

Food Desert & Food Balance

Community Fact Sheet



In some communities, *heart-healthy* food is hard to find.

Learn how the lack of access to mainstream food options is linked to obesity, diabetes, cardiovascular diseases and other diet-related conditions.

Get the facts in our Community Fact Sheet!

April 2010

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MARI GALLAGHER

RESEARCH & CONSULTING GROUP

Save
a lot
food stores

Dear Community Members:

Throughout my career in the grocery industry, I have found the greatest satisfaction and pleasure in providing fresh, affordable and healthy food to families throughout the country. With a family of my own, I know first-hand the important role diet plays in raising healthy and happy children.

For more than 30 years, Save-A-Lot Food Stores has operated and grown with the mission of providing families access to affordable healthy foods, especially for families on tight budgets. We have nearly 1200 stores from Maine to California serving over five million customers each week with a plan to expand to 2400 stores in the United States over the next five years.

The Save-A-Lot expansion plan offers the opportunity for entrepreneurs to open stores in their communities and provide jobs for those who live in the neighborhoods where stores are located. Many of our existing stores are owned by licensees who enjoy great success and satisfaction in serving their communities. If you are interested in exploring opportunities with Save-A-Lot, please visit our website at www.save-a-lot.com/own.

Our expansion plan incorporates research to determine where Save-A-Lot can best meet the needs of communities throughout the country. Our commitment to serving communities without access to affordable healthy foods puts food deserts in the forefront. In fact, many of our existing stores are located in underserved communities or food deserts, which are large geographic areas with very few if any grocery stores.

Mari Gallagher, the leading food desert expert, has conducted groundbreaking research showing that residents of food deserts are more likely to die and suffer prematurely from diet-related diseases such as obesity and diabetes. This compelling data that links food access and community health reinforces our commitment to serving neighborhoods in need of easy access to affordable healthy food. Save-A-Lot has partnered with Mari Gallagher Research & Consulting Group to share this very important research and background information about food deserts contained in this Community Fact Sheet.

We thank Mari Gallagher for her work and look forward to continued partnerships that increase jobs, entrepreneurship, healthy food access and choice and the overall wellbeing of the customers we serve.

Sincerely,

Bill Shaner
President and Chief Executive Officer
Save-A-Lot Food Stores

What are Food Deserts?

Mari Gallagher Research & Consulting Group defines Food Deserts as large geographic areas that have no or distant *mainstream* grocery stores. Does this mean that there is no food at all in the Food Desert? No, quite the contrary.

Often, Food Deserts have an *imbalance* of food choice, meaning a heavy concentration of nearby *fringe* food that is high in salt, fat, and sugar. Many fringe locations also offer “quick meals” that are very convenient but cannot support a healthy diet on a regular basis. The study of Food Deserts is important for every type of community – urban, suburban and rural – because findings from our studies reveal that residents of Food Deserts suffer worse diet-related health outcomes, including diabetes, cancer, obesity, heart disease and premature death. These effects are independent from other contributing factors such as income, race, and education. For diabetes and obesity, we have found these relationships to be statistically significant.

Can you buy
whole, raw
potatoes as easily
as French fries,
high-salt chips,
candy and soda?

What are examples of mainstream and fringe food venues?

A mainstream grocer is a place where you can support a healthy diet on a regular basis. A fringe food location is the opposite; it is not inherently bad, but if it were the primary food source, local diets and public health would likely suffer. Mainstream grocers need not be part of a major “full service” chain; total square footage is not important. Mainstream grocers can be independent and/or small food stores. The key defining factor is that they sell an assortment of healthy and fresh foods such as produce, fruits, dairy and meats.

Fringe food venues include fast food restaurants and convenience stores. However, they can also include gas stations, liquor stores, department stores, discount bakeries, pharmacies and a multitude of other retailers that sell ready-made, fast, boxed, canned and other types of food products but for whom fresh and healthy food is not the primary line of



business. Again, these foods are usually high in salt, fat, and sugar and have very limited if any nutritional value.

Consider where you live. Can you buy fresh, skinless chicken as easily as ready-made fried chicken? Can you buy whole, raw potatoes as easily as French fries, high-salt chips, candy, and soda? Can you buy fresh tomatoes or only ketchup? In some Food Desert communities, whole fruits such as pineapples are considered exotic because they are so hard to find.



Fringe retailers do provide consumer options, but when they are the only or dominant option, there can be negative consequences.

