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## Evaluating Community Food Security in Kent County, 2006

Kent County Michigan Health Department

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2006  
EVALUATING COMMUNITY FOOD SECURITY  
IN KENT COUNTY



in collaboration with:  
Kent County Emergency Needs Task Force  
Food Subcommittee





# KENT COUNTY HEALTH DEPARTMENT



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Cathy Raevsky  
Administrative Health Officer

April, 2007

To the Citizens of Kent County:

On behalf of Kent County Health Department (KCHD), I am pleased to present the *Evaluating Community Food Security in Kent County* report.

*Evaluating Community Food Security in Kent County* is in direct response to strategic planning work started by the Kent County Emergency Needs Task Force (ENTF) Food Subcommittee and the dedicated effort of KCHD's Obesity Initiative. Both organizations are committed to the study of the causative factors of obesity and ways to reduce and prevent its long term effects on the community. The need for a comprehensive view of Kent County's response to these issues was identified because of the interrelated issues surrounding hunger and obesity.

*Evaluating Community Food Security in Kent County* provides a unique and compelling look into the health status of our community as it relates to nutrition and the issue of food security. It also:

- examines food assistance systems planning;
- presents a more comprehensive view of food assistance resources;
- encourages questions about, and consideration of, additional analysis that needs to be pursued around the ENTF subcommittee's goal: "To ensure that all people of Kent County have access to safe, affordable and nutritious food" and;
- identifies a framework for future evaluations of food and nutrition issues that can build upon this work.

Far from being an end in itself, the information in this report should serve as a baseline or starting point against which we can measure future progress. It is our hope that this report will open the doors for future work in the area of food security and healthy eating while engaging others in the effort.

*Evaluating Community Food Security in Kent County* would not be possible without the valuable input we received from study participants and the hard work and dedication of our community partners including: Spectrum Health's Healthier Communities, Heart of West Michigan United Way, and Grand Valley State University's Dorothy Johnson Center for Philanthropy and the Kent County Emergency Needs Task Force Food Subcommittee.

This report also exemplifies the Kent County Health Department's commitment to assess, monitor and diagnose the health status of our community and provide a foundation for informed community decision-making. As Kent County continues to grow and change, we remain committed to making our community a healthier place to live.

Sincerely,

A handwritten signature in cursive script that reads "Cathy Raevsky".

Cathy Raevsky  
Administrative Health Officer  
Kent County Health Department



## **Acknowledgements**

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This assessment would not have been possible without the contribution of information, resources and input from the following people and organizations:

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### **Emergency Needs Task Force – Food Subcommittee**

### **Medema Consulting Associates**

**Kent County Health Department** - Amy Morris, cover design



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## EXECUTIVE SUMMARY

Community food security initiatives may, over the long term, increase the economic resources available to households to purchase food; strengthen local capacity for food production, processing, and marketing; and boost the effectiveness of federal food assistance and education programs, thereby increasing the availability of high quality, affordable food within a community.

Community food security in Kent County, Mich. is coordinated through the Kent County Emergency Needs Task Force Food Subcommittee. It's comprised of various non-profit and governmental agencies working to make Kent County a hunger-free zone. Self-sufficiency, better health through nutritious eating, and more efficient food procurement are primary focal points.

The purpose of this evaluation was to assess community food security using data from individual households. Other issues were also examined, including the local need for food assistance, transportation barriers, the health and wellness continuum, and availability of nutritious food.

The evaluation provides benchmark data and information regarding food utilization reported by participants in five focus groups. Surveys were also used to examine the food security system in Kent County and retail food stores were visited to record prices using the USDA Thrifty Food Plan (Cohen, 2002), which calculates the cost of groceries for a family of four for a week.

The project was conducted during a three-month period from June-August, 2006. The maps in this report were generated using Geographic Information System (GIS) to visually display information on food services recipients, demographics, and location of food assistance. These were provided as in-kind services from the Community Research Institute at the Dorothy A. Johnson Center for Philanthropy and Nonprofit Leadership at Grand Valley State University (GVSU)."

Answers to these eight questions can provide insight into the accessibility, availability, and affordability of nutritious food in Kent County. Information and data collected from six surveys, comments from focus groups participants, and research from a variety of sources cited throughout the evaluation help answer the question:

### ***How well does our community provide access to affordable and nutritious food?***

#### **Major Findings of the Evaluation**

- 1. How well equipped is our community to meet the food-related needs of its residents?** Overall, Kent County, Mich., is well-equipped to meet the food-related needs of its residents. There is a diverse farm economy, many fruit and vegetable distributors, successful food retailers, charity food organizations with centralized operations, and shared leadership between government and non-governmental organizations to meet food related needs of those who require assistance.
- 2. Are people in the community participating in food assistance programs?** Yes, but, unfortunately the need for food assistance exceeds federal response.
- 3. Are resources available in the event that residents do not have enough money to purchase food through normal channels?** Kent County residents have various food resources available including Meals-on-Wheels, Senior Meals-on-Wheels, Food Pantries, and emergency 24-hour services to meet acute and critical needs of the hungry.

4. **Which population subgroups personally experience unusually severe levels of food insecurity in our community?** Focus group findings show the population subgroups most affected by unusually severe levels of food insecurity are predominately female, operate with less than \$11,000 annual household budget, and half have children under the age of 18. Over the last 12 months, 40% of respondents reported that each month they were hungry and had to go without food. Most stated that food shortages occur in the third and fourth week of the federal food assistance cycle. Summer is when households are hardest hit by food insecurity because children are not eating breakfast or lunch at school. Participants also reported that the holiday season (Thanksgiving through New Years Eve) is another period of time when their food supplies are inadequate.
5. **Do you eat well-balanced and nutritious meals?** Only 13% of survey participants reported eating balanced meals throughout the year. All participants agreed that the higher cost of fresh fruit and vegetables is the primary reason they do not eat a properly balanced diet. There is strong desire for mobile markets, similar to Second Harvest Gleaners of West Michigan's (SHG) trucks, and neighborhood-based markets to provide fresh fruit and vegetables.
6. **What shopping patterns, transportation barriers, and other factors make it difficult for households to access food resources that in turn influence people's use of community food resources?** We found through focus group participants that suburban supermarkets are not accessible to low-income shoppers. Transportation and time is the major barrier preventing them from shopping in suburban areas.
7. **Do retail stores used by low-income residents offer a variety of affordable foods needed to prepare a family of four week's worth of recipes and menus developed for USDA Thrifty Food Plan (TFP)?** Yes. Affordable food at retail prices is available in Kent County. However, the prices vary from store to store. It would be best to shop at the stores with the lowest prices to stretch the food purchasing budget. Also, supplementing food pantry items into the family's monthly food menu can help. (see charts on page 16).
8. **Are there local food production resources available and affordable to all community members?** Yes. Donations from local farm production help fill food pantry shelves with fresh fruit and vegetables during the summer months. Unfortunately the bounty does not last, so during the other months of the year food pantries supplement what they receive from SHG by purchasing fruit and vegetables.

**Findings from this evaluation indicate:**

1. Continue to collaborate and cooperate through Kent County Emergency Needs Task Force Food Subcommittee and it's supporting network
2. Develop programs that stop childhood food insecurity, especially during the summer
3. Teach food budgeting, nutrition, and meal preparation in low-income neighborhoods
4. Expand mobile markets, similar to SHG trucks, that provide fresh fruit and vegetables
5. Address transportation to suburban retail food stores for low-income residents
6. Mobilize Department of Human Services caseworkers to enroll FAP applicants in high poverty neighborhoods
7. Continue to monitor food prices at regional retail food stores
8. Include farmers in food security network discussions and plan development

## INTRODUCTION

One of the most disturbing and extraordinary aspects of life in this very wealthy country is the persistence of hunger. The U.S. Department of Agriculture (USDA) reports, based on a national U.S. Census Bureau survey of households representative of the U.S. population, that in 2004 11.9% of all U.S. households were food insecure because of lack of resources. Of the 13.5 million households that were food insecure, 4.4 million suffered from “food insecurity” that was so severe that USDA's very conservative measure classified them as “hungry” (FRAC, 2006).

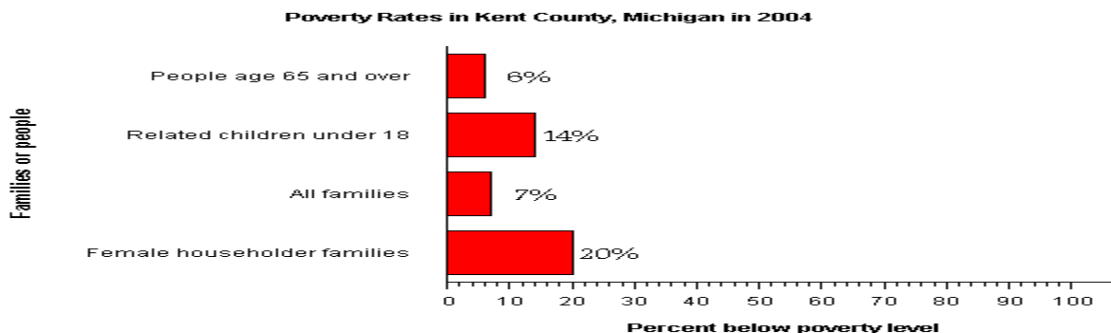
1. **Food Security**—Access by all people at all times to enough food for an active, healthy life. Food security includes at a minimum:
  - the ready availability of nutritionally adequate and safe foods
  - an assured ability to acquire acceptable foods in socially acceptable ways
2. **Food Insecurity**—Limited or uncertain availability of nutritionally adequate and safe foods or limited or uncertain ability to acquire acceptable foods in socially acceptable ways
3. **Hunger**—Uneasy or painful sensation caused by a lack of food along with the recurrent and involuntary lack of access to food. (LSRO, 1990)

The Federal Food Security Measurement Project, an ongoing collaboration among federal agencies, academic researchers, and commercial and nonprofit private organizations, adopted and standardized these conceptual definitions and called them food security measurements.

However, “community food security” is a relatively new concept with no universally accepted definition. For some purposes, community food security concerns the underlying social, economic, and institutional factors within a community that affect the quantity and quality of available food and its affordability or price relative to the sufficiency of financial resources available to acquire it (Cohen, 2002).

Community food security in Kent County, Mich. is coordinated through the Kent County Emergency Needs Task Force (ENTF), comprised of 100 non-profit agencies, government, faith-based organizations, funders, and volunteers who work together to make Kent County a hunger-free zone. Self-sufficiency, better health through nutritious eating, and more efficient food procurement are primary focal points.

Kent County is located in West Michigan and has the fourth largest county population in Michigan. Census data from 2004 shows Kent County had a population of 581,000, consisting of 51% females and 49% males. Most residents lived in metropolitan Grand Rapids, the county seat. The median age was 33.6 years. Twenty-eight percent of the population was under 18 years and 10% was 65 years and older.



Source: American Community Survey, 2004

The ENTF monitors basic service systems in Kent County including food, health/wellness, housing, transportation, and utilities. Since December 1982 various committees meet to review basic and emergency service activities throughout the county. These meetings have provided community leaders an opportunity to identify new and emerging issues while working towards improved coordination within Kent County's service delivery system.

Each of the ENTF subcommittees have made strides in using data to design strategies to respond to need more efficiently. The work reported by each subcommittee reflects a strong continued commitment to help each Kent County resident live in a safe, secure environment. ENTF members are making a concerted effort to implement prevention strategies designed to reduce or eliminate emergency assistance requests.

In 1994, Heart of West Michigan United Way provided funding for a two-year study of Kent County's food security network. West Michigan's Second Harvest Gleaners Food Bank (SHG) published its findings in a document entitled, *Waste Not Want Not*. The Gleaner's distinctive approach to food distribution allows the *Waste Not Want Not* model to be used for food selection. Traditionally, pantry clients receive a pre-packaged box of food selected for them. The *Waste Not Want Not* approach has impacted food assistance and distribution thinking since its publication.

In summer of 2006, the ENTF commissioned this evaluation of Kent County's emergency food assistance system and the food security needs of its users, emphasizing the perspectives of food pantry clients.

### **Project Participants, Audiences, and Stakeholders**

Funded by Kent County Health Department, this evaluation included the deployment of surveys among a range of countywide stakeholders and five focus groups within targeted Kent County census tracts. Specific tracts were chosen to ensure representation of a diverse range of food pantry consumers from urban, suburban, and rural agricultural areas. Participants in the focus groups lived in a mix of households varying from transitional rental housing to residential communities. They were from various racial and ethnic backgrounds, including recent immigrants. The five neighborhoods in which focus groups were held included three in Grand Rapids, Mich. (Baxter, Eastbrook, and West Grand), and one each in Wyoming, Mich. and Cedar Springs, Mich.

Food pantries that are part of the All County Churches Emergency Support System (ACCESS) assisted in recruiting focus group participants and hosting the sessions. Focus group members each received \$10-\$15 as an incentive for participation.

This report is a summary of findings from the five focus groups and their 42 participants, along with information and data collected from surveys, and research from a variety of sources cited throughout the evaluation.

### **Project Context**

In 1965, John van Hengel, founder of food banks in the United States, volunteered at St. Vincent de Paul in Phoenix, Ariz. and collected donations for the community dining room. When he learned that grocery stores dumped food that was either nearing expiration or cast-off due to small tears or dents in the packaging, John persuaded store managers to donate the food to the community dining room. Soon, he was receiving more food than the dining room could handle. To accommodate the donations, he approached St. Mary's Basilica with the idea of creating a central location so social service agencies could shop at no cost for the food they needed to serve clients. The church responded by loaning John \$3,000 and an abandoned building. The

St. Mary's Food Bank, the first of its kind, was founded. This was the start of the Gleaners, now called America's Second Harvest (America's Second Harvest, 2005).

In Kent County, local churches and neighborhood organizations followed the same plan. They accepted donations and sought surplus from grocers, growers, and food distributors. ACCESS (All County Churches Emergency Support System) began in 1981, to help congregations meet community needs, especially hunger needs. They coordinated the holiday food basket program and in 1981, provided structure to the 100 food pantries that had been working independently. Shortly thereafter, West Michigan's Second Harvest Gleaners (SHG) started in Grand Rapids.

ACCESS organizes demographic data on each pantry customer and helps them sign-up for USDA food assistance. ACCESS has responded to gaps in pantry service by organizing canned goods drives and creating a Pantry Buying Group for purchasing protein foods from distributors.

Food pantries get food from SHG. Each week they receive a listing of food so they can call, place an order, and pick-it-up. Food cost is priced per pound; fruit and vegetables 3 cents, bread and milk 7 cents, and everything else 15 cents.

The Heart of West Michigan United Way also offers a 2-1-1 countywide emergency assistance hotline, which is available 24/7. Staff will assist callers based on individual need.

Even though there are many sources to provide assistance, issues are surfacing in the food security network. Are pantries available to meet the needs of the customer? Is there a better system to provide food assistance? What are the barriers to affordable food access? How do we ensure customers receive a week of nutritious food? Do we organize local food distributors to assist in the food security system?

## **Purpose**

The ENTF Food Subcommittee has made excellent strides in the stewardship of Kent County food security. However, there are numerous challenges: loss of volunteers due to high fuel prices, loss of support due to manufacturing job loss, increased need from households affected by job loss, and reductions in USDA food assistance programs.

The ENTF Food Subcommittee vision is for Kent County to be a hunger-free zone. Self-sufficiency, better health through nutritious eating and more efficient food procurement, both at the consumer and provider level, are primary focal points. Subcommittee members are developing methods to enhance food stamp participation, designing systems for increased use and distribution of locally grown food, and expanding education on food options and nutrition to those who use the food support system.

The purpose of this evaluation was to assess community food security using data from individual households. Other issues were also examined, including the local need for food assistance, transportation barriers, the health and wellness continuum, and availability of nutritious food.

## **Limitations**

Many factors working together help determine an individual's daily food consumption. This evaluation looks at these factors in isolation. The interpretations and conclusions from this study are limited to the respondents. With less than 16 people sampled in each of five different census tracts throughout Kent County, total of 42, statistical interpretations would not be valid.

The qualitative results are reported using descriptive charts and tables. This evaluation generates benchmark data and future evaluations can compare to this pioneer work. Due to the nature of the data, the findings should not represent other counties in Michigan, or be generalized to other counties in the U.S.

## FINDINGS

In this evaluation we administrated six data collection surveys:

- **Evaluating Kent County Food Security - Key Informant Survey**  
On-line survey completed by ENTF Food Subcommittee members.
- **Participant Paper Survey**  
Paper survey completed by participants from the five focus groups.
- **Focus Group Survey**  
Verbal survey completed by participants from the five focus groups.
- **TFP Market Basket Store Price Survey**  
Paper survey to record food prices at local retail food stores, completed by evaluation team member.
- **Five Store Price Survey**  
Paper survey conducted weekly over a four-week period to record food prices at local retail food stores, completed by evaluation team member.
- **Food Producer Survey**  
Paper survey completed by farmers at a local farmers market.

Answers to the following eight questions can provide insight into the accessibility, availability, and affordability of nutritious food in Kent County. Information and data collected from the six surveys, comments from focus groups participants, and research from a variety of sources cited in this section help answer the question:

### ***How well does our community provide access to affordable and nutritious food?***

#### **1. How well equipped is our community to meet the food-related needs of its residents?**

Kent County, Mich. is well-equipped to meet the food-related needs of its residents as evidenced by the following:

- There is a diverse farm economy of fruit, vegetables, livestock, dairy, and poultry.
- The county has many fruit and vegetable distributors.
- There are several successful food retailers in the area, including Meijer<sup>®</sup>, a food and general merchandise store that started one-stop shopping in Grand Rapids and GFS<sup>®</sup>, a regional food service distributor with headquarters in suburban Wyoming. Three food cooperatives also started here to help local grocery stores. Country Fresh<sup>®</sup> dairy has grown and was recently acquired by Dean Foods<sup>®</sup>, the nation's largest dairy. Oven Fresh bakery also prospered and was recently acquired by Sara Lee<sup>®</sup>. Lastly, Spartan Stores<sup>®</sup> started out as a grocers' cooperative and has evolved into the nation's tenth largest grocery distributor.

- Charity food organizations have centralized their operations. The western regional headquarters and distribution warehouse of Michigan's West Michigan's Second Harvest (WMG) is located in Comstock Park. ACCESS, a non-denominational food charity organization, coordinates a food pantry system in excess of 100 sites throughout the county.
- Shared leadership between government and non-governmental organizations. Twenty-five years ago, the Kent County Board of Commissioners established the Kent County Emergency Needs Task Force. At that time, Governor William Milliken initiated a directive for local communities to work towards meeting the basic needs of residents severely affected by the poor economy of the late 1970's. Kent County government continues to support this initiative along with Kent County Department of Human Services and Heart of West Michigan United Way, in fostering collaboration and cooperation between public, private, and faith-based funders, service providers, and concerned citizens.

## **2. Are people in the community participating in food assistance programs?**

Yes. Yet there is a discrepancy between the number of persons living in poverty and the number of participants receiving federal food assistance. See **Map 1** it shows the spatial concentration of all residents receiving Food Assistance Program (FAP) benefits. In each census tract neighborhood, the percent of persons living in poverty exceeds the percent of residents participating with FAP. Thus, the food assistance need exceeds federal response.

