

Healthy Corner Stores

The State of the Movement

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Executive Summary

Over the past decade, a growing number of advocates have begun partnering with corner store owners in low-income urban and rural communities to improve the availability and marketing of healthy, affordable foods. Some of these pioneering corner store efforts have altered the food retail landscape in low-income neighborhoods, while others have struggled to survive beyond initial grant funding.

As the number of corner store projects increases, the time is ripe for a critical look at the state of the movement. This report explores the successes and challenges of early corner store interventions, and outlines a series of steps for developing sustainable models for future projects – models that engage community residents and business owners in creating meaningful change.

Since 2007 nearly 300 advocates have joined the Healthy Corner Stores Network, a national effort convened by Public Health Law & Policy, the Community Food Security Coalition, and The Food Trust to share information and resources. For this report, network participants were asked to identify priority actions for advancing corner store projects to sustainability. Several key themes emerged:

- Advocates want case studies, toolkits, and opportunities for peer-to-peer learning around common challenges and best practices.
- Advocates ranked two particular questions as most critical to advancing their work:
 - What changes in the distribution system would make it easier for corner stores to offer healthy foods, including local produce?
 - What would a healthy corner store business plan look like?
- Advocates are keenly interested in engaging a broad range of new partners, including local government, in corner store work.

PHLP synthesized advocates' feedback into a three-phase strategic plan outlining concrete actions in three categories: technical assistance, collaborative research, and policy development. These strategies identify ways to move beyond individual, grant-funded corner store projects toward substantial, long-term improvements in the selection, quality, and price of foods sold in corner stores.

Part I: Assessing the Opportunities

Why Healthy Corner Stores?

Due to a lack of grocery stores in their neighborhoods, too many low-income families are unable to make healthy food choices. Residents with limited access to transportation rely heavily on corner stores for their food shopping. Most corner stores sell primarily liquor, cigarettes, and prepackaged convenience items; few offer fresh produce or other healthy food options, such as whole-grain baked goods or low-fat dairy products.



Poor food access is a major contributor to health disparities, disproportionately high rates of disease and other health problems among low-income communities. People who live in a neighborhood without access to grocery stores are less likely to have healthy diets,¹ increasing their risk of diet-related diseases including high blood pressure, cancer, and diabetes.² A recent study showed that in California, there are more than four times as many fast food restaurants and convenience stores as supermarkets and produce vendors,³ and in many low-income

communities, the ratio is even further skewed toward unhealthy food. Not surprisingly, new research has found that low-income Californians living in neighborhoods where corner stores and fast food predominate have significantly higher rates of obesity and diabetes.⁴

To make matters worse, corner stores' emphasis on alcohol and tobacco often makes them magnets for litter, loitering, drug dealing, and prostitution. Improving the product selection at corner stores is one way to address a host of concerns facing urban and rural communities.

- 1 Morland K, Wing S and Diez Roux A. "The Contextual Effect of the Local Food Environment on Residents' Diets: The Atherosclerosis Risk in Communities Study." *American Journal of Public Health*, 92(11): 1761-1768.
- 2 Powell KE, Thompson PD, Caspersen CJ and Kendrick JS. "Physical Activity and the Incidence of Coronary Heart Disease." *Annual Review of Public Health*, 8: 253-287, 1987.
- 3 California Center for Public Health Advocacy. *Searching for Healthy Food: The Food Landscape in California Cities and Counties*, 2007.
- 4 Center for Public Health Advocacy, PolicyLink, and the UCLA Center for Health Policy Research. *Designed for Disease: The Link Between Local Food Environments and Diabetes and Obesity*, California, April 2008.

Healthy Corner Store Projects

In recent years, a growing number of advocates have sought to partner with local corner store owners to improve the availability, quality, and affordability of healthy foods. These partnerships, often referred to as “healthy corner store projects,” vary in their design and duration.

There is no single definition of what constitutes a healthy corner store project, but they all share a common goal: working with small business owners to make healthier choices easily available in underserved communities.