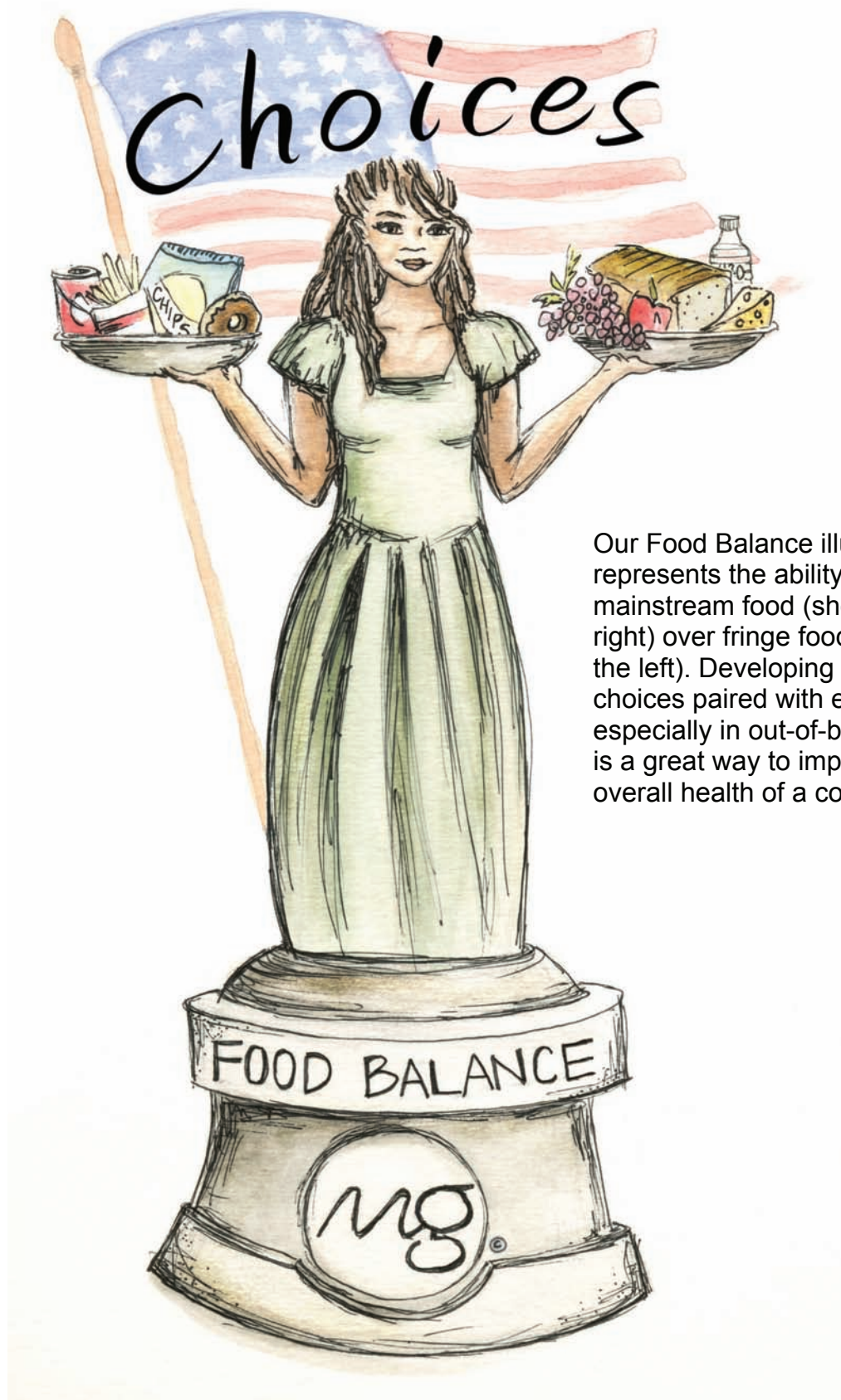
Fringe retailers do provide consumer options, but when they are the only or dominant option, there can be negative consequences.

In our work we cite other industry examples of mainstream and fringe retailers, such as banks (mainstream) and currency exchanges (also called check cashers) and pawnshops (both fringe). Communities that are in-balance in terms of food and other goods tend to have healthier people and healthier economies. Mainstream food access is especially critical to the human condition and to public health, because if we don't eat, we don't live, and if we don't eat well, we don't live as long as we would otherwise.