Ten percent of county residents receive FAP benefits (Michigan Department of Human Services, 2006), however in rural Cedar Springs only 5% receive these benefits. This information contradicts common assumptions that residents in rural areas receive FAP benefits at a greater rate than urban residents. In two suburban neighborhoods, Wyoming and Eastbrook, participation rates were 17% and 19% respectively. In Steepletown and Baxter, two inner city neighborhoods, the rates were 25% and 37% respectively.

**Map 6** illustrates that USDA Women, Infants, and Children (WIC), The Emergency Food Assistance Program (TEFAP), and Commodity Supplemental Food Program (CSFP) distribution sites are located in areas with historically high need for food assistance in Kent County. In addition, as population redistributes from the central city - Grand Rapids - program sites have relocated to suburban and rural areas that demonstrate need.

## **3. Are resources available in the event that residents do not have enough money to purchase food through normal channels?**

Kent County residents have various resources available. Senior centers, spread throughout the county, operate in cooperation with the federal Area Agency on Aging. They are responsive to areas with high concentrations of senior citizens, as shown on **Map 2**.

Senior centers serve congregate meals where participants eat with peers. The meals meet the seniors' social and nutritional needs.

Many senior citizens experience limited mobility, both physically and through lack of access to transportation. The best solution for these seniors who live in their own



homes is to deliver a meal to them. In response, the community offers Senior Meals on Wheels. Other residents with similar needs rely on Meals on Wheels for a home-delivered meal, as shown on **Map 3**.

Also, Kent County has an extensive food pantry system, as shown on **Map 4**. A large majority of the food pantries cooperate with ACCESS, which provides data management, advocacy, and food procurement assistance such as food drives. Independent food pantries fill niches in the community and many times act in an isolated manner. Regardless of their affiliation, pantries rely on SHG for the majority of their food needs and round out their supply with purchased food through distributors like GFS®.

Additionally, Heart of West Michigan United Way operates a 2-1-1 information and referral service to direct those looking for assistance. This 24-hour emergency service is designed to meet acute and critical needs of the hungry.

#### **4. Which population subgroups personally experience unusually severe levels of food insecurity in our community?**

For the evaluation, we selected five census tract neighborhoods based on the high level of poverty documented by the 2004 US Census, see **Map 5**. Two were urban locations - Baxter and Steepletown neighborhoods. Baxter represents a predominantly African American sample with a low percentage of high school graduates and high unemployment. Steepletown represents a mixed neighborhood of ethnicity and work income. Two of the census tracts were in suburban locations - Wyoming and Eastbrook neighborhoods. Wyoming represents a mix of transitional housing in apartments, townhouses, and multiplexes, along with 50% single-family owner-occupied homes. Eastbrook represents a sample of immigrants from Bosnia, Somalia, and Sudan. Lastly, we selected a rural neighborhood - Cedar Springs.

Focus group data shows:

- 63% of the households operate on less than an \$11,000 annual budget
- Females are affected by poverty more than males - 79% vs. 21%
- Half the homes have children under the age of 18
- Race/ethnicity by location:
  - Rural Cedar Springs = 88% Caucasian, 22% mixed ethnicities
  - Baxter = 100% African American
  - Steepletown = 54% Caucasian, 23% African American, 15% Hispanic
  - Wyoming = 67% Caucasian, 33% mixed ethnicities
  - Eastbrook = 57% Immigrant, 29% Caucasian, 14% African American
- Food assistance participation:
  - 63% report receiving food stamps
  - 61% report getting food at a pantry
  - 7% report participation with WIC

Focus group findings show the population subgroups most affected by unusually severe levels of food insecurity are predominately female, operate with less than \$11,000 annual household budget, and half have children under the age of 18. The chart below summarizes the data.

Census Tract Neighborhood	Household Occupancy								Children younger than 18	Household Income				
	1	2	3	4	5	6	7	8 or more		less than \$11,000	\$11,001 - \$18,000	\$18,001 - \$26,000	\$26,001 - \$33,000	\$33,000 or more
Rural Cedar Springs			38%	38%	13%	13%			63%	75%			13%	
Baxter		38%	15%	15%	8%	15%			77%	69%	8%		8%	
Wyoming	50%	50%							17%	50%	50%			
Eastbrook	14%	43%			29%			14%	57%	57%	43%			
Steepletown	38%	15%	8%	31%	8%				38%	62%	23%	15%		8%

Source: Participant Paper Survey

### Focus Group Findings

Focus group participants responded both verbally and in writing. Results from some of the paper surveys are summarized below along with supporting data derived from the verbal surveys.

<b>Which of these statements best describes the food situation of your household over the past 12 months?</b>	
Sometimes there is not enough to eat	40%
We have enough food, but not always the kinds of food we want.	40%
We have enough of the kinds of food we want to eat.	20%

Source: Participant Paper Survey

Summary: Over the last 12 months, 40% of respondents reported that each month they were hungry and had to go without food. Food shortages typically occur in the third and fourth week of the federal food assistance cycle. During the summer, households are hardest hit by food insecurity because children are not eating breakfast or lunch at school. The holiday season (Thanksgiving through New Years Eve) is another time when their food supply is inadequate.

<b>I or other adults in my household don't eat for a whole day because there isn't enough money for food.</b>	
Never	66%
Almost every month	15%
Some months, but not every month	13%
Only 1 or 2 months	6%

Source: Participant Paper Survey

Summary: Participants reported a wide variety of coping and survival strategies when there is not enough food. Many pinch and stretch their food supply by reducing meal portions, skipping meals to feed their children, and relying on family members for extra food. One mother stated, "I go without food so my son can eat. I may not eat for several

days.” Most participants said they eat potatoes and pasta to fill their stomachs. “I make big pots of soup, goulash, or stew and share it with others.”

## 5. Do you eat well-balanced and nutritious meals?

<b>My household can't afford to eat balanced meals that include meat, fruits and vegetables, grains, and milk products:</b>	
Some months, but not every month	57%
Almost every month	24%
This never happens	13%
Only 1 or 2 months	7%

Source: Participant Paper Survey

Summary: Only 13% of survey participants reported eating balanced meals throughout the year. Eating unbalanced meals can contribute to people being overweight or even obese. It seems paradoxical that those suffering from food insecurity and hunger could be obese. However, it is possible if they consume processed food that contains high amounts of sodium, sugar, carbohydrates, and fats. A balanced diet should include fresh fruit and vegetables, lean meat, fish, and poultry, low-fat dairy, and high amounts of fiber.

In Kent County, 40% of adult residents are overweight and 20% are obese. Results are summarized below.

<b>Population</b>	<b>Overweight</b>	<b>Obese</b>
White	37.6 % ± 3.0	19.2% ± 2.4
Black	30.2 % ± 9.2	28.3% ± 8.9
Hispanic	58.7 % ± 11.1	14.9% ± 8.1
Non-Hispanic	35.7 % ± 2.8	20.0 % ± 2.4

Source: 2002 Kent County Behavioral Risk Factor Survey, Kent County Health Department (Confidence Interval 95%)

<b>Where do you most often get fresh fruits and vegetables?</b>	
Supermarket	72%
Neighborhood grocery store	26%
Food pantry	19%
Farmers market	15%
Convenience store / gas station	2%
Ethnic Market	2%

Source: Participant Paper Survey

Summary: Focus group participants were asked where they get fresh fruits and vegetables. Responses are rank ordered in the chart. Supermarkets and neighborhood grocery stores were the two most popular places to shop for fresh fruits and vegetables. Neighborhood stores that offer fresh fruits and vegetables are meeting consumer demand for these products, especially since suburban supermarkets are not easily accessible due to time and transportation constraints.

## **Additional Focus Group Findings**

We verbally asked participants questions about their health and if they eat well-balanced and nutritious meals. Research shows a balanced diet can benefit people suffering from chronic health conditions like the ones reported by our participants. They suffer from the following health issues: hypertension (53%), respiratory (47%), diabetes (43%), and heart disease (23%).

Many participants said they carefully read labels concerning levels of sugar and sodium. Very few participants expressed awareness of the connection between how food is prepared, for example frying versus steaming, and its impact on health. African participants expressed concern for food that meets the Muslim standard of food preparation, similar to kosher standards.

Focus group participants reported strong agreement that fruit and vegetables are essential to a healthy diet. All agreed that the higher cost for these products is the primary reason they do not have a properly balanced diet. Many said that eating foods from all four-food groups, and better access to farmers markets or a supermarket would improve their diet.

Only 17 of the respondents purchase food at farmers markets, but others reported a strong interest in shopping there. Among the barriers are higher cost, WIC no longer offers vouchers, and the distance of travel. One participant said, "It would take me two bus transfers there, forty-five minutes to shop, and two bus transfers to return home. Who has five hours to go to the farmers market?"

There is strong desire for mobile fruit and vegetable markets, similar to SHG trucks. A home or community garden is not viewed as a viable option. Most participants had limited knowledge of gardening and canning.

When judging the health and safety of food from pantries, there is confusion if food or food acquired after the "sell by" date is safe. Food pantry users also reported they examine meat for color, look for signs of spoilage, freezer burn, and expiration dates.

Additionally, they stated the chief source of dissatisfaction with food pantries was lack of meat, fresh fruit, and vegetables on a consistent basis.

## **6. What shopping patterns, transportation barriers, and other factors make it difficult for households to access food resources that in turn influence people's use of community food resources?**

Most focus group participants reported that they are satisfied with the store where they frequently shop. Many are "niche" shoppers who have identified which stores offer the type and quality of food they want at acceptable food prices.

Approximately one-half of all participants own a car. Others rely on rides from friends, family, or neighbors. Only three participants rely on public transportation, the Rapid. They complained that it is difficult to carry large amounts of food on the bus and it takes a lot of time to transfer buses to travel to and from the store. Rural participants reported that rising gas prices are hindering their ability to buy food and they would like food pantries to expand access to offset rising transportation costs.

Another concern was the high cost and limited variety offered in neighborhood grocery stores. Because suburban supermarkets were accessible by a limited number of participants, access to these locations is a big issue for some consumers.

Other transportation issues arise because FAP participants must travel to southeast Grand Rapids to file enrollment paperwork. Metropolitan residents without cars can rely on public transportation, however rural residents who do not own a car

must rely on others for transportation and the journey can take up to 45 minutes one-way. The Department of Human Services (DHS), the agency responsible for administering FAP, has tried to address this concern. In recent years, they have funded a Food Stamp Outreach worker who visits food pantries to assist people with the completion of the initial form. Those seeking FAP must schedule a meeting at the centralized DHS office in S.E. Grand Rapids.

**7. Do retail stores used by low-income residents offer a variety of affordable foods needed to prepare a family of four week’s worth of recipes and menus developed for USDA Thrifty Food Plan (TFP)?**

To determine if affordable food was available for low-income households we planned to record the prices of 87 food items found on the USDA Thrifty Food Plan. We selected 13 stores to visit in the city of Wyoming, located on the southwest side of Grand Rapids. We chose this location because it has a variety of convenience stores, neighborhood grocery stores, and a supermarket.

We immediately eliminated two stores from our list because they had less than six of the 87 items on the TFP list. Next, we eliminated a health food store because of unusually high food prices and we eliminated two neighborhood grocery stores because they did not have at least 13 items on our list. If we kept those stores in the comparison, the results could be confusing and difficult to interpret.

In the end, we visited eight stores and recorded prices for 52 of the 87 items on the TFP list. We could not locate all 87 items in each store. See **Map 6** for store locations.

**52 items from the TFP list:**

- |                              |                              |
|------------------------------|------------------------------|
| 1 Milk, 1% lowfat            | 28 Melon                     |
| 2 Milk, whole                | 29 Oranges                   |
| 3 Cheddar Cheese             | 30 Carrots, unpeeled         |
| 4 Cottage Cheese             | 31 Celery, bunch             |
| 5 Mozzarella Cheese          | 32 Green pepper              |
| 6 Beef, ground, lean         | 33 Lettuce                   |
| 7 Chicken thighs             | 34 Onions, yellow            |
| 8 Eggs, grade A, large       | 35 Tomatoes                  |
| 9 Tuna, chunk-style in water | 36 Potatoes                  |
| 10 Baked beans, vegetarian   | 37 Mandarin Oranges          |
| 11 Margarine, stick          | 38 Canned peaches            |
| 12 Vegetable Shortening      | 39 Spaghetti sauce           |
| 13 Mayonnaise Salad dressing | 40 Tomato sauce              |
| 14 Vegetable oil, any type   | 41 Orange juice concentrate  |
| 15 Sugar, brown              | 42 Green peas, frozen        |
| 16 Sugar, powdered           | 43 French fries, frozen      |
| 17 Sugar, white, granulated  | 44 Bread, white, enriched    |
| 18 Jelly, grape              | 45 Bread, whole-wheat        |
| 19 Pancake syrup             | 46 Hamburger buns, enriched  |
| 20 Fudgesicles, ice milk     | 47 Corn flakes               |
| 23 Vanilla                   | 48 Toasted oats              |
| 24 Catsup                    | 49 Flour, white, all-purpose |
| 25 Apples                    | 50 Elbow Macaroni, enriched  |
| 26 Bananas                   | 51 Long-grain Rice, enriched |
| 27 Grapes                    | 52 Spaghetti, enriched       |

<b>Total Cost for 52 items from the Thrifty Food Basket</b>	<b>\$102.43</b>	<b>\$ 97.50</b>	<b>\$ 87.98</b>	<b>\$ 89.86</b>	<b>\$ 87.46</b>	<b>\$ 89.15</b>	<b>\$67.30</b>	<b>\$59.74</b>
	<b>D&amp;W Supermarket</b>	<b>Forest Hills Grocery</b>	<b>Duthler Family Foods Grocery</b>	<b>Family Fare Supermarket</b>	<b>Meijer Supermarket</b>	<b>The Big Top Market Grocery</b>	<b>Sav A Lot Grocery</b>	<b>Aldi Grocery</b>

Source: TFP Market Basket Store Price Survey

Next, we visited the following five retail stores shopped most often by focus group participants. Over four weeks, we surveyed each store for ten items. We did this to determine the low cost provider among the five stores. The following table shows the results:

<b>Total Price</b>	<b>Store Name and Type</b>	<b>Whole Grain/Wheat Bread 24 oz</b>	<b>Skim or 1% Lowfat Milk 1 gallon</b>	<b>Eggs, Grade A Large</b>	<b>Beef, lean ground 1 pound</b>	<b>Fresh Bananas 1 pound</b>	<b>Fresh Grapes 1 pound</b>	<b>Fresh Romaine Lettuce 1 pound</b>	<b>Fresh Tomatoes 1 pound</b>	<b>Fresh Carrots, unpeeled 1 pound</b>	<b>Rice, white long grained 5 pound</b>
	<b>Sav A Lot Grocery</b>										
\$ 15.45	28-Jul-2006	0.89	2.49	0.69	2.69	0.48	1.79	1.99	1.49	1.29	1.65
\$ 15.05	4-Aug-2006	0.89	2.49	0.89	2.69	0.48	1.79	1.99	1.19	0.65	1.99
\$ 14.85	14-Aug-2006	0.89	2.49	0.89	2.49	0.48	1.79	1.99	1.19	0.65	1.99
	<b>Family Fare Supermarket</b>										
\$ 17.60	28-Jul-2006	1.59	2.99	0.99	2.69	0.69	0.99	1.99	1.69	0.99	2.99
\$ 19.37	4-Aug-2006	1.69	3.29	0.99	3.49	0.49	1.99	1.99	1.69	0.76	2.99
\$ 19.87	4-Aug-2006	1.69	3.29	0.99	3.99	0.49	1.99	1.99	1.69	0.76	2.99
\$ 18.80	14-Aug-2006	1.59	2.99	0.99	3.19	0.49	1.99	1.99	1.79	0.79	2.99
\$ 18.60	14-Aug-2006	1.59	2.99	0.99	3.19	0.49	1.99	1.79	1.79	0.79	2.99
	<b>Duthler Grocery</b>										
\$ 16.10	28-Jul-2006	1.39	2.99	0.59	1.99	0.99	1.29	1.59	1.49	0.79	2.99
\$ 17.70	4-Aug-2006	1.39	1.99	0.89	2.79	0.99	2.49	1.39	1.99	0.79	2.99
\$ 17.40	14-Aug-2006	1.39	1.99	0.89	2.79	0.49	2.49	1.59	1.99	0.79	2.99
	<b>Meijer Supermarket</b>										
\$ 17.96	28-Jul-2006	1.79	2.99	0.99	3.49	0.69	1.99	1.29	1.69	0.75	2.29
\$ 15.98	4-Aug-2006	1.69	2.99	0.89	3.19	0.49	0.99	1.29	1.5	0.66	2.29
\$ 14.87	14-Aug-2006	0.99	2.89	1.09	1.79	0.49	1.99	1.29	1.3	0.75	2.29
	<b>Aldi Grocery</b>										
\$ 11.59	28-Jul-2006	0.79	2.19	0.65	1.99	0.33	1.25	1.39	1.03	0.49	1.48
\$ 12.05	14-Aug-2006	0.79	2.19	0.75	1.99	0.33	1.25	1.59	1.03	0.65	1.48

Source: Five Store Price Survey

Summary: While there are differences in prices, affordable food at retail prices is available in Kent County. Also, data showed, supplementing food pantry items into the family's monthly food menu can help.

### 8. Are there local food production resources available and affordable to all community members?

We surveyed 17 farmers at a local outdoor farm market located in Grand Rapids. Predominantly they sold fruit and vegetables but some had fresh meat. Twenty-five percent noted their farms were organic or natural. Two farmers said they sought assistance from USDA, Michigan Farm Bureau, MSU Extension, food distributors, food retailers, or non-profit action groups.

**Map 7** shows the location of farms in Kent County where the primary occupation is farming. Acreage of parcels farmed varies throughout the county.

- Farms using fertilizers and pesticides = yellow diamonds\*
- Retail food stores = green squares
- Food pantries = red squares
- Farmers markets = green asterisks

\* small organic/natural farms with less than 100 acres are not displayed

More than 1000 acres	500 to 999 acres	180 to 499 acres	50 to 179 acres	10 to 49 acres	9 or Less acres
31 farms	36 farms	139 farms	382 farms	512 farms	112 farms

Source: National Agriculture Statistics Service (2002)

As the chart below shows, various crops and livestock are available at farms throughout Kent County.

Commodity	Year	Planted Acres	Harvested Acres	Yield	Production	
Wheat Winter All	2005	6,100	5,800	58	338,000	bushels
Wheat All	2005	6,100	5,800	58	338,000	bushels
Corn For Grain	2005	43,000	37,000	138	5,090,000	bushels
Corn For Silage	2005		5,700	14.9	85,000	tons
Oats	2005	1,900	1,500	73	110,000	bushels
Soybeans	2005	22,000	21,900	42	920,000	bushels
Hay All (Dry)	2004		23,800	3	76,000	tons
Cattle & Calves	2005	28,000				head
Milk Cows & Production	2005	170,000				thousand pounds of milk
Hogs & Pigs	2005	11,000				head

Source: National Agriculture Statistics Service (2002)

How long have you been in operation?	
Less than 3 years	0%
4 to 9 years	24%
10 to 14 years	12%
Over 15 years	65%

Source: Food Producer Survey

How do you sell your products?	
Farmers market	100%
Sell to Restaurants	41%
Donate to Gleaners or Food Banks	29%
Sales through Distributors/Wholesalers	24%
Road-side stand	18%
Pick your own	6%
Sell to Hospitals	6%
Community supported agriculture	0%
Producers Cooperative	0%
Sell to Government Institutions (schools, jails, or colleges)	0%

Source: Food Producer Survey

Summary: Farmers were asked how they sold their products. Responses are ranked ordered on the chart. Most farmers sell their items at the farmers market and to restaurants, or they donate them to Gleaners or food banks.

