



Institute for Agriculture and Trade Policy

**Healthy Food Access in Minneapolis:  
Initial Conversations with Residents**



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The Institute for Agriculture and Trade Policy works locally and globally at the intersection of policy and practice to ensure fair and sustainable food, farm and trade systems.

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## Executive summary

Local food and healthy eating are of growing interest to many people in the Twin Cities. From restaurants sourcing directly from farmers to grocery stores expanding their offerings of locally produced fresh fruits and vegetables, examples abound. Despite this, many people, and even entire neighborhoods, lack access to healthy, affordable and culturally appropriate foods.<sup>1,2</sup>

To learn more about access to and consumption of healthy foods in Minneapolis, the Institute for Agriculture and Trade Policy (IATP) partnered with Common Roots Café to host a series of roundtable discussions with community members. Participants represented a diversity of ages and backgrounds and came together to discuss their personal experiences and perceptions regarding food access in their communities.

Several key themes emerged from the discussions:

- Improving access is critical to increasing consumption of healthy foods. Simply knowing what to eat is not enough; people need sources of affordable, accessible food to make those healthy food choices.
- “Access” means more than physical access to food. Other factors, including affordability, time to prepare food and cultural traditions, are often important in determining whether people will buy and consume healthier food.
- Farmers markets and other community-based initiatives are important and successful ways to increase access to healthy foods. However, they must be coupled with efforts to influence public policy and address the larger societal and environmental issues that hinder access to and consumption of healthier options.

The roundtables highlighted the idea that changes in healthy food access and consumption will only happen through understanding and addressing our communities’ experiences, knowledge and needs. The roundtables represent a first step toward a broader understanding of food access issues in Minneapolis.

## Roundtable methodology

To gather perceptions about access to and consumption of healthy foods in Minneapolis, the Institute for Agriculture and Trade Policy (IATP) partnered with Common Roots Café to host a series of informal roundtable discussions with local community members. The roundtables took place between September 2007 and January 2008 at Common Roots Café in South Minneapolis and the Sabathani Community Center in Central Minneapolis. The roundtables were preceded by a survey of 31 patrons at the Sabathani Community Center food shelf.

Each of the five roundtables included 10-15 people with diverse experiences and backgrounds. Participation was voluntary and small-scale public outreach was conducted in Minneapolis to recruit participants. Each roundtable brought a distinct focus to the discussions. The five groups were divided as follows:

1. Youth in 6th-8th grades from Project for Pride in Living.
2. Seniors from Sabathani Community Center.
3. The final three roundtables included a mix of community organizers from various cultures and neighborhoods, some neighborhood residents, and individuals working on nutrition education, research, and urban and rural farming initiatives.

All of the discussions included a set of survey questions, along with guided conversation about participants' personal experiences and perceptions regarding food access in their communities. The groups that included professionals in various food-related fields were also asked about the broader trends they see and the populations they serve. The survey questions were tailored to each of the roundtables and the discussions varied as conversation naturally developed. The facilitators strove to create an inviting and safe space for all participants.

## Summary of results

### *Survey of food shelf patrons*

Thirty-one visitors to the Sabathani Community Center food shelf were surveyed in October 2007 before the roundtables were conducted. The survey results include the following:

When asked about access to fresh produce, 77 percent of those surveyed said they are able to find and purchase fresh produce when they want it. However, only 54 percent could find it nearby—primarily at the Sabathani farmers market, which runs from July to early October. Only 25 percent could find fresh produce at what they considered affordable prices. Approximately one-third (32 percent) said they could not find or buy fresh produce when they wanted due to price, proximity and/or lack of knowledge about where to shop.

When asked where they would prefer to shop if price or location were not an issue, 44 percent of participants chose farmers markets. Twenty-nine percent chose large grocery stores, 16 percent chose food cooperatives and four percent preferred to either buy directly from farmers or grow their own food. No individuals said they preferred to shop at convenience stores.

Participants were also asked whether they have any connection to local farmers and local food. Thirty-two percent of those surveyed answered in the affirmative. Of those, 70 percent said their connection comes through a farmers market and 20 percent through a food cooperative. (The remaining 10 percent did not answer the question.)

