity purchases:

First, funds otherwise unspent for their authorized purposes within the Section 32 budget account must be identified and transferred in a timely manner if bonus purchases are to be maximized.

Based on an internal reprogramming of the FY 2010 authorization, USDA already has been able to supplement the original \$199 million authorized for bonus purchases with an *additional \$58.5 million*. These latter funds were transferred from an authorization intended to ensure USDA is compli-

ant with a 2008 Farm Bill mandate that requires a minimum of 3399 million of fruit and vegetables be purchased in FY 2010 using Section 32 funds.

It seems likely that additional Section 32 funds could be diverted to bonus purchases from those originally intended to ensure the minimum purchase requirement for specialty crops is met. In particular, the likely purchase of additional commodities to meet the 12% requirement for the school lunch program in combination with school lunch entitlement and otherwise intended bonus purchases could allow the \$399 million fruit and vegetables purchase requirement to be met with only a limited draw on the \$199 million authorized to ensure this 2008 Farm Bill spending requirement for fruit and vegetables is met. The likely larger share of these funds could then be shifted to bonus purchases for distribution to families as well as schools.

Second, USDA has authorized to date, in FY 2010, bonus purchases of \$101.7 million—\$61.7 million of fruit and vegetable bonus purchases and \$40.0 million of pork product purchases. There currently remain \$155.8 million (or, possibly \$155.8 + 86.1 = \$241.9 million) for bonus purchases that could be directed to schools or households. It is imperative that *remaining Section 32 bonus purchases be identified and made in a timely manner*.

Third, with further regard to the funds available for Section 32 bonus purchases, every effort should be made to maximize the flow of bonus commodities to household feeding programs.

President's Proposed Budget for FY 2011—There are several observations that should be noted with respect to the President's proposed FY 2011 budget:

First, reflecting a slowly recovering global economy, a \$5 billion reduction in U.S. customs receipts (tariffs or taxes collected on imports) is anticipated in 2010, translating into *a* \$1.5 *billion reduction* in the availability of Section 32 funds in FY 2011.

Second, the President's FY 2011 budget proposal includes *a \$50 million rescission* of the funds that would otherwise be available under the permanent Section 32 appropriation authority.

Third, a *reduced \$181 million bonus purchase spending level* is proposed, down nine percent from FY 2010's initial authorization of \$199 million, well below the likely actual bonus purchase level in FY 2010, and over 40 percent less than actual bonus purchases in FY 2009.

Fourth, \$120 million are authorized in FY 2011—compared to \$176 million in FY 2010—to ensure meeting the National School Lunch Program (NSLP) requirement that 12 percent of Federal support be in the form of commodities. If this nearly $\frac{1}{3}$ reduction ultimately proves to be an underestimate, the only source for meeting the shortfall will be the already reduced \$181 million in bonus funds proposed for FY 2011.

Child Nutrition Program Reauthorization—Two possible concerns arise with the reauthorization of child nutrition programs that seems likely to occur over the next several months:

First, the President's proposed budget for FY 2011 includes \$10 billion over 10 years to strengthen child nutrition and WIC programming. Although this budget proposal leaves Section 32 funding largely intact, albeit with a reduced level of support for bonus purchases, at least some uncertainty exists as to how the Congress will deal with child nutrition and the necessary funding for programs in this area.

Second, Sen. Lincoln's proposed legislation for child nutrition program reauthorization, "Healthy, Hunger-Free Kids Act of 2010," includes a smaller \$4.5 billion spending increase than the President contemplates, and identifies offsets that the Congressional Budget Office concludes will make the proposal budget neutral. Among the budget offsets is the apparent elimination of the current requirement that 12 percent of the Federal support to the National School Lunch Program must be in the form of commodities. If this legislation is adopted, including elimination of the 12 percent requirement, it would reduce the funds available for Section 32 commodity purchases by \$120 million (President's FY 2011 Budget). Although funds would remain available in the Section 32 account to ensure that the farm bill minimums for specialty crop purchases are met, and that those commodities could flow to both schools and household recipients, use of this authority would restrict purchases to fruit and vegetables, precluding possible bonus purchases of meat and poultry protein products.

Opportunities for Collaboration

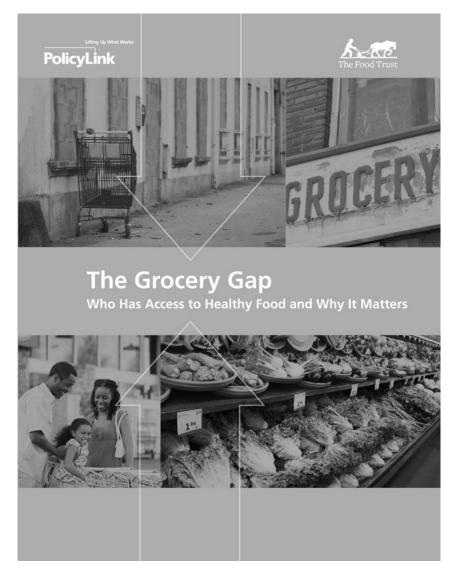
As noted in previous monthly reports, Feeding America might want to consider working with allied organizations to promote shorter-term and longer-term support for maximum availability of Section 32 funds for bonus commodity purchases.

In the *shorter-term*, Feeding America might consider, possibly with allied organizations, meeting with USDA officials to reinforce the need for even greater focus on the food product requirements of food banks and others serving families and households. As substantiated in recent studies and evidenced by the lingering high rates of under- and unemployment, there remains a great need for food assistance. Within the context of FY 2010 and focusing on the use of Section 32 funding to acquire and distribute food commodities:

- Section 32 bonus purchases should be made in a timely and expedited manner whenever market circumstances justify such purchases—missed purchase opportunities mean greater malnourishment, at a time when unemployment persists as our economy recovers from a deep and serious recession.
- When making Section 32 bonus purchases, priority must be given to the distribution of food commodities to food banks and others that serve families and households—the needs are great.
- To the extent that FY 2010 Section 32 funds are not fully required for their initially intended purposes, expedited reprogramming should be permitted to maximize bonus purchases of surplus food products.

For the *longer-term*, efforts should be undertaken with allied organizations to ensure that Congressional and Executive Branch officials are aware of the implications of the Section 32 re-programmings and rescissions that have been made and continue to be proposed in the appropriations process. Such actions may have been undertaken for other good purposes, but they come at a very real cost to those who depend on donations of federally-procured food products. An opportunity will exist in the FY 2011 appropriations process to reconsider the manner in which Section 32 funding is handled and allocated.

Report Submitted by Jeffrey N. Brown, Founder, President, and CEO, Brown's Super Stores, Inc.





.....

The Food Trust

The Grocery Gap:

Who Has Access to Healthy Food and Why It Matters

Sarah Treuhaft PolicyLink

Allison Karpyn The Food Trust

The Food Trust

Acknowledgments

PolicyLink and The Food Trust are grateful to the funders who supported the development and publication of this report, including the Convergence Partnership and the Kresge Foundation.

The research for this study was conducted with indispensable assistance from Diana Fischmann (former intern, The Food Trust), who initially collected, reviewed, and summarized many of the studies, and Allison Hagey (PolicyLink) who adeptly assisted with the data analysis and manuscript development. Many thanks to Jennefer Keller, Jon Jeter, and Leslie Yang (PolicyLink), and Lance Loethen (The Reinvestment Fund) for their assistance. Our gratitude also extends to Judith Bell and Rebecca Flournoy (PolicyLink), John Weidman (The Food Trust), and Ira Goldstein (The Reinvestment Fund) who provided helpful guidance and feedback throughout the research process.

The Food Trust

Contents

PolicyLink

- 5 Preface
- 7 Executive Summary
- 11 Introduction
- 13 Findings
- 21 Implications for Policy

- 23 Methods
- 25 References
- 32 Notes





The Food Trust



Preface

For decades, low-income communities of color have suffered as grocery stores and fresh, affordable food disappeared from their neighborhoods. Advocates have long drawn attention to this critical issue and crafted policy solutions, but access to healthy food is just now entering the national policy debate. While the problem is obvious to impacted communities, good policy must also be based on solid data about the issue and its consequences.

Unfortunately, it often takes years for the research to catch up with pressing needs in historically underserved communities. Sometimes information is not available. Other times, evidence is accumulating but it is buried in journals not widely read by policymakers. Or it is produced by practitioners and advocates for local action campaigns and not accepted by researchers or shared with policymakers or the broader field. Too often, research focusing on lowincome people and communities of color, informed by their experiences, or conducted in partnership with them, is perceived as a political strategy, rather than as a legitimate search to understand problems and inform strategies for change.

PolicyLink and The Food Trust conducted this inquiry to summarize the existing evidence base, carefully reviewing more than 132 studies. We found that a large and consistent body of evidence supports what residents have long observed: many low-income communities, communities of color, and sparsely populated rural areas do not have sufficient opportunities to buy healthy, affordable food. The consequences are also clear: decreased access to healthy food means people in low-income communities suffer more from diet-related diseases like obesity and diabetes than those in higherincome neighborhoods with easy access to healthy food, particularly fresh fruits and vegetables.

Inequitable access to healthy food is a major contributor to health disparities. According to the Centers for Disease Control and Prevention, adult obesity rates are 51 percent higher for African Americans than whites, and 21 percent higher for Latinos. Black and Latino children are more likely to become obese than white children. The lack of healthy food retail also hinders community economic development in neighborhoods that need private investment, activity hubs, and jobs.

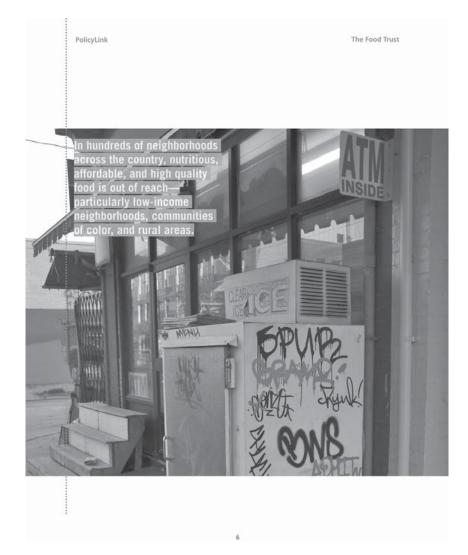
Thankfully, the tide is beginning to turn. Researchers and policymakers are coming to consensus that this is a critical issue. And they are recognizing that communities have developed innovative, sustainable solutions that can work in other locales and at larger scales. In December 2009, 39 members of Congress from both political parties issued a resolution in the House of Representatives recognizing the need for national policy to address limited access to healthy food in underserved communities. The President's 2011 budget calls for more than \$400 million to establish a national Healthy Food Financing Initiative, and this initiative is a key component of the First Lady's Let's Move campaign to reduce childhood obesity. Legislation to create a Healthy Food Financing Initiative is expected to be introduced in both the House and the Senate in Spring 2010.

This report presents powerful data. It confirms that as a nation we must answer the appeals of community activists seeking access to healthy food for their families and their neighborhoods. We hope that it provides policymakers, advocates, philanthropists, and others with information, evidence, and analysis that can inform their efforts to eliminate "food deserts" from neighborhoods and communities across the country.

yoe be AAS

Angela Glover Blackwell Founder and CEO PolicyLink

Yael Lehmann Executive Director The Food Trust



Executive Summary

An apple a day?

F or millions of Americans—especially people living in low-income communities of color finding a fresh apple is not so easy. Full-service grocery stores, farmers' markets, and other vendors that sell fresh fruits, vegetables, and other healthy foods cannot be found in their neighborhoods. What can be found, often in great abundance, are convenience stores and fast food restaurants that mainly sell cheap, high-fat, high-sugar, processed foods and offer few healthy options.

Without access to healthy foods, a nutritious diet and good health are out of reach. And without grocery stores and other fresh food retailers, communities are missing the commercial hubs that make neighborhoods livable, and help local economies thrive.

For decades, community activists have organized around the lack of access to healthy foods as an economic, health, and social justice issue. As concerns grow over healthcare and the country's worsening obesity epidemic, "food deserts"—areas where there is little or no access to healthy and affordable food—have catapulted to the forefront of public policy discussions. Policymakers at the local, state, and national level have begun recognizing the role that access to healthy food plays in promoting healthy local economies, healthy neighborhoods, and healthy people.

This report, a summary of our current knowledge about food deserts and their impacts on communities, provides evidence to inform this policymaking.

To assess the current evidence base in this dynamic and fast-growing field of research, we compiled the most comprehensive bibliography to date of studies examining food access and its implications conducted in the United States over the past 20 years. This bibliography incorporates a total of 132 studies: Sixty-one published in peerreviewed journals and primarily conducted by university-based researchers and 71 conducted by practitioners or policy researchers, sometimes in collaboration with academic researchers, and self-published (also known as "grey literature"). The studies include three nationwide analyses of food store availability and neighborhood, city, county, regional, statewide, and multistate analyses covering 22 states across the country.

Findings

- Accessing healthy food is a challenge for many Americans—particularly those living in low-income neighborhoods, communities of color, and rural areas. In hundreds of neighborhoods across the country, nutritious, affordable, and high quality food is largely missing. Studies that measure food store availability and availability of healthy foods in nearby stores find major disparities in food access by race and income and for low-density, rural areas.
 - Lack of supermarkets. A 2009 study by the U.S. Department of Agriculture found that 23.5 million people lack access to a supermarket within a mile of their home. A recent multistate study found that lowincome census tracts had half as many supermarkets as wealthy tracts. Another multistate study found that eight percent of African Americans live in a tract with a supermarket, compared to 31 percent of whites. And a nationwide analysis found there are 418 rural "food desert" counties where all residents live more than 10 miles from a supermarket or supercenter this is 20 percent of rural counties.