## Farm Production and Food Pantries

To show the impact that local farm production has on the food pantry system we contacted a local food pantry and requested a quarterly pantry shelf report. United Church Outreach Ministries (UCOM), an ACCESS food pantry in Wyoming, had these items for the following periods.

### Items on the shelf at UCOM from August 14 – August 18, 2006

#### Fruit and Vegetables

Onions	Garden Vegetable Salad	Bananas
Tomatoes	Cabbage	Cantaloupe
Asparagus	Tomato Sauce	Strawberries
Mushrooms	Tomato Juice	Grapes
Broccoli	Tomato Soup	Orange Juice
Summer Squash	Mushroom Soup	Three Varieties of Fruit Snacks
Zucchini, Fresh	Red Pepper and Bean Soup	Applesauce
Cucumbers	Canned Corn	Apple Pie Filling
Lettuce	Canned Cream Corn	Fruit Cocktail
Frozen Carrots	Canned Peas	Cranberry Sauce
Frozen Corn	Canned Green Beans	Citrus Salad
Frozen Zucchini	Canned Wax Beans	Fruit Spread
Spinach	Canned Spinach	Canned Pumpkin
Garlic	Canned Sweet Potatoes	Figs
Coleslaw	Fruit Salad	Canned Grape Juice
Bell Peppers	Cranberry Juice	Cranberry Cocktail
Hot Peppers	Apple Juice	
Celery	Fruit Blend	



**Dairy**

Milk, skim fresh  
 Milk, 2% fresh  
 Vanilla Yogurt Fruit Dip  
 Ranch Dip  
 Butter

Margarine  
 Sour Cream  
 Eggs, Liquid  
 Eggs  
 Cream Cheese

Trix Yogurt  
 Gorgonzola Cheese  
 Milk , 2% shelf stable  
 Milk, sweetened condensed

**Specialty Foods**

Sugar Free Foods  
 Med pass Nutrition Drink  
 Soy Milk

Nutrament Protein Energy Drink  
 Boost  
 Soy Formula

Asst Baby Food

**Proteins**

Chicken  
 Roast Beef  
 Ham Hocks  
 Ham, whole and sliced  
 Salami

Bologna  
 Minced Lunch meat  
 Pork Fillets  
 Burritos  
 Sliced Turkey

Corned Beef Hash  
 Barbecue Beef with Beans  
 Salmon  
 Peanut Butter  
 Tuna

**Grains**

Phyllo Dough  
 French fries  
 Biscuits, two varieties  
 Mashed Potatoes  
 Diced potatoes  
 Tortillas, whole wheat  
 Tortillas, regular  
 Tortilla Strips  
 Filled Pretzels  
 Pie Crusts  
 Bread Dough  
 Flour

Spaghetti  
 Fresh potatoes  
 Canned Sliced Potatoes  
 Oat Cakes  
 Saltines  
 Wheat Thins  
 Biscuit Mix  
 Crunch Bars  
 Oyster Crackers  
 Sesame Crackers  
 Cereal (8 varieties)

Asst. Breads and Bagels (15+ varieties)  
 Corn Meal  
 Rigatoni  
 Maya Cobia Beans  
 Kidney Beans  
 Sourdough Bread Mix  
 Black Beans  
 Garbanzo Beans  
 Chili  
 Fettuccini  
 Green Split Peas

**Miscellaneous Foods**

Pop  
 Beef Gravy  
 Carmel Dip  
 Cake Mixes  
 Pies  
 Chips

Corn Chips  
 Donuts  
 Coffee Creamer  
 Maple Syrup  
 Mushroom Gravy  
 Peanut Butter Cups

Clam Juice  
 Cooking Oil  
 Jello  
 Hot Fudge Topping  
 Asst. Mixes and Spices  
 Ketchup

**Items on the shelf at UCOM from March 27 – March 31, 2006****Fruit and Vegetables**

Asst. Produce  
 Organic Grape Juice  
 Cranberry Sauce  
 Canned Pumpkin

Mango Passion Juice  
 Cream of Tomato Soup  
 Fruit Snacks  
 Canned Peas

Red Pepper Soup  
 Heinz Relish  
 Kosher Dills

**Dairy**

Milk  
 Coffee Creamer  
 Ice Cream

Whipped Cream  
 Strawberry Yogurt Fruit Dip  
 Sweetened Condensed Milk

Ice Cream Sandwiches

**Specialty Foods**

Oatmeal Baby Cereal  
 Diabetic Shakes  
 Ensure

**Proteins**

Ring Bologna  
 Pork Fillets  
 Sliced Bologna  
 Sliced Minced Lunch Meat  
 Ham

Subpack  
 Sliced Turkey  
 Ham Patties  
 Beef Polish Sausage  
 Brown and Serve Links

Chicken  
 Sugar Free Gelatin  
 Butterball Turkey Breast  
 Tyson Chicken

**Grains**

Nut Quick Bread  
 Pecan Quick Bread  
 Radiatore Pasta  
 Cheddar Cheese Crackers

Walnut Toast  
 Buttermilk Corn Meal Mix  
 Saltine Crackers  
 Asst. Snack Crackers

Spaghetti  
 Tortillas  
 Garlic Croutons

**Miscellaneous Foods**

Jello Pudding	Candy Bars	Walnut Brownie Mix
Ice Cream Cones	Carmel Dip	
Low Carb Snacks	Worcestershire Sauce	

**Items on the shelf at UCOM from June 26 – June 30, 2006****Fruit and Vegetables**

White Grape Juice Conc.	Orange Juice	Spaghetti Sauce
Clamato Juice	Cranberry Grape juice	Lima Beans
Lemon Juice	Figs	Lo cal Apple Juice

**Dairy**

Ranch Dip	Vanilla Yogurt Dip
Strawberry Yogurt Dip	Scrambled Egg patties

**Specialty Foods**

Oatmeal Baby Cereal  
Diabetic Shakes  
Ensure

**Proteins**

Ring Bologna	Subpack	Cajun Sausage
Sliced Bologna	Sliced Turkey	Hot Dogs
Canadian Bacon	Ham Patties	Chicken
Smoked Pork Roll	Chicken	Sugar Free Gelatin
Sliced Minced Lunch Meat	Brats	
Ham	Brown and Serve Links	

**Grains**

Pie Crusts	Tri Colored Rotini	Reduced Fat Crackers
Cheese Nips	Triscuits	Wheat Thins
Peanut Butter Crackers	Snack Crackers	Cheese & Chive Crackers
Spaghetti	Oyster Crackers	
Whole Grain Wheat Flakes	Pita Chips	

**Miscellaneous Foods**

Iced tea	Carmel Dip
Vanilla Pudding	Syrup

As the charts illustrate, local farm production has a dramatic impact on food pantry shelves during the summer months. August was the most prosperous month for farm products. The list below shows the variety of items available.

**Fruit and Vegetables**

Onions	Cucumbers	Cabbage
Tomatoes	Lettuce	Bananas
Asparagus	Spinach	Cantaloupe
Mushrooms	Garlic	Strawberries
Broccoli	Bell Peppers	Grapes
Summer Squash	Hot Peppers	Figs
Zucchini, Fresh	Celery	

Unfortunately the bounty does not last. During the other months of the year, UCOM supplements the fruit and vegetables it receives exclusively from SHG with purchases from GFS.

**FINDINGS FROM THIS EVALUATION INDICATE THESE NEXT STEPS:**

1. Continue to collaborate and cooperate through Kent County Emergency Needs Task Force Food Subcommittee and it's supporting network
2. Develop programs that stop childhood food insecurity, especially during the summer
3. Teach food budgeting, nutrition, and meal preparation in low-income neighborhoods
4. Address transportation to suburban retail food stores for low-income residents
5. Mobilize DHS caseworkers to enroll FAP applicants in high poverty neighborhoods
6. Continue to monitor food prices at regional retail food stores
7. Include farmers in food security network discussions and plan development
8. Expand mobile markets, similar to SHG trucks that provide fresh fruit and vegetables

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## OTHER FOOD RELATED LINKS

- Second Harvest Gleaners: [www.wmgleaners.org](http://www.wmgleaners.org)
- Community Research Institute: <http://www.cridata.org/>
- ACCESS: <http://www.accessofwestmichigan.org/>
- Senior Meals on Wheels: <http://www.seniormealsonwheels.org/links.htm>
- MI Dept of Community Health: <http://www.michigan.gov/mdch>
- MSU Extension: <http://www.msue.msu.edu/>
- Greater Grand Rapids Food Systems Council: [www.foodshed.net](http://www.foodshed.net)
- Michigan Food Policy Council: [www.michigan.gov/mfpc](http://www.michigan.gov/mfpc)

## APPENDICES

### Maps

1. **Map 1** shows the spatial concentration of all residents receiving Food Assistance Program (FAP) benefits for Kent County, MI. **page 22**, inset map for Grand Rapids, MI. **page 23**.
2. **Map 2** shows the spatial concentration of all residents receiving Congregate Meals for Kent County, MI. **page 24**, inset map for Grand Rapids, MI. **page 25**.
3. **Map 3** shows the spatial concentration of all residents receiving Meals on Wheels and Senior Meals on Wheels for Kent County, MI. **page 26**, inset map for Grand Rapids, MI. **page 27**.
4. **Map 4** shows the spatial concentration of all residents receiving food at ACCESS pantries for Kent County, MI. **page 28**, inset map for Grand Rapids, MI. **page 29**.
5. **Map 5** shows the spatial concentration of all residents living at 185% or below the poverty line in 2000 for Kent County, MI. **page 30**, inset map for Grand Rapids, MI. **page 31**.
6. **Map 6** shows the spatial distribution of selected stores based on total cost for a 52 item food basket on retail food for Kent County, MI. **page 32**, inset map for Grand Rapids, MI. **page 33**.
7. **Map 7** shows the spatial distribution of farms whose primary occupation is farming for Kent County, MI. **page 34**, inset map for Grand Rapids, MI. **page 35**.

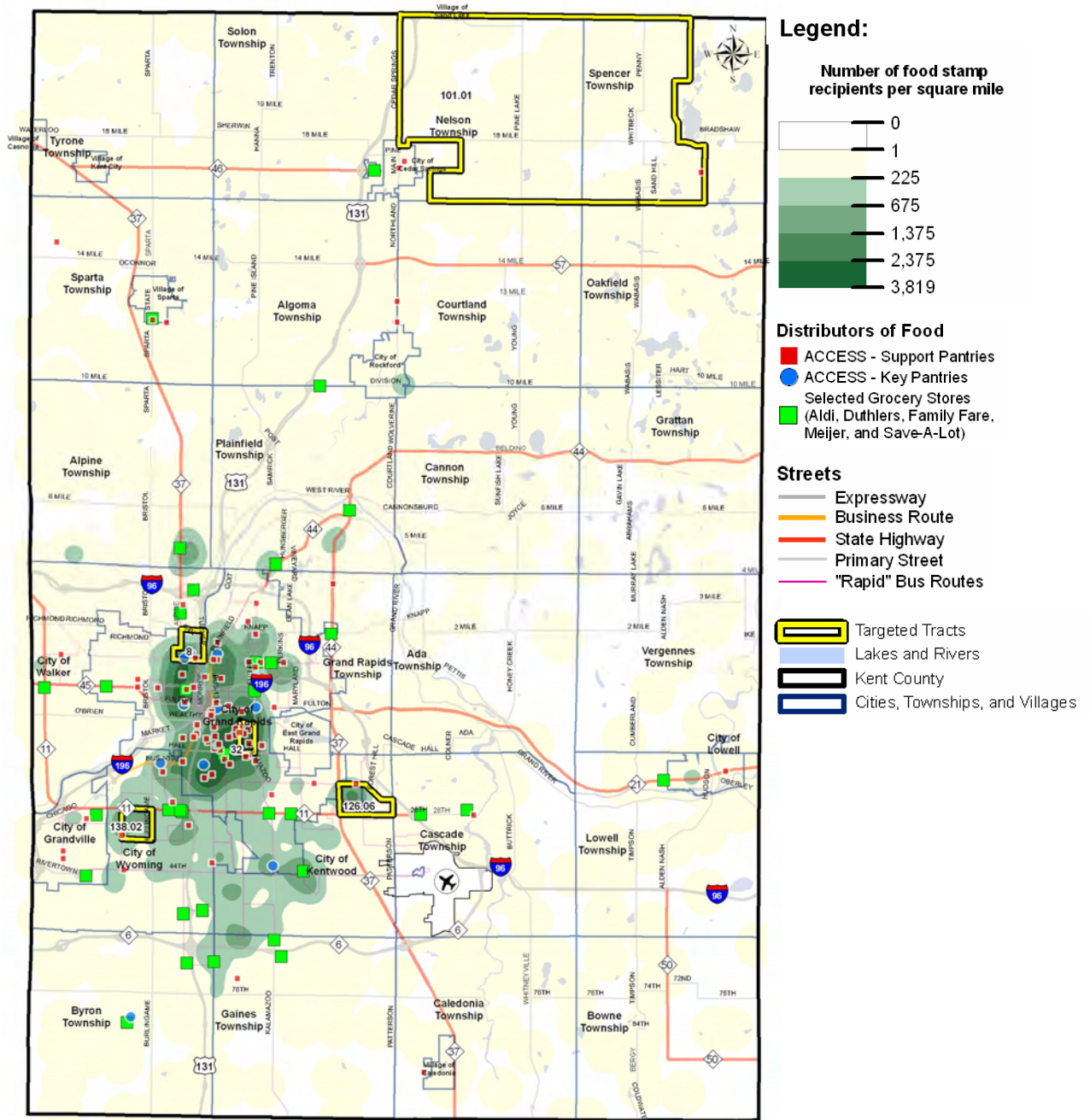
### SURVEYS

**Key Informants**, Email survey sent to a network of hunger and food affiliated organizations, **pg. 37**

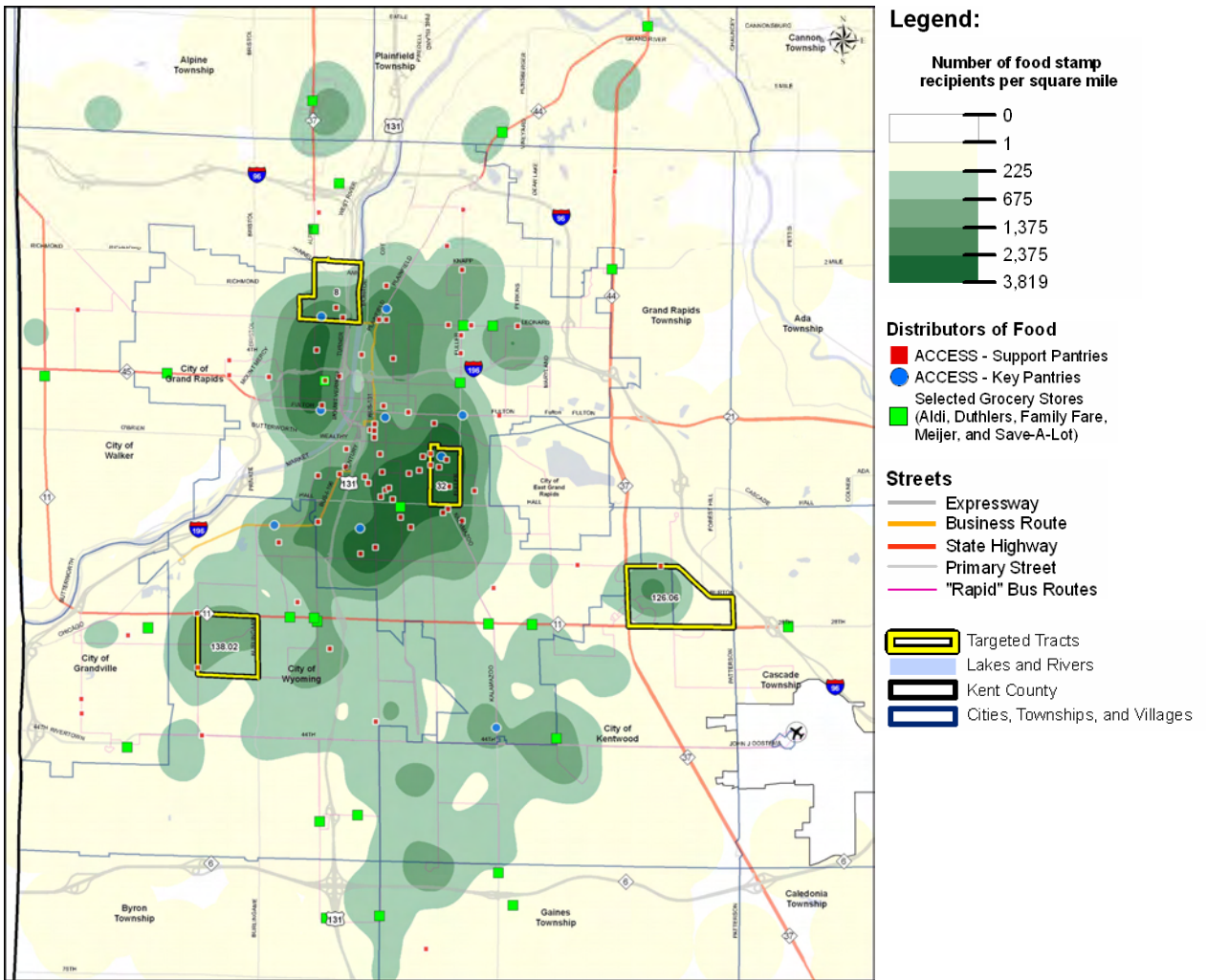
### FOCUS GROUP FINDINGS

Reflects a series of at-risk and pantry recipients at five locations within Kent County. Recipients were randomly selected volunteers, **pg. 48**

**Map 1** shows the spatial concentration of all residents receiving Food Assistance Program (FAP) benefits for Kent County, MI.