Approximately two-thirds (66 percent) of the survey participants said that their food choices and methods of food preparation reflect their cultural traditions. One-third said they do not, due to lack of availability, cost, lack of knowledge about cultural traditions and/or lack of interest in maintaining those traditions.

When asked for recommendations about how city officials and others can best improve access to fresh produce, 45 percent of those surveyed wanted to see more and improved farmers markets. About one-third (32 percent) wanted more grocery stores, and 18 percent emphasized improved selection at convenience stores.

Farmers markets figured prominently in many of the responses at the Sabathani food shelf. Sabathani hosts a small weekly farmers market during the summer months and participants' perception of access to fresh produce may have been influenced by the presence of the market. It would be interesting to conduct the survey again at a different time of the year to see if and how perceptions of food access change.

### **Roundtable 1: Youth**

After the survey of food shelf patrons was conducted, the roundtable process began. The first discussion group consisted of youth in grades 6-8 participating in programs of Project for Pride in Living (PPL). PPL is an organization "dedicated to helping lower-income families develop the tools they need to achieve self-sufficiency." Several adults helped conduct interactive activities. The youth first answered a dot survey and then engaged with the adults in hands-on activities and discussions about food.

Only 55 percent of the youth said they could walk to a grocery store from their house. Of the youth who participated in the roundtable, 75 percent said they eat at least one home-cooked meal per day. However, only 13 percent said they eat at least one-home cooked meal with their family rather than with a television. All of the youth said that some foods make them feel "heavy, sick, gross or still hungry after [they] eat them."

When asked where they would go if they had \$3.00 with which to buy food, the youth gave a range of answers. While fast food was the most popular choice (33 percent), food co-ops were selected with the same frequency as corner stores (each at 22 percent) and farmers markets with the same frequency as big grocery stores (each at 11 percent).

Fifty-five percent of the youth said they eat cultural or traditional foods in their home. One hundred percent of the youth expressed interest in learning how to cook and 55 percent wanted to learn how to garden and grow their own food.

When asked what they knew about diabetes, every youth said they knew someone with diabetes. All could describe things that happen to a person's body as a result of the disease. The youth all knew that the disease was connected to food habits, and were very eager to talk about their stories.

The youth roundtable also included activities to engage participants in thinking about food. For example, when initially asked "what is organic?" some youths' first reaction was "it tastes bad." After talking about how organic meant "natural" or "without chemicals," the youth were served a meal made completely of organic ingredients. Although they hesitated at first, by the end of the meal they were fighting over the last bites of food.

In teams with adults, the youth were then asked to visit a convenience store across the street and find the healthiest food, the food with the lowest number of calories, an item made in Minnesota and an item that they also find in their own homes. Many of the items selected were beverages. The youth all agreed that the healthier foods were in the back of the store, with the less healthy food more conveniently located at the front of the store. When asked why this might be, one of the youth commented, "They want us to buy junk food." The youth also agreed that they do buy junk food, even though they know it is not healthy. They then talked about their favorite snacks, all of which were various forms of chips.

## **Roundtable 2: Seniors**

The second discussion session involved a group of seniors who participate in programs at the Sabathani Community Center. The seniors first answered a dot survey similar to those given to the other roundtables and then had a broader discussion about their food-related experiences.

While most (77 percent) of the seniors said they could find and buy fresh produce when they wanted it, they also said they would eat more fresh produce if they had more access to it. Some of the seniors rely on transportation provided by Sabathani to get to grocery stores and farmers markets.

About half of the seniors surveyed preferred to shop at large grocery stores. Although none preferred to shop at convenience stores, many thought convenience stores should provide more and better produce. Some seniors said they would shop at convenience stores if the stores provided a better selection of healthy foods.

Nearly all (90 percent) of the seniors said they eat at least one home-cooked meal every day and, in contrast to the youth, most of them eat that meal with other people. The seniors' survey did not explore connections to farmers or cultural traditions.