- Lack of healthy, high quality foods in nearby food stores. In Detroit and New Haven, produce quality is lower in low-income communities of color compared to more affluent or racially mixed neighborhoods. In Albany, New York, 80 percent of nonwhite residents cannot find low-fat milk or high-fiber bread in their neighborhoods. And in Baltimore, 46 percent of lower-income neighborhoods have limited access to healthy food (based on a healthy food availability survey) compared to 13 percent of higher-income neighborhoods.
- Predominance of convenience/corner/ liquor stores. Nationally, low-income zip codes have 30 percent more convenience stores, which tend to lack healthy items, than middle-income zip codes.
- Lack of transportation access to stores. Residents in many urban areas (including Seattle, Central and South Los Angeles, and East Austin, Texas) have few transportation options to reach supermarkets. Inadequate transportation can be a major challenge for rural residents, given the long distances to stores. In Mississippi—which has the highest obesity rate of any state—over 70 percent of food stamp eligible households travel more than 30 miles to reach a supermarket.
- Better access corresponds with healthier eating. Studies find that residents with greater access to supermarkets or a greater abundance of healthy foods in neighborhood food stores consume more fresh produce and other healthful items.
 - For every additional supermarket in a census tract, produce consumption increases 32 percent for African Americans and 11 percent for whites, according to a multistate study.
 - A survey of produce availability in New Orleans' small neighborhood stores found that for each additional meter of shelf space devoted to fresh vegetables, residents eat an additional 0.35 servings per day.

 In rural Mississippi, adults living in "food desert" counties lacking large supermarkets are 23 percent less likely to consume the recommended fruits and vegetables than those in counties that have supermarkets, controlling for age, sex, race, and education.

The Food Trust

- 3. Access to healthy food is associated with lower risk for obesity and other diet-related chronic diseases. Researchers find that residents who live near supermarkets or in areas where food markets selling fresh produce (supermarkets, grocery stores, farmers' markets, etc.) outnumber food stores that generally do not (such as corner stores) have lower rates of diet-related diseases than their counterparts in neighborhoods lacking food access.
 - A multistate study found that people with access to only supermarkets or to supermarkets and grocery stores have the lowest rates of obesity and overweight and those without access to supermarkets have the highest rates.
 - In California and New York City, residents living in areas with higher densities of fresh food markets, compared to convenience stores and fast food restaurants, have lower rates of obesity. In California, obesity and diabetes rates are 20 percent higher for those living in the least healthy "food environments," controlling for household income, race/ethnicity, age, gender, and physical activity levels.
 - Using statistical modeling techniques that control for a variety of factors, researchers estimate that adding a new grocery store to a high poverty neighborhood in Indianapolis would lead to a three pound weight decrease among residents, while eliminating a fast food restaurant in a neighborhood with a high density of fast food would lead to a one pound weight decrease.
 - In Chicago and Detroit, residents who live farther from grocery stores than from convenience stores and fast food

restaurants have significantly higher rates of premature death from diabetes.

4. New and improved healthy food retail in underserved communities creates jobs and helps to revitalize low-income neighborhoods. Though the economic impacts of food retailers are understudied, we know that grocery stores contribute to community economic development. Analysis of a successful statewide public-private initiative to bring new or revitalized grocery stores to underserved neighborhoods in Pennsylvania provides positive evidence that fresh food markets can create jobs, bolster local economies, and revitalize neighborhoods. The effort has created or retained 4,860 jobs in 78 underserved urban and rural communities throughout the state. Analyses of stores supported by the effort find they lead to increased economic activity in surrounding communities.

Implications for Policy

The evidence is clear that many communities predominantly low-income, urban communities of color and rural areas—lack adequate access to healthy food, and the evidence also suggests that the lack of access negatively impacts the health of residents and neighborhoods. These findings indicate that policy interventions to increase access to healthy food in "food deserts" will help people eat a healthy diet, while contributing to community economic development.

For many years, impacted communities and their advocates have been implementing a variety of strategies to increase access to fresh, wholesome foods, including:

- Attracting or developing grocery stores and supermarkets;
- Developing other retail outlets such as farmers' markets, public markets, cooperatives, farmstands, community-

supported agriculture programs, and mobile vendors (and ensuring public benefits can be used at these venues);

- Increasing the stock of fruits, vegetables, and other healthy foods at neighborhood corner stores or small groceries;
- Growing food locally through backyard and community gardens and largerscale urban agriculture; and
- Improving transportation to grocery stores and farmers' markets.

Improving access to healthy food is a critical component of an agenda to build an equitable and sustainable food system. It is time for a nationwide focus to ensure that healthy food choices are available to all, building on these local efforts and innovations.

Smart public policies and programs should support communities in their efforts to develop, implement, and test strategies that increase healthy food access. Government agencies at the local, state, and federal level should prioritize the issue of inequitable food access in low-income, underserved areas. Programs and policies that are working should be expanded and new programs should be developed to bring more grocery stores and other fresh food retail outlets to neighborhoods without access to healthy foods. Transportation barriers to fresh food outlets should be addressed. Whenever possible, policies to address food deserts should link with comprehensive efforts to build strong regional food and farm systems.

Residents of low-income communities and communities of color in urban and rural areas have suffered for too long from a lack of access to healthy food. With local and state programs showing enormous promise, now is the time for policymakers to enact policies that will catalyze the replication of local and state innovations and bring them to a national scale.

98

The Food Trust



The Food Trust

PolicyLink

n hundreds of neighborhoods across the country, nutritious, affordable, and high quality food is out of reach. Residents of many urban lowincome communities of color walk outside their doors to find no grocery stores, farmers' markets, or other sources of fresh food. Instead they are bombarded by fast food and convenience stores selling high-fat, high-sugar, processed foods. Rural residents often face a different type of challenge—a lack of any nearby food options.

This has been a persistent problem for communities. Beginning in the 1960s and 1970s, white, middleclass families left urban centers for homes in the suburbs, and supermarkets fled with them. Once they left the city, grocers adapted their operations to suit their new environs, building ever-larger stores and developing chain-wide contracts with large suppliers and distributors to stock the stores with foods demanded by a fairly homogeneous suburban population. Over the past several decades, the structure of the grocery industry has changed dramatically, with significant consolidation and growth in discount stores and supercenters and specialty/natural food retailers.1 At the same time, alternative sources of fresh foods such as farmers' markets, produce stands, and community-supported agriculture programs have proliferated, though predominantly in middle-class or affluent communities.

While some continue to be well-served, many have been left out. Without fresh food retailers, these communities miss out on the economic and health benefits they bring to neighborhoods. The presence of stores selling healthy, affordable food makes it possible to eat "five a day" and consume a healthful diet. This is particularly important for low-income people of color given the vast disparities in health that exist in areas including obesity, diabetes, and other diet-related diseases. The same communities are often economically distressed and in need of new or revitalized neighborhoodserving retailers and job opportunities. Grocery stores and supermarkets are also economic anchors in a neighborhood—supplying local jobs and creating foot traffic for additional businesses. Smaller food retailers and farmers' markets can also bolster the local economy and contribute to a healthy neighborhood business environment.

Although the lack of access to healthy foods has preoccupied residents of low-income urban neighborhoods and rural areas for decades, and many advocates have fought long and hard to bring in or develop new fresh food retailers, until recently the issue was largely confined to the occasional local win or news story. But that is all changing. "Food deserts"—areas with low access to healthy foods—have become a major topic of interest among public health advocates and the media, as well as a dynamic and fast-growing field of research. With the recognition of the obesity (and childhood obesity) crises and the increasing understanding of how the neighborhood environment influences health, solving the food desert problem is now rising to the forefront of policy discussions.

This report provides data to inform that debate. Across the country, dozens of studies have examined the availability of nutritious, affordable foods in communities and/or the relationship between food access and health. These include studies authored by university-based researchers, health departments, community groups, and nonprofit policy and research organizations. A large number of studies, particularly local studies about geographic access to healthy food, are conducted by practitioners who seek to understand the situation locally in order to take action. This "grey literature" often provides important data but is rarely included in academic reviews.



PolicyLink

Findings

 Accessing healthy food is a challenge for many Americans particularly those living in low-income neighborhoods, communities of color, and rural areas

Researchers have measured geographic access to healthy foods in many different ways, and at nearly every imaginable scale: from national samples to detailed assessments of specific neighborhoods. Only one study has sought to calculate the extent of the problem nationally. The U.S. Department of Agriculture's 2009 "food desert" study examined access to supermarkets and determined that 23.5 million people cannot access a supermarket within one mile of their home.

Most studies (a total of 113) examine whether supermarkets or healthy foods are equitably distributed across communities according to socioeconomic status, racial composition, or level of urbanization (population density).⁶ Their findings are remarkably consistent: people living in low-income neighborhoods, minority neighborhoods, and rural communities face much greater challenges finding healthy food, especially those who lack good transportation options to reach full-service grocery stores. Ninety-seven of these studies found inequitable access to healthy foods, 14 had some mixed results, and two studies did not find inequities.

Disparities in supermarket access in urban areas by race and income

Many researchers use supermarkets as a proxy for food access because they provide the most reliable access to a wide variety of nutritious and affordable produce and other foods compared to other types of food outlets such as convenience stores and smaller grocery stores. Several of these studies look at the distribution of different types of food stores, such as supermarkets, smaller grocery stores, and "fringe retailers" such as convenience and corner stores across different community types. They find that lower-income communities and communities of color have fewer supermarkets, more convenience stores, and smaller grocery stores than wealthier and predominantly white communities.

The Food Trust

Eighty-nine national and local studies document uneven geographic access to supermarkets in urban areas according to income, race, or both^{7,87} and nine had mixed results.^{88,56}

Nationwide study findings include:

- Low-income zip codes have 25 percent fewer chain supermarkets and 1.3 times as many convenience stores compared to middle-income zip codes.
 Predominantly black zip codes have about half the number of chain supermarkets compared to predominantly white zip codes, and predominantly Latino areas have only a third as many.⁴⁶
- Low-income neighborhoods have half as many supermarkets as the wealthiest neighborhoods and four times as many smaller grocery stores, according to an assessment of 685 urban and rural census tracts in three states. The same study found four times as many supermarkets in predominantly white neighborhoods compared to predominantly black ones.³⁸ Another multistate study found that eight percent of African Americans live in a tract with a supermarket compared to 31 percent of whites.⁴²

Local studies demonstrate similar trends:

- In Los Angeles there are 2.3 times as many supermarkets per household in low-poverty areas compared to high-poverty areas.
 Predominantly white areas have 3.2 times as many supermarkets as black areas and 1.7 times as many as Latino areas.⁴⁹
- Among affluent neighborhoods in Atlanta, those that are predominantly white have better grocery store access than those that are predominantly black, indicating that race may be a factor independent of income.³⁰
- In West Louisville, Kentucky, a low-income African American community that suffers from high rates of diabetes, there is one supermarket for every 25,000 residents, compared to the county average of one supermarket for every 12,500 residents.¹⁷
- In Washington, DC, the city's lowestincome wards (Wards 7 and 8) have one supermarket for every 70,000 people while two of the three highest-income wards (Wards 2 and 3) have one for every 11,881 people.²⁰ One in five of the city's food stamp recipients lives in a neighborhood without a grocery store.³⁷⁷
- In California and in New York City, lowincome neighborhoods have fewer purveyors of healthy foods (supermarkets, produce stands) compared to outlets that primarily sell unhealthy foods (convenience stores, fast food restaurants).^{14, 47} Lowincome neighborhoods in California have 20 percent fewer healthy food sources than higher-income ones.¹⁴
- In unincorporated communities (colonias) located along the U.S.-Mexico border in Texas, residents in neighborhoods with higher levels of deprivation (measured by income, transportation, lack of infrastructure, etc.) travel farther to reach the nearest supermarket or grocery store and have lower access to a variety of food stores.⁵¹

Disparities in access to healthy food at neighborhood stores in urban areas by race and income

Other studies gather much more detailed data, conducting in-store surveys to assess the availability, variety, quality, and price of particular healthy items or grocery "market baskets." Such surveys offer a more precise look at healthy food availability in neighborhoods, but they are labor-intensive so generally focus on smaller geographic areas.

Among these studies, 21 found that food stores in lower-income neighborhoods and communities of color are less likely to stock healthy foods, offer lower quality items, and have higher prices compared to stores in higher-income or 0.23 predominantly white communities, 13, 15, 17, 18, 59, 96-99, 103, 105, 106 and seven found mixed results (for example, lower quality but similar prices and selection)9, 81, 88, 89, 100, 102 or no difference.¹⁰¹ In addition, a study based on focus groups with residents in East Baltimore (a lowincome community of color) found that they were reliant on small neighborhood stores that charged extremely high prices and lacked a good variety and selection of healthy foods.¹⁰³ Findings include:

- Stores carrying fruits and vegetables are unevenly distributed among different types of communities in upstate New York: a minority neighborhood in Albany has the least access (4.6 stores per 10,000 residents), followed by a rural community (7.8), a small town (9.8), and a racially mixed neighborhood in Albany (11.4).³² The same researchers find that eight in 10 of Albany's nonwhite residents live in a neighborhood that lacks any stores selling low-fat milk or high-fiber bread.³³
- Stores located in low-income and very low-income zip codes in Los Angeles and Sacramento are less likely to stock healthy foods than stores in higher-income areas.²⁴ Three in 10 food stores in a highpoverty, predominantly African American community in Los Angeles lacked fruits and vegetables while nearly all of the stores in a contrast area that was low poverty and predominantly white sold fresh produce.⁵²

The Food Trust

Share of Baltimore Neighborhood Food Stores with Low Availability of Healthy Food, by Neighborhood Race and Income, 2006 46% 43% 25% 14% 13% 4%

Mixed **Racial Composition**

White

Lower

Medium

Income

Source: Franco et al., 2008.

African

American

PolicyLink

- Produce quality is lower in a predominantly black, low-income community in Detroit compared to an adjacent suburban community that is racially mixed and middle-income.81 Produce quality is also lower in New Haven, Connecticut's low-income communities compared to more affluent neighborhoods.9
- In Baltimore (see chart above), a healthy food availability survey of 226 supermarkets, grocery stores, convenience stores, and behind-glass stores in 106 census tracts found that 43 percent of predominantly black neighborhoods and 46 percent of lower-income neighborhoods were in the bottom third of availability, compared to four percent of predominantly white and 13 percent of higher-income neighborhoods. The supermarkets in predominantly black and lower-income neighborhoods scored lower for healthy food availability as well.23

Disparities in food store access around schools by race and income

In addition to the residential environment, researchers are beginning to examine the "food environment"

around schools because of the link between access to convenience stores and adolescent health.¹²¹ Two studies looked at convenience stores in proximity to schools and found that schools with more lowincome or nonwhite students or in urban areas, and schools located in low-income neighborhoods or communities of color¹⁰⁷ are more likely to have at least one convenience store nearby.