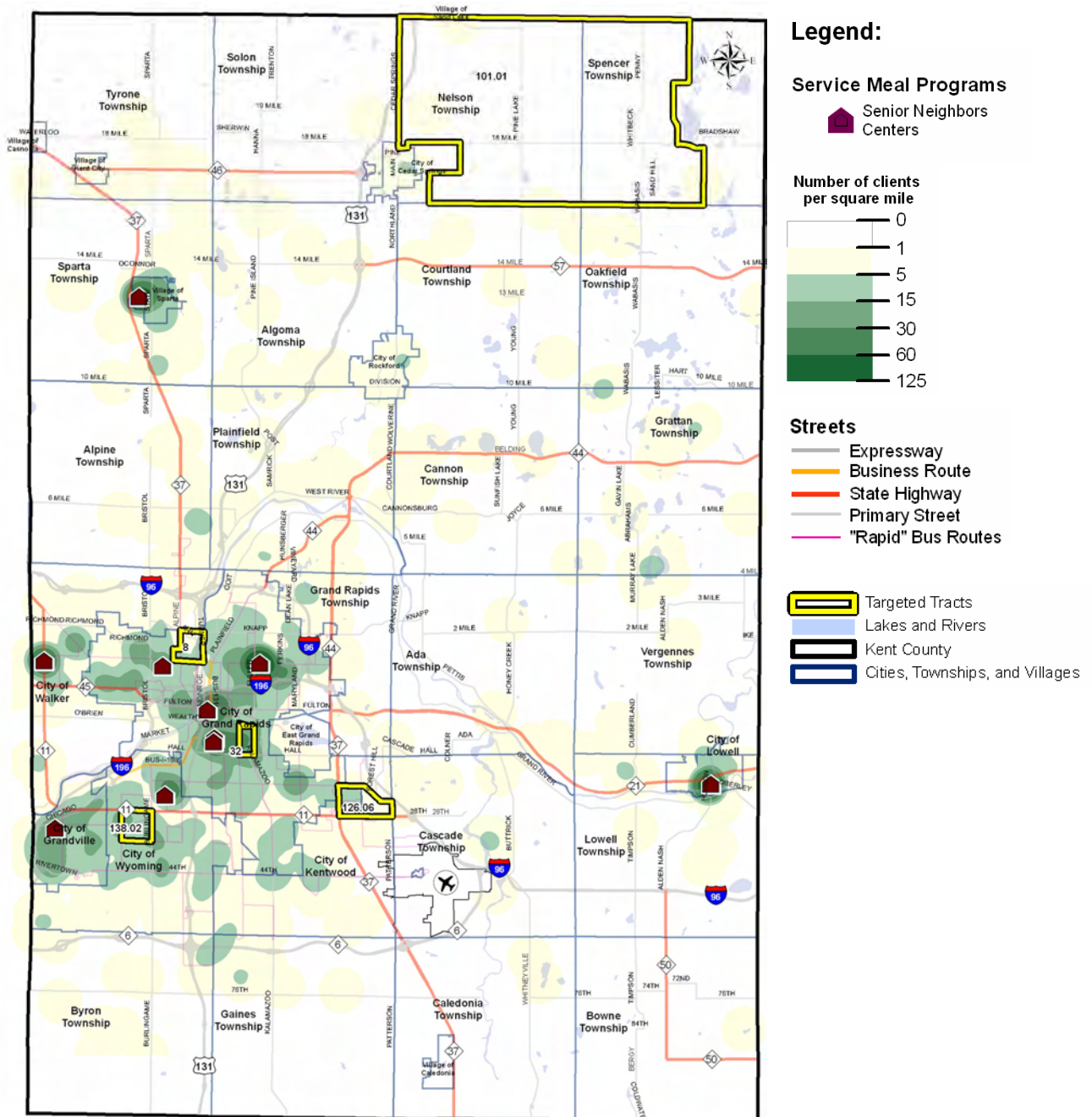


**Inset Map 1** shows the spatial concentration of all residents receiving Food Assistance Program (FAP) benefits in Grand Rapids, MI.

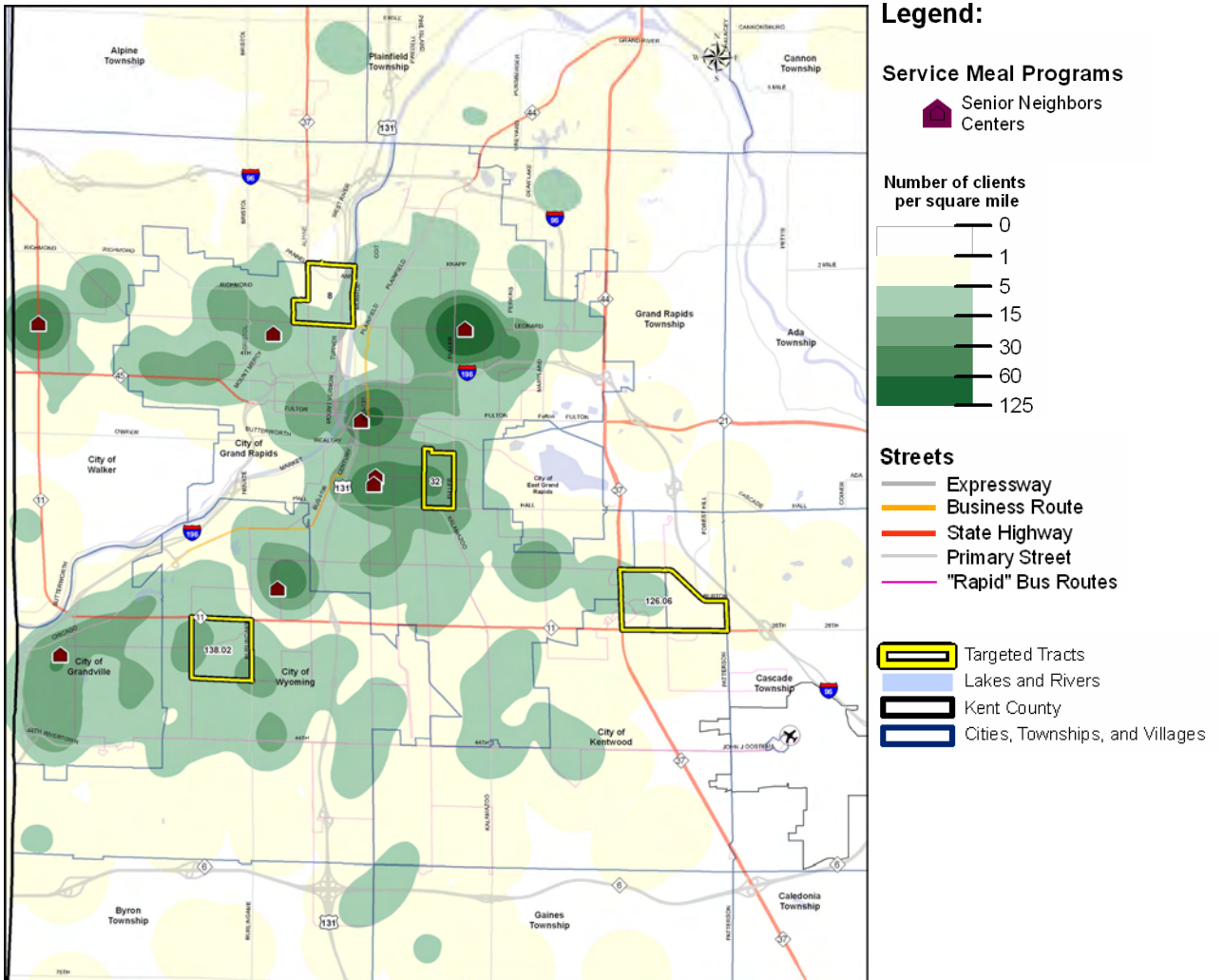




**Map 2** shows the spatial concentration of all residents receiving Congregate Meals for Kent County, MI.

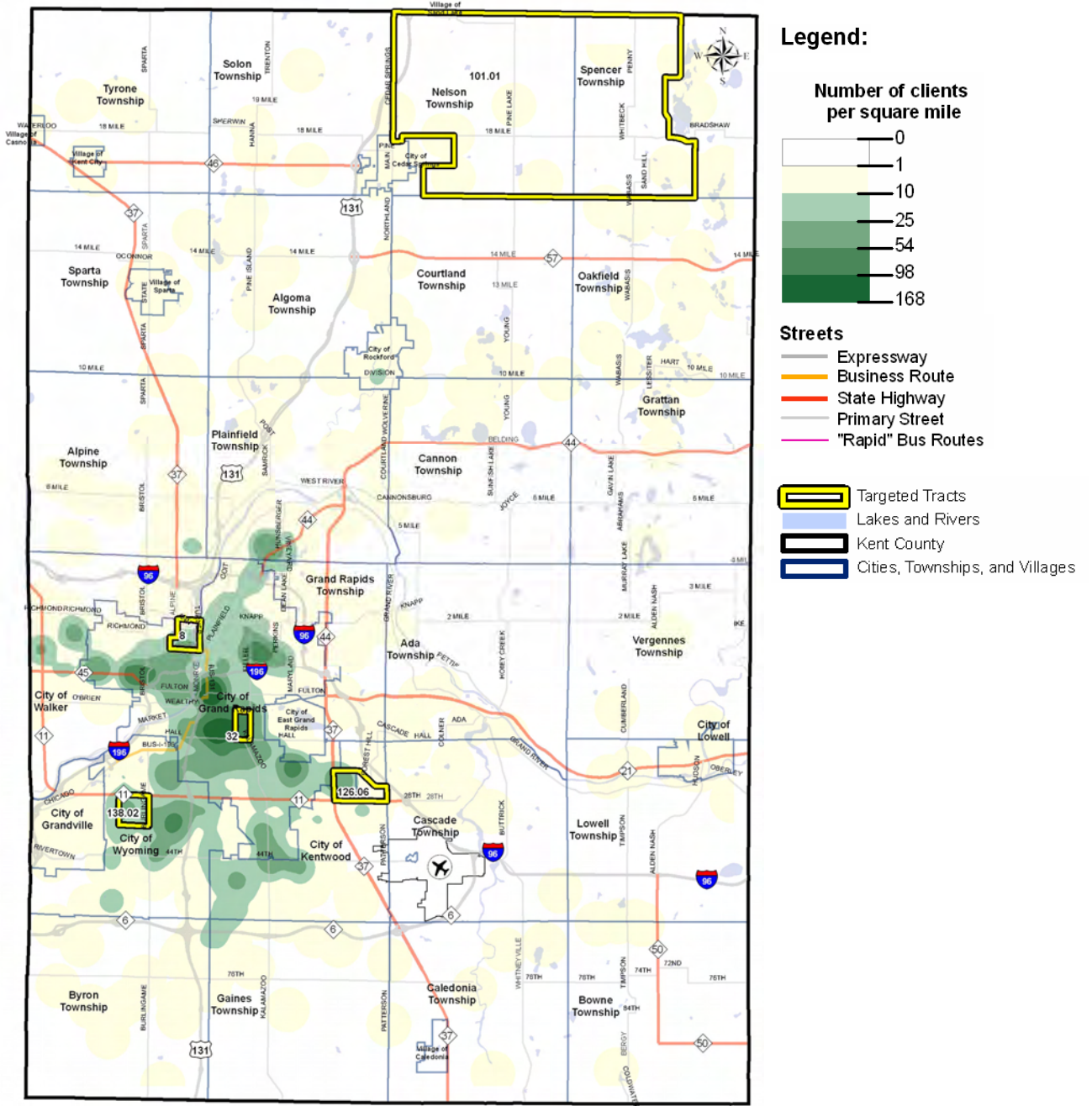


**Inset Map 2** shows the spatial concentration of all residents receiving Congregate Meals for Grand Rapids, MI.

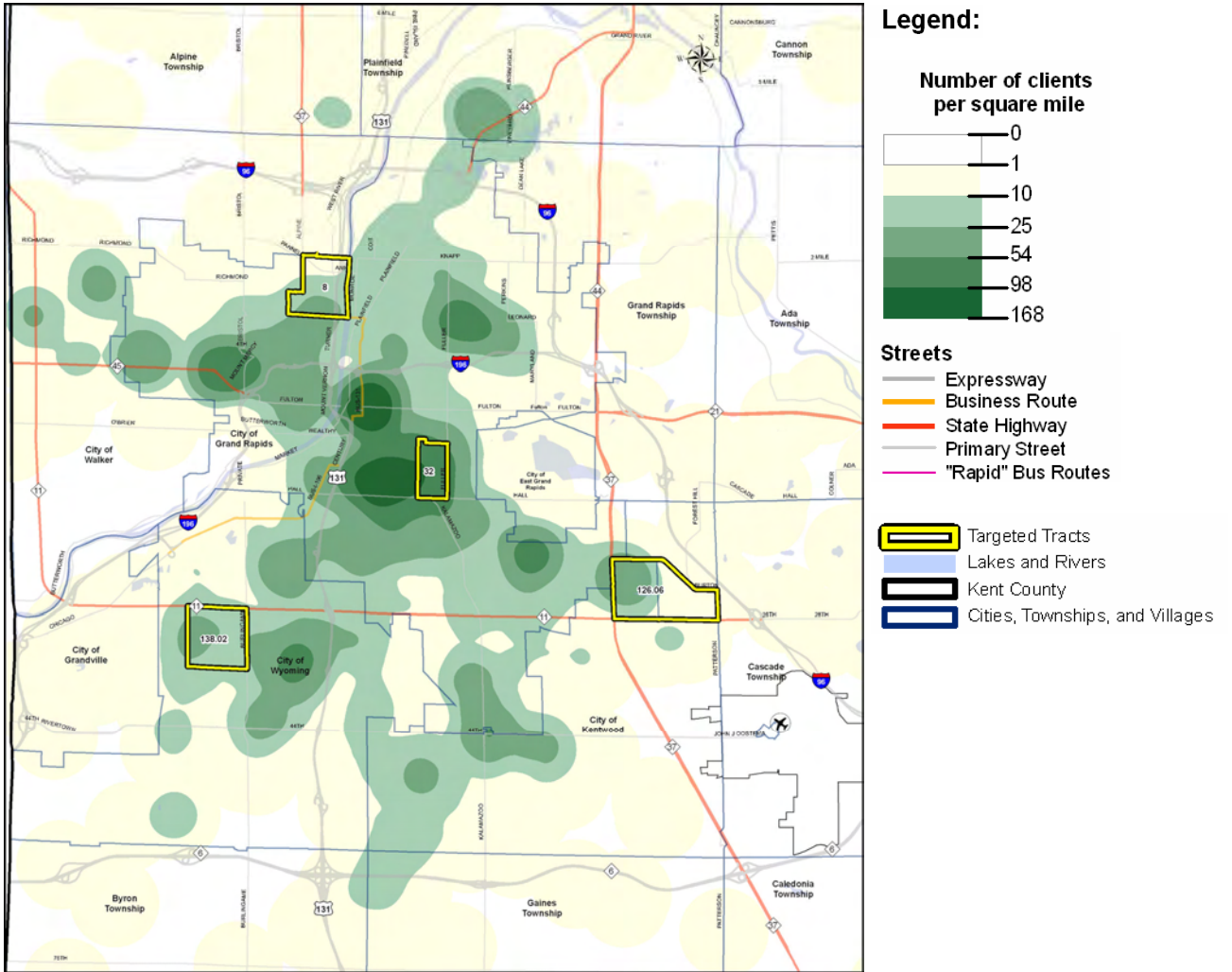




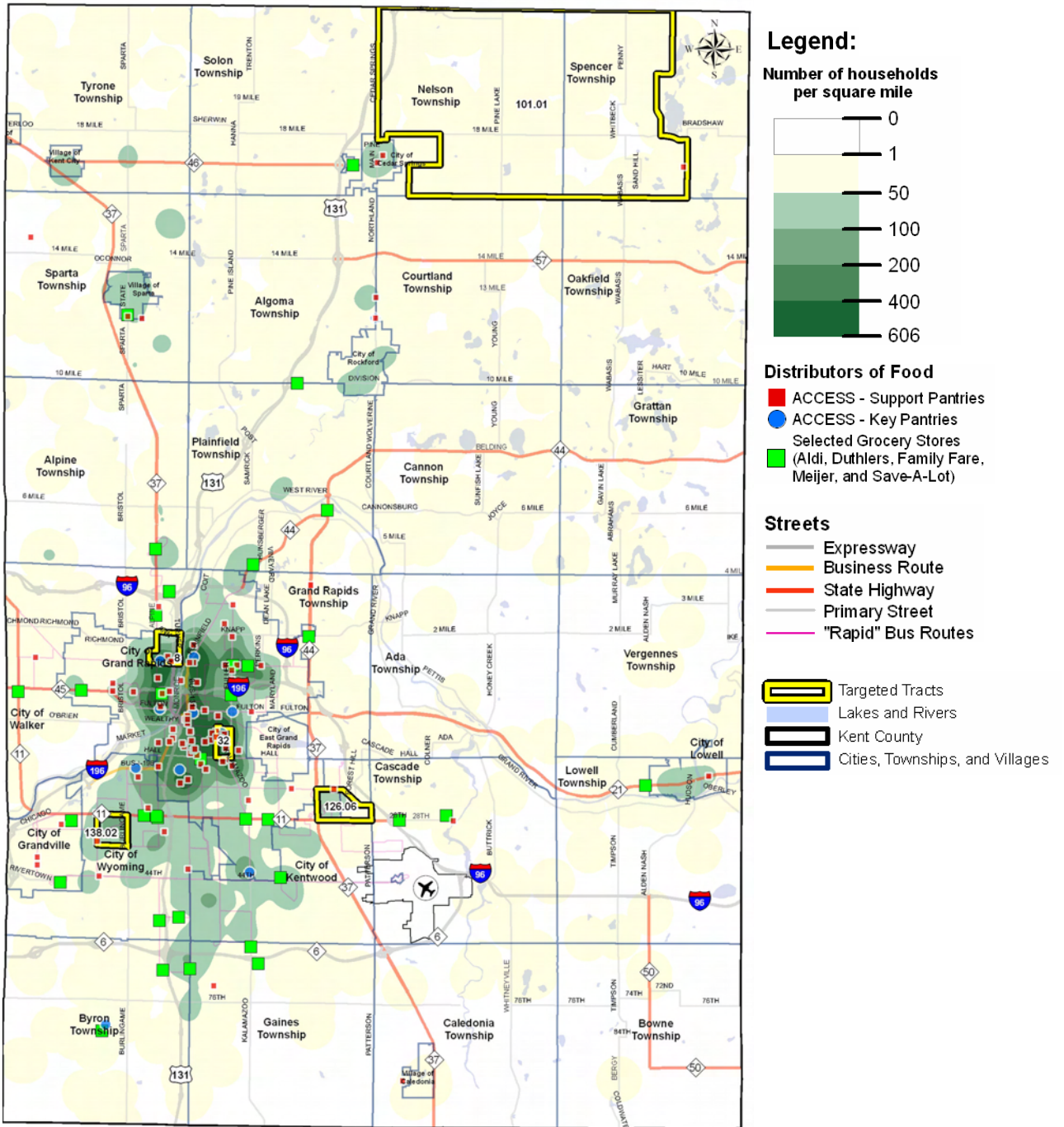
**Map 3** shows the spatial concentration of all residents receiving Meals on Wheels and Senior Meals on Wheels for Kent County, MI.



**Inset Map 3** shows the spatial concentration of all residents receiving Meals on Wheels and Senior Meals on Wheels for Grand Rapids, MI.