Much of the seniors' discussion tended toward the topic of how much things have changed over their lifetimes. They discussed topics including access to grocery stores, cooking skills and how food itself has changed. Observations included the following:

*“We could always walk two blocks to the grocery store. If you forgot something you could always go back. You could get daily supplies, especially produce and meat. Now with the larger grocery stores, you have to go far away.”*

*“The food doesn't taste as good. They use all those chemicals and fertilizers.”*

*“When we were growing up we had home economics, courses on how to cook. Sodium, Hamburger Helper, that's quickness, but it's not all you need. We need to teach the kids how to cook, get it back into the schools.”*

*“Young people, nobody has time and they eat things out of the can.... Young parents are teaching poor eating habits to their children.”*

*“There used to be a grocery store within walking distance [of Sabathani]. It really hurt the neighborhood [when it closed].”*

## **Roundtables 3-5: Community organizers, nutrition educators, neighborhood residents, nonprofit staff**

The remaining three roundtables were composed primarily of individuals professionally involved in local and healthy food issues. Participants included staff from agricultural nonprofit organizations, nearby neighborhood residents, nutrition educators and community organizers. In general, this group could be said to be highly knowledgeable about and experienced with food-related issues. They were also, on average, of middle income levels.

Many of the survey responses in these three discussion sessions reflect these characteristics. For example, 90 percent of those surveyed said they could buy fresh, local produce when they wanted it. Of the 10 percent who could not, all said it was because they didn't know where to find it; price and proximity were not important factors in why participants did not purchase fresh produce. However, despite their high level of access to fresh produce, 100 percent of participants said they would eat more fresh produce if it were even more accessible.

Fifty percent of those surveyed said their cultural traditions play a role in their selection and preparation of foods. Of the other half for whom cultural traditions do not influence food choices, 33 percent said it was because they do not know their cultural traditions. Ninety-two percent of participants eat at least one home-cooked meal every day.

Reflecting their professional pursuits, participants also displayed a high level of connection to local farms and farmers. Ninety-one percent said they had a relationship with local farmers and local food. The source of these connections varied: 32 percent connected primarily through food cooperatives, 25 percent through farmers markets, 21 percent through restaurants that serve local food, 14 percent through community-supported agriculture (CSA) programs and seven percent in other ways. Three-quarters of the participants were interested in learning more about local farms and meeting farmers.

Similarly, when asked where they would prefer to buy food if price and proximity were not limiting factors, nearly all of the choices directly involved farmers. When asked to identify their top choice, about a third (32 percent) preferred to buy food directly from farmers. Twenty-eight percent preferred food cooperatives, 20 percent preferred farmers markets and 20 percent preferred to grow their own food. No individuals chose large grocery stores, convenience stores or other options such as online shopping as their first choice.

When asked where they would buy food if they were given \$3.00 to spend, 46 percent of participants said large grocery stores. About a quarter (23 percent) said food cooperatives, 15 percent said farmers markets and 15 percent said fast food restaurants. It is interesting to note that these responses differ from where the participants said they would prefer to buy food if price and proximity were not limiting factors.

When asked how city officials and community organizations could best help improve access to fresh produce, 41 percent wanted to see more direct sales from farmers (with drop-off sites such as churches and schools), about a quarter (23 percent) recommended more and better farmers markets, 18 percent said better selection at convenience stores and 18 percent chose “other.”

Participants also discussed their perspectives on the larger societal issues that influence access to healthy foods. Their answers do not represent a comprehensive assessment, but do indicate areas that merit further consideration. Key quotes are provided below, grouped by topic.

## Broad access issues

*“Sometimes it’s cheaper to eat out, but really if you know how to do it, it is cheaper to buy and cook from scratch. But that requires a lot of education to be able to have the resources to do so. Many people are just struggling to get through the day as well, so the last thing they’d want to do is go home and cook. Many times when you’re struggling, comfort food is nicer than eating a carrot stick.”*

*“Most people’s priorities are not on food, but on how to keep the lights on.”*

*“This is an issue in rural areas as well. When you drive through rural areas, how many farmers are actually growing food for human consumption?”*

*“There are many issues that influence food accessibility: availability, proximity, fair prices for the consumer and producer, transportation, education, competing priorities, attitudes, cultural sensitivity, state and federal policies, money, language and isolation of culture, myths surrounding food and food choice....”*