The efforts reflect any of a number of approaches:

- Conducting full-scale “corner store conversions,” in which corner stores make infrastructure changes (such as acquiring refrigeration units) to sell fruits and vegetables
- Creating new or tapping into existing distribution networks to make locally grown/organic produce available in corner stores
- Improving the nutritional profile of foods currently offered (for example, offering low-fat or skim instead of whole milk, or baked instead of fried potato chips)
- Implementing social marketing tactics in the store and its surroundings to promote healthy choices available in the stores

Establishing a Network

In 2004 The Food Trust, a Philadelphia-based nonprofit, and the Healthy Stores Project at the Johns Hopkins Bloomberg School of Public Health established a national Healthy Corner Stores Network (HCSN) to share information about the challenges and opportunities for increasing healthy food options in underserved communities. The HCSN grew to 40 participants, who convened for quarterly conference calls until funding ran out in 2005. But interest continued to grow, and in 2007 three organizations – Public Health Law & Policy (PHLP), the Community Food Security Coalition (CFSC), and The Food Trust – joined together to relaunch the Healthy Corner Stores Network through a grant from the UPS Foundation.

Participation in the HCSN has now grown to include nearly 300 organizations and individuals; as many as 100 participants attend each of the quarterly technical assistance calls, and approximately 3,500 people visit the website (www.healthycornerstores.org) each month. HCSN participants have gathered in person at several major conferences (including national convenings of the American Planning Association and the American Public Health Association), and the CFSC made healthy food retail a major focus of its recent annual meeting.

Participants in the Healthy Corner Stores Network vary widely in their level and depth of technical expertise around corner store work. While some advocates (such as the San Francisco-based nonprofit Literacy for Environmental Justice and the Hartford Food System, a Connecticut nonprofit) have extensive experience working with store owners in their community, the majority are just getting started planning or implementing corner store projects. In fact, at least 40 percent of HCSN participants are not yet actively involved with an on-the-ground project but intend to be within two years. A number of academics and other technical experts, who do not plan on directly implementing corner store conversions but share an interest in corner stores, also participate in HCSN activities.

The tremendous interest in the revitalized Healthy Corner Stores Network indicates the rapid growth in corner store interventions as an approach to addressing food access issues.

Impact of Existing Projects

Anecdotal evidence about the successes and challenges of corner store projects abounds, but there has been no comprehensive evaluation of these interventions to date. A few of the pilot projects have conducted modest evaluations of their experience, but these results have not been widely available. Joel Gittelsohn at the Johns Hopkins Bloomberg School of Public Health is currently conducting a literature review of these early evaluations.

One recent study fills an important gap in the literature. In 2007, the Network for a Healthy California's Retail Program assessed seven healthy corner store projects throughout the state; agency staff interviewed project partners, focusing on barriers store owners faced as they sought to increase the sale of produce. All of the projects studied were initiated between 2000 and 2005 – two were implemented by public health departments, four by local nonprofit organizations, and one by a university school of public health. Three of the stores were still receiving programmatic assistance; the other four were operating without additional staff or material support.

In six of the seven interventions, organizers provided the store owner with refrigerated display cases, training, and technical assistance, as well as marketing materials and other forms of promotional support. The store owners then purchased produce to sell in their store. The seventh project, meanwhile, operated on a donation basis, where the organizer purchased the produce and other healthy products and gave them to the store owner to sell. Unfortunately, the sample size was too small to assess how or whether the structure of the intervention affected outcomes.

The findings from the store owner interviews paint a mixed picture of the initiatives' success. Of the four projects no longer receiving assistance, only one was still stocking significant produce. The refrigerated display cases at the other

three stores without active support were being used for deli items or were completely empty and turned off. Four of the seven sites had social marketing materials promoting healthy eating on display in the store, although two of these sites were no longer stocking produce.

The store owners offered a variety of reasons for the limited duration of the projects. Several who had stopped selling fresh produce reported problems developing demand for it, as well as competition from larger stores nearby. One store had changed ownership during the period of the intervention, and the new owner had not carried on the effort.

These findings – combined with the dearth of other assessments – suggest the rigorous evaluation of existing corner store interventions should be a priority for the movement. Further experimentation will produce many lessons, but this valuable information will be lost if the results are not documented and disseminated.