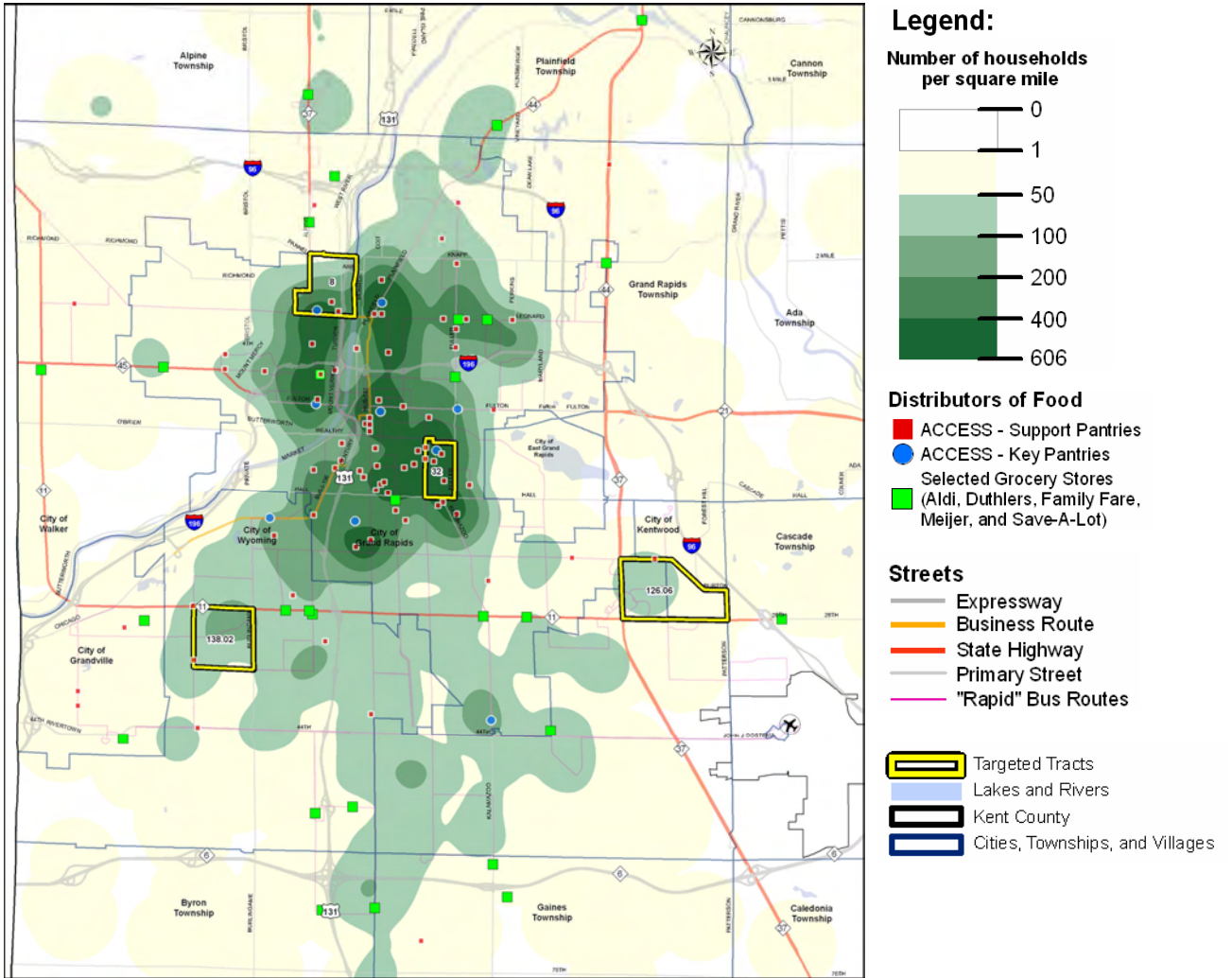


**Map 4** shows the spatial concentration of all residents receiving food at ACCESS pantries for Kent County, MI.

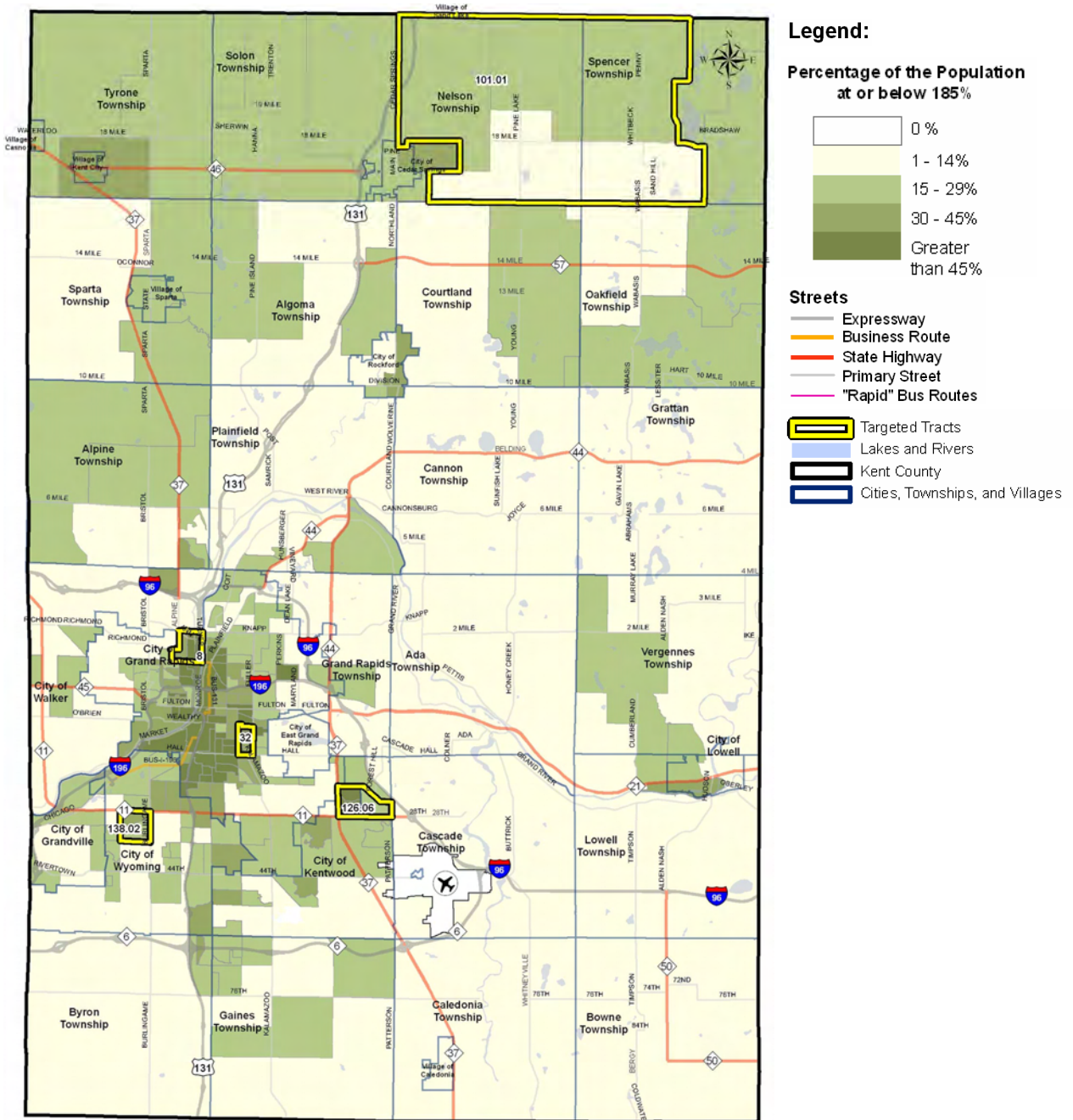




**Inset Map 4** shows the spatial concentration of all residents receiving food at ACCESS pantries for Grand Rapids, MI.

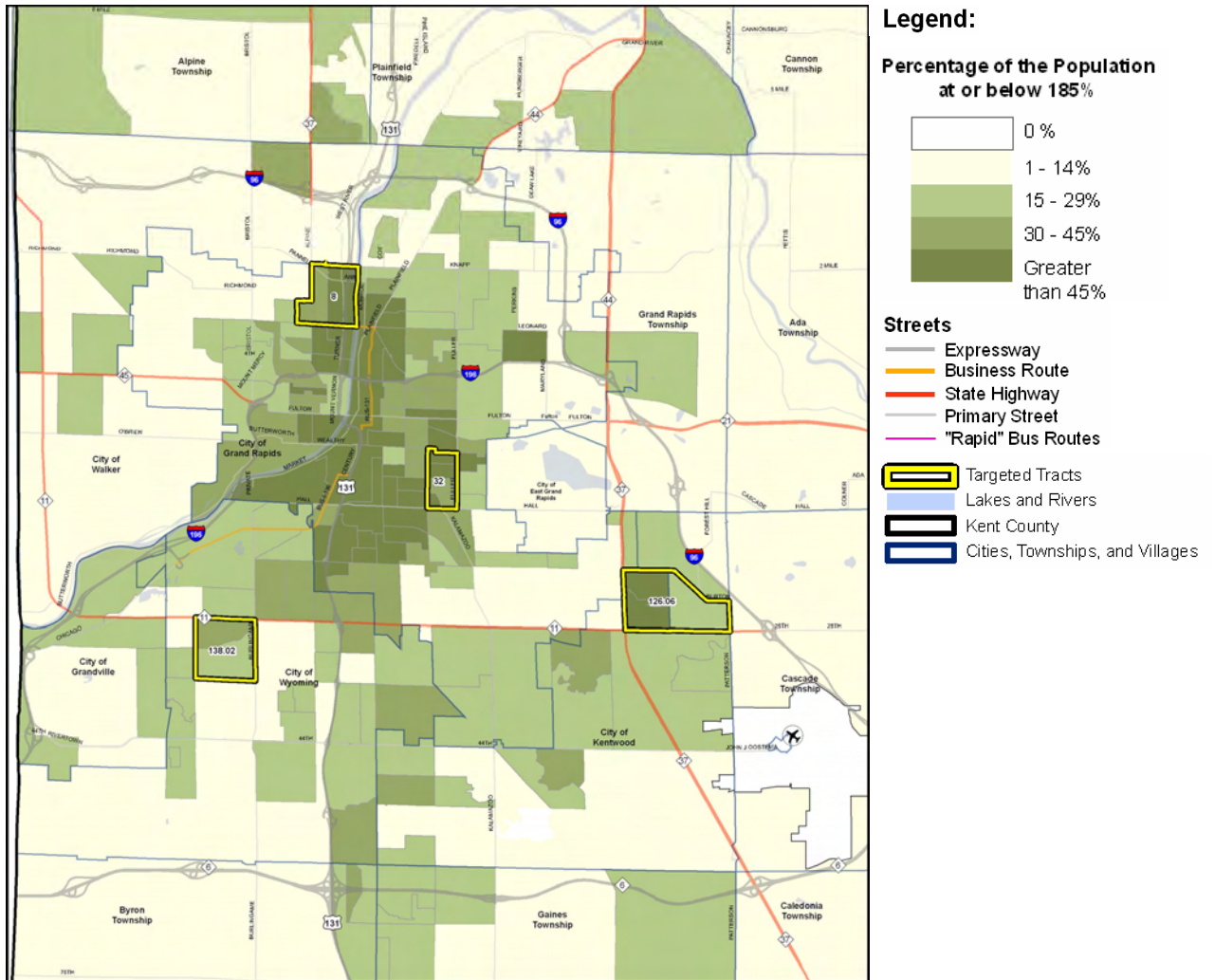


**Map 5** shows the spatial concentration of all residents living at 185% or below the poverty line in 2000 for Kent County, MI.



Produced by: CRI at The Johnson Center

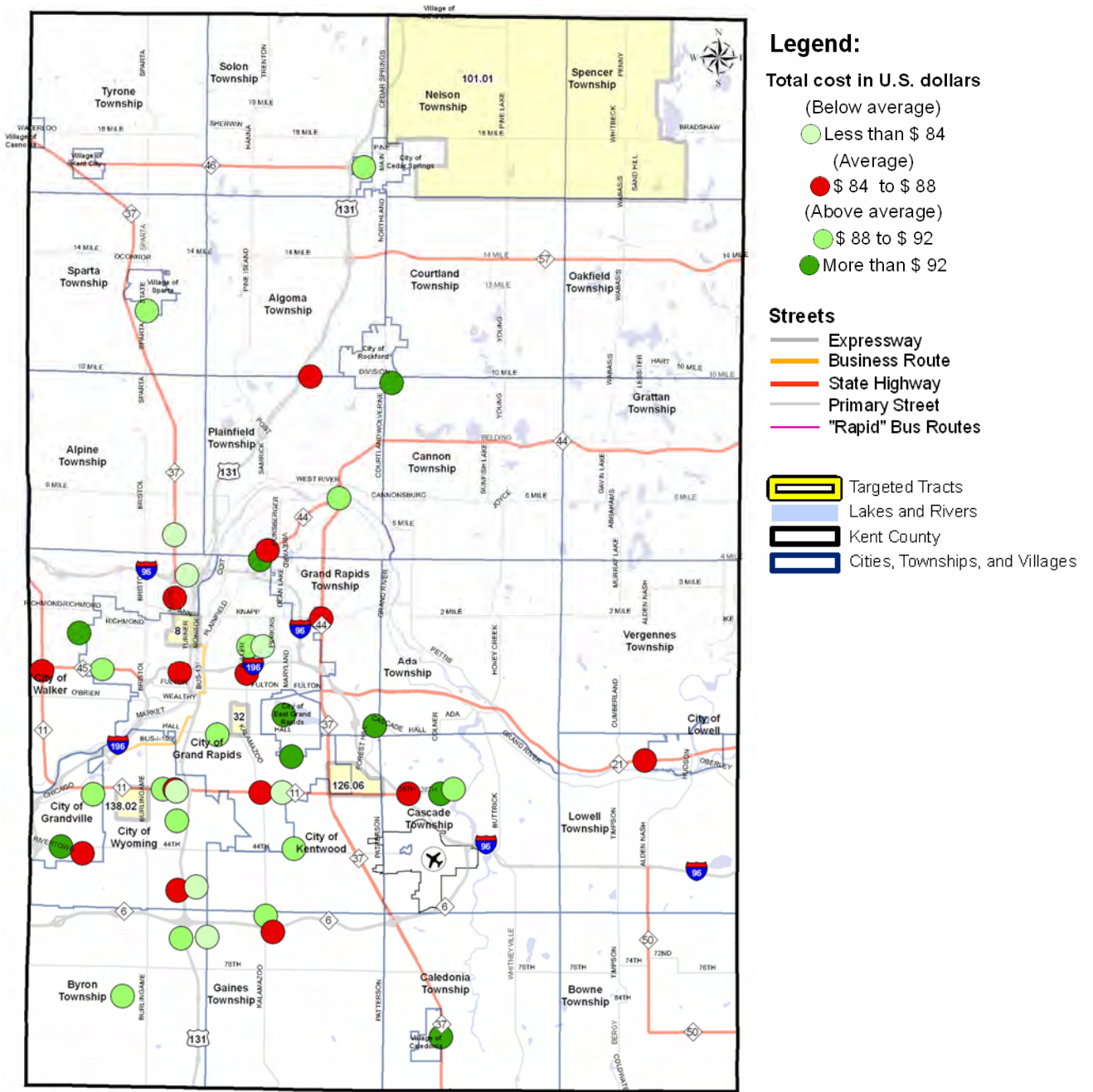
**Map 5** shows the spatial concentration of all residents living at 185% or below the poverty line in 2000 for Grand Rapids, MI.



*Produced by: CRI at The Johnson Center*

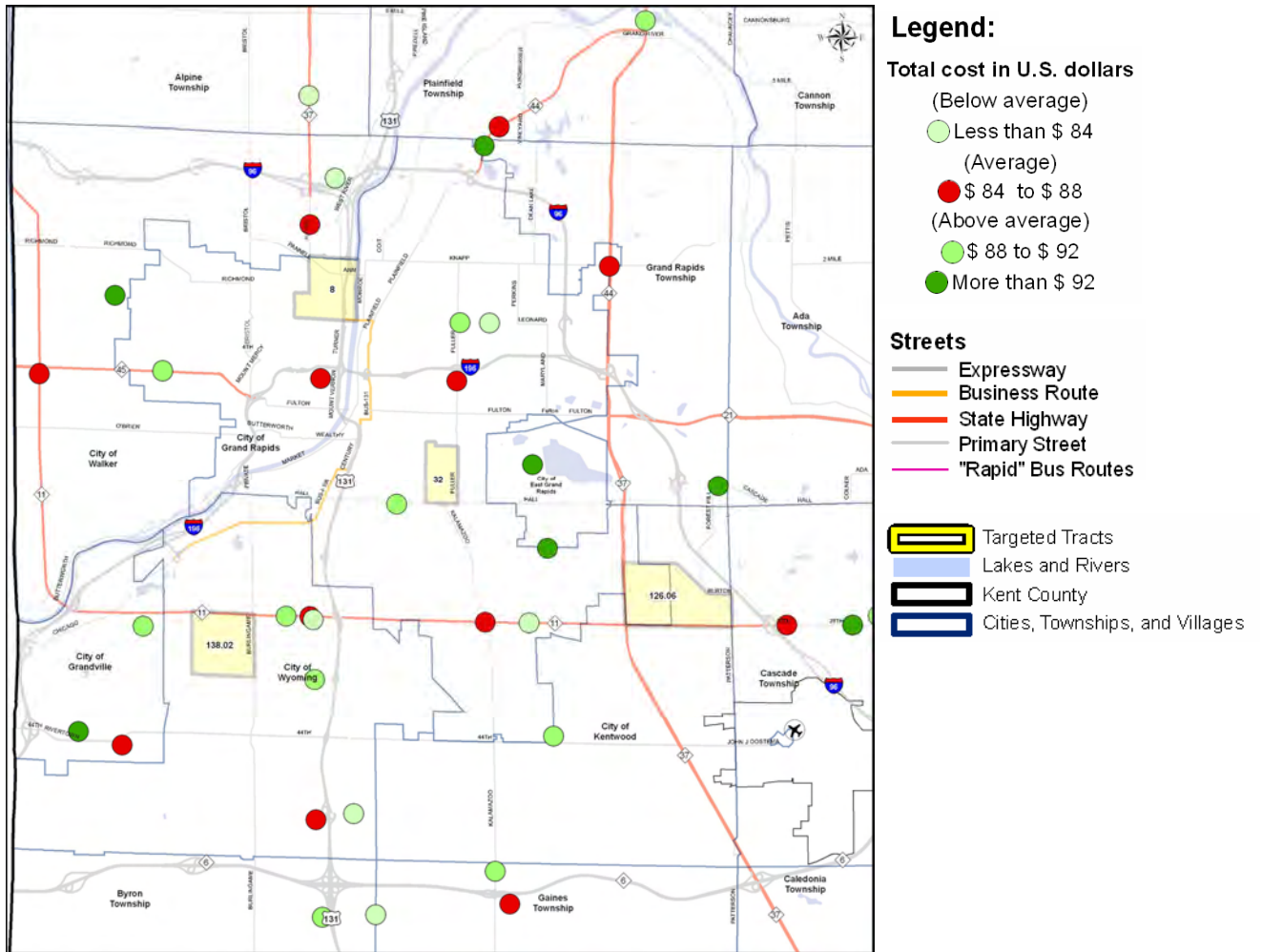


**Map 6** shows the spatial distribution of selected stores based on total cost for a 52 item food basket on retail food for Kent County, MI.