Higher

Rural food deserts

While the majority of food desert studies focus on urban communities, 21 studies examined rural communities. Twenty of them found significant food access challenges in rural communities^{21,} 29, 32, 33, 36, 43, 46, 50, 51, 70, 75, 95, 108-114, 116 and one (that

looked at Springfield, Oregon) did not find urban-rural disparities.⁵⁴ The major issues in rural areas are different than those in urban areas given the low population density, longer distances between retailers, and rapid rise of supercenters and their impact on other food retailers. Key findings include:

Controlling for population density, rural areas have fewer food retailers of any type compared to urban areas, and only 14 percent the number of chain supermarkets.46 (See chart, next page) Another nationwide

15

104

The Food Trust

<text><text><text><figure><figure><figure>

analysis found that there are 418 rural "food desert" counties where all residents live 10 miles or more from the nearest supermarket or supercenter—20 percent of all rural counties.⁴³

- In the Mississippi Delta, over 70 percent of households eligible to receive food stamp benefits needed to travel more than 30 miles to reach a large grocery store or supermarket.³⁶
- In New Mexico, rural residents have access to fewer grocery stores than urban residents, pay more for comparable items, and have less selection. The same market basket of groceries costs \$85 for rural residents and \$55 for urban residents.¹¹³

Transportation access

Lack of transportation to supermarkets is a major barrier for residents in many communities.¹¹⁵ Assessments of Lexington (KY), Seattle (WA), Central and South Los Angeles (CA), East Austin (TX), and Trinity County (CA) highlighted transportation challenges.^{11, 12, 22, 60, 116} Rural residents have higher vehicle ownership generally, but those who lack reliable access to personal vehicles are particularly isolated given the longer distances to stores and lack of public transportation options.^{12, 51, 114, 116, 117} 2. Better access to healthy food corresponds with healthier eating

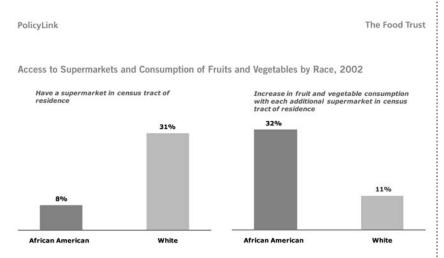
Consistent with the conclusions of a recent review study.⁴ we found strong and consistent evidence indicating a positive relationship between access to healthy food and eating behaviors. Without nearby access to healthy ingredients, families have a harder time meeting recommended dietary guidelines for good health such as eating fruits and vegetables and lowering fat intake. In a survey of diabetic adults in New York's East Harlem neighborhood, 40 percent said that they did not follow the recommended dietary guidelines because the necessary foods were less available and more expensive in their neighborhood stores.³¹

Of 14 studies that examine food access and consumption of healthy foods, all but one of them found a correlation between greater access and better eating behaviors. All of the studies in this category were conducted by academic researchers and published in peer-reviewed journals.¹¹⁸

Access to supermarkets

Eight studies analyzed access to nearby supermarkets or large grocery stores that sell a wide variety of healthy foods in relation to consumption of fruits and vegetables, specific healthy foods (such as low-fat milk or high-fiber bread), or a healthy diet (measured by an index of diet quality). Almost all

16



Source: Morland et al., 2002.

of these studies control for individual characteristics such as race and income and still find a relationship between access and healthy eating. Six of the studies found associations between supermarket access and healthy eating among adults^{42, 79, 91,} ^{109, 119, 120} and one had mixed results. ⁷⁸ Only one study examined access to food stores and eating behaviors of adolescents (specifically, boys aged 10 to 14); this study did not find a relationship between supermarket access and fruit and vegetable consumption but did find that proximity of convenience stores (where young people who do not drive are more likely to shop) was associated with reduced fruit and vegetable intake.¹²¹

Some of the findings include:

- African Americans living in a census tract with a supermarket are more likely to meet dietary guidelines for fruits and vegetables, and for every additional supermarket in a tract, produce consumption rose 32 percent. Among whites, each additional supermarket corresponded with an 11 percent increase in produce consumption (see chart above).⁴² This study used a large sample: 10,230 adults living in 208 urban, suburban, and rural census tracts in four states.
- Adults with no supermarkets within a mile of their homes are 25 to 46 percent less

likely to have a healthy diet than those with the most supermarkets near their homes, according to a study that used data from North Carolina, Baltimore, and New York City. A healthy diet was defined using two different measures: the Alternate Healthy Eating Index, which measures consumption of foods related to low risk of chronic disease, and a measure looking at.⁹¹ consumption of fats and processed meats.⁹¹

- Proximity to a supermarket is associated with increased fruit consumption among food stamp recipients (based on a nationally representative sample). Similar patterns were also seen with vegetable consumption, though associations were not statistically significant.¹¹⁹
- In rural Mississippi, adults living in "food desert" counties (defined as those lacking large supermarkets) are 23 percent less likely to consume the recommended fruits and vegetables than those in counties that are not food deserts.¹⁰⁹
- In Detroit's East Side neighborhood, African American women with lower incomes are less likely to shop at supermarkets (which are all located outside the neighborhood) and eat fruits and vegetables than those with higher incomes.⁷⁹

Access to fresh produce and other healthful foods in nearby stores

Several recent studies go beyond using supermarkets as proxies for healthy food access and conduct in-store surveys to more accurately measure the availability of healthy food items in nearby stores.^{13, 21, 91, 122, 123} Others use resident surveys to measure access to nutritious and quality foods and eating behaviors.^{5, 124} Of the six studies in this category, all of them found that increased availability of produce or of specific healthy foods (such as low-fat milk as a percentage of all milk) is associated with the increased consumption of those foods. Findings include:

- In New Orleans, proximity to stores stocking more fresh produce is associated with higher vegetable consumption. Each additional meter of shelf space devoted to fresh vegetables is associated with an additional 0.35 servings of vegetables per day.¹³
- For participants in a communitybased health promotion program in Colorado, greater shelf space allocated to fresh produce corresponded with greater increases in fruit and vegetable consumption.¹²²
- The proportion of low-fat milk in stores is positively and directly related to its consumption according to a New York state study²¹ and a study that examined areas of California and Hawaii.¹²³
- One study asked residents to rank their access to healthy food and then examined their rankings in relation to their diets. Residents living in areas ranked by themselves or others as having the worst food environments were 22 to 35 percent less likely to eat a healthy diet than those living in areas ranked as having the best food environments.⁹¹

The Food Trust

 Access to healthy food is associated with diet-related disease

In addition to making it possible—and even more likely—for residents to eat healthy diets, the availability of healthy food in communities is related to a host of diet-related diseases including obesity and overweight, diabetes, and cardiovascular disease. Seventeen studies examined the relationship between healthy food access and diet-related health outcomes; approximately half were conducted by academics and half were conducted by policy researchers. Twelve found a positive relationship, ¹⁴, ²⁴, ²⁵, ²⁷, ³⁴, ⁴⁵, ⁴⁷, ²⁷, ²¹, ²¹⁵, ^{126, 128} three studies had mixed results, ^{127, 129, 145} and two studies had contrary findings. ^{78, 104}

Access to supermarkets

Five studies found that proximity to supermarkets corresponds with a lower body mass index (BMI), or rates of obesity, diabetes, or diet-related death among adults,^{27, 71-23, 125} and one found the same correlation among adolescents.⁴⁵ Only two studies focused on children. One found that supermarket access was associated with lower BMI among children in lower-density counties in Indianapolis (but not in higher-density ones).¹²⁷ The other tracked kindergarteners over four years and found that, controlling for individual characteristics, higher fruit and vegetable prices in their city or metro corresponded with weight gain, but the density of restaurants, convenience stores, or grocery stores around their schools did not make a difference.¹⁴⁵

- Adults living in neighborhoods with supermarkets or with supermarkets and grocery stores have the lowest rates of obesity (21 percent) and overweight (60–62 percent) and those living in neighborhoods with no supermarkets and access to only convenience stores, smaller grocery stores, or both had the highest rates (32–40 percent obesity; 73–78 percent overweight), according to a study of more than 10,000 adults.¹²⁵
- The lack of supermarket access corresponds with higher rates of dietrelated death in Philadelphia.²⁷

PolicyLink	The Food Trust
Local tax revenues Asset-building for Workforce training New businesses si	pacts: prohod housing markets low-income homeowners (via appreciating real estate assets) and development urrounding the store ng in the local economy generated by the store and the new jobs it
 In Los Angeles, a longer distance traveled to reach a grocery store was associated with higher BML. Those who traveled more than 1.75 miles to a supermarket weighed 0.8 BMI units more (4.8 pounds for a 5'5" person).³⁴ A national study of more than 70,000 teens also found that increased availability of chain supermarkets was associated with lower rates of overweight.⁴⁵ Food outlet mix Several studies^{14,24,25,47,136} have found that the mix of food stores available to residents is associated with diet-related health outcomes: 	 fast food dense neighborhood (six or more fast food restaurants per square kilometer) translates into a one pound decrease.¹⁹⁶ A 2009 study of Chicago's food deserts found that as the distance to the nearest grocer increases relative to the distance to the nearest finge food outlet, the Years of Potential Life Loss (YPLL) due to diseases such as cancer, cardiovascular disease, diabetes, and liver disease increases. This relationship is significant in African American communities, but less clear for white and Hispanic communities.²⁵ New and improved healthy
 Californians and New Yorkers living in areas with higher densities of fresh food markets compared to convenience stores and fast food restaurants have lower rates of obesity. In California, obesity and diabetes rates were 20 percent higher for those living in the least healthy "food environments," controlling for individual factors.¹⁴ In New York City, increasing "BMI-healthy" food stores in New York neighborhoods corresponded with lower obesity rates (though decreasing "BMI-nealthy" stores did not).⁴⁷ In Indianapolis, BMI values correspond with access to supermarkets and fast food restaurants. Researchers estimate that adding a new grocery store to a high-poverty neighborhood translates into a three pound weight decrease, and eliminating a fast food restaurant from a 	food retail in underserved communities creates jobs and helps to revitalize low-income neighborhoods Beyond the benefits to individual health described above, fresh food markets contribute to the overall health of neighborhoods and communities. Grocery stores are known by economic development practitioners to be high-volume "anchors" that generate foot traffic and attract complementary stores and services like banks, pharmacies, video rentals, and restaurants. ¹¹³ Yet compared to the study of food access and its health impacts, the study of economic impacts related to food retail development is an area of relatively limited research. Several methods have been developed to estimate the demand for food retail in underserved

The Food Trust

The Pennsylvania Fresh Food Financing Initiative has helped develop supermarkets and other fresh food outlets in 78 underserved urban and rural areas, increasing access to healthy food for nearly 500,000 residents and creating or retaining 4,860 jobs.

communities. Studies that use local data sources find that these neighborhoods have the potential to support thousands of square feet in additional grocery retail space.^{56-67, 134} One study estimated \$8.7 billion dollars in annual grocery leakage in inner-city neighborhoods.¹³⁵

Some have also investigated the impact of new supermarkets on nearby real estate values. When new food retailers enter areas that were previously under-retailed, they can bring viability to urban neighborhoods' commercial real estate markets, and can change perceptions that economically distressed urban areas are undesirable places to operate businesses.133 An assessment of the impact of new supermarkets on neighborhood housing values in Philadelphia found that the values of homes located within one-quarter to one-half mile of the new supermarkets increase by four to seven percent (an average of \$1,500) after the stores open, mitigating the downward trend in real estate values. In addition, the effect was larger in neighborhoods with weaker housing markets.130

Recent analyses of efforts to bring new grocery stores into underserved communities find that these businesses are viable (even thriving), offer a good selection of nutritious and affordable foods, and contribute greatly to local economic development. An examination of the first full-service supermarket to locate in New York City's Harlem neighborhood (thanks in part to a \$2.5 million loan from the city to cover construction costs), four years after its opening, found that the store allocated the same amount of space to a similar variety of fresh fruits and vegetables, fish, and meat as typical suburban supermarkets, at similar prices.¹³⁶ The store has been credited with catalyzing the revitalization of the neighborhood.¹³⁷ Studies of the Pennsylvania Fresh Food Financing Initiative (FFFI), a statewide public-private effort that has helped develop 78 supermarkets and other fresh food outlets in underserved urban and rural areas, also demonstrate the positive impacts of healthy food retailing. In addition to increasing access to healthy food for nearly 500,000 residents, the effort resulted in:

- Job creation. The initiative created or retained 4,860 jobs throughout the state. A recent case study of selected supermarkets in the Philadelphia region found that the vast majority of jobs created through the initiative (75 percent) were filled by local residents living within three miles of their workplace.138 A new store assisted by the initiative that is part of the regional ShopRite chain created 258 jobs and more than half were filled by local residents.13 When you add in the additional jobs that are created through a new store's multiplier effect, the total number of jobs becomes much higher: one grocery store that the effort helped launch is estimated to have created 660 jobs directly and indirectly.1
- Economic development. New and improved grocery stores can catalyze commercial revitalization in a community. An analysis of the economic impacts of five new stores that opened with FFFI assistance found that, for four of the stores, total employment surrounding the supermarket increased at a faster rate than citywide trends. This suggests a positive effect on overall economic activity resulting from the introduction of a new supermarket.¹³⁸

Implications for Policy

E xisting research provides clear evidence that food deserts exist in numerous low-income communities and communities of color across the country, and that they have significant negative impacts on health, social equity, and local economic development. The balance of the research strongly suggests that making affordable, healthy foods more available to underserved residents will lead to their making healthier choices about what to eat and, ultimately, better health, while contributing to economic and neighborhood revitalization.

While there is general agreement in the literature about the lack of access to healthy foods and increasing evidence about its consequences, fewer researchers have focused on the question of what are the most effective solutions. This search has largely been taken up by impacted communities and their advocates and supporters. Across the country, they are:

- Attracting or developing grocery stores and supermarkets;
- Developing other retail outlets such as farmers' markets, public markets, cooperatives, farmstands, communitysupported agriculture programs, and mobile vendors (and ensuring public benefits can be used at these venues);
- Increasing the stock of fruits, vegetables, and other healthy foods at neighborhood corner stores or small groceries;
- Growing food locally through backyard and community gardens and largerscale urban agriculture; and
- Improving transportation to grocery stores and farmers' markets.