How far away should the closest mainstream grocery store be?

We are often asked this question. Frankly, based on our work we believe that there is no perfect distance to a grocery store that would apply to all communities. For example, we could quantify and map the distances to all mainstream grocers at the block level for an entire state but that map could be misleading. Some communities rely on driving more than others, whereas some communities rely on public transportation or walking. Each community is unique; a distance such as “five blocks” or “two miles” does not have the same meaning everywhere. We have found that a more important measure than simply the distance to the nearest mainstream grocer is our Food Balance Score, which reveals how easy or difficult it is to choose between a mainstream and fringe food location on a daily basis.





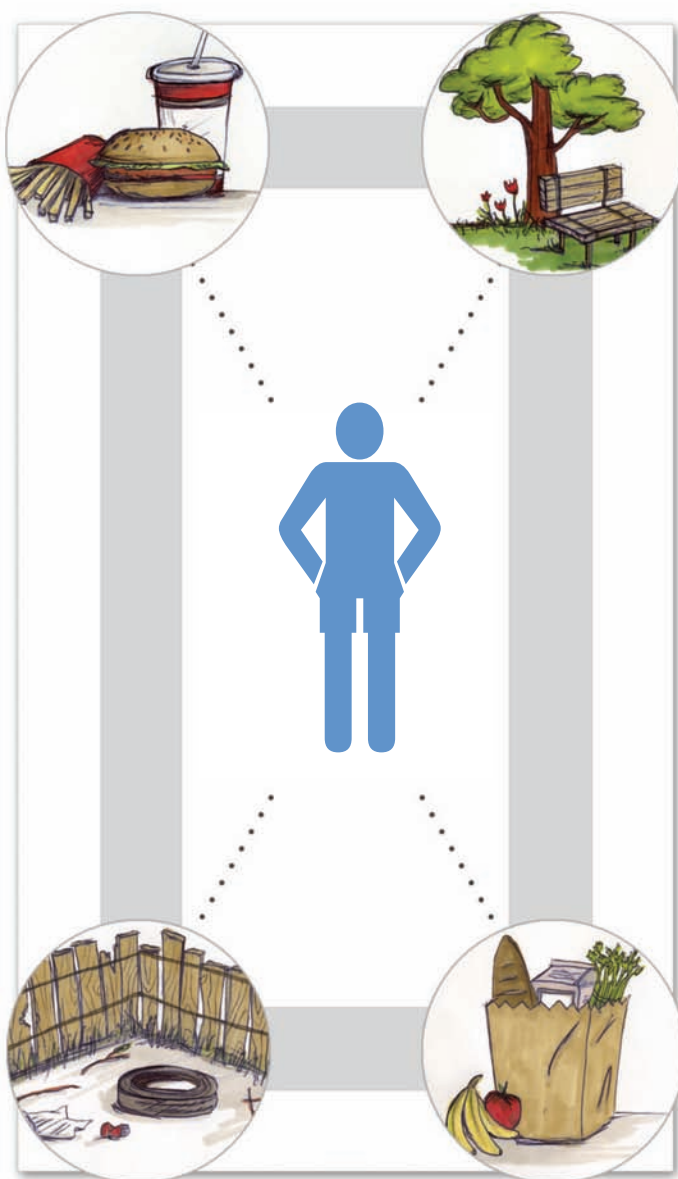
Our Food Balance illustration represents the ability to choose mainstream food (shown on the right) over fringe food (shown on the left). Developing good food choices paired with education, especially in out-of-balance areas, is a great way to improve the overall health of a community.



Food Balance Theory

As communities become more out-of-balance in terms of food options, negative diet-related health outcomes increase, holding constant other key factors

Food Balance Score Description	Examples
Far above 1: High score and worst outcome	Mainstream food venue is 1 mile away, and fringe food venue is .5 mile away $1/.5 = 2$
Around 1: Average score and Average outcome	Mainstream food venue is 1 mile away and fringe food venue is 1 mile away $1/1 = 1$
Far below 1: Low score and best outcome	Mainstream food venue is .5 miles away and fringe food venue is 1 mile away $.5/1 = .5$



If this is the block where you live, as shown by the icons, a grocery store, fast food restaurant, park, and empty lot are all equal distance from the center.

For example, the fast food restaurant might be five blocks away, but if the grocery store is five blocks away, too, then, since 5 divided by 5 = 1, that's your score.