Produced by: UMI at the Johnson Center

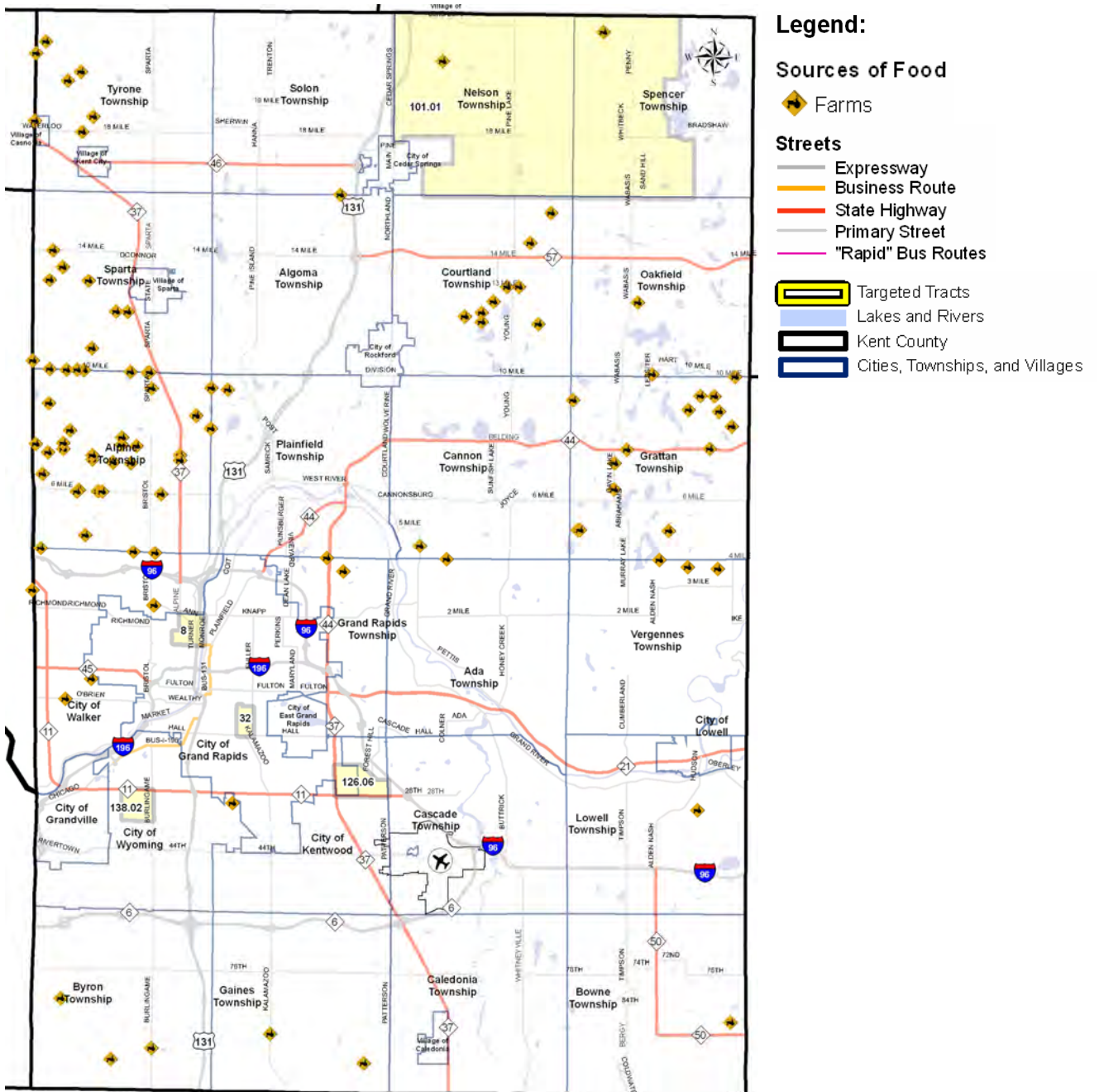
**Inset Map 6** shows the spatial distribution of selected stores based on total cost for a 52 item food basket on retail food for Grand Rapids, MI.



*Produced by: CRI at The Johnson Center*

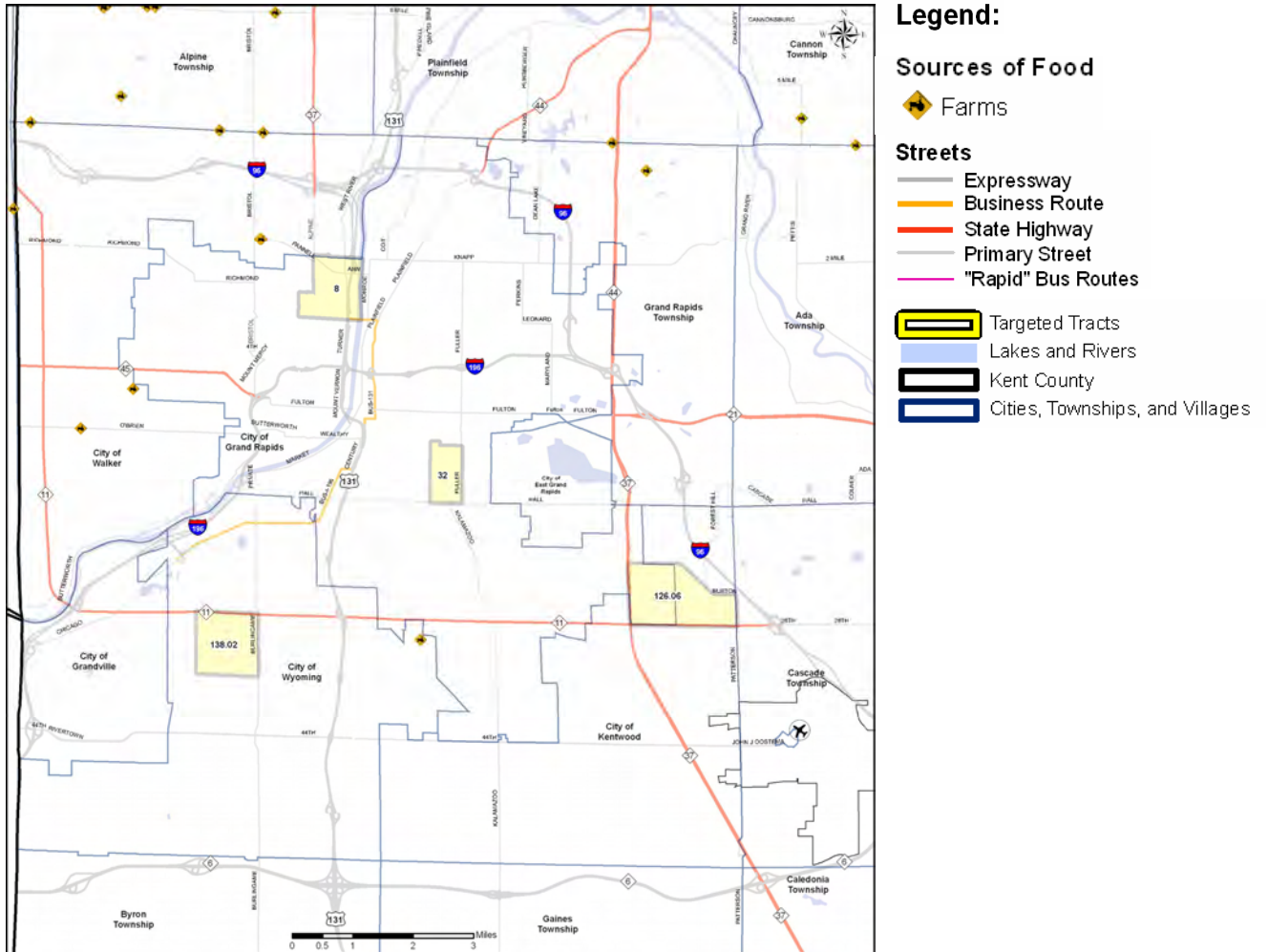


**Map 7** shows the spatial distribution of farms whose primary occupation is farming for Kent County, MI.



Produced by: CRI at The Johnson Center

**Inset Map 7** shows the spatial distribution of farms whose primary occupation is farming for Grand Rapids, MI.



*Produced by: CRI at The Johnson Center*

## Surveys

Evaluating Kent County Food Security- Key Informants  
 Response Status: Completes  
 Filter: No filter applied  
 Aug 28, 2006 07:28 PM PST

(Emailed survey sent to a network of hunger and food affiliated organizations)

### 1. Do you think that many households in your community have a problem with food security?

Yes	23	85%
No	4	15%
<b>Total</b>	<b>27</b>	<b>100%</b>

### 2. If there is a problem, what is the extent?

There isn't a problem	0	0%
Less than 5%	3	11%
6 to 15%	17	63%
16 to 30%	4	15%
31 to 45%	3	11%
Over 46%	0	0%
<b>Total</b>	<b>27</b>	<b>100%</b>

### 3. How do you see the household food security problem manifest itself?

Not enough money for food	24	89%
Kinds of food wanted are not available	8	30%
Not enough time for shopping or cooking	4	15%
food isn't appropriate for health needs	14	52%
Too hard to get to the store	14	52%
On a diet	0	0%
Fresh fruits and/or vegetables aren't available	11	41%
No working stove available	3	11%
Not able to cook or eat because of health problems	5	19%
Don't know or not applicable	0	0%
Other, Please Specify	6	22%

#### 4. How do people cope with food insecurity?

Worry whether food will run out before getting money to buy more	18	67%
Food just didn't last, and don't have money to get more	17	63%
Couldn't afford to eat balanced meals	15	56%
Adults in the household cut the size of your meals or skip a meal	15	56%
Went hungry because couldn't afford enough food	13	48%
Lose weight because not enough money for food	2	7%
Relied on only a few kinds of low-cost food to feed the children	17	63%
Couldn't afford to feed the children a balanced meal	14	52%
Children would skip meals because there wasn't enough food	8	30%
Other, Please Specify	2	7%

#### 5. What are the contributing factors to household food insecurity?

Low wage jobs	24	89%
Unemployment	22	81%
Divorce	14	52%
Single parent household	20	74%
Lack of skill training	19	70%
Didn't finish high school	16	59%
Don't own a car	17	63%
Weak reading and writing skills	17	63%
Teenage pregnancy	14	52%
Recent immigrant	15	56%
Alcohol and substance dependency	22	81%
Other, Please Specify	2	7%

#### 6. Do you think that food is accessible, available, and affordable in your community?

Yes	20	74%
No	7	26%
<b>Total</b>	<b>27</b>	<b>100%</b>

**7. Let's focus on the stores used by people for the majority of their food shopping. Why do you use these stores the most?**

convenience	21	78%
variety offered	17	63%
cleanliness	11	41%
safety	7	26%
location	21	78%
quality of food	17	63%
service	4	15%
location	9	33%
cleanliness	1	4%
food cost	18	67%
fresh fruit & vegetables	14	52%
Other, Please Specify	2	7%

**8. How do you get to the store?**

Walk	1	4%
Own auto	26	96%
Bus	1	4%
Taxi	0	0%
Get a ride from someone	3	11%
Other, Please Specify	0	0%

**9. How long does it take you to get there?**

Under 5 minutes	7	26%
6 to 15 minutes	18	67%
16 to 30 minutes	2	7%
31 to 45 minutes	0	0%
Nearly an hour	0	0%
<b>Total</b>	27	100%

**10. Name a grocery store or market with in walking distance of your home?**

D&W  
 Duthler's Family Foods  
 Family Fare  
 Kingma's Market  
 Local Mexican Market  
 Marathon Convenience Store  
 Meijer  
 Walgreens  
 There isn't one

**11. Name a grocery store or market with in two miles of your home**

D&W  
 Duthler's Family Foods  
 Family Fare  
 Forest Hills Foods  
 Horrock's Market  
 Kingma's Market  
 Local Mexican Market  
 Marathon Convenience Store  
 Meijer  
 Walgreens  
 There isn't one

**12. Does your favorite grocery store have an ample supply of fresh fruit and vegetables?**

Yes	26	96%
No	1	4%
<b>Total</b>	<b>27</b>	<b>100%</b>

**13. What are the reasons that you don't use other stores?**

transportation difficulty	5	19%
cost	15	56%
variety of food	8	30%
lack fresh fruit & vegetables	4	15%
Don't accept food stamps	0	0%
hours of operation	2	7%
Other, Please Specify	7	26%

**14. We are trying to understand why people shop the way they do. What influences the number of times you shop?**

transportation	7	26%
storage	7	26%
availability of stores	2	7%
food in the stores	0	0%
available time	16	59%
Other, Please Specify	9	33%

**15. Can you see a bus stop from the front door of your favorite store or market?**

Yes	20	74%
No	7	26%
<b>Total</b>	27	100%

**16. Is the food affordable for low-income members of the community?**

Yes	20	74%
No	7	26%
<b>Total</b>	27	100%

**17. Do you feel comfortable and accepted at your favorite store or market?**

Yes	26	96%
No	1	4%
<b>Total</b>	27	100%

**18. What do you think are the biggest problems related to food security at the community level?**

Low wages

Unemployment  
 Too much free food  
 Hazardous food handling and storage  
 Transportation costs  
 Cost of meat, protein and dairy products  
 Limit on # of times can get food at food pantries  
 Too much travel time  
 Global economy and job loss  
 Single parent household  
 Lack working refrigerator and/or stove  
 Substance abuse of alcohol, cigarettes and drugs  
 Housing costs  
 No ride-share to the market  
 Lack of education  
 Macro economic issues  
 Government programs not fully funded  
 Poverty  
 Wisely shop, cook and prepare food  
 Neighborhood stores  
 Availability of healthy food  
 Funds for food  
 Budgeting and meal planning  
 Childcare costs  
 Media, consumerism, and culture  
 Limited choice and higher price  
 Too much low nutrition, low cost food

**19. Pick two of the biggest problems listed and explain why you think these exist?**

Low wages  
 Unemployment  
 Transportation costs  
 Housing costs  
 Macro economic issues  
 Poverty  
 Wisely shop, cook, and prepare food  
 Neighborhood stores  
 Availability of healthy food  
 Funds for food  
 Budgeting and meal planning

**20. What resources are in place to address the community food insecurity problem?**

"Big Box" store low prices  
 ACCESS Pantry Network  
 Charity Agencies  
 Classes on budgeting, shopping, and cooking  
 Collaboration  
 Community food markets  
 Community gardens  
 Community initiative and investment  
 Congregate meals  
 Emergency food pantries  
 Faith-based groups  
 Family and friends



Farmer's Markets  
Food donations and canned good drives  
Food stamp program and outreach workers  
Free meals: God's Kitchen, Mel Trotter, churches  
Government Programs – WIC and commodity food  
Greater G.R. Food Council  
Heart of W. MI United Way and 2-1-1 hotline  
Housing assistance  
Kent Co. Emergency Food Task Force Food Cmte.  
Low cost grocery stores  
Meals on Wheels and Sr. Meals on Wheels  
Medical assistance  
MI Dept of Human Services  
MSU Cooperative Extension  
Non-affiliated food pantries  
Rapid Transportation  
Saturday Food Program AT Eastern Ave. CRC  
Second Harvest Gleaners and Mobile Food Truck  
Senior Meals  
Spectrum Health NOW program  
The Salvation Army  
USDA programs: School Breakfast/lunch and summer meals  
Volunteers

**21. Name two things that could improve the community's food security.**

Distributing meal planning information and recipes  
Consumer choice at pantries  
Coordinated nutrition relief programming  
Substance abuse programs  
Low cost neighborhood grocery stores  
Adequate financial resources  
Full funding for government food security programs  
Greater utilization of mobile food trucks  
Greater use of food stamps  
Better paying jobs and higher wages  
Increasing summer food stamp values  
Client needs assessment  
Sustainable agriculture  
Lower food costs  
Training for budgeting, buying, safety and preparation  
Increased concern about good nutrition  
Area wide transportation system  
Meat, protein, dairy, fruit and vegetables available at a reasonable cost  
Better collaboration with all players  
Low cost transportation and/or grocery store deliveries

**22. Who are the key players?**

Meals on Wheels	21	78%
Senior Pantries	20	74%
School officials	12	44%
Gleaners/West Michigan's Second Harvest	23	85%
ACCESS	26	96%
Food Pantries	27	100%
God's Kitchen	18	67%
Farmer's markets	10	37%
Michigan Department of Human Services	22	81%
Elected officials	7	26%
Your church	14	52%
Food Activists	10	37%
United Way	17	63%
Community foundations	6	22%
Neighborhood groups	10	37%
Other	1	4%
Other, Please Specify	5	19%

**23. Are there any local ordinances or other policies that affect food production, distribution, and consumption?**

zoning rules that affect supermarket development,	2	7%
food purchasing regulations for local schools or institutions,	7	26%
policies on the use of city-owned land for community gardens	6	22%
other	4	15%
Other, Please Specify	15	56%

**24. How do transportation policies affect food access?**

I don't know	7	26%
Other, Please Specify	20	74%
<b>Total</b>	<b>27</b>	<b>100%</b>

**25. Are there local funding sources for community food security-related activities?**

Yes	21	78%
No	6	22%

<b>Total</b>	27	100%
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**26. Is there an integration of food-related issues into the community planning process?**

Yes	23	85%
No	4	15%
<b>Total</b>	27	100%

**27. Let's focus on some specific Government-sponsored programs like food stamps, WIC, and school meals. How important are food assistance programs to your community?**

Vital	17	63%
Very Important	8	30%
Important	2	7%
Not Very Important	0	0%
Don't know	0	0%
<b>Total</b>	27	100%

**28. What would you say are the best features of the food assistance programs? That is, what makes them really work well?**

staff attitude	13	48%
location	16	59%
easy access	18	67%
other	1	4%
Other, Please Specify	9	33%

**29. What are some reasons why people may not be participating in food assistance programs?**

transportation problems	23	85%
eligibility	15	56%
lack of comfort using the food assistance programs	21	78%
the application process	16	59%
attitudes of food stamp office staff	14	52%
children embarrassed	6	22%
children unwilling to eat the food	5	19%

the limitations of the coupons or bridge cards	5	19%
Didn't know about the program	11	41%
food isn't appropriate for health needs	9	33%
Other, Please Specify	2	7%

**30. Do you grow your own food in a home garden or fish or hunt for your food?**

Yes	13	48%
No	14	52%
<b>Total</b>	<b>27</b>	<b>100%</b>

**31. How heavily do you rely on garden fresh foods in your regular summer food supply?**

Less than 15%	9	33%
16 to 30%	7	26%
31 to 45%	5	19%
46 to 60%	0	0%
Don't have a food garden	6	22%
<b>Total</b>	<b>27</b>	<b>100%</b>

**32. Community gardens are gardens that are planned and maintained by community members. Do you grow food in a community garden?**

Yes	0	0%
No	27	100%
<b>Total</b>	<b>27</b>	<b>100%</b>

**33. What is the schedule of your local farmers markets in your community?**

I don't know	14	52%
Please Specify	14	52%

**34. A food cooperative or co-op is an organization owned and controlled democratically by its members. It may be organized as a buyers club or a store where people who are not members may also shop. Are there food co-ops in your community?**

Yes	12	44%
No	15	56%
<b>Total</b>	<b>27</b>	<b>100%</b>

**35. Community supported agriculture (CSA) is a partnership between a farm and community members. Members support the farm by paying a set fee that is used to help pay for seeds, fertilizer, water, equipment maintenance, labor, etc. In return, the farm provides, to the best of its ability, a healthy supply of seasonal fresh produce throughout the growing season. Are there any community-supported agriculture programs in your community?**

Yes	6	22%
No	21	78%
<b>Total</b>	<b>27</b>	<b>100%</b>

**36. Now one last question. Imagine that you have the opportunity to do something in the community to help people have an easier time getting the types of foods that they want or need. What would you do?**

Bring stores closer to our homes	7	26%
Try to get the foods we want available in the stores	5	19%
Establish and enforce standards of cleanliness for stores	3	11%
Provide public transportation to the large supermarkets	16	59%
Start a food co-op	6	22%
Start farmers markets in the community	9	33%
Create outreach programs for alternative resources	14	52%
Establish a community garden	6	22%
Outreach or information programs	13	48%
Application assistance programs	13	48%
One application for all programs	9	33%
Change in hours of program operation	7	26%
Transportation improvements	21	78%
Training for professional staff on the programs and on the community's culture	9	33%
Other, Please Specify	7	26%

**37. Name of city or township where you reside.**

Ada, MI 49301  
 Byron Center, MI 49315  
 Cedar Springs, MI 49319  
 Grand Rapids, Twp, MI 49525  
 Grand Rapids, MI 49503  
 Grand Rapids, MI 49504  
 Grand Rapids, MI 49505  
 Grand Rapids, MI 49506  
 Grand Rapids, MI 49508  
 Grand Rapids, MI 49546  
 Hamilton, MI  
 Holland, MI 49423  
 Kentwood, MI 49508  
 Plainfield Township, MI 49525  
 Wyoming, MI 49519  
 Wyoming, MI 49509

### 38. Your Age Range

	19-Oct	
	0	0%
20-29	1	4%
30-39	3	11%
40-49	9	33%
50-59	9	33%
60-69	5	19%
70-79	0	0%
80-89	0	0%
90-99	0	0%
over 100	0	0%
<b>Total</b>	<b>27</b>	<b>100%</b>

### 39. PLEASE identify yourself as ONE of the following people:

Clergy	0	0%
Political/community officials	5	19%
Food assistance providers	7	26%
Emergency food providers	4	15%
Community nutritionists	0	0%
Welfare Office staff	0	0%
Case/social workers	3	11%
Advocates	2	7%
Local Food Producers	0	0%
Local farmers	0	0%
Farmers at farmers markets	0	0%

Community-supported agriculture	0	0%
Community gardens	0	0%
Local dairies	0	0%
Local fisheries	0	0%
County extension agents	0	0%
Food systems activists	0	0%
Food Distributors	0	0%
Food Grocers	0	0%
Low-income household members	1	4%
Other community members	3	11%
Other, Please Specify	2	7%
<b>Total</b>	<b>27</b>	<b>100%</b>

# FOCUS GROUPS

**EMERGENCY NEEDS TASK FORCE  
FOOD SUBCOMMITTEE  
PROGRAM EVALUATION  
FOCUS GROUP AGGREGATE REPORT**  
Reported by David Medema MSW, President  
**medema consulting associates LLC**  
developing people • strengthening organizations • building success  
**September 7, 2006**

## **Background**

The Emergency Needs Task Force (ENTF), through the initiative of its Food Subcommittee, commissioned an evaluation of Kent County's emergency food assistance system and the food security needs of its users. This evaluation emphasized acquiring the perspectives of food pantry users. This evaluation was funded by The Kent County Health Department and included surveys among a range of county-wide stakeholders as well as five focus groups within targeted Kent County census tracts. Census tracts were chosen to assure representation of a diverse range of food pantry users. These census tracts were urban, rural agricultural, had significant transitional rental housing, contained significant numbers of recent immigrants, had a mix of suburban residential and rental housing, or whose residents were from different racial or ethnic backgrounds. The five neighborhoods in which focus groups were held included three in Grand Rapids (Baxter, Eastbrook, and West Grand), and one each in Wyoming and Cedar Springs.