Communities are using a variety of strategies to increase access to healthy foods, and their efforts provide several lessons for policymakers at the local, state, and federal level.¹⁴³

Until more systemic solutions are instituted, transportation barriers to fresh food markets need to be removed. Community groups and planners should evaluate existing transportation routes and improve coordination of bus routes, bus stops, and schedules or add vanpools or shuttles to maximize transit access to grocery stores and farmers' markets. Longer-term transportation and land use planning should promote the co-location of food retail, transit access, and affordable homes. Communities and retailers can launch programs such as mobile markets, grocery shuttles, and grocery vandelivery to improve access to healthy food.

Community groups, residents, researchers, and government agencies should work together to identify areas that lack access to healthy food and to understand local economic conditions and regional food systems. Areas lacking access should be prioritized, strategies for action need to identified, and then advocates need to demand the resources, programs, and policies to solve the access problem. Once underway, efforts should be monitored to examine progress over time, and advocates should seek the expansion of successful approaches.

Cities have many policy tools they can use to incentivize and promote healthy food retail including land use planning, zoning, economic development and redevelopment, and nutrition assistance. A recent analysis of retailers' location decisions found that the land availability, market demand (and data demonstrating that demand), construction and operations costs, and approval/ zoning requirements all pose barriers to locating in underserved urban areas.¹⁴¹ Cities can help

21

PolicyLink

The Food Trust

What Type of Food Access Will Make a Difference?

One question the research begins to address is whether supermarkets are the only solution to the "grocery gap" in low-income communities.

The majority of studies use supermarkets (typically defined by a sales volume of more than \$2 million or more than 50 employees) as a proxy for access to healthy foods. This makes sense because most Americans do the built of their grocery shopping at these stores (and increasingly at larger supercenters)¹⁴ and supermarkets more consistently and selection of affordable and nutritious foods compared to other types of food retailers.^{16, 44}

But more and more studies are using in-store surveys to examine the availability of particular healthy items or healthy "market baskets" and their consumption. These studies find the same relationship between access and diet as studies that look at supermarkets.

This suggests that health could be improved through many different food access strategies.

overcome these barriers by providing publicly owned land for food retailers, helping with land assembly, and identifying and marketing sites for grocery store development. Several cities have conducted internal assessments to understand how their agencies and departments can foster healthy food retail in underserved neighborhoods.

In New York City, the departments of health, planning, housing, economic development, and the Mayor's office all played a role in developing and implementing several innovative programs including: Green Carts, to help produce vendors locate in underserved neighborhoods with high rates of obesity and diabetes; Healthy Bodegas, to improve healthy offerings in corner stores; Health Bucks, to promote produce purchasing at farmers' markets; and FRESH, to provide zoning and financial incentives to promote groccery store development, upgrading, and expansion in underserved areas.

At the state and national level, fresh food financing initiatives—based on Pennsylvania's successful program (described on page 20)—that create public-private partnerships to support the development, renovation, and expansion of retail outlets offering fresh healthy food (such as grocery stores, farmes' markets, and cooperatives) should be developed.¹⁴⁴ The success of the Pennsylvania Fresh Food Financing Initiative demonstrates that public investments can leverage significant private investment and dramatically improve healthy food access. Policy replication efforts have been successful in Illinois, hew York, and New Orleans, and numerous replication efforts are underway in states across the country. Given the national scope of the problem, this successful state policy should be brought to a national scale so this innovative financing mechanism can be available to all communities.

Successful policies and programs need to be replicated and brought to a greater scale to increase healthy food access. A problem with such broad and negative impacts on health, economy, and equity warrants a focus at all levels—community, state, and national. Now is the time for bold, nationvide efforts to ensure that healthy food choices are available to all.

Methods

B etween May and July 2009, PolicyLink and The Food Trust created a comprehensive bibliography of studies related to food access and/or food access and health across the United States. Unlike previous review studies, which typically only include published work, we sought to include "grey literature," or studies, reports, and analyses that are not published in peer-reviewed journals. Public health agencies, community-based organizations, and policy groups frequently conduct primary data analyses of retail food access to inform their activities, but generally do not take the additional steps to submit their studies to journals for publication.

We used the following search methods to compile the bibliography:

- Sent requests for information to relevant listservs, e.g., COMFOOD, the National Neighborhood Indicators Partnership (ININP), American Evaluation Association (EVALTALK), and agency email lists;
- Wrote to 80 food policy councils across the country that are listed on the North American Food Policy Council website and the Community Food Security Coalition Food Policy Council Database;
- Contacted several foundations and leaders working in the food access field;
- Searched PubMed and other library databases related to the fields of planning, community development, and geography to identify formally published work related to urban and rural food access and health implications; and
- Reviewed reference lists of included studies.

The Food Trust

In order to be included, each study needed to meet the following criteria:

- Related directly or indirectly to identifying disparities in access to food retailers or healthy food, and the relationship between food retail and health;
- Either included original research on these topics or reviewed other studies;
- Conducted in the United States (while there have been studies conducted outside of the United States, the persistent trend of residential segregation by race/ethnicity and income in this country makes extrapolation from these studies of limited value); and
- Published during or after 1995 (although we included a few important studies that were conducted between 1990 and 1994).

One hundred and thirty-two studies were ultimately included in the database, of 168 articles initially gathered through the search methods above. We included studies that use random and nonrandom sampling methods and quantitative and qualitative techniques (such as resident interviews). We also included studies that examine single communities of interest (alone or in comparison to other areas). We excluded newsletters, policy statements, and studies that focused on methods and measurements. In one case we found two policy papers, one shorter than the other, based on the same study and data; they were counted as one study in the database.

Of the studies selected for the database, 61 were published in peer-reviewed journals, and 71 fell into the grey literature category. We did not systematically review the evidence quality (e.g., sample size, strength of methods used) of each



PolicyLink

References

Peer-Reviewed Journal Articles

Alwitt, L., and Donley, T. "Retail Stores in Poor Urban Neighborhoods." *Journal of Consumer Affairs* 31 (1997): 139–164.

Andrews, M., Kantor, L., Lino, M., and Ripplinger, D. "Using USDA's Thrifty Food Plan to Assess Food Availability and Affordability." *Food* Access 24, no.2 (2001): 45-53.

Andreyeva, T., Blumenthal, D., Schwartz, M., Long, M., and Brownell, K. "Availability and Prices of Foods Across Stores And Neighborhoods: The Case Of New Haven, Connecticut." *Health Affairs* 27, no.5 (2008): 1381–1388.

Auchincloss, A., Diez-Roux, A., Brown, D., Erdmann, C., Bertoni, A. "Neighborhood Resources for Physical Activity and Healthy Foods and Their Association with Insulin Resistance." *Epidemiology*, 19 (2008):146–157.

Baker, E., Schootman, M., Barnidge, E., and Kelly, C. "The Role of Race and Poverty in Access to Foods that Enable Individuals to Adhere to Dietary Guidelines." *Preventing Chronic Disease: Public Health Research, Practice and Policy* 3, no. 3 (2006): 1-11. Available at http://www. cdc.gov/pcd/issues/2006/jul/05_0217.htm.

Beaulac, J., Kristjansson, E., and Cummins, S. "A Systematic Review of Food Deserts, 1966-2007." Preventing Chronic Disease: Public Health Research, Practice and Policy 6, no. 3 (2009): 1-10. Available at http://www.cdc. gov/pcd/issues/2009/Jul/08_0163.htm.

Block, D., and Kouba, J. "A Comparison of the Availability and Affordability of a Market Basket in Two Communities in the Chicago Area." *Public Health Nutrition* 9, no.7 (2006): 837–845.

Bodor, J. N., Rose, D., Farley, T. A., Swalm, C., and Scott, S.K. "Neighbourhood Fruit and Vegetable Availability and Consumption: The Role of Small Food Stores in an Urban Environment." Public Health Nutrition 11 (2008): 413-420.

Caldwell E., Kobayashi, M., DuBow, W., and Wytinck, S. "Perceived Access to Fruits and Vegetables Associated with Increased Consumption." *Public Health Nutrition* (2008): 1743-50.

Cheadle A., Psaty, B., Curry, S., Wagner, E., Diehr, P., Koepsell, T., and Kristal, A. "Community-Level Comparisons Between Grocery Store Environment and Individual Dietary Practices." *Preventive Medicine* 20, no.2 (1991): 250-61.

Clifton, K. "Mobility Strategies and Food Shopping for Low-Income Families: A Case Study." Journal of Planning Education and Research 23 (2004): 402-413.

Cotterill, R., and Franklin, A. "The Urban Grocery Store Gap." Food Marketing Policy Center, University of Connecticut. Food Marketing Policy Issue Paper 8 (1995).

Fisher, B., and Strogatz, D. "Community Measures of Low-Fat Milk Consumption: Comparing Store Shelves with Households." *American Journal* of *Public Health* 89, no.2 (1999): 235–237.

Franco, M., Roux, A., Glass, T., Caballero, B., and Brancati, F. "Neighborhood Characteristics and Availability of Healthy Foods in Baltimore." *American Journal of Preventive Medicine* 35, no.6 (2008): 561–567.

Galvez, M., Morland, K., Raines, C., et al. "Race and Food Store Availability in an Inner-City Neighbourhood." *Public Health Nutrition* 11 (2007): 624–631.

Giang, T., Karpyn, A., Laurison, H., Hillier, A., Burton, M., and Perry, D. "Closing the Grocery Gap in Underserved Communities: The Creation of the Pennsylvania Fresh Food Financing Initiative." Journal of Public Health Management and Practice 14, no.3 (2008): 272-279.

25

The Food Trust

PolicyLink

Gittelsohn, J., Franceschini, M., Rasooly, I., Ries, A., Ho, L., Pavlovich, W., Santos, V., Jennings, S., and Frick, K. "Understanding the Food Environment in a Low-Income Urban Setting: Implications for Food Store Interventions." *Journal of Hunger & Environmental Nutrition* 2, no.2 (2008): 33-50.

Glanz, K., Sallis, J., Saelens, B., and Frank, L. "Nutrition Environment Measures Survey in Stores (NEMS-S) Development and Evaluation." *American Journal of Preventive Medicine* 32, no.4 (2007): 282-289.

Helling, A., and Sawicki, D. "Race and Residential Accessibility to Shopping and Services." *Housing Policy Debate* 14, no.1 (2003): 69-101.

Horowitz, C., Colson, K., Hebert, P., and Lancaster K. "Barriers to Buying Healthy Foods for People with Diabetes: Evidence of Environmental Disparities." *American Journal* of *Public Health* 94 (2004): 1549–1554.

Hosler, A., Rajulu, D., Fredrick, B., and Ronsani, A. "Assessing Retail Fruit and Vegetable Availability in Urban and Rural Underserved Communities." *Preventing Chronic Disease* 5, no.4 (2008): 1-9. Available at http://www. cdc.gov/pcd/issues/2008/oct/07_0169.htm.

Hosler, A., Varadarajulu, D., Ronsani, A., Fredrick, B., and Fisher, B. "Low-Fat Milk and High-Fiber Bread Availability in Food Stores in Urban and Rural Communities." *Journal of Public Health Management Practice* 12 (2006): 556–562.

Inagami, S., Cohen, D., Finch K. B., and Asch, S. "You are Where You Shop: Grocery Store Locations, Weight, and Neighborhoods." *American Journal* of Preventive Medicine 31, no.1 (2006): 10-17.

Jago, R., Baranowski, T., Baranowski, J., Cullen, K., and Thompson, D. "Distance to Food Stores and Adolescent Male Fruit and Vegetable Consumption: Mediation Effects." International Journal of Behavioral Nutrition and Physical Activity 4 (2007): 4-35. Available at http://www.ijbnpa.org/content/4/1/35.

Jetter, K., and Cassady, D. "The Availability and Cost of Healthier Food Alternatives." *American Journal of Preventive Medicine* 30 (2006): 38–44.

Kaufman, P. "Rural Poor Have Less Access to Supermarkets, Large Grocery Stores." Rural Development Perspectives 13 (1998): 19–26. Available at http://www.ers.usda.gov/ publications/rdp/rdp1098/rdp1098c.pdf.

Laraia, B., Siega-Riz, A., Kaufman, J. and Jones, S. "Proximity of Supermarkets Is Positively Associated with Diet Quality Index for Pregnancy." *American Journal of Preventive Medicine* 39 (2004): 869–875.

Larson, N., Story, M., and Nelson, M. "Neighborhood Environments Disparities in Access to Healthy Foods in the U.S." *American Journal of Preventative Medicine* 36, no.1 (2009): 74-81.

Lavin, M. "Supermarket Access and Consumer Well-Being: The Case of Pathmark in Harlem." International Journal of Retail and Distribution Management 33, no.5 (2005): 388-398.

Liese, A., Weis, K., Pluto, D., Smith, E., and Lawson, A. "Food Store Types, Availability, and Cost of Foods in a Rural Environment." *Journal of the American Dietetic Association* 107 (2007): 1916–1923.

Liu, G., Wilson, J., Qi, R., and Ying, J. "Green Neighborhoods, Food Retail and Childhood Overweight: Differences by Population Density." American Journal of Health Promotion 21, no.4 (2007): 317-325.

Moore, L., and Roux, A. "Associations of Neighborhood Characteristics with the Location and Type of Food Stores." American Journal of Public Health 96 (2006): 325–331.

Moore, L., Roux, A., and Brines, S. "Comparing Perception-Based and Geographic Information System (GIS)-Based Characterizations of the Local Food Environment." Journal of Urban Health: Bulletin of the New York Academy of Medicine 85, no.2 (2008).

Moore, L., Roux, A., Nettleton, J., and Jacobs, D. "Associations of the Local Food Environment with Diet Quality—A Comparison of Assessments Based on Surveys and Geographic Information Systems: The Multi-Ethnic Study of Atherosclerosis." American Journal of Epidemiology 167 (2008): 917–924.