It's that easy!



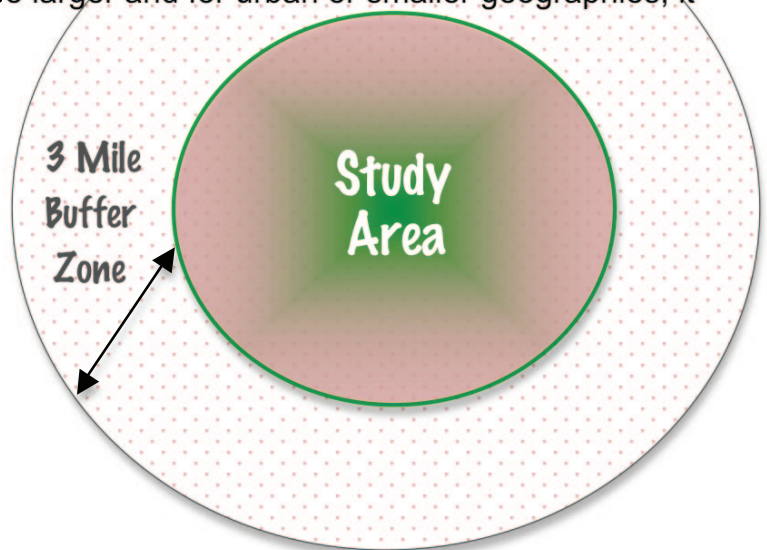
Weighting, block-level data and buffer zones

For the Food Access, Food Desert, and Food Balance Scores, each block is “weighted” by population density, and non-zero or near non-zero blocks are excluded. “Weighting” sounds complicated and boring, but it’s just the process of making sure that blocks with more population, or less population, are accounted for appropriately in terms of their relative share of the total population. Blocks with more population are assigned a larger weight. “Non-zero” blocks are places where there is no residential population, such as in the middle of a forest preserve, airport or industrial area. It would not make sense to develop scores for those locations. We exclude them so we do not distort the findings.

One of the most important aspects of the analysis is that scores must be calculated for every block and then brought up to larger geographies if needed, such as the Census tract, community area, or Zip Codes. If you calculate one average across a very large area, the result can be very misleading.

A “buffer zone” is a ring that circles the study area. Sometimes a study area is defined by specific borders or boundary lines. For example, the study area might be a city. But if you live on the edge of the city, you might cross the official city line to do some of your shopping. So the data need to include not just the food stores in your city but also those in the larger buffer zone around the city. This is true also for a neighborhood; the stores just outside the neighborhood should also be considered when conducting a neighborhood food access assessment. The “universe” of data must reflect the realities of how people might shop. Generally, for our studies, we use a three-mile buffer zone. For rural areas, the buffer zone might be larger and for urban or smaller geographies, it might be smaller.

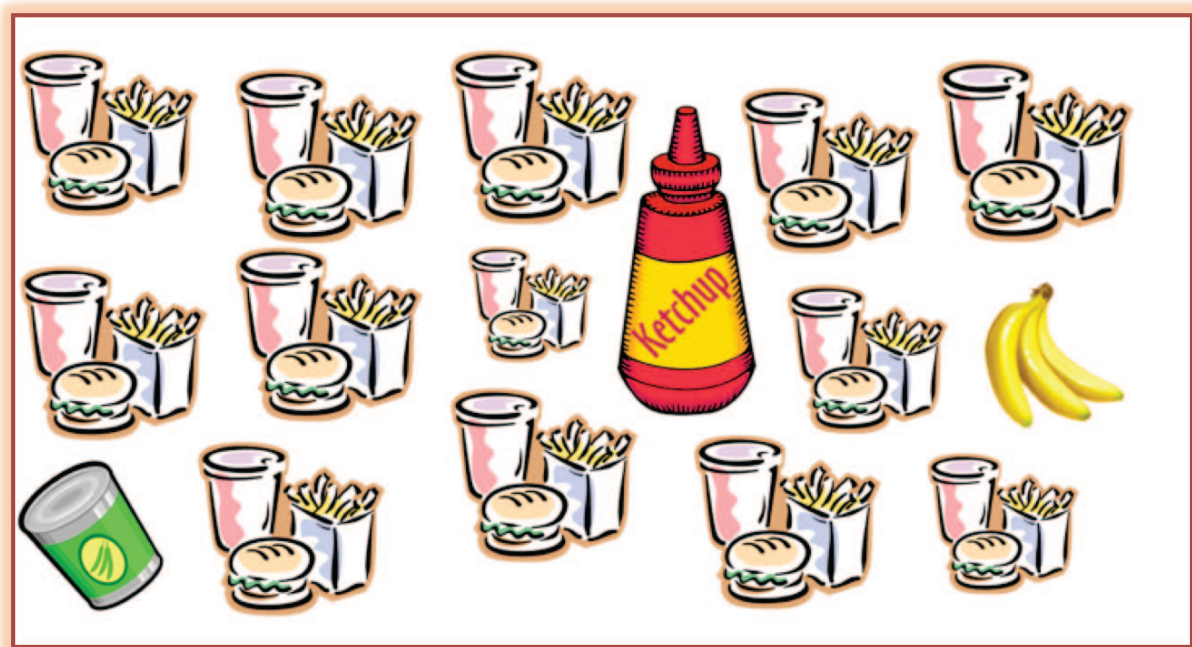
Residents who live near the border of the study area, might cross into the “buffer zone” to buy groceries.