Identifying Effective Strategies

Despite their mixed outcomes, these corner store projects have broken new ground in addressing persistent food access issues. Their greatest success is that they have inspired many others to pilot their own initiatives. But without the benefit of thoughtful evaluation and shared best practices, healthy corner store advocates are left with the slow process of trial and error.

There is much to be learned about the components of successful corner store work. In all of the projects included in the Network for a Healthy California's study, organizers successfully convinced store owners to alter their business model and experiment with a new product mix and new marketing materials. What was their strategy in approaching store owners? What can we learn from community members' response to these new, healthier foods? Do deep partnerships with community residents improve the sustainability of projects? How did organizers engage community members in this work?



Similarly, we need to ask what can be learned from the challenges projects have experienced sustaining this work beyond grant funding. While some level of subsidy may be necessary to successful corner store conversions, the limited resources should be invested strategically so that subsidy is leveraged at the point of greatest impact.

Corner store advocates are currently pioneering many promising strategies for sustainability, including sharing the investment with corner store owners; partnering with community residents; linking to neighborhood revitalization projects; and using sophisticated, culturally appropriate marketing.

1. Sharing the investment with corner store owners

Few of the early corner store interventions required the business owner to invest money in the project. Store owners received free equipment, training and technical assistance, promotional materials, and recognition – all with little or no upfront financial investment. A few healthy corner store projects are now asking store owners to provide matching resources. In Denver, the public health department offers subsidized loans to store owners who wish to purchase a price scanner; to qualify for the subsidized loan, the owner must agree to provide information about its produce sales to project organizers. In Philadelphia, The Food Trust helped a corner store owner apply for a small business loan to finance his corner store conversion.

Advocates are also exploring whether building the capacity of corner store owners enhances a project's sustainability. Corner store owners who don't have experience stocking produce, for instance, may need specific training in this area. San Francisco's Redevelopment Agency retained the pro bono services of a grocery store consultant to help a local merchant redesign his store to better accommodate healthier products. Investing more broadly in store owners' business skill development may also benefit corner store interventions: for example, in Connecticut, the Hartford Food System's Healthy Food Retailer Initiative connects more than 40 small retailers with the services of the Spanish American Merchants Association to help these businesses thrive, while in San Francisco, merchants who participate in Literacy for Environmental Justice's Good Neighbor project are offered the services of a local microenterprise development organization.

2. Partnering with community residents

Engaging community members in change is a powerful strategy for strengthening local stores and neighborhoods. If residents are actively involved in a project, it will better reflect their needs and they will be more invested in making it succeed. Some of the most effective corner store interventions have been strongly community-based, sometimes working with youth. For example, in South Los Angeles, local high school students worked with corner store consultant Nathan Cheng to modify a store's layout to promote healthy choices. These youth then became ambassadors for the store in the community.

3. Linking to neighborhood revitalization projects

A healthy corner store project's likelihood of success might be improved if it is part of a larger neighborhood revitalization strategy. Advocates could partner with local economic/community development agencies or nonprofit community development corporations to integrate corner store work into broader neighborhood or commercial corridor revitalization

projects. Improvements inside the store, for example, could be supported by improvements in lighting, signage, and walkability in the surrounding commercial corridor. These types of comprehensive revitalization efforts often include in-depth community planning processes that could promote healthy corner store work. Further research is needed to identify planning and economic development tools available through local governments.

4. Using sophisticated, culturally appropriate marketing

When it comes to shifting purchasing patterns, many healthy corner store advocates have recognized the critical importance of marketing and merchandising – but few advocacy organizations have the resources or expertise to develop marketing materials on their own. The Network for a Healthy California’s Retail Program has developed sophisticated materials promoting fruits and vegetables, available to merchants statewide. Other projects, such as the Healthy Stores Project at the Bloomberg School of Public Health, use ethnographic approaches to identify and test appropriate cultural metaphors for healthy eating. Healthy corner store projects could benefit tremendously from a greater understanding of how health promotion can be most successful in corner stores’ advertising-saturated environment, particularly when merchants receive financial incentives from alcohol, tobacco, and junk food manufacturers to promote these industries’ products. Advocates also need to build their understanding of the legal constraints to policies that limit unhealthy advertising.