*“Why is there not enough money in nutrition and education? It’s always a battle of money, but it’s about public health.”*

*“Why is better and healthier food not subsidized, but all the low-quality harmful food is?”*

*“[One local organization] would like to deliver produce directly to small markets and stores but they haven’t found funding. Instead of building new venues, we should focus on where people are already going for food. Where do people go when they don’t go to foodshelves?”*

## Cultural issues

*“Lots of Somalis here in Minneapolis have health issues like high blood pressure. In Somalia, everything was fresh. Here it is in cans and packaged. In Somalia everyone walks. Here everyone drives.”*

*“At a food shelf, cultural/traditional foods are important to offer. Immigrant households tend to use more fresh produce than the general population, yet access to it outside the food shelf is hardest for this community.”*

## Physical access issues

*“I would not be able to get to a grocery store if I didn’t have a car. Bus lines and light rail systems also limit people buying good quantities of items for long-term or large families. Many stores don’t carry local or organic produce, or give many options. In many areas, the closest store is a gas station.”*

*“Corner store access is very important in a lot of communities. Almost every kid buys things from the corner store. You can’t even find a grocery store nearby, but there are so many corner stores that have tons of chips and candy. There are not quality eggs, produce or meat. If quality food were available, people would buy it.”*

## Food support program issues

*“Food support programs are not meeting the needs of hunger. Food support systems build dependency. Even if a participant tries to be self-sustaining, there’s a point where they will be cut off before getting to be independent, and will begin struggling again.”*

*“When you look at food support, you have to look at what kind of food is being offered.”*

*“Programs supported by the government need to be addressing public health, and not just ‘more money for more food.’”*

## Suggestions for change

*“Community-supported agriculture (CSA) shares should be available to participants in the EBT [food stamps] programs or have a sliding fee. Drop-off sites could include high-rises or families could go in together with their EBT benefits. Perhaps communities could subsidize shares. This would also need to be approached on a policy level, as we are dealing with federal funding.”*

*“To make a change in food, we need to reverse the system and connect people back to where the food comes from. We need health for the community and we need to make these changes economically viable.”*

*“Instead of giving [away] meals we should be teaching people how to budget, or give away seeds and open a community garden. Teach people how to fish, not give them fish. We need to be looking at the larger picture and address long-term changes, not just temporary fixes.”*

## Key themes

While all of the roundtable discussions were unique, they also shared many similarities. A few key themes stand out from the discussions:

- Improving access is critical to increasing consumption of healthy foods. Regardless of their perceived access to fresh produce, nearly all participants said they would eat more produce if it were more accessible. Simply knowing what to eat is not enough; people realistically have to be able to make those healthy food choices.
- “Access” means more than physical access to food. While people may be able to get to places that offer fresh produce, factors such as whether they can afford it, whether the available food fits within their cultural traditions and whether they have the time, knowledge and facilities to prepare it are often key factors in determining whether people will buy and consume that food.
- Farmers markets and other community-based initiatives are important and successful ways to increase access to healthy foods. However, they must be coupled with efforts to influence public policy and address the larger societal and environmental issues that hinder access to and consumption of fresh, healthy foods.

Successfully increasing access to and consumption of healthy foods will only happen through understanding and addressing our communities’ experiences, knowledge and needs. Most importantly, this must be done in partnership with local communities and by bringing a broad diversity of people to the table. The roundtable discussions highlighted in this report represent a first step toward a broader understanding of food access issues in Minneapolis.

## Notes

<sup>1</sup>Lee Egerstrom, “Food for Thought: Hunger is Bad for Business, Bad for Everyone,” Minnesota 2020, July 20, 2008, <http://www.mn2020.org/vertical/Sites/%7BE87029B4-3CCA-40B0-8DE9-3BD2A16A9DB9%7D/uploads/%7BCA797F0E-C84C-4738-BD24-6E3D929A3449%7D.PDF>.

<sup>2</sup>Hennepin County Human Services and Public Health Department, “Hennepin County Grocery Store Nutrition Report,” 2002.