Morland, K., and Filomena, S. "Disparities in the Availability of Fruits and Vegetables Between Racially Segregated Urban Neighbourhoods." *Public Health Nutrition* 10, no.12 (2007): 1481-1489.

Morland, K., Roux, A., and Wing, S. "Supermarkets, Other Food Stores, and Obesity: The Atherosclerosis

The Food Trust

Risk in Communities Study." American Journal of Preventive Medicine 30, no.4 (2006): 333-339.

Morland, K., and Evenson, K. "Obesity Prevalence and the Local Food Environment." *Health & Place* 15, no.2 (2009): 491-495.

Morland, K., Wing, S., Roux, A., and Poole, C. "Neighborhood Characteristics Associated with the Location of Food Stores and Food Service Places." *American Journal of Preventive Medicine* 22 (2002): 23–29.

Morland, K., Wing, S., and Roux, A. "The Contextual Effect of the Local Food Environment on Residents' Diets: The Atherosclerosis Risk in Communities Study." *American Journal of Public Health* 92, no.11 (2002): 1761-67.

Morton, L., and Blanchard, T. "Starved for Access: Life in Rural America's Food Deserts." *Rural Realities* 1, no.4 (2007). Available at www. ruralsociology.org/pubs/ruralrealities/issue4.html.

Nayga, M., and Weinberg, Z. "Supermarket Access in the Inner Cities." *Journal of Retailing* and Consumer Services 6, no.3 (1999): 141-145.

Powell, L., Auld, C., Chaloupka, F., O'Malley, P. M., and Johnston, L. D. "Associations Between Access to Food Stores and Adolescent Body Mass Index," *American Journal of Preventive Medicine* 33, no.4 (2007).

Powell, L., Slater, S., Mirtcheva, D., Bao, Y., and Chaloupka, F. "Food Store Availability and Neighborhood Characteristics in the United States." *American Journal of Preventive Medicine* 44 (2007): 189–195.

Raja, S., Ma, C., and Yadav, P. "Beyond Food Deserts: Measuring and Mapping Racial Disparities in Neighborhood Food Environments." *Journal of Planning Education and Research* 27 (2008): 469-482.

Rose, D., and Richards, R. "Food Store Access and Household Fruit and Vegetable Use among Participants in the US Food Stamp Program." *Public Health Nutrition* 7, no. 8 (2004): 1081-1088.

Rundle, A., Neckerman, K., Freeman, L., Lovasi, G., Purciel, M., Quinn, J., Richards, C., Sircar, N., and Weiss, C. "Neighborhood Food Environment and Walkability Predict Obesity in New York City." *Environmental Health Perspectives* 117 (2009): 442–447. Sekhobo, J., and Berney, B. "The Relation of Community Occupational Structure and Prevalence of Obesity in New York City Neighborhoods— An Ecological Analysis." Journal of Hunger & Environmental Nutrition 3, no.1 (2008): 76-83.

Sharkey J., and Horel, S. "Neighborhood Socioeconomic Deprivation and Minority Composition are Associated with Better Potential Spatial Access to the Ground-Truthed Food Environment in a Large Rural Area." The Journal of Nutrition 138 (2008): 620–627.

Sharkey, J., Scott, H., Daikwon, H., and Huber, J. "Association Between Neighborhood Need and Spatial Access to Food Stores and Fast Food Restaurants in Neighborhoods of Colonias." International Journal of Health Geographics 8, no.9 (2009): 1-17.

Short, A., Guthman, J., and Raskin, S. "Food Deserts, Oases, or Mirages? Small Markets and Community Food Security in the San Francisco Bay Area." *Journal of Planning Education and Research* 26 (2007): 352.

Sloane, D., Diamount, A., Lewis, L, et al. "Improving the Nutritional Resource Environment for Healthy Living Through Community-Based Participatory Research." *The Journal of General Internal Medicine* 18 (2003): 568–575.

Small, M. L., and McDermott, M. "The Presence of Organizational Resources in Poor Urban Neighborhoods: An Analysis of Average and Contextual effects." *Social Forces* 84 (2006): 1697-1724.

Sturm, R. "Disparities in the Food Environment Surrounding U.S. Middle and High Schools." *American Journal of Public Health* 122 (2008): 681–690.

Sturm, R., and Datar, A. "Body Mass Index in Elementary School Children, Metropolitan Area Food Prices and Food Outlet Density." Journal of Public Health 119 (2005): 1059–1068.

Wang, M., Kim, S., Gonzalez, A., MacLeod, K., and Winkleby, M. "Socioeconomic and Food-Related Physical Characteristics of the Neighborhood Environment are Associated with Body Mass Index." Journal of Epidemiology and Community Health 61 (2007): 491–498.

Zenk, S., and Powell, L. "U.S. Secondary Schools and Food Outlets." Health & Place, 14 (2008): 336–346.

Zenk, S. H., Schulz, A., Hollis-Neely, T., Campbell, R. T., Watkins, G., Nwankwo, R., and Odoms-Yound, A. "Fruit and Vegetable Intake in African Americans Income and Store Characteristics." *American Journal of Preventive Medicine* 20, no.1 (2005).

Zenk, S., Schulz, A., Israel, B., James, S., Bao, S., and Wilson, M. "Neighborhood Racial Composition, Neighborhood Poverty, and the Spatial Accessibility of Supermarkets in Metropolitan Detroit." *American Journal of Public Health* 95 (2005): 660–667.

Zenk, S., Schulz, A., Israel, B., Sherman, J., Bao, S., and Wilson, M. "Fruit and Vegetable Access Differs by Community Racial Composition and Socioeconomic Position in Detroit, Michigan." *Ethnicity & Disease* 16 (2006): 75-280.

Grey Literature

Alameda Point Collaborative, Alameda Point Collaborative Food Security Findings and Recommendations. Alameda, CA: Alameda Point Collaborative, 2006. Available at http://www. apcollaborative.org/images/APC_GrowingYouth.pdf.

Alberti, P., Hadi, E., Cespedes, A., Grimshaw, V., and Bedell, J. Farmers' Markets—Bringing Fresh, Nutritious Food to the South Bronx. New York, NY: New York City Department of Health and Mental Hygiene, 2008. Available at http://www.ci.nyc.ny.us/html/doh/downloads/ pdf/dpho/dpho-farmersmarket.pdf.

Beatley, T., et al. The Charlottesville Region Food System: A Preliminary Assessment. Charlottesville, VA: University of Virginia, 2006. Available at http://www.virginia.edu/ren/ docs/06FINALRept_Jun06_CvilleFood.pdf.

Birnbach, K. Food for Thought. Access and Availability of Health Food in East Austin. Austin, TX: University of Texas at Austin, 2008.

Bjorn, A., Lee, B., Born, B., Monsivais, P., Kantor, S., Sayre, R. At the Table with the AFPC. Mapping Food Insecurity and Access in Seattle and King County Issue. Seattle, WA: Seattle and King County Acting Food Policy Council, 2008.

Blanchard, T., and Lyson, T. "Access to Low Cost Groceries in Nonmetropolitan Counties: Large Retailers and the Creation of Food Deserts." Mississippi, MS: Southern Rural

The Food Trust

Development Center, 2006. Available at http:// srdc.msstate.edu/measuring/blanchard.pdf.

Blanchard, T., and Lyson, T. "Food Availability & Food Deserts in the Nonmetropolitan South." Mississippi, MS: Southern Rural Development Center, 2006. Available at http://srdc.msstate. edu/focusareas/health/fa/fa_12_blanchard.pdf.

Blanchard, T., and Lyson, T. "Retail Concentration, Food Deserts, and Food Disadvantaged Communities in Rural America." Mississippi, MS: Southern Rural Development Center, 2009. Available at http://srdc.msstate.edu/ focusareas/health/fa/blanchard02_final.pdf.

California Center for Public Health Advocacy. Searching for Healthy Food: The Food Landscape in California Cities and Counties. Davis, CA: California Center for Public Health Advocacy, 2007.

California Center for Public Health Advocacy, PolicyLink, and the UCLA Center for Health Policy Research. *Designed for Disease: The Link Between Local Food Environments and Obesity and Diabetes.* Davis, CA: California Center for Public Health Advocacy, 2008. Available at http://www. policylink.org/documents/DesignedforDisease.pdf.

Chen, S., Raymond, F., and Snyder, S. "Obesity in Urban Food Markets: Evidence from Georeferenced Micro Data." West Lafayette, IN: Purdue University, 2009. Available at http://www.npc.umich.edu/ news/events/food-access/chen_et_al_revised.pdf.

City Harvest. Mount Hope Community Food Assessment Report. New York, NY: City Harvest, 2009. Available at http://www.cityharvest. org/images/pdf/Mount_Hope_CFA.pdf.

City Harvest. The Melrose Community Food Assessment. New York, NY: City Harvest, 2009. Available at http://www.cityharvest. org/images/pdf/Melrose_CFA_2007.pdf.

Community Farm Alliance. Bridging the Divide. Growing Self-Sufficiency in Our Food Supply: Community Food Assessment. A Regional Approach for Food Systems in Louisville KY. Frankfort, KY: Community Farm Alliance, 2007. Available at http://www. communityfarmalliance.org/BridgingTheDivide.pdf.

Community Health Councils Inc. Does Race Define What's in the Shopping Cart? Community Health and Education. Los Angeles, CA:

Community Health Councils Inc., 2008.

28

The Food Trust

PolicyLink

D.C. Hunger Solutions. Healthy Food, Healthy Communities: An Assessment and Scorecard of Community Food Security In the District of Columbia. Washington, DC: D.C. Hunger Solutions, 2006. Available at http://www. dchunger.org/pdf/healthfoodcomm.pdf.

Fresno Metro Ministry. Fresno Fresh Access: Community Food Assessment Report. 2003-2005. Fresno, CA: Fresno Metro Ministry, 2005. Available at http://fresnometmin.org/ fmm/pdfs/CFA_Summary_9-14-05.pdf.

Frontier Nutrition Project. Trinity County Food Security Assessment. Weaverville, CA: Frontier Nutrition Project, 2001. Available at http://www.foodsecurity.org/ cfa/trinity_cty_food_assessment.pdf.

Fulfrost, B. Mapping the Markets: The Relative Density of Retail Food Stores in Densely Populated Census Blocks in the Central Coast Region of California. Santa Cruz, CA: University of California, Santa Cruz, 2006. Available at http://casfs. ucsc.edu/research/MappingTheMarkets.pdf.

Gallagher, M. *The Chicago Food Desert Report*. Chicago, IL: Mari Gallagher Research and Consulting Group, 2009. Available at www.marigallagher.com.

Gallagher, M. Examining the Impact of Food Deserts on Public Health in Chicago. Chicago, IL: Mari Gallagher Research and Consulting Group, 2006. Available at http://www. marigallagher.com/site_media/dynamic/project_ files/1_ChicagoFoodDesertReport-Full_.pdf.

Gallagher, M. Examining the Impact of Food Deserts on Public Health in Detroit. Chicago, IL: Mari Gallagher Research and Consulting Group, 2007. Available at http://www. marigallagher.com/site_media/dynamic/project_ files/1_DetroitFoodDesertReport_Full.pdf.

Goldstein, I., Loethen, L., Kako, E., and Califano, C. *CDFI Financing of Supermarkets in Underserved Communities: A Case Study.* Philadelphia, PA: The Reinvestment Fund, 2008. Available at http://www.trfund.com/resource/ downloads/policypubs/CDFIStudySummary.pdf.

Gordon, C., Ghai, N., Purciel, M., Talwalkar, A., and Goodman, A. *Eating Well in Harlem: How Available Is Healthy Food*? New York, NY: New York City Department of Health and Mental Hygiene, 2007. Graham, R., Kaufman, L., Novoa, Z., and Karpati, A. *Eating In, Eating Out, Eating Well: Access to* Healthy Food in North and Central Brooklyn. New York, NY: New York City Department of Health and Mental Hygiene, 2006.

Hartford Food System. Connecticut's Supermarkets: Can New Strategies Address the Geographic Gaps? Hartford, CT: Hartford Food System, 2006. Available at http://www. hartfordfood.org/pubs/supermarkets.pdf.

Hatfield, D., and Gunnell, A. *Food Access in California Today*. Portland, OR: Ecotrust, 2005. Available at http://www.vividpicture.net/documents/12_Food_Access_in_CA_Today.pdf.

Hrisanti, A., Chong, T., Dang, J., et al. *The East Baltimore Nutritional Environment: Formative Research with Community Leaders*. Baltimore, MD: Healthy Stores Project, 2003. Available at http://www.healthystores. org/images/downloads/eastbalt.pdf.

Hunger Task Force of Milwaukee. Hunger in Milwaukee, Some Food for Thought. Milwaukee, WI: Hunger Task Force of Milwaukee, 2002. Available at http://www.hungertaskforce.org/ userimages/publications_foodforthought_report.pdf.

Kaiser, C. Healthy Food Access in Minneapolis: Initial Conversations with Residents. Minneapolis, MN: Institute for Agriculture and Trade Policy, 2009. Available at http://www.iatp.org/iatp/ publications.cfm?accountID=258&refID=104952.

Kaufman, L., and Karpati, A. Food Matters: What Bushwick Families' Food Habits Teach Us about Childhood Obesity. New York, NY: New York City Department of Health and Mental Hygiene, 2007.

King, R., Leibtag, E., and Behl, A. "Supermarket Characteristics and Operating Costs In Low-Income Areas," *Agricultural Economics Reports.* Washington, DC: United States Department of Agriculture, Economic Research Service, 2004.

Lopez, R. Community Food Security in Connecticut: An Evaluation and Ranking of 169 Towns. Storrs, CT: Hartford Food System, 2005. Available at http:// www.hartfordfood.org/pubs/cfs_connecticut.pdf.

Manjarrez, C., and Cigna, J. Food Stamp Participation and Market Access in the District of Columbia. Discussion Brief No. 3. Washington, DC: Urban Institute, 2006. Available at http://www. urban.org/UploadedPDF/311343_dcfoodstamp.pdf.

Morton, L., Oakland, J., Bitto, E., Sand, M., and Michaels, B. Iowa Community Food Assessment

The Food Trust

PolicyLink

Project Report 2001-02. Ames, IA: Iowa State University Family Nutrition Program, 2002. Available at http://www.soc.iastate.edu/extension/pub/tech/ IowaCommunityFoodAssessmentReport.pdf.