The Convenience Food Factor

We have developed a new body of work called the Convenience Food Factor, which means that people generally shop for food most regularly at the places closest to them even though they might desire or require for medical reasons more distant, healthier food. Convenience means location or physical access, but other important variables also come into play, such as financial access (the cost and affordability of the food), cultural access (level of comfort with the store) and even the size of the store (the amount of time to get in and out of the store with groceries when you are in a rush).

**If this is what's convenient in your neighborhood,
it's hard to make a healthy food choice on a regular basis.**



What is food insecurity? How does it relate to Food Deserts?

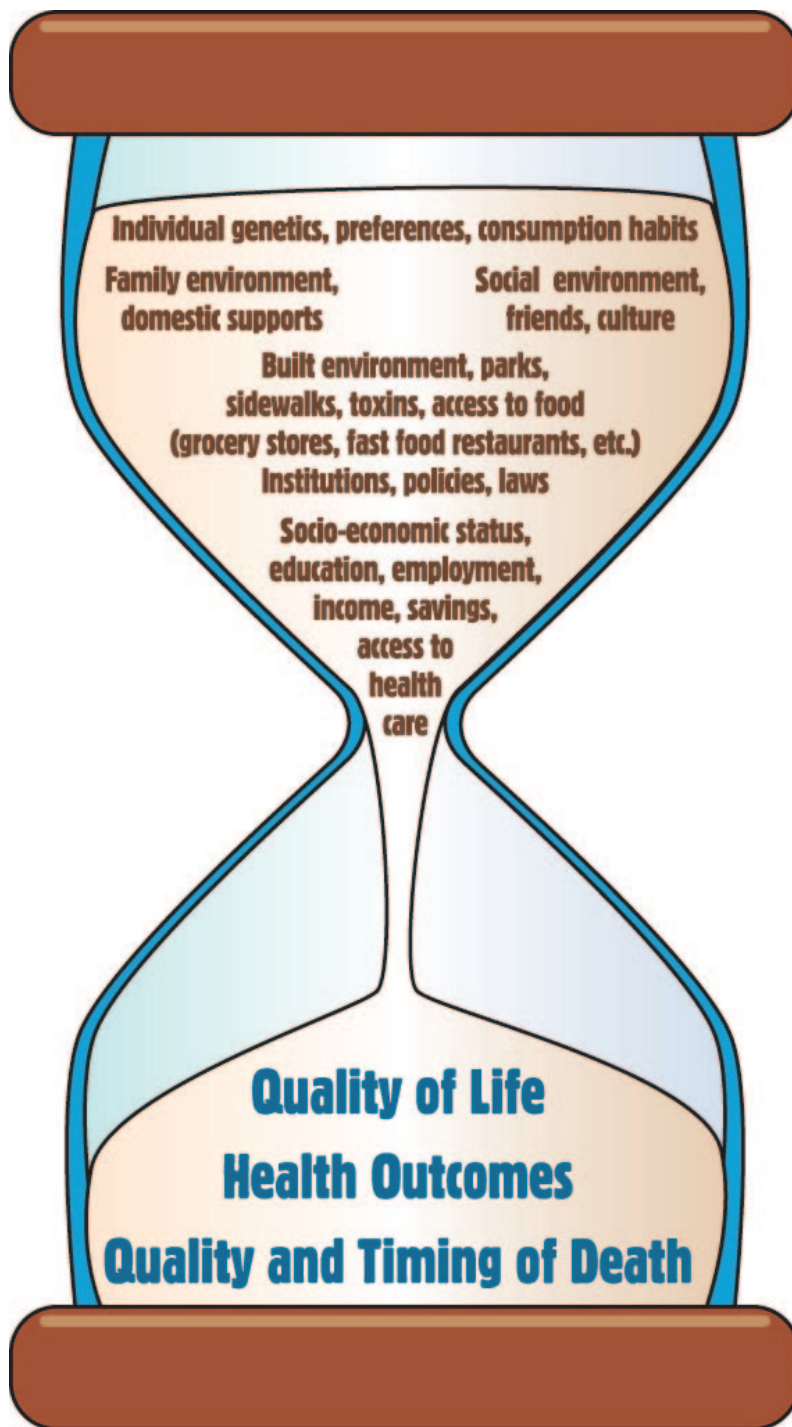
Food insecurity is defined by the U.S. Department of Agriculture to be "limited or uncertain availability of nutritionally adequate and safe foods." In Food Deserts, there is often food insecurity. MG contends that hunger needs to be redefined in the Food Desert, where while there might be an abundance of some type of food but no or very little healthy food. Food insecurity can also occur in areas with an abundance of healthy food access if the individual family cannot *afford* the food. The word "insecurity" is used because they struggle to obtain enough food on a regular basis.