It is critical that advocates who are piloting healthy corner store projects rigorously evaluate what works best, disseminating the data widely to fellow advocates, funders, and others who implement these strategies. In-depth case studies describing the methodology of existing healthy corner store projects could strengthen new corner store interventions. Toolkits on corner store conversion are available from San Francisco’s Literacy for Environmental Justice and forthcoming from The Food Trust and the South Los Angeles Healthy Eating Active Communities (HEAC) collaborative. These case studies, toolkits, and any other materials should be updated regularly as the healthy corner store movement progresses and matures.

The Corner Store Owners' Perspective

The sustainability of healthy corner store projects rests in large part on successfully engaging small business owners, yet few healthy corner store advocates have expertise in economic development or the food retail sector. Many advocates are now seeking a more sophisticated understanding of the complexity of neighborhood food retail environments and how corner store owners view the opportunities and barriers for increasing produce sales.

Understanding how corner store owners themselves rate the opportunities for selling fruits and vegetables is a critical component of healthy corner store work. While advocates have been able to engage individual store owners in one-off conversion projects, the movement needs to build a deeper understanding of the dynamics of the corner store business sector. To begin to address this issue, Public Health Law & Policy (PHLP) conducted a series of interviews in 2008 with corner store owners in San Francisco's Tenderloin neighborhood, where the median income is around \$20,000/year – well below the citywide average of just over \$55,000. PHLP had already conducted a comprehensive survey of food retail in the Tenderloin in 2007, assessing the availability, quality, and price of grocery food in the neighborhood. While the corner store owners in the Tenderloin are not a representative sample, their perspectives highlight many of the complex challenges faced by corner store owners elsewhere.

The food retail landscape in the Tenderloin – like many low-income neighborhoods – is complex. While the Tenderloin is a low-income neighborhood, it is not a “food desert” as the term is used in the literature. The findings from PHLP's 2007 food retailer survey showed that the “full-service” grocery stores⁵ in the Tenderloin are very small: the average store is 1,800 square feet, compared with the average 45,000-square-foot supermarket. But the selection and availability of fresh produce in the Tenderloin is relatively good, especially given the small size of stores.

Still, stores in the neighborhood that do *not* offer fresh produce outnumber those that *do* almost four to one. Our study found that people are deterred from shopping in the Tenderloin's corner stores because of what they see as an unsafe shopping environment, high prices, and limited selection. Some residents estimate that half of the produce they consume comes from emergency food sources and food assistance programs.

PHLP interviewed the owners or managers of six corner stores in 2008. While language barriers, owner discomfort, and the presence of customers interfered with data gathering, three main findings emerged: store owners perceive that demand for produce at small stores is limited; they feel their selection reflects

5 “Full-service grocery” was defined for the purposes of this study as a store that sold 12 or more kinds of produce (fresh fruits and vegetables).

customer demand; and while they feel “part of the community,” store owners are not interested in business assistance from local government.

1. Store owners perceive that demand for produce at small stores is limited.

- Corner store operators’ estimates of their produce sales varied widely, from 2 to 60 percent of total sales. Two stores reported declining sales of produce (one was even considering getting out of the produce business in order to focus on liquor and soda); two reported that sales had been flat in the past five years; and two reported an increase in sales.
- The majority of stores reported that the average produce purchase was between \$10 and \$20 per visit.
- Store owners estimated that only 10 to 25 percent of their customers purchase produce. Another owner specified that those who purchased food with food stamps did not purchase produce. However, the 2007 Tenderloin resident survey showed that residents are *leaving* the neighborhood to purchase fresh fruit and vegetables, in part due to a perception that what’s available in the neighborhood is not of good quality or priced competitively.

2. Store owners feel their selection reflects customer demand.

- Three store owners reported that their customers requested organic products. Several store owners also noted that they received requests for more varieties of vegetables, including Asian varieties.
- None of the owners reported any customer requests for locally grown produce.