Neckerman, K., Bader, M., Purciel, M., and Yousefzadeh, P. "Measuring Food Access in Urban Areas." New York, NY: Columbia University, 2009. Available at http://www.npc.umich.edu/ news/events/food-access/neckerman_et_al.pdf.

New Mexico Food and Agriculture Policy Council. *Closing New Mexico's Rural Food Gap.* Santa Fe, NM: New Mexico Food and Agriculture Policy Council, 2006. Available at http://www. farmtotablenm.org/closing_nm_food_gap_4pgs.pdf.

New York City Department of City Planning. Going to Market: New York City's Neighborhood Grocery Store and Supermarket Shortage. New York, NY, 2008. Available at http://www.nyc. gov/html/dcp/html/supermarket/index.shtml.

Papavasiliou, F., Essig, C., Barlett, P., and Rolls, A. Is Healthy Eating Possible in DeKalb County? An Assessment of Food Availability, Access, and Cost in Two Neighborhoods. Atlanta Local Food Initiative. Decatur, GA: DeKalb County Board of Health, 2007.

Rose, D., Bodor, N., Swalm, C., Rice, J., Farley, T., and Hutchinson, P. *Deserts in New Orleans? Illustrations of Urban Food Access and Implications for Policy*. Ann Arbor, MI: University of Michigan National Poverty Center/USDA Economic Research Service, 2009. Available at http://www.npc.umich. edu/news/events/food-access/rose et al.pdf.

Sacramento Hunger Coalition. The Avondale/Glen Elder Community Food Assessment. Food Security in a South Sacramento Neighborhood. Sacramento, CA: Sacramento Hunger Coalition, 2004.

San Francisco Food Alliance. 2005 San Francisco Collaborative Food System Assessment. San Francisco, CA: San Francisco Food Alliance, 2005. Available at http://www. sffoodsystems.org/pdf/FSA-online.pdf.

Shaffer, A. The Persistence of L.A.'s Grocery Gap: The Need for a New Food Policy and Approach to Market Development. Occidental, CA: Center for Food and Justice, 2002. Available at www.departments.oxy.edu/uepi/ publications/the_persistence_of.htm.

Sharkey, J., and Horel, S. "Characteristics of Potential Spatial Access to a Variety of Fruits and Vegetables in a Large Rural Area." College Station, TX: Texas A&M Health Science Center, 2009. Available at http://www.npc.umich. edu/news/events/food-access/sharkey.pdf.

Smith, D. Food Deserts in the Willamette: A Study of Food Access in Lane County, Oregon. [Master's thesis]. Eugene, OR: University of Oregon, 2003.

Social Compact Inc., Baltimore Neighborhood Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods.

Washington, DC: Social Compact Inc., 2008. Social Compact Inc., *Cincinnati Neighborhood*

Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2007.

Social Compact Inc., *Detroit Grocery Initiative* Catalyzing Grocery Retail Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2008.

Social Compact Inc., City of Fresno Neighborhood Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2009.

Social Compact Inc., City of Tampa Neighborhood Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2008.

Social Compact Inc., Harlem Neighborhood Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2008.

Social Compact Inc., Houston Neighborhood Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2007.

Social Compact Inc., *Los Angeles Neighborhood Market DrillDown*. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2008.

Social Compact Inc., Louisville Metro Neighborhood Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2008.

Social Compact Inc., San Francisco Neighborhood Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2008.

Social Compact Inc., Southeast Fort Worth Neighborhood Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2008.

Social Compact Inc., Washington DC Neighborhood Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2008.

Southeast Food Access Working Group. Food Preferences in San Francisco's Southeast Sector: A Survey Conducted by the Southeast Food Access Working Group. San Francisco, CA: Southeast Food Access Working Group, 2007. Available at http://www.sfgov.org/site/uploadedfiles/ shapeupsf/SEFASurveyReport-FINAL.pdf.

Sparks, A., Bania, N., and Leete, L. "Finding Food Deserts: Methodology and Measurement of Food Access in Portland, Oregon." Washington, DC: National Poverty Center and USDA Economic Research Service, 2009.

Sustainable Food Center. Access Denied. An Analysis of Problems Facing East Austin Residents in Their Attempts To Obtain Affordable, Nutritious Food. Austin, TX: Sustainable Food Center, 1995. Available at http://www.sustainablefoodcenter. org/library/Access_Denied.pdf.

Tanaka, K., Mooney, P., et al. Lexington Community Food Assessment: 2004-2007. Lexington, KY: University of Kentucky, 2008. Available at http://www.uky.edu/Ag/CLD/doc/ CommunityFoodAssessmentReport04-07.pdf.

Tchumtchoua, A. Town-Level Assessment of Community Food Security in Connecticut. Storrs, CT: Food Marketing Policy Center, 2005. Available at http://digitalcommons.uconn.edu/cgi/viewcontent. cgi?article=1000&context=fpmc_mono.

The Food Trust. Stimulating Supermarket Development: A New Day for Philadelphia, Philadelphia, PA: The Food Trust, 2004. Available at http://www.thefoodtrust. org/pdf/SupermktReport_Epdf.

The Food Trust. The Need for More Grocery Stores in New York. Special Report. Philadelphia, PA: The Food Trust, 2008. Available at http://www.thefoodtrust. org/catalog/download.php?product_id=147.

The Food Trust. The Need for More Supermarkets in Chicago. Philadelphia, PA: The Food Trust, 2008. Available at http://www.thefoodtrust. org/catalog/download.php?product_id=147.

The Reinvestment Fund. The Economic Impacts of Supermarkets on their Surrounding Communities, Philadelphia, PA: The Reinvestment Fund, 2008. http://www.trfund.com/resource/ downloads/policypubs/supermarkets.pdf.

Thurman, S. Measuring Access to Food in Charlottesville, VA. Charlottesville, VA: University of Virginia, 2007. Available at http://www. virginia.edu/ien/docs/07FoodClassFINAL%20 PAPERS/AccessTransportation.pdf.

Tsai, S. Needs Assessment: Access to Nutritious Foods in East Oakland and South Hayward. [Master's Thesis]. Berkeley, CA: University of California at Berkeley School of Public Health and Alameda County Public Health Department, 2003.

Unger., S., and Wooten., H. A Food Systems Assessment For Oakland, CA: Toward A Sustainable Food Plan. [Master's Thesis]. Berkeley, CA: Oakland Mayor's Office of Sustainability and University of California, Berkeley, 2006.

Urban and Environmental Policy Institute. Food Access in Central and South Los Angeles: Mapping Injustice, Agenda for Action. 2007: A Report on Project CAFE: Community Action on Food Environments. Los Angeles, CA: Urban and Environmental Policy Institute 2007. Available at http://departments.oxy. edu/uepi/cfj/publications/project_cafe.pdf.

USDA Economic Research Service. Access to Affordable and Nutritious Food: Measuring and Understanding Food Deserts and Their Consequences. Report to Congress. Washington, DC: U.S. Department of Agriculture, 2009. Available at http://www.ers.usda. gov/Publications/AP/AP036/AP036.pdf.

Williams, D. Food Security and Access in Akron Ohio. [Master's Thesis]. Akron, OH: University of Akron, 2002.

120

Notes

¹ Martinez, S. "The U.S. Food Marketing System: Recent Developments, 1997-2006," Washington, DC: United States Department of Agriculture, Economic Research Service, 2007. Available at www.ers.usda.gov/publications/err42/.

² Contact the authors for summaries of the study findings that can be sorted by place and subtopic (e.g. race, income, eating behaviors).

³ Beaulac, J., Kristjansson, E., and Cummins, S. "A Systematic Review of Food Deserts, 1966-2007." Preventing Chronic Disease: Public Health Research, Practice and Policy 6, no.3 (2009): 1-10. Available at http://www.cdc. gov/pcd/issues/2009/Jul/08_0163.htm.

⁴ Larson, N., Story, M., and Nelson, M. "Neighborhood Environments Disparities in Access to Healthy Foods in the U.S." *American Journal of Preventative Medicine* 36, no.1 (2009): 74-81.

⁵ Nayga, M., and Weinberg, Z. "Supermarket Access in the Inner Cities." *Journal of Retailing* and Consumer Services 6, no.3 (1999): 141-145.

⁶ One study interviewed Minneapolis residents about access to healthy food and found challenges, but did not examine differences according to their race, income, or neighborhood of residence. Kaiser, C. *Healthy Food Access in Minneapolis: Initial Conversations with Residents*, Minneapolis, MN: Institute for Agriculture and Trade Policy, 2009. Available at http://www.iatp.org/iatp/ publications.cfm?accountID=2588refID=104952.

⁷ Alameda Point Collaborative. Alameda Point Collaborative Food Security Findings and Recommendations. Alameda, CA: Alameda Point Collaborative, 2006. Available at http://www. apcollaborative.org/images/APC_GrowingYouth.pdf.

⁸ Alwitt, L., and Donley, T. "Retail Stores in Poor Urban Neighborhoods." *Journal of Consumer Affairs* 31 (1997):139–64.

⁹ Andreyeva, T., Blumenthal, D., Schwartz, M., Long, M., and Brownell, K. "Availability and Prices of Foods Across Stores and Neighborhoods: The Case Of New Haven, Connecticut." *Health Affairs* 27, no.5 (2008): 1381–1388.

¹⁰ Baker, E., Schootman, M., Barnidge, E., and Kelly, C. "The Role of Race and Poverty in Access to Foods that Enable Individuals to Adhere to Dietary Guidelines." *Preventing Chronic Disease: Public Health Research, Practice and Policy* 3, no.3 (2006): 1-11. Available at http://www. cdc.gov/pcd/issues/2006/jul/05_0217.htm.

¹¹ Birnbach, K. Food for Thought. Access and Availability of Health Food in East Austin. Austin, TX: University of Texas at Austin, 2008.

¹² Bjorn, A., Lee, B., Born, B., Monsivais, P., Kantor, S., and Sayre, R. At the Table with the AFPC. Mapping Food Insecurity and Access in Seattle and King County Issue. Seattle, WA: Seattle and King County Acting Food Policy Council, 2008.

¹³ Bodor, J. N., Rose, D., Farley, T. A., Swalm, C., and Scott, S. K. "Neighbourhood Fruit and Vegetable Availability and Consumption: The Role of Small Food Stores in an Urban Environment." *Public Health Nutrition* 11 (2008): 413-420.

¹⁴ California Center for Public Health Advocacy, PolicyLink, and the UCLA Center for Health Policy Research. Designed for Disease: The Link Between Local Food Environments and Obesity and Diabetes. Davis, CA: California Center for Public Health Advocacy, 2008. Available at http://www. policylink.org/documents/DesignedforDisease.pdf.

¹⁵ Chung, C., and Myers, J. "Do the Poor Pay More for Food? An Analysis of Grocery Store Availability and Food Price Disparities." *Journal* of Consumer Affairs 33 (1999): 276–296.

¹⁶ Clifton, K. "Mobility Strategies and Food Shopping for Low-Income Families: A Case Study." Journal of Planning Education and Research 23 (2004): 402-413.

¹⁷ Community Farm Alliance. Bridging the Divide. Growing Self-Sufficiency in our Food

32

Supply: Community Food Assessment. A Regional Approach for Food Systems in Louisville KY: Frankfort, KY: Community Farm Alliance, 2007. Available at http://www. communityfarmalliance.org/BridgingTheDivide.pdf.

¹⁸ Community Health Councils Inc. Does Race Define What's in the Shopping Cart? Community Health and Education. Los Angeles, CA: Community Health Councils Inc., 2008.

¹⁹ Cotterill, R., and Franklin, A. "The Urban Grocery Store Gap." Food Marketing Policy Center, University of Connecticut. *Food Marketing Policy* Issue Paper 8 (1995).

²⁰ D.C. Hunger Solutions. Healthy Food, Healthy Communities: An Assessment and Scorecard of Community Food Security In the District of Columbia. Washington, DC: D.C. Hunger Solutions, 2006. Available at http://www. dchunger.org/pdf/healthfoodcomm.pdf.

²¹ Fisher, B., and Strogatz, D. "Community Measures of Low-Fat Milk Consumption: Comparing Store Shelves with Households." *American Journal* of *Public Health* 89, no.2 (1999): 235–237.

²² Urban and Environmental Policy Institute. Food Access in Central and South Los Angeles: Mapping Injustice, Agenda for Action. A Report on Project CAFE: Community Action on Food Environments. Los Angeles, CA: Urban and Environmental Policy Institute, 2007. Available at http://departments. oxy.edu/uepi/cfi/publications/project_cafe.pdf.

²³ Franco, M., Roux, A., Glass, T., Caballero, B., and Brancati, F. "Neighborhood Characteristics and Availability of Healthy Foods in Baltimore." *American Journal of Preventive Medicine* 35, no.6 (2008): 561–567.

²⁴ Gallagher, M. Examining the Impact of Food Deserts on Public Health in Chicago. Chicago, IL: Mari Gallagher Research and Consulting Group, 2006. Available at http://www. marigallagher.com/site_media/dynamic/project_ files/1_ChicagoFoodDesertReport-Full_.pdf.

²⁵ Gallagher, M. *The Chicago Food Desert Report*. Chicago, IL: Mari Gallagher Research and Consulting Group, 2009. Available at www.marigallagher.com.

²⁶ Galvez, M., Morland, K., Raines, C., et al. "Race and Food Store Availability in an Inner-City Neighbourhood." *Public Health Nutrition* 11 (2007): 624–631. ²⁷ Giang, T., Karpyn, A., Laurison, H., Hillier, A., Burton, M., and Perry, D. "Closing the Grocery Gap in Underserved Communities: The Creation of the Pennsylvania Fresh Food Financing Initiative." *Journal of Public Health Management and Practice* 14, no.3 (2008): 272-279.

122

²⁸ Glanz, K., Sallis, J., Saelens, B., and Frank, L. "Nutrition Environment Measures Survey in Stores (NEMS-S) Development and Evaluation." *American Journal of Preventive Medicine* 32, no. 4 (2007): 282-289.

²⁹ Hartford Food System. Connecticut's Supermarkets: Can New Strategies Address the Geographic Gaps? Hartford, CT: Hartford Food System, 2006. Available at http://www. hartfordfood.org/pubs/supermarkets.pdf.