The intersection between the built environment and health outcomes

MG has identified statistically significant relationships between access to mainstream food options and diet-related public health outcomes. In short, where there is greater access to mainstream grocery stores, premature death and suffering from diet-related diseases decreases. These effects are independent from other contributing factors such as income, race, and education.

Local land use decisions are, in many respects, public health decisions. And while one plot of land does not directly cause either life or death, or community revitalization or decline, it certainly can influence those outcomes. As far back as 1926, the Supreme Court rendered an opinion that government has a responsibility to promote and protect public health, and that government can therefore control land use to that end, which typically happens through zoning laws. So to be a community planner and not care about health, or to be a health official and not care about the built environment, means opportunities are lost. The good news is that everyone – grocery store owners, community groups, health officials, schools, neighborhood block clubs, policy makers, families – can be directly involved in solutions.



Diabetes example from
“Examining the Impact of Food
Deserts on Public Health in
Chicago”

MG developed Food Balance Scores for every block in Chicago and averaged those block Scores by community area. We found that the more out of balance communities collectively experienced greater premature death. The red bar in the charts shows that out-of-balance communities will experience over 40 years of premature death by diabetes.

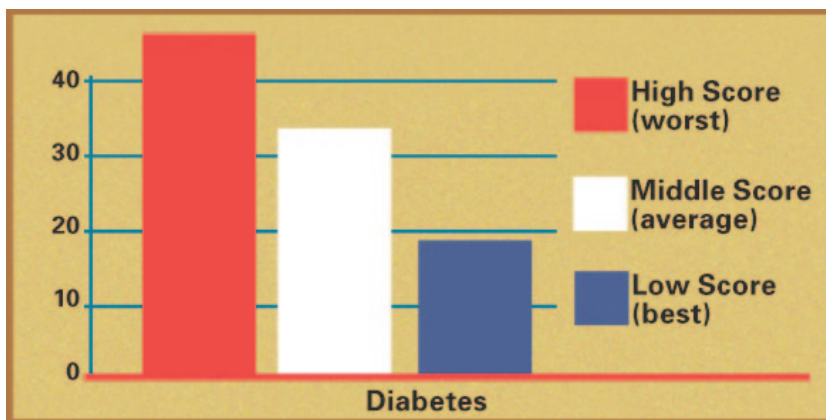
We also analyzed this pattern using a regression and found that the relationship between Food Balance and diabetes is statistically significant. This means it is not likely the result of “chance patterns” in the data. This study can be found on our website along with findings on other urban, rural and suburban locations across the US.

We have known for a long time that diet equals health, but recent research being conducted by medical scientists around the world goes farther, suggesting that child-bearing women have a greater propensity to pass on diet-related diseases and conditions to their offspring. This might be one reason why we see adult level diabetes increasingly affecting children.

The environment does not create your genes, but it can affect their expression.