Food pantries that are part of the All Church Emergency Service System (ACCESS) assisted in recruiting focus group participants and hosting the sessions. Each focus group participant received a stipend as an incentive for participation.

This report is a summary of findings from the five focus groups and their 57 total participants.

## **Shopping Patterns**

At each focus group, participants identified the 2-4 stores where they most commonly shopped. While supermarkets were a common choice, up to 50% of the participants regularly purchased food at other locales such as Dollar General and Family Dollar (for dried and bulk food), small grocers (due to the high quality of meat or fruit), or bulk food stores such as Save-A-Lot, Aldi's, and Big Top. Participants frequently stated that the difference in food prices between supermarkets and small grocers is not as great as in the past and is therefore not the driving incentive to shop at supermarkets. Participants considered access and proximity as a major issue as well as the opportunity to buy specific food items at other stores when they are as cheap as a supermarket.

### **1. When you have run out of food and needed help from a pantry, did this happen at specific times of the month? Or at certain times of the year?**

Participants who receive either TANF or Food Stamps reported that food shortages commonly occur by the 3<sup>rd</sup> and 4<sup>th</sup> week of their monthly cycle. Summers (when children



are home from school and not eating breakfast or lunch at school) and holidays (especially Christmas) are also occasions when food supplies are inadequate.

**2. What do you do if there isn't enough food? What are some of the things you might do to make the food you have last longer?**

Participants employ a wide variety of coping and survival strategies that were described by one participant as "pinching and stretching". These strategies include reducing meal portions, buying lower cost food in bulk quantities (at the expense of better nutritional value), skipping meals to feed their children, and relying on family members for extra food. Very few participants indicated that they forego or eliminate essentials such as purchasing prescriptions or not paying utilities in order to buy food.

**3. What makes food "healthy"?**

Participants expressed widely varying levels of awareness, knowledge, and criteria for judging food health. Participants frequently expressed confusion in assessing the health / safety of food from food pantries when they read expiration and "sell by" dates. Participants expressed a strong preference for fruit and vegetables. Many participants carefully read labels concerning sugar and sodium levels. Very few participants expressed awareness of the connection between *how* food is prepared (i.e., frying vs. steaming) and its impact on health. Pantry users are also quick to examine food that they are given for its color (esp. for meat), signs of spoilage, and freezer burn.

**4 & 5. How healthy is the food that you receive at the food pantry? Which food do you think is healthier – the food you buy, or the food that you receive at the pantry? Why?**

The greatest source of user dissatisfaction with pantry food was that users could not receive a balanced variety of food to meet their dietary and health requirements. The most common missing foods were meat, fresh fruit, and fresh vegetables. Participants consistently stated that being able to choose the food they need is strongly connected to the level of pantry food health. Most participants agreed that stores offer healthier food simply because they offer wider choice. However, when pantries provided examples of healthy food and related information, then participants could acquire healthier food.

**6. How important is it to you that the food you eat includes fruit and vegetables?**

There was strong agreement that fruit and vegetables are essential to a healthy diet, with the exception being African participants. They also agreed that the higher cost of fresh fruit and vegetables is the primary reason why their diet is not properly balanced with these items.

**7. Are you satisfied with the store where you most frequently shop? Why / why not?**

Most participants are satisfied. Most of them shop at stores that have a desired niche in terms of the type and quality of food as well as acceptable prices.

**8. How do you get to the store? Is transportation for shopping a problem? How much time does it take you to get there?**

Approximately one-half of all participants own a car. Non-owners rely on rides from friends, family, or neighbors. The two reasons why only 3 participants rely on public transportation (The Rapid) when they shop is that it is difficult to carry large amounts of food and the time it takes (especially when transfers are needed) to go from home to the store and back.

Rural participants report that rising gas prices are hindering their ability to buy enough food. Distance to anywhere is a growing financial problem for them, and they request that rural pantries expand access to offset rising transportation costs.

**9. Are there other stores where you would rather shop but you don't? Why not?**

While distance / proximity were not major considerations for some, it was a greater concern for urban pantry users who find that neighborhood stores are higher in cost and have less variety. They tend to have more limited access to suburban supermarkets.

**10 & 11.** How many of you grow your own food in a home garden or fish or hunt for your food? Why/why not? How heavily do you rely on these foods in your regular food supply? At which times of the year? How many of you grow food in a community garden? Why/why not? How heavily do you rely on these foods in your regular food supply? At which times of the year?

Only 3 of 57 participants have a garden. Generally, participants did not express awareness that a community or personal garden could be a meaningful food resource. Most participants appeared to have limited knowledge of gardening and canning as possible food resources.

**12. How many of you go to a farmers' market to buy food? Why/why not? If one was located in your neighborhood, would you buy food there?**

17 participants purchase food at farmers markets, and there is strong interest in having greater access to them. Among the barriers are higher cost, markets do not accept Bridge Cards or food stamps, WIC no longer offers vouchers, and distance / location. Participants expressed a strong desire for mobile markets (trucks) and neighborhood-based markets. However, African participants are wary of "open air markets", and they would need some education about them.

**13. What would be the one most important thing that would help you have a healthier and more nutritious diet?**

- a. Eat foods from all four food groups
- b. Better access (nearness to farmers markets or a supermarket)
- c. Having help in determining what is "healthy" food
- d. Having help with meal preparation (recipes, classes)
- e. Eating healthier for a chronic medical condition

Of these five options, 41 of the 56 participants who responded identified either “a” and “b” as most important. A balanced diet and access to fresh food and a larger variety of more affordable food are key.

**Comments:**

General:

1. Pantries should provide enough to last for the duration of the need.
2. Pantries should give more meat.
3. Pantries should have fresh fruit and vegetables at least three or four times a year.
4. Pantries should routinely inquire about clients’ health needs and provide appropriate food. Only the Salvation Army asks about special needs/ requests, but even then they don’t always meet those needs.
5. Pantries should label frozen vegetables and give recipes about how to prepare frozen vegetables and canned meat.
6. Many participants throw away food with which they are not familiar or that they don’t know how to prepare.
7. Recipes in general would be helpful as they help with having a variety of prepared foods.
8. Participants would be interested in sharing ideas with each other about how to prepare food. They like the idea of a community cookbook based on pantry clients’ recipes.
9. One participant stated that “I feel like I’m shopping at Meijer” at the Baxter Pantry.
10. Food pantries should offer pet food.

How participants would improve food pantries:

1. 5 participants reported that when they recent lost electrical power they lost food. They said that pantries do not respond to this emergency and that they should.
2. All pantry food must have ingredients listed.
3. Get rid of outdated food before giving to users.
4. The number of pantry visits should be based of family situation and not on a set number of times
5. Participants strongly agreed that pantries can tell who is abusing the system, so they should provide more for those who aren’t misusing it.
6. Pantries should try to provide emergency/extra support around Christmas time.
7. Have mobile pantries / food trucks to come to the area.
8. Increase the variety of available commodities in northern Kent County, as they are more limited than in GR, where recipients also receive cheese and meat.
9. Pantries need to be better organized, with lists matching aisle locations and putting similar products together, i.e., have all the grains in one aisle together.
10. Pantries should offer evening hours.

**FOCUS GROUP SUMMARY REPORT**  
**BAXTER NEIGHBORHOOD, CENSUS TRACT 32**  
**Reported by David Medema MSW, President**  
**medema consulting associates LLC**  
developing people • strengthening organizations • building success

**June 22, 2006**

This report contains findings of the focus group held at the Baxter Community Center.

**Participant Profile**

There were 13 participants, including 12 females and 1 male. All were African-American.

**Map of Shopping Patterns**

By placing dots on a map of Census Tract 32 and surrounding six-block area, participants indicated the 2 – 4 local stores where they most frequently purchase food. This map did not include larger, supermarket-type stores or stores located in the greater Grand Rapids area. The results include:

- 9 of 15 participants purchase food at Family Dollar. Participants indicated that “dollar” stores are the cheapest source of snacks, cereals, and other dried foods.
- 6 of 15 participants purchase food at Sam’s Supermarket, indicating that Sam’s has the variety of foods that many African Americans prefer.
- 6 other locations were identified where between 1 and 4 participants shopped.
- Several participants indicated that they no longer shop at Clark’s, because it no longer carries a variety of meats and has become a “convenience store with booze”.

**1. When you have run out of food and needed help from a pantry, did this happen at specific times of the month or at certain times of the year?**

Participants who receive either TANF or Food Stamps reported that food shortages commonly occur by the 3<sup>rd</sup> and 4<sup>th</sup> week of their monthly cycle and to a lesser degree after holidays when they have consumed more food or provided for others. Six people stated that they regularly run out of food each month. Some participants manage holiday food needs by celebrating with potluck activities. Participants were more likely to run out of meats and fresh fruit. Several stated that the Baxter Pantry lacks meat, while other pantries such as Eastern Ave Church and Bethel Pentecostal Church have larger meat supplies.

Participants strongly agreed that it takes planning ability to make things last.

**2. What do you do if there isn’t enough food? What are some of the things you might do to make the food you have last longer?**

Most participants “stretch” meals by adding rice, water, and / or carrots to foods soup, vegetable, stews, chili, and spaghetti.

Most participants also employ what they described as “survival techniques”, such as the ability to make meals of what remains “on the shelf” in the form of casseroles.

No one skips meals due to a shortage of food. However, they may have lighter meals and let kids eat first. In probing their answers, only one person actually eats three meals daily, while many others appeared to choose to skip breakfast or lunch for reasons unrelated to a food shortage.

### **3. What makes food “healthy”?**

Healthy foods are those with no preservatives, low in sodium, calories, and sugar and high in protein (peanut butter). Fresh fruits and veggies are considered “healthy”.

Many participants stated that healthy food generally does not taste as good as less healthy food. Many also agreed that it is more important to be aware of how you eat than what you eat. However, most participants readily enjoy vegetables, pasta, and salads.

### **4. How healthy is the food that you receive at the food pantry?**

Participants expressed divergent views. Several stated that pantry food is generally healthy, while others stated that pantry food is only as healthy as what you choose to accept.

Participants strongly agreed that Baxter pantry food has improved in the last few months by offering healthier foods such as light canned fruit instead of fruit canned in heavy syrup. In addition, the pantry now offers less candy.

There were eight participants who have chronic health issues where their health is affected by the quality of their diets. They all agreed that pantries are usually not equipped to respond to their dietary requirements.

### **5. Which food do you think is healthier – the food you buy, or the food that you receive at the pantry? Why?**

Participants expressed divergent views. Several stated that stores offer greater choice regarding healthy food. Eight participants indicated that they obtain healthier food at a pantry, saying that the pantry sets examples of the types of healthy foods that they should purchase.

### **6. How important is it to you that the food you eat includes fruit and vegetables?**

Nearly all participants stated that this is a very important concern. Most participants acquire fruits and vegetables from grocery stores and seldom, if ever, from pantries unless it is a mobile pantry.

### **7. Are you satisfied with the store where you most frequently shop? Why / why not?**

Five participants who expressed dissatisfaction indicated that a lack of transportation limits their options and means that they do not go where they desire. They are forced to shop at a nearby corner store where there are higher prices and lower quality. They debated the cost vs. benefit of paying more for expensive gas in order to shop at a non-neighborhood food store where food quality and variety may be better.

A majority expressed satisfaction with their current shopping locations and will continue to return there, citing the quality of meat and produce as well as reasonable prices as the basis for their satisfaction.

Most participants indicated that it takes 15-25 minutes to get to their preferred store. Four participants indicated that they take the bus.

### **8. Are there other stores where you would rather shop but you don't? Why not?**

Meijer and Family Fare were by far the most commonly identified stores. Gas, distance, prices, and transportation were cited as the greatest barriers. These stores are preferred because of the opportunities to get better purchasing "deals" such as "buy one, get one". In addition, fresh meat and vegetables are more available at stores that are farther away.

Participants generally perceived that the area where stores are located influence prices and that "better" areas have lower prices.

Participants strongly agreed that D&W was too expensive.

The variety of food was not a strong issue, as participants are accustomed to shopping at different stores for different foods.

### **9. How many of you grow your own food in a home garden or fish or hunt for your food? Why/why not? How heavily do you rely on these foods in your regular food supply? At which times of the year?**

One participant has a garden. No one hunts or fishes for their food.

### **10. How many of you grow food in a community garden? Why/why not? How heavily do you rely on these foods in your regular food supply? At which times of the year?**

No one participates in a community garden, but 6 participants expressed interest in being part of one.

### **11. How many of you go to a farmers' market to buy food? Why/why not? If one was located in your neighborhood, would you buy food there?**

Eight participants indicated that they shop at the E. Fulton farmer's market on occasion. Higher prices limit their purchases (but said that near end-of-season prices are lower). Parking is a problem at the E. Fulton market.

Participants expressed strong interest in shopping at a neighborhood farmer's market. However, when stores or farmer's markets do not accept Bridge cards, their purchasing options are greatly reduced. All participants bought food from trucks that used to come to their neighborhood and would welcome the return of those trucks. They most desired fresh vegetables and eggs.

**12. What would be the one most important thing that would help you have a healthier, more nutritious diet?**

- 10 a. Eat foods from all four food groups.
- 2 b. Better access (nearness to farmers markets or a supermarket)
- 0 c. Having help in determining what is "healthy" food
- 1 d. Having help with meal preparation (recipes, classes)
- 1 e. Eating healthier for a chronic medical condition

Miscellaneous comments

Participants expressed the following thoughts throughout the focus group:

- a. Pantries should give you enough to last for the duration of your need.
- b. Pantries should give more meat.
- c. Pantries should have fresh fruit and vegetables at least three or four times a year (3 participants).
- d. Pantries should routinely inquire about **clients' health needs and provide appropriate food. Only the Salvation Army asks about special needs/ requests, but even then they don't meet those needs.**
- e. Pantries should label frozen veggies and give recipes about how to prepare frozen veggies and canned meat (strong agreement).
- f. Several participants indicated that they throw away food with which they are not familiar or do not know how to prepare them.
- g. Recipes in general would be helpful as they help with having a variety.
- h. Participants would be interested in sharing ideas with each other about how to prepare food. They like the idea of a **community cookbook based on pantry clients' recipes.**
- i. One participant stated that **"I feel like I'm shopping at Meijer" at the Baxter Pantry.**

**FOCUS GROUP SUMMARY REPORT**  
**WEST GRAND NEIGHBORHOOD, CENSUS TRACT 8**  
**Reported by David Medema MSW, President**  
**medema consulting associates LLC**  
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**June 27. 2006**

This report contains findings of the focus group held at Steepletown Ministries.

### **Participant Profile**

There were 17 participants, including 14 females and 3 males. Three participants were African-American, two were Latino, and 12 were Caucasian.

7 participants indicated that they have chronic medical conditions, including:

- C.O.P.D.
- Bowel resection
- Diabetes
- Anemia
- High Cholesterol
- High Blood Pressure

### **Map of Shopping Patterns**

By placing dots on a map of Census Tract 8 and a surrounding six-eight block area, participants indicated the 2 - 4 local stores where they most frequently purchase food. This map included supermarkets but not stores located throughout the greater Grand Rapids area. The results include:

- 5 prefer Meijer on Alpine Ave.
- 4 prefer Duthler Family Foods on Bridge St.
- 4 prefer Ralph's Food Market on W. Leonard St.
- 3 prefer Save A Lot on either Alpine or E. Leonard.
- Others stores where 1 or 2 participants shopped regularly included Aldi's (Alpine Ave.), Dollar General (Plainfield Ave.), Family Dollar, Family Fare, Meijer's (E. Beltline), and Parkside (E Fulton).

#### **1. When you have run out of food and needed help from a pantry, did this happen at specific times of the month? Or at certain times of the year?**

Participants who receive either TANF or Food Stamps agreed that they are more likely to run short of food by the 4<sup>th</sup> week of their monthly cycle. Summer is also a time of regular food deficits, as their children were home most of the day and do not have access for school lunch programs. Several participants said that holidays occasionally cause food deficits, as they spend more money and consume more food or provided for others.

#### **2. What do you do if there isn't enough food? What are some of the things you might do to make the food you have last longer?**



Participants identified many specific examples how they plan and budget food purchases and consumption:

- 8 participants clip coupons.
- 7 participants stated that they eat smaller portions.
- 2 participants either eat leftovers the next day or freeze them and use later.
- 2 participants feed children first and do not eat if there is not enough.
- 2 sisters stated that they receive food stamps on different days of the month and they share food with each other if / when they run short.

Other strategies mentioned by various individual participants included:

- Buying larger quantities at the beginning of the month to get better value, i.e., family packs of meat.
- Buying less expensive foods (beans and soup) that last longer and stay fresh.
- Serving just one side dish with a meal instead of two.
- Getting side dishes from the food pantry.

### **3. What make food “healthy”?**

Eight participants said that the contents of food make it healthy or unhealthy and that they pay special attention to the fat, salt and sugar content on labels. Others stated that the way food is prepared determines its health, i.e., baking is better than frying.