³⁰ Helling, A., and Sawicki, D. "Race and Residential Accessibility to Shopping and Services." *Housing Policy Debate* 14, no.1 (2003): 69-101.

³¹ Horowitz, C., Colson, K., Hebert, P., and Lancaster, K. "Barriers to Buying Healthy Foods for People with Diabetes: Evidence of Environmental Disparities." *American Journal* of Public Health 94 (2004): 1549–1554.

³² Hosler, A., Rajulu, D., Fredrick, B., and Ronsani, A. "Assessing Retail Fruit and Vegetable Availability in Urban and Rural Underserved Communities." *Preventing Chronic Disease* 5, no.4 (2008): 1-9. Available at http://www. cdc.gov/pcd/issues/2008/oct/07_0169.htm.

³³ Hosler, A., Varadarajulu, D., Ronsani, A., Fredrick, B., and Fisher, B., "Low-Fat Milk and High-Fiber Bread Availability in Food Stores in Urban and Rural Communities." *Journal of Public Health Management Practice* 12 (2006): 556–562.

³⁴ Inagami, S., Cohen, D., Finch K. B., and Asch, S. "You are Where you Shop: Grocery Store Locations, Weight, and Neighborhoods." *American Journal* of Preventive Medicine 31, no.1 (2006): 10-17.

³⁵ Jetter, K., and Cassady, D. "The Availability and Cost of Healthier Food Alternatives." *American Journal of Preventive Medicine* 30 (2006): 38–44.

³⁶ Kaufman, P. "Rural Poor Have Less Access to Supermarkets, Large Grocery Stores." *Rural Development Perspectives* 13 (1998): 19–26. Available at http://www.ers.usda.gov/ publications/rdp/rdp1098/rdp1098c.pdf. ³⁷ Manjarrez, C., and Cigna, J. Food Stamp Participation and Market Access in the District of Columbia. Discussion Brief No. 3. Washington, DC: Urban Institute, 2006. Available at http://www. urban.org/UploadedPDF/311343_dcfoodstamp.pdf.

³⁸ Moore, L., and Roux, A. "Associations of Neighborhood Characteristics with the Location and Type of Food Stores." *American Journal* of Public Health 96 (2006): 325–331.

³⁹ Moore, L., Roux, A., and Brines, S. "Comparing Perception-Based and Geographic Information System (GIS)-Based Characterizations of the Local Food Environment." *Journal of Urban Health: Bulletin of the New York Academy of Medicine* 85, no.2 (2008).

⁴⁰ Morland, K., and Filomena, S. "Disparities in the Availability of Fruits and Vegetables Between Racially Segregated Urban Neighbourhoods." *Public Health Nutrition* 10, no.12 (2007): 1481-1489.

⁴¹ Morland, K., Wing, S., Roux, A., and Poole, C. "Neighborhood Characteristics Associated with the Location of Food Stores and Food Service Places." *American Journal* of Preventive Medicine 22 (2002): 23–29.

⁴² Morland, K., Wing, S., and Roux, A. "The Contextual Effect of the Local Food Environment on Residents' Diets: The Atherosclerosis Risk in Communities Study." *American Journal of Public Health* 92, no.11 (2002): 1761-1767.

⁴³ Morton, L., and Blanchard, T. "Starved for Access: Life in Rural America's Food Deserts." *Rural Realities* 1, no.4 (2007). Available at www. ruralsociology.org/pubs/ruralrealities/issue4.html.

⁴⁴ Neckerman, K., Bader, M., Purciel, M., and Yousefzadeh, P. Measuring Food Access in Urban Areas. New York, NY: Columbia University, 2009. Available at http://www.npc.umich.edu/news/ events/food-access/neckerman_et_al.pdf.

⁴⁵ Powell, L., Auld, C., Chaloupka, F., O'Malley, P. M., and Johnston, L. D. "Associations Between Access to Food Stores and Adolescent Body Mass Index," *American Journal of Preventive Medicine* 33, no.4 (2007).

⁴⁶ Powell, L., Slater, S., Mirtcheva, D., Bao, Y., and Chaloupka, F. "Food Store Availability and Neighborhood Characteristics in the United States." *American Journal of Preventive Medicine* 44 (2007): 189–195. ⁴⁷ Rundle, A., Neckerman, K., Freeman, L., Lovasi, G., Purciel, M., Quinn, J., Richards, C., Sircar, N., and Weiss, C. "Neighborhood Food Environment and Walkability Predict Obesity in New York City." Environmental Health Perspectives 117 (2009): 442–447.

⁴⁸ Sacramento Hunger Coalition. *The Avondale/Glen Elder Community Food Assessment. Food Security in a South Sacramento Neighborhood.* Sacramento, CA: Sacramento Hunger Coalition, 2004.

⁴⁹ Shaffer, A. The Persistence of L.A.'s Grocery Gap: The Need for a New Food Policy and Approach to Market Development. Center for Food and Justice, Urban and Environmental Policy Institute, Occidental College. 2002. Available at www.departments.oxy. edu/uepi/publications/the_persistence_of.htm.

⁵⁰ Sharkey, J., and Horel, S. "Neighborhood Socioeconomic Deprivation and Minority Composition are Associated with Better Potential Spatial Access to the Ground-Truthed Food Environment in a Large Rural Area." *The Journal of Nutrition* 138 (2008): 620–627.

⁵¹ Sharkey, J., Scott, H., Daikwon, H., and Huber, J. "Association Between Neighborhood Need and Spatial Access to Food Stores and Fast Food Restaurants in Neighborhoods of Colonias." International Journal of Health Geographics 8, no.9 (2009): 1-17.

⁵² Sloane, D., Diamount, A., Lewis, L., et al. "Improving the Nutritional Resource Environment for Healthy Living Through Community-Based Participatory Research." *The Journal of General Internal Medicine* 18 (2003): 568–575.

⁵³ Small, M. L, and McDermott, M. "The Presence of Organizational Resources in Poor Urban Neighborhoods: An Analysis of Average and Contextual effects." *Social Forces* 84 (2006): 1697-1724.

⁵⁴ Smith, D. Food Deserts in the Willamette: A Study of Food Access in Lane County, Oregon. [Master's thesis]. Eugene, OR: University of Oregon, 2003.

⁵⁵ Sparks, A., Bania, N., and Leete, L. "Finding Food Deserts: Methodology and Measurement of Food Access in Portland, Oregon." Paper prepared for Institute of Medicine, Workshop on the Public Health Effects of Food Deserts, January 26, 2009. Washington, DC, 2009.

34

The Food Trust

⁵⁶ Social Compact Inc. Baltimore Neighborhood Market DrillDown. Catalyzing Business

PolicyLink

Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2008.

⁵⁷ Social Compact Inc. Cincinnati Neighborhood Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2007.

⁵⁸ Social Compact Inc. Detroit Grocery Initiative Catalyzing Grocery Retail Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2008.

⁵⁹ Social Compact Inc. City of Fresno Neighborhood Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2009.

⁶⁰ Social Compact Inc. City of Tampa Neighborhood Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2008.

⁶¹ Social Compact Inc. Harlem Neighborhood Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2008.

⁶² Social Compact Inc. Houston Neighborhood Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2007.

⁶³ Social Compact Inc. Los Angeles Neighborhood Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2008.

⁶⁴ Social Compact Inc. Louisville Metro Neighborhood Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2008.

⁶⁵ Social Compact Inc. San Francisco Neighborhood Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2008.

⁶⁶ Social Compact Inc. Southeast Fort Worth Neighborhood Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2008.

⁶⁷ Social Compact Inc. Washington DC Neighborhood Market DrillDown. Catalyzing Business Investment in Inner-City Neighborhoods. Washington, DC: Social Compact Inc., 2008.

⁶⁸ Sustainable Food Center. Access Denied. An Analysis of Problems Facing East Austin Residents in Their Attempts To Obtain Affordable, Nutritious Food. Austin, TX: Sustainable Food Center, 1995. Available at http://www.sustainablefoodcenter. org/library/Access_Denied.pdf.

⁶⁹ Tanaka, K., Mooney, P., et al. Lexington Community Food Assessment: 2004-2007. Lexington, KY: Department of Community & Leadership Development, University of Kentucky, 2008. Available at http://www.uky.edu/Ag/CLD/ doc/CommunityFoodAssessmentReport04-07.pdf.

⁷⁰ Tchumtchoua, A. Town-Level Assessment of Community Food Security in Connecticut. Food Marketing Policy Center. University of Connecticut, 2005. Available at http:// digitalcommons.uconn.edu/cgi/viewcontent. cgi?article=1000&context=fpmc_mono.

²¹ The Food Trust. *Stimulating Supermarket Development: A New Day for Philadelphia*. Philadelphia, PA: The Food Trust, 2004. Available at http://www.thefoodtrust. org/pdf/SupermktReport_F.pdf.

¹² The Food Trust. The Need for More Grocery Stores in New York. Special Report. Philadelphia, PA: The Food Trust, 2008. Available at http://www.thefoodtrust.org/ catalog/download.php?product_id=147.

⁷³ The Food Trust. The Need for More Supermarkets in Chicago. Philadelphia, PA: The Food Trust, 2008. Available at http://www.thefoodtrust. org/catalog/download.php?product_id=147.

⁷⁴ University of Virginia School of Architecture, Department of Urban and Environmental Planning. The Charlottesville Region Food System: A Preliminary Assessment [Student Report]. Charlottesville, VA: University of Virginia School of Architecture, Department of Urban and Environmental Planning., 2006. Available at http://www.virginia.edu/ien/ docs/06FINALRept_Jun06_CvilleFood.pdf.

⁷⁵ Thurman, S. Measuring Access to Food in Charlottesville, VA. Charlottesville, VA: University of Virginia, 2007. Available at http://www. virginia.edu/ien/docs/07FoodClassFINAL%20 PAPERS/AccessTransportation.pdf.

⁷⁶ Tsai, S. Needs Assessment: Access to Nutritious Foods in East Oakland and South Hayward. [Master's Thesis]. Berkeley, CA: University of California at Berkeley School of Public Health and Alameda County Public Health Department, 2003.

⁷⁷ Unger, S., and Wooten, H. A Food Systems Assessment For Oakland, CA: Toward A Sustainable Food Plan. [Master's Thesis]. Berkeley, CA: Oakland Mayor's Office of Sustainability and University of California, Berkeley, 2006.

⁷⁸ Wang, M., Kim, S., Gonzalez, A., MacLeod, K., and Winkleby, M. "Socioeconomic and Food-Related Physical Characteristics of the Neighborhood Environment are Associated with Body Mass Index." *Journal of Epidemiology* and Community Health 61 (2007): 491–498.

²⁹ Zenk, S.H., Schulz, A. J., Hollis-Neely, T., Campbell, R.T., Watkins, G., Nwankwo, R., and Odoms-Yound, A. "Fruit and Vegetable Intake in African Americans Income and Store Characteristics." *American Journal of Preventive Medicine* 20, no.1 (2005).

⁸⁰ Zenk, S., Schulz, A., Israel, B., James, S., Bao, S., and Wilson, M. "Neighborhood Racial Composition, Neighborhood Poverty, and the Spatial Accessibility of Supermarkets in Metropolitan Detroit." *American Journal of Public Health* 95 (2005): 660–667.

⁸¹Zenk, S., Schulz, A., Israel, B., Sherman, J., Bao, S., and Wilson, M. "Fruit and Vegetable Access Differs by Community Racial Composition and Socioeconomic Position in Detroit, Michigan." *Ethnicity & Disease* 16 (2006): 275-280.

⁸² Fresno Metro Ministry. Fresno Fresh Access: Community Food Assessment Report. 2003-2005. Fresno, CA: Fresno Metro Ministry, 2005. Available at http://fresnometmin.org/ fmm/pdfs/CFA_Summary_9-14-05.pdf.

⁸³ Kaufman, L., and Karpati, A. Food Matters: What Bushwick Families' Food Habits Teach us about Childhood Obesity. New York, NY: New York City Department of Health and Mental Hygiene, 2007.

⁸⁴ Fulfrost, B. Mapping the Markets: The Relative Density of Retail Food Stores in Densely Populated Census Blocks in the Central Coast Region of California. Santa Cruz, CA: University of California, Santa Cruz, 2006. Available at http://casfs.ucsc.edu/ research/MappingTheMarkets.pdf. ⁸⁵ Williams, D. *Food Security and Access in Akron Ohio*. [Master's Thesis]. Akron, OH: University of Akron, 2002.

⁸⁶ San Francisco Food Alliance. 2005 San Francisco Collaborative Food System Assessment. San Francisco, CA: San Francisco Food Alliance, 2005.

⁸⁷ California Center for Public Health Advocacy. Searching for Healthy Food: The Food Landscape in California Cities and Counties. Davis, CA: California Center for Public Health Advocacy, 2007.

Andrews, M., Kantor, L., Lino, M., and Ripplinger, D. "Using USDA's Thrifty Food Plan to Assess Food Availability and Affordability." *Food Access* 24, no.2. (2001): 45-53.

⁸⁹ Block, D., and Kouba, J. "A Comparison of the Availability and Affordability of a Market Basket in Two Communities in the Chicago Area." *Public Health Nutrition* 9, no.7 (2006): 837–845.

Dopez, R. Community Food Security in Connecticut: An Evaluation and Ranking of 169 Towns. Storrs, CT: Hartford Food System, 2005. Available at http://www. hartfordfood.org/pubs/cfs_connecticut.pdf.

⁹¹ Moore L., Roux, A., Nettleton, J., and Jacobs, D. "Associations of the Local Food Environment with Diet Quality—A Comparison of Assessments Based on Surveys and Geographic Information Systems: The Multi-Ethnic Study of Atherosclerosis." *American Journal of Epidemiology* 167 (2008): 917–924.

⁹² Raja, S., Ma, C., and Yadav, P. "Beyond Food Deserts: Measuring and Mapping Racial Disparities in Neighborhood Food Environments." *Journal of Planning Education and Research* 27 (2008): 469-482.