Improving mainstream food access helps. Then we must choose those healthy foods and also exercise.

Years of Potential Life Loss
by Community Food Balance Scores



**What we eat is a reflection of
our heart & our health.**

**Heart-healthy foods can prevent
and moderate diabetes.**



What communities can do:

Inventory the types of food stores you have in your community. Do they provide healthy food options? How can your community partner with local stores to improve their offerings? What about urban agriculture and community gardening? Exercise programs? Healthy school lunches? What can we all do to choose healthy foods more often once they become available?

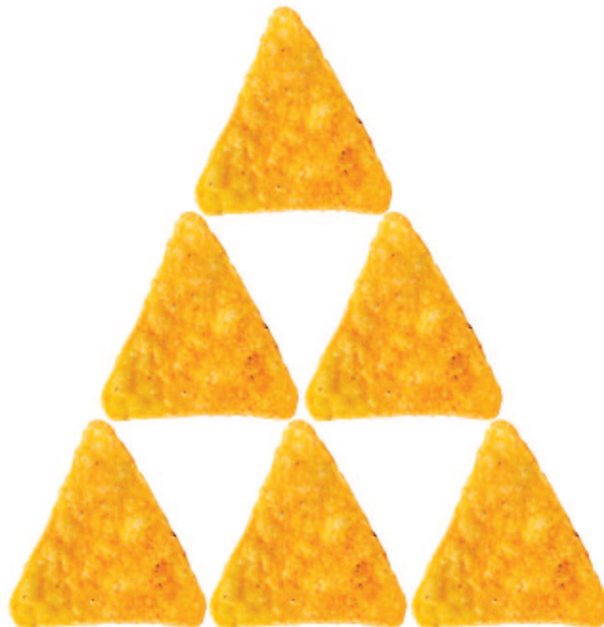
There is not one single cause of the Food Desert or one single solution. So get involved: every effort helps!

While Food Desert and out-of-balance communities are without enough mainstream grocers, many do have community assets, disposable income, appropriate sites for sustainable grocery stores, corner stores owners interested in making improvements, and community and government leaders working to improve healthy food options.



In your community, in terms of local access, is this the food pyramid?

Or is this the food pyramid?



About MG:

Mari Gallagher is President of Mari Gallagher Research & Consulting Group (www.marigallagher.com) and the National Center for Public Research (www.NCforPR.org), both headquartered in Chicago. MG authored *Examining the Impact of Food Deserts on Public Health in Chicago*, a breakthrough study that popularized the term “Food Desert” nationally in 2006 and encouraged Congressman Bobby Rush to enter “Food Desert” language into the Farm Bill (the Chicago report was updated in 2009). MG was the first to develop a block-by-block metric for “Food Deserts” and “Food Balance” linked with health measures and has since done similar work in Detroit, rural Michigan, Louisville, Los Angeles, Harlem, Richmond, Savannah, and Birmingham.

Over the last 20 years, Mari has enjoyed a colorful career. As the former executive director of a community development corporation, she co-developed a \$75 million shopping center anchored by a full-service grocery store. She was the president of a technology company. And before launching her own firm, Mari directed a major Washington-based national research initiative aimed at identifying new ways to measure African American and Latino markets.

Her other areas of expertise include quantitative and qualitative research projects; financial services, civil rights, housing, community development, safety, community planning, workforce issues, the economy, immigration, the environment, open space, and community health; market analyses, commercial site assessments and hands-on redevelopment consulting; business strategies; mapping; expert testimony, facilitation, and public forums.

Mari is also an Adjunct Associate Professor at the Institute on Urban Health Research at Bouvé College of Health Sciences at Northeastern University in Boston.

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About Save-A-Lot

Save-A-Lot is one of the nation's leading extreme value, carefully selected assortment grocery chains, operating nearly 1,200 value-oriented stores in all types of urban, rural and suburban neighborhoods. We deliver our customers terrific savings, up to 40% compared to conventional grocery stores.

Our grocery store network extends from Maine to California, serving more than 5 million shoppers each week. Customers enjoy savings on exclusive Save-A-Lot brands and national brands, plus USDA-inspected beef, pork and poultry, farm-fresh fruits and vegetables and non-food items.

We help our customers to live richer, fuller lives by saving them money and time through a compelling, convenient shopping experience featuring great food, great prices and great people every day.

To explore opportunities with Save-A-Lot, contact:

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