Several participants expressed care to wash meats, store food properly (let air out of storage bags to prevent freezer burn), and check meat color. Several participants also seek fresh foods, especially fruits and vegetables.

### **4. How healthy is the food that you receive at the food pantry?**

7 participants stated that pantries offer excessive amounts of cookies, sweets, and deserts and that the food they receive sometimes doesn't seem balanced among the food groups.

4 participants who regularly visit The Other Way expressed satisfaction with food quality. Several participants expressed dissatisfaction that the food pantries do not provide meat and that they only receive canned vegetables and canned goods.

A small number were satisfied with the quality and said that they receive unsweetened things, as their pantry lets them pick their own food.

Most of these 7 participants stated that much of the food they receive has unhealthy levels of sugar or salt. They agreed that it is difficult to get low sodium food.

Most perceived that pantries do not seem concerned about consumers' health issues, as they don't ask about their health history. They all agreed that it is always their responsibility to inform the pantry of their health needs and related dietary requirements. However, one participant who used to utilize the North Kent Service Center stated that this Center always asked about family health history.

### **5. Which food do you think is healthier – the food you buy, or the food that you receive at the pantry? Why?**

Most participants said there is no difference. They expressed confusion as to whether food used after a “sell by” or expiration date is healthy or safe. Many participants stated that when they receive food from pantries with an expired “sell by” date they often throw it away. They want to know the risks of eating this food.

**6. How important is it to you that the food you eat includes fruit and vegetables?**

Most participants agreed that it is very important to eat at least one vegetable daily, but most also agreed that they do not receive the recommended amount of fruit and vegetables. Only one participant believed that she was eating enough fruit and vegetables.

**7. Are you satisfied with the store where you most frequently shop? Why / why not?**

Most participants expressed satisfaction with their preferred store, citing reasonable prices and quality of food. Those who purchase food at Ralph’s agreed that this store does a very good job in offering affordable meats, and that a \$50 meat purchase can last a month.

Several participants agreed that Duthler’s is dirty and that unpacked boxes are frequently in the aisles.

Participants discussed the impact of transportation on their ability to acquire food.

- 2 participants walk to the store.
- 2 participants take the bus.
- Several participants stated that it is difficult to use the bus and carry shopping bags.
- 5 participants stated that transportation is a problem and limits where they shop.
- Most participants stated that their preferred store is 7-10 minutes away.

**8. Are there other stores where you would rather shop but you don’t? Why not?**

There is a perception that Meijers, Family Fare, and D&W are too expensive. Other participants stated that they would shop at Family Dollar, but it does not accept the Bridge Card for food stamps.

**9. How many of you grow your own food in a garden or fish or hunt or your food? Why/why not? How heavily do you rely on these foods in your regular food supply? At which times of the year?**

No one gardens, hunts, or fishes.

**10. How many of you grow food in a community garden? Why/why not? How heavily do you rely on these foods in your regular food supply? At which times of the year?**

None of the participants participate in a community garden, and little interest in this was expressed.

**11. How many of you go to a farmer's market to buy food? Why/why not? If one were located in your neighborhood, would you buy food there?**

5 participants purchase food at a farmer's market, usually at Fulton & Fuller. They enjoy the variety of fresh vegetables and fruit, which are more expensive, but fresher than at the store.

10 participants would purchase food at a farmer's market if one was located in their neighborhood.

**12. What would be the one most important thing that would help you have a healthier, more nutritious diet?**

- 7   a. Eat foods from all four food groups
- 10  b. Better access (nearness to farmers markets or a supermarket)
- 0  c. Having help in determining what is "healthy" food
- 3  d. Having help with meal preparation (recipes, classes)
- 0  e. Eating healthier for a chronic medical condition

Participants suggested other important actions to have a healthier diet, including:

- 3 participants would can foods.
- Ask doctor for advice.
- Cut back on sugar and fat.
- Better meal planning.
- Make own snacks or sweets.
- Shop weekly in order to eat healthier all month long.

Miscellaneous comments

- 3 participants indicated that it would help if food pantries offered pet food.

**FOCUS GROUP SUMMARY REPORT**  
**WYOMING NEIGHBORHOOD, CENSUS TRACT 138.02**  
**Reported by David Medema MSW, President**  
**medema consulting associates LLC**  
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**July 7, 2006**

This report contains findings of the focus group held at the Family Network in Wyoming.

### **Participant Profile**

There were 6 participants, including 4 females and 2 males. Five were Caucasian and 1 was African-American. All participants either suffered from a chronic medical condition or had a family member who did. Their medical conditions included heart, disease, kidney failure, diabetes, gout, epilepsy, asthma, bronchitis, anemia, and prostate cancer.

### **Map of Shopping Patterns**

By placing dots on a map of Census Tract 138.02 and surrounding area, participants indicated the 3 local stores where they most frequently purchase food. The results include:

- 4 individuals prefer Meijer, Family Fare, and Aldi's
- 1 individual prefers Save-A-Lot
- 1 individual prefers Duthler Family Foods.

#### **1. When you have run out of food and needed help from a pantry, did this happen at specific times of the month? Or at certain times of the year?**

Several participants stated that their varying amount of food stamps determines whether or not they require support from a food pantry. One participant often runs out by the end of the monthly food stamp / public assistance check cycle.

#### **2. What do you do if there isn't enough food? What are some of the things you might do to make the food you have last longer?**

Participants offered the following strategies:

- "I go without food so my son can eat."
- Another one says she "pinches and stretches". And as a diabetic with asthma, she tries to buy as much fruit and vegetables as she can.
- "I make big pots of soup, goulash, or stew and share it amongst others who live alone."
- "I buy bulk meat and separate it. Sometimes I may not eat for several days. I also buy noodles and Ramen noodles to fill up my son's stomach."
- All eat reduced portions.
- All eat potatoes and pasta to "fill their stomachs".

#### **3. What makes food "healthy"?**

Participants defined “healthy food” accordingly:

- Low sodium and fat levels, per label descriptions
- Fruits and vegetables
- Whole grains, fruit, vegetables, and milk/dairy products.

#### **4. How healthy is the food that you receive at the food pantry?**

Participants strongly agreed that the pantries are weak on food quality / health. Pantries usually lack fruit and vegetables, or have none at all. Participants agreed that Family Network has an abundance of fruits and vegetables and that they receive a good balanced diet here. Family Network was praised as being able to respond effectively to the unique health conditions of users.

Two participants stated that the freshness of usability of fruits, vegetables, and meats is inconsistent.

Several participants perceive that poor communities get poor quality food from Gleaners while the pantry at Calvary Church gets good quality food.

#### **5. Which food do you think is healthier – the food you buy, or the food that you receive at the pantry? Why?**

Participants did not have an opinion.

#### **6. How important is it to you that the food you eat includes fruit and vegetables?**

Participants agree that this is very important, but that cost hinders them from regularly having sufficient fruit and vegetables in their diet.

#### **7. Are you satisfied with the store where you most frequently shop? Why / why not?**

Participants like Aldi’s fruit and vegetables. They shop in the morning because their fruit and vegetables aren’t refrigerated. Participants agreed that Aldi’s and Save-A-Lot are cheaper than Family Fare and Meijer, but their prices are also rising.

Participants agreed that Meijer and Family Fare are neat and clean and well stocked, but that they stock during the day and it blocks aisles.

Two participants complain that stores advertise specials in fliers but the item is quickly out of stock.

#### **8. How do you get to the store? Is transportation for shopping a problem?**

3 of 6 participants own their own car and use it to get to the store. 2 of 6 participants rely on rides from family members or a friend. 2 participants will also walk. 1 participant rides The Rapid.

#### **9. Are there other stores where you would rather shop but you don’t? Why not?**

All participants are satisfied with where they shop.

**10. How many of you grow your own food in a home garden or fish or hunt for your food? Why/why not? How heavily do you rely on these foods in your regular food supply? At which times of the year?**

3 participants grow tomatoes. 2 participants can tomatoes. 5 participants report that they freeze tomatoes. 2 participants can and freeze blueberries.

**11. How many of you grow food in a community garden? Why/why not? How heavily do you rely on these foods in your regular food supply? At which times of the year?**

No participants are involved with a community garden.

**12. How many of you go to a farmers' market to buy food? Why/why not? If one was located in your neighborhood, would you buy food there?**

All participants agreed that farmers markets are too far away. Several participants go to Studio 28, where there is a weekend Flea Market with fruit and vegetables. All participants agreed that the farmer's market has reasonable prices and fresh food.

**13. What would be the one most important thing that would help you have a healthier, more nutritious diet?**

- 3   a. Eat foods from all four food groups
- 1   b. Better access (nearness to farmers markets or a supermarket)
- 0   c. Having help in determining what is "healthy" food
- 1   d. Having help with meal preparation (recipes, classes)
- 1   e. Eating healthier for a chronic medical condition.

**FOCUS GROUP SUMMARY REPORT**  
**EASTBROOK NEIGHBORHOOD, CENSUS TRACT 126.05**  
**Reported by David Medema MSW, President**  
**medema consulting associates LLC**  
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**July 8, 2006**

This report contains findings of the focus group held in the Eastbrook Neighborhood.

### **Participant Profile**

There were 13 participants, including 8 females and 5 males. 5 were Caucasian, 3 were Somali, 1 was from Sierra Leone, 2 were African-American, and 2 were of unknown ethnicity / race. There was a translator for Somali participants. Several participants indicated that they had a variety of illnesses, including high cholesterol, diabetes, and hypertension.

### **Map of Shopping Patterns**

By placing dots on a map of Census Tract 126.05 and surrounding blocks, participants indicated the 2 - 4 stores where they most frequently purchase food. The results include:

- 4 individuals prefer Meijers
- 3 individuals prefer Family Fare
- 3 individuals prefer Save-A lot
- 1 individual prefers Big Top
- 1 individual prefers Aldi's
- 1 individual prefers Forest Hills Foods.

#### **4. When you have run out of food and needed help from a pantry, did this happen at specific times of the month? Or at certain times of the year?**

Three participants who receive either TANF or Food Stamps indicated that they experience food shortages on a monthly basis just before food stamps arrive. One experiences weekly shortages.

#### **5. What do you do if there isn't enough food? What are some of the things you might do to make the food you have last longer?**

Participants identified a variety of strategies that included:

- Share or borrow food from neighbors.
- Pool the family's resources.
- Put off clothes purchases.
- Make big pot meals, like spaghetti, soup, or stew.
- Use a food schedule, a menu, and control portions.
- Get small jobs for food money.
- Go without prescriptions or take half of the dose.
- Wait for pantry visits.
- Eat less.

**3 – 5. What makes food “healthy”? How healthy is the food that you receive at the food pantry? Which food do you think is healthier – the food you buy, or the food that you receive at the pantry? Why?**

“Healthy” food had limited meaning or understanding among the African participants. Other participants identified unspoiled fruits and vegetables and unexpired food as two aspects of having healthy food.

Several participants stated that pantry food is healthier if they are allowed to choose their own. Then, they are able to refuse junk food or other high-sugar food that is otherwise handed to them.

**10. How important is it to you that the food you eat includes fruit and vegetables?**

Seven participants stated that fruit and vegetables are very important. Everyone agreed that it is hard to afford fresh fruit and vegetables.

**11. Are you satisfied with the store where you most frequently shop? Why / why not?**

One person shops at Family Fare agreed that it is good food but a little pricey. A Meijer shopper stated that it is accessible by walking or taking a bus, but it is more expensive than a farmer’s market. Others did not express an opinion.

**12. How do you get to the store? Is transportation for shopping a problem? How much time does it take you to get there?**

Five participants who do not have their own car receive rides from a family friend, other family members, or a neighbor. Two participants rely on The Rapid. One occasionally uses a taxi when the food quantity is large. One person owns a car.

**13. Are there other stores where you would rather shop but you don’t? Why not?**

One participant would go to Family Fare, but it is too far to travel.

To illustrate the difficulty of using The Rapid, one participant stated that it takes about 5 hours and 2 transfers each way to go to and from the farmers market on E. Fulton.

**14. How many of you grow your own food in a home garden or fish or hunt for your food? Why/why not? How heavily do you rely on these foods in your regular food supply? At which times of the year?**

One participant has a garden, and another gets food from a friend’s garden.

**15. How many of you grow food in a community garden? Why/why not? How heavily do you rely on these foods in your regular food supply? At which times of the year?**

No one is involved in a community garden.



**16. How many of you go to a farmers' market to buy food? Why/why not? If one was located in your neighborhood, would you buy food there?**

All participants stated that they would shop at a local farmer's market. However, all of the Somali participants would refuse to shop in an 'open air market'.

**13. What would be the one most important thing that would help you have a healthier, more nutritious diet?**

- 1 a. Eat foods from all four food groups
- 4 b. Better access (nearness to farmers markets or a supermarket)
- 1 c. Having help in determining what is "healthy" food
- 1 d. Having help with meal preparation (recipes, classes)
- 0 e. Eating healthier for a chronic medical condition

**FOCUS GROUP SUMMARY REPORT  
NORTH KENT, CENSUS TRACT 101.01  
Reported by David Medema MSW, President  
medema consulting associates LLC**  
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**August 1, 2006**

This report contains findings of the focus group held at the North Kent Service Center.

**Participant Profile**

There were 8 participants, including 7 females and 1 male. All were Caucasian. Among the health challenges that they reported were allergy to beta carotene, hearth problems, allergies, kidney and heart failure (high potassium levels), and diabetes.

**Map of Shopping Patterns**

By placing dots on a map of Census Tract 101.01 and a surrounding area of approximately 8 x 11 miles in size, participants indicated the stores where they most frequently purchase food. The results include:

- 7 of 8 shop at Family Fare, and Save-A-Lot Food Center
- 6 of 8 shop at Dollar General
- 4 of 8 shop at Family Dollar.

All preferred stores were in or near Cedar Springs.

**1. When you have run out of food and needed help from a pantry, did this happen at specific times of the month? Or at certain times of the year?**

Participants who receive either TANF or Food Stamps indicated that they struggle closer to end of their monthly cycle. They also indicated that the holidays – especially Christmas – is a difficult time. Several participants stated that winter is a significant challenge because of propane heating costs. Participants with children stated that summer is a particular challenge as kids are eating at home and not at school.

**2. What do you do if there isn't enough food? What are some of the things you might do to make the food you have last longer?**

A majority stated that they skip meals so that kids can eat. Several parents buy larger quantities of Ramen noodles that are popular with kids. Several participants said that they buy more of what they need, but not what they necessarily want, such as spaghetti without vegetables or meat

One participant shares meals with her sister and family because they charge her less for food. One participant acquires food from a family member's garden.

**3. What makes food "healthy"?**

There was little participant comment, as if they did not have a strong understanding of what "healthy" might mean. Three comments were offered that "healthy" includes:

- Fruits and vegetables
- The way food is prepared, i.e., baked vs. deep fried
- Food that is high in protein.

**4. How healthy is the food that you receive at the food pantry?**

At first, participants equated "healthy" food with useable, non-spoiled food. A majority reported that they have thrown bloated cans away, discarded moldy bread, or had to decide whether to keep or use frozen food from pantries that had freezer burn.

Four of five participants who have been to Lean On Me complained that they have received a large quantity of spoiled food, including vegetables, bread, and meat.

Several participants stated that meat from N. Kent Service Center is often not labeled.

Participants strongly agreed that since N. Kent Service Center has become a do-it-yourself pantry, there are now more options to acquire the types of food that fit their family's dietary needs. This means that they use a far higher proportion of the food they receive.

Participants strongly agreed that pantries tend to give less valuable "shelf items" rather than essentials such as fruit, veggies, meat, and dairy products.

Participants reported that pantries are generally able to meet any health or dietary related food needs. Participants stated that the pantries at North Kent Service Center and Cedar Springs always ask if there is any unique family health or dietary needs.

The pantry at the United Methodist Church in Cedar Springs was praised for giving great quality and amounts “they go above and beyond, a grocery cart full!”

Everyone agreed that pantries should provide vouchers for fresh meat at grocery store.

**5. Which food do you think is healthier – the food you buy, or the food that you receive at the pantry? Why?**

There were no opinions.

**6. How important is it to you that the food you eat includes fruit and vegetables?**

All agree that this is very important although some said that their kids are picky so they don't always incorporate these into meals. Meat is more important than fruit and vegetables for some participants.

**7. Are you satisfied with the store where you most frequently shop? Why / why not? (Probe for quality of food and service, location, cleanliness, cost, and variety).**

All participants reported satisfaction. Among comments made were:

- Location, cost, cleanliness, service are all good.
- Save-A-Lot purchases go further than Family Fair – strong agreement, except they won't buy Save-A-Lot meat.
- Bird's Meat Market has good prices and most people go there.

**8. How do you get to the store? Is transportation for shopping a problem? How much time does it take you to get there? What is the impact of rising gas prices?**

Everyone has their own car. Several participants do some family carpooling. Most participants reported that they reside within a 5 minute drive of their preferred store(s). Two people drive 10-15 minutes to their preferred store.

All participants indicated that rising gas prices have reduced their food budget. They hope that pantries will recognize this problem and become less restrictive on how often visits are allowed.

**9. Are there other stores where you would rather shop but you don't? Why not?**

Several participants stated that Meijer has better deals, but the further drive makes it less of a value. “Buy one get two” deals make the trip more worthwhile.

**10. How many of you grow your own food in a home garden or fish or hunt for your food? Why/why not? How heavily do you rely on these foods in your regular food supply? At which times of the year?**

Two participants have home gardens. One uses her parents' garden. One person hunts, although this is less valuable now that hunting regulations have changed and each person can only kill one deer per season instead of two.

**11. How many of you grow food in a community garden? Why/why not? How heavily do you rely on these foods in your regular food supply? At which times of the year?**

No one participates in a community garden.

**12. How many of you go to a farmers' market to buy food? Why/why not? If one was located in your neighborhood, would you buy food there?**

One person goes back to her family's home in Morley where she use to live and visits that market, as it is worth the time and money.

WIC no longer offers vouchers. Several participants used to go. Participants stated that there is no farmer's market. Everyone would go if there was one close by, although one draw back would be that farmers do not accept food stamps.

**13. What would be the one most important thing that would help you have a healthier, more nutritious diet?**

- 3   a. Eat foods from all four food groups
- 0   b. Better access (nearness to farmers markets or a supermarket)
- 2   c. Having help in determining what is "healthy" food
- 2   d. Having help with meal preparation (recipes, classes)
- 2   e. Eating healthier for a chronic medical condition

**Additional Comments**

*How participants would improve food pantries:*

- a. 5 participants reported that when they recent lost electrical power they lost food. They all agreed that pantries do not respond to this emergency and that they should.
- b. Pantries that give odd or unlabelled foods should have recipes.
- c. Foods should be labeled and have instructions for preparation (Everyone has thrown food away because they don't know what it is).
- d. Must have ingredients on products.
- e. Making food more appealing.
- f. Get rid of outdated food.
- g. The number of pantry visits should be based of family situation not a set number of times (participants strongly agreed that pantries can tell who is abusing the system so they should provide more for those who aren't).
- h. Pantries should try to provide emergency/extra support around Christmas time.
- i. Arrange to have mobile pantries / food trucks to come to the area.
- j. Increase the variety of available commodities, as they are more limited than in GR, where recipients get cheese, and meat.
- k. Pantries need to be better organized, with lists matching aisle locations and put similar products together, i.e., have all the grains in one aisle together.
- l. Pantries should offer evening hours.