⁹³ Rose, D., Bodor, N., Swalm, C., Rice, J., Farley, T., and Hutchinson, P. Deserts in New Orleans? Illustrations of Urban Food Access and Implications for Policy. Ann Arbor, MI: University of Michigan National Poverty Center/USDA Economic Research Service Research, 2009. Available at http://www.npc. umich.edu/news/events/food-access/rose_et_al.pdf.

⁹⁴ Sekhobo, J., and Berney, B. "The Relation of Community Occupational Structure and Prevalence of Obesity in New York City Neighborhoods— An Ecological Analysis." Journal of Hunger & Environmental Nutrition 3, no.1 (2008): 76-83.

⁹⁵ USDA Economic Research Service. Access to Affordable and Nutritious Food: Measuring and Understanding Food Deserts and Their Consequences. Report to Congress. Washington, DC: U.S. Department of Agriculture, 2009. Available at http://www.ers.usda. gov/Publications/AP/AP036/AP036.pdf.

⁹⁶ Gordon, C., Ghai, N., Purciel, M., Talwalkar, A., and Goodman, A. *Eating Well in Harlem: How Available Is Healthy Food?* New York, NY: New York City Department of Health and Mental Hygiene, 2007.

⁹⁷ Graham, R., Kaufman, L., Novoa, Z., and Karpati, A. Eating In, Eating Out, Eating Well: Access to Healthy Food in North and Central Brooklyn. New York, NY: New York City Department of Health and Mental Hygiene, 2006.

⁹⁸ Papavasiliou, F., Essig, C., Barlett, P., and Rolls, A. Is Healthy Eating Possible in DeKalb County? An Assessment of Food Availability, Access, and Cost in Two Neighborhoods. Decatur, GA: Atlanta Local Food Initiative, DeKalb County Board of Health, 2007.

⁹⁹ Gittelsohn, J., Franceschini, M., Rasooly, I., Ries, A., Ho, L., Pavlovich, W., Santos, V., Jennings, S., and Frick, K. "Understanding the Food Environment in a Low-Income Urban Setting: Implications for Food Store Interventions." *Journal of Hunger & Environmental Nutrition* 2, no.2 (2008): 33-50.

¹⁰⁰ Short, A., Guthman, J., and Raskin, S. "Food Deserts, Oases, or Mirages? Small Markets and Community Food Security in the San Francisco Bay Area." *Journal of Planning Education and Research* 26 (2007):352.

¹⁰¹ City Harvest. The Melrose Community Food Assessment. New York, NY: City Harvest, 2009. Available at http://www.cityharvest. org/images/pdf/Melrose_CFA_2007.pdf.

¹⁰² King, R., Leibtag, E., and Behl, A. "Supermarket Characteristics and Operating Costs In Low-Income Areas," Agricultural Economics Reports. Washington, DC: United States Department of Agriculture, Economic Research Service, 2004.

¹⁰³ Hrisanti, A., Chong, T., Dang, J., et al. The East Baltimore Nutritional Environment: Formative Research with Community Leaders. Baltimore, MD: Healthy Stores Project, 2003. Available at http://www.healthystores. org/images/downloads/eastbalt.pdf. ¹⁰⁴ Sturm, R. "Disparities in the Food Environment Surrounding U.S. Middle and High Schools." *American Journal of Public Health* 122 (2008): 681–690.

¹⁰⁵ Hunger Task Force of Milwaukee. Hunger in Milwaukee, Some Food for Thought. Milwaukee, WI: Hunger Task Force of Milwaukee, 2002. Available at http://www.hungertaskforce.org/ userimages/publications_foodforthought_report.pdf.

¹⁰⁶City Harvest. Mount Hope Community Food Assessment Report. New York, NY: City Harvest, 2009. Available at http://www.cityharvest. org/images/pdf/Mount_Hope_CFA.pdf.

¹⁰⁷ Zenk, S., and Powell, L. "U.S. Secondary Schools and Food Outlets." *Health & Place* 14 (2008): 336–346.

¹⁰⁸ Blanchard, T., and Lyson, T. "Access to Low Cost Groceries in Nonmetropolitan Counties: Large Retailers and the Creation of Food Deserts." Mississippi, MS: Southern Rural Development Center, 2006. Available at http:// srdc.msstate.edu/measuring/blanchard.pdf.

¹⁰⁹ Blanchard, T., and Lyson, T. "Food Availability & Food Deserts in the Nonmetropolitan South." Mississippi, MS: Southern Rural Development Center, 2006. Available at http://srdc.msstate. edu/focusareas/health/fa/fa_12_blanchard.pdf.

¹¹⁰ Blanchard, T., and Lyson, T. "Retail Concentration, Food Deserts, and Food Disadvantaged Communities in Rural America." Mississippi, MS: Southern Rural Development Center, 2009. Available at http://srdc.msstate.edu/ focusareas/health/fa/blanchard02_final.pdf.

¹¹¹ Hatfield, D., and Gunnell, A. Food Access in California Today. Portland, OR: Ecotrust, 2005. Available at http://www.vividpicture.net/ documents/12_Food_Access_in_CA_Today.pdf.

¹¹² Liese, A., Weis, K., Pluto, D., Smith, E., and Lawson, A. "Food Store Types, Availability, and Cost of Foods in a Rural Environment." *Journal of the American Dietetic Association* 107 (2007): 1916–1923.

¹¹³ New Mexico Food and Agriculture Policy Council. *Closing New Mexico's Rural Food Gap.* Santa Fe, NM: New Mexico Food and Agriculture Policy Council, 2006. Available at http://www. farmtotablenm.org/closing_nm_food_gap_4pgs.pdf.

The Food Trust

The Food Trust

PolicyLink

¹¹⁴ Sharkey, J., and Horel, S. "Characteristics of Potential Spatial Access to a Variety of Fruits and Vegetables in a Large Rural Area." School of Rural Public Health, Texas A&M Health Science Center, 2009. Available at http://www.npc.umich. edu/news/events/food-access/sharkey.pdf.

¹¹⁵ Vallianatos, M., Shaffer, A., and Gottlieb, R. "Transportation and Food: The Importance of Access." Los Angeles, CA: Center for Food and Justice, Urban and Environmental Policy Institute, 2002. Available at http://www.uepi.oxy.edu.

¹¹⁶ Frontier Nutrition Project. *Trinity County Food Security Assessment*. Weaverville, CA: Frontier Nutrition Project, 2001. Available at http://www. foodsecurity.org/cfa/trinity_cty_food_assessment.pdf.

¹¹⁷ Morton., L., Oakland, J., Bitto, E., Sand, M., and Michaels, B. *Iowa Community Food Assessment Project Report, 2001-02*. Des Moines, IA: Iowa State University Family Nutrition Program, 2002. Available at http://www.soc.iastate.edu/extension/pub/tech/ IowaCommunityFoodAssessmentReport.pdf.

¹¹⁸The lack of community-based studies on this topic is likely due to the difficulty of accessing data on eating behaviors for small geographies or individuals.

¹¹⁹ Rose, D., and Richards, R. "Food Store Access and Household Fruit and Vegetable Use among Participants in the US Food Stamp Program." *Public Health Nutrition* 7, no.8 (2004):1081-1088.

¹²⁰ Laraia, B., Siega-Riz, A., Kaufman, J. and Jones, S. "Proximity of Supermarkets is Positively Associated with Diet Quality Index for Pregnancy." *American Journal of Preventive Medicine* 39 (2004): 869–875.

¹²¹ Jago, R., Baranowski, T., Baranowski, J., Cullen, K., and Thompson, D. "Distance to Food Stores and Adolescent Male Fruit and Vegetable Consumption: Mediation Effects." *International Journal of Behavioral Nutrition and Physical Activity* 4 (2007): 4-35. Available at http://www. ijbnpa.org/content/4/1/35.

¹²² Caldwell E., Kobayashi, M., DuBow, W., and Wytinck, S. "Perceived Access to Fruits and Vegetables Associated with Increased Consumption." *Public Health Nutrition*, 12, no.10 (2008): 1743-50.

¹²³ Cheadle A., Psaty, B., Curry, S., Wagner, E., Diehr, P., Koepsell, T., and Kristal, A. "Community-Level Comparisons Between Grocery Store Environment and Individual Dietary Practices." *Preventive Medicine* 20, no.2 (1991): 250-261. ¹²⁴ Alberti, P., Hadi, E., Cespedes, A., Grimshaw, V., and Bedell, J. Farmers' Markets—Bringing Fresh, Nutritious Food to the South Bronx. New York, NY: New York City Department of Health and Mental Hygiene, 2008. Available at http://www.ci.nyc.ny.us/html/doh/downloads/ pdf/dpho/dpho-farmersmarket.pdf.

127

¹²⁵ Morland, K., Diex Roux, A., and Wing, S. "Supermarkets, Other Food Stores, and Obesity: The Atherosclerosis Risk in Communities Study." *American Journal of Preventive Medicine* 30, no.4 (2006): 333-339.

¹²⁶ Chen, S., Raymond, F., and Snyder, S. "Obesity in Urban Food Markets: Evidence from Georeferenced Micro Data." West Lafayette, IN: Purdue University, 2009. Available at http://www.npc.umich.edu/ news/events/food-access/chen_et_al_revised.pdf.

¹²⁷ Liu, G., Wilson, J., Qi, R., and Ying, J. "Green Neighborhoods, Food Retail and Childhood Overweight: Differences by Population Density." *American Journal of Health Promotion* 21, no.4 (2007): 317-325.

¹²⁸Auchincloss, A., Diez-Roux, A., Brown, D., Erdmann, C., and Bertoni, A. "Neighborhood Resources for Physical Activity and Healthy Foods and Their Association with Insulin Resistance." *Epidemiology*, 19 (2008):146–157.

¹²⁹ Morland, K., and Evenson, K. "Obesity Prevalence and the Local Food Environment." *Health & Place* 15, no.2 (2009): 491-495.

¹³⁰ Goldstein, I., Loethen, L., Kako, E., and Califano, C. *CDFI Financing of Supermarkets in Underserved Communities: A Case Study.* Philadelphia, PA: The Reinvestment Fund, 2008. Available at http://www.trfund.com/resource/ downloads/policypubs/CDFIStudySummary.pdf.

¹³¹ Anchor effects are commonly recognized by practitioners and assumed in economic impacts studies, but there are few empirical studies of their scale or scope.

¹³² Gallagher, M. Examining the Impact of Food Deserts on Public Health in Detroit. Chicago, IL: Mari Gallagher Research and Consulting Group, 2007. Available at http:// www.marigallagher.com/site_media/dynamic/ project_files/1_DetroitFoodDesertReport_Full.pdf.

133 Several analyses have described how the lack of market activity in distressed urban communities

The Food Trust

128

PolicyLink

serves as a barrier to business development. See Peri Sabety, Using Information to Drive Change, Washington, DC: The Brookings Institution, 2004. Available at http://www.brookings.edu/~/media/ Files/rc/reports/2004/07metropolitanpolicy_sabety/ framingpaper.pdf. Also, Robert Weissbourd, The Market Potential of Inner-City Neighborhoods: Filling the Information Gap (Attracting Business Investment to Neighborhood Markets). Washington, DC: The Brookings Institution, 2004. Available at http:// www.brookings.edu/~/media/Files/rc/reports/2004 /07metropolitanpolicy_sabety/framingpaper.pdf.

¹³⁴ Office of Housing and Urban Development. New Markets: The Untapped Retail Buying Power in America's Inner Cities. Washington, DC: The Office of Housing and Urban Development, 1999.

¹³⁵ Porter, M. "The Competitive Advantage of the Inner City," *Harvard Business Review*, 73, no.3 (1995): 55-71.

¹³⁶ Lavin, M. "Supermarket Access and Consumer Well-Being: The Case of Pathmark in Harlem." *International Journal of Retail and Distribution Management* 33, no.5 (2005): 388-398.

¹³⁷ Pristin, T. "Harlem's Pathmark Anchors a Commercial Revival on 125th Street," *The New York Times*, November 13, 1999. Available at: http://www.nytimes.com/1999/11/13/nyregion/ harlem-s-pathmark-anchors-a-commercialrevival-on-125th-street.html?pagewanted=1.

¹³⁸ The majority of supermarket jobs are part-time (84 percent of jobs analyzed in the study). The Reinvestment Fund. *The Economic Impacts of Supermarkets on their Surrounding Communities*, Philadelphia, PA: The Reinvestment Fund, 2008.

¹³⁹ The Food Trust. "The Pennsylvania Fresh Food Financing Initiative Providing Healthy Food Choices to Pennsylvania's Communities." Philadelphia, PA: The Food Trust. Available at http://www. thefoodtrust.org/pdf/FFFI%20Brief.pdf. ¹⁴⁰ This study did not account for the probable displacement effects associated with transferring sales from one store to another. The Reinvestment Fund. The Economic Impacts of Supermarkets on their Surrounding Communities, Philadelphia, PA: The Reinvestment Fund, 2008.

¹⁴¹ Social Compact Inc., Inside Site Selection: Retailers' Search for Strategic Business Locations. Washington, DC: Social Compact Inc., 2008. Available at http://www.icsc.org/ srch/government/briefs/200805_insidesite.pdf

¹⁴² Economic Research Service, Food CPI and Expenditures: Table 14, http://www.ers. usda.gov/Briefing/CPIFoodAndExpenditures/ Data/Expenditures_tables/table14.htm.

¹⁴³ For a more detailed discussion of strategies to address the lack of access to healthy foods see: Flournoy, R. and Treuhaft, S. *Healthy Food, Healthy Communities: Improving Access and Opportunities through Food Retailing*, Oakland, CA: PolicyLink, 2009. Available at www.policylink.org.

¹⁴⁴ In 2004, child health and nutrition advocates and Representative Dwight Evans successfully campaigned for an initial infusion of \$10 million in state funds to launch Pennsylvania Fresh Food Financing Initiative (FFFI), a public-private partnership which provides low-cost loans and grants to support retail projects in underserved communities. (An additional \$20 million followed.) An independent Community Development Financial Institution (The Reinvestment Fund) leveraged these public funds with private capital, tax credits, and other mechanisms to create a \$165 million fund.

¹⁴⁵ Sturm, R., and Datar, A. "Body Mass Index in Elementary School Children, Metropolitan Area Food Prices and Food Outlet Density." *Journal of Public Health* 119 (2005):1059–1068.



 \bigcirc