Rural Community Profiles: Nutrition

Making Healthy Foods Affordable Navajo Nation

or generations, Navajo families, like many agrarian communities, have grown food both for personal consumption and to make money. But environmental changes and a protracted drought in the western U.S. have slowed farm production and forced many farmers to fallow their fields. Facing a reduction in productive farms, most families living on reservations started buying food at convenience stores and trading posts. A recent study conducted by the Navajo Nation and the Centers for Disease Control and Prevention concluded that those stores primarily carry unhealthy foods, such as chips, fries, candy, and soda. Indian Health Services has found the rise in unhealthy food consumption to be one of the primary reasons why one in three Navajo people is either diabetic or pre-diabetic.

The distance to healthy food and limited refrigeration pose added challenges. People living on reservations may drive more than a hundred miles to get to supermarkets. And because many communities may still lack electricity or the resources to purchase refrigerators, preserving nutritious perishable goods is difficult. "When we don't have access to quality food and we're forced to purchase non-quality foods, we're really at a disadvantage," said Gloria Begay, a member of the Dine Advocacy Community Alliance.

Every year, diabetes costs the community up to \$100,000 per person in medical expenses. When cuts to health care



Strategies to increase healthy food consumption in rural communities:

- Make sure healthy foods are affordable and accessible to all people
- - Educate consumers about food options and how to prepare healthy foods
- Facilitate connections between producers, consumers, retailers, and institutional purchasers
- Create policies that support local production of healthy foods

services were announced, the Dine Advocacy Community Alliance decided to confront diabetes head on. "We need to start getting better and guit relying on prescription drugs to help cure our illnesses," Begay said.

The Navajo Nation adopted the Healthy Dine Nation Act, which applies a 2 percent tax to unhealthy foods and removes the 5 percent sales tax on healthy foods, such as fresh fruits and vegetables, water, nut butters, and seeds. The Act applies to all purchases that take place on the reservation, including restaurants buying from distributors and families buying at local trading posts. The revenues generated by the tax will fund wellness projects in Navajo communities: health education, cooking demonstrations, promotion of traditional Navajo foods, and infrastructure improvements, such as building trails or sports fields, restoring farms, bringing in clean water, and waste management. Begay noted, "We're sending a message to the Navajo people 'please, make better choices about what you're purchasing, whether you're on or off reservation." But Begay was quick to emphasize the message extends beyond individual decisions. "There's a food movement going on; stores are now being encouraged to carry fresh fruits and veggies, and Navajo growers are being encouraged to set up farmers markets." It is a policy that sends a message for individuals but also addresses the root causes of health disparities within the Navajo Nation.



Rural Community Profiles



Homegrown Health Conetoe, North Carolina

When Reverend Richard Joyner arrived at the Conetoe Chapel Missionary Baptist Church in Conetoe, North Carolina, one of the first things that caught his attention was the number of funerals he was officiating. "The cause of funerals was poor access to health care and poor access to healthy foods. The real challenge was seeing families feeling hopeless," Rev. Joyner explained.



Conetoe Church decided to address that hopelessness by starting several community

gardens, which are now mostly run by youth. The church set two immediate goals for themselves and the community as a whole: help families cut their food bills in half and change church policy to ensure they served healthy foods at church events – including replacing sweet tea with iced mint tea. The congregation now sells produce grown in the gardens at farmers' markets and other community events. Collectively, the congregation has reduced the amount congregants spend on prescription drugs by \$3,000 a month. The community as a whole has reduced emergency room visits by 75 percent.

Stores Sow Seeds of Health North Carolina

The Macon County Public Health Department, in North Carolina, developed the MountainWise initiative in 2011, with the goal of creating healthier communities and reducing chronic disease. Yet the initiative came at a challenging time, as rising unemployment rates forced residents and local governments to tighten their purse strings and focus on economic development. The health department had to make special efforts to ensure their initiative was relevant and meaningful. **"We knew our goal was to get people eating healthier, but we needed to capitalize on what people wanted, which was to stimulate the economy, more jobs, and more qualityof-life opportunities to attract businesses,"** explained Sarah Tennyson, MountainWise's Regional Coordinator.

One approach was to design a healthy retail program, called WiseChoice. They began with a small marketing campaign in eight stores, offering promotions, changing signage, and educating retailers about how to stock and present healthy foods. Once they were able to show there was a market for WiseChoice products, they were able to make the business case for the program to the local distributor. MountainWise partnered with the local distributor providing the marketing and branding of healthy foods. The local distributor, in turn, worked with local farms to make sure the items were affordable. Thirty small retailers have signed on to the program, with 20 more expected to join in the coming year.

ChangeLab Solutions is a nonprofit organization that provides legal information on matters relating to public health. The legal information in this document does not constitute legal advice or legal representation. For legal advice, readers should consult a lawyer in their state. This publication was made possible through funding from The California Endowment. © 2015 ChangeLab Solutions. This publication was supported by the Association of State Public Health Nutritionists (ASPHN). Founded in 1952, ASPHN is a nonprofit membership organization that provides state and national leadership on food and nutrition policy, programs, and services aimed at improving the health of our population.