3. Store owners report feeling “part” of the community but are not interested in business assistance from local government.

- All of the store owners reported positive relationships with the community and their customers, although one owner did note there were occasionally “rough people in the street.” However, Tenderloin residents cited safety concerns in the neighborhood as one major reason why they chose to shop outside of the neighborhood. Further research is needed to explore this disconnect.
- None of the corner store owners expressed interest in business assistance programs to improve store façades, increase safety, purchase equipment, or source local produce.

Recommendations for Further Study

The findings from the Tenderloin survey – which are broadly applicable across urban corner store projects – illustrate the complexity of the environment in which food retailers operate. Retailers described complicated economic, environmental, and social factors that influence purchasing and consumption patterns, which point to several areas of future study.

1. Opportunities and challenges of cross-cultural marketing

Both the interviews with the corner store owners and the focus groups with community residents suggest that cultural factors play an enormous role in people's decisions on where to shop. To understand the dynamics of cross-cultural merchandising of produce, the movement needs further research, including focus groups of grocers from different cultural groups (such as Vietnamese, Korean, and Yemeni grocers). How does the relationship between the store owners and the community affect the outcomes of corner store interventions? When and how do racial tensions and cultural barriers inhibit residents from shopping at stores in their own neighborhoods? How might those barriers be overcome to create greater social cohesion and local market opportunities?

The complex cross-cultural dynamics further highlight the critical importance of deep and meaningful community participation in healthy corner store work. Advocates can create opportunities, such as focus groups or meetings, for residents and store owners to discuss the kinds of changes they would like to see in their community.

2. Ways to build on existing business networks

Strong partnerships with the local business community have the potential to create more effective corner store interventions. In Los Angeles, for example, an effort to shift dry cleaners to more environmentally sustainable technologies is tapping into the business network of Korean dry cleaners to conduct outreach and education. A similar mentoring or apprenticeship model taking advantage of existing cultural and business relationships might be applicable to corner store owners. Preliminary research suggests the strength of these business associations is quite variable, so local communities need to do their own research to understand how to best leverage this mentoring model.

3. Understanding the corner store business model

Corner store business plans vary, as the interviews with Tenderloin store owners made clear. Advocates need a more sophisticated understanding of the corner store business model to effectively target their interventions, which to date have not typically made business planning a core part of their strategy. Further research is essential to develop a corner green grocer business model: What size store is needed? What volume of produce sales would be required? What kind of marketing would be needed? Corner store advocates could engage successful green grocers, local business

development organizations, business schools, and other technical experts in developing business plans for local projects.

4. Grocery shopping preferences

Building a deeper understanding of low-income residents' shopping behavior may improve future corner store interventions. Focus group research suggests that corner stores (and/or the neighborhoods in which they are located) are often perceived to be unsafe and unclean, with high prices and low-quality products. On the other hand, store owners perceive limited demand for produce. Increasing the supply of produce needs to be coupled with strategies that address price, quality, and perceptions of safety. Again, advocates should carefully consider what kind of social marketing materials and product placement choices will influence consumer purchases.

Part II: Building a Sustainable Vision for Healthy Corner Stores

Next Steps

Given advocates' burgeoning interest in working with corner store owners and the number of unanswered questions about the best approaches to this work, the time is ripe to carefully consider what actions will advance healthy corner store projects to sustainability.

Public Health Law & Policy (PHLP), together with the Community Food Security Coalition (CFSC) and The Food Trust, asked advocates to consider what it would take to maximize the potential impact of healthy corner store projects in the next three years. We asked the following three key questions:

- What are the critical needs for technical assistance, collaborative research, and policy development to advance the healthy corner store movement?
- Who are the critical partners in this work?
- How should we leverage limited resources for the greatest impact?

A select group of advocates who have pioneered large-scale and innovative corner store projects (see Acknowledgments) were invited to provide in-depth input on these issues. PHLP then invited a broad array of healthy corner store advocates to weigh in with their priorities through an online survey, and more than 50 advocates participated.

With substantial input from CFSC and The Food Trust, PHLP organized the stakeholder feedback into a three-stage plan for advancing healthy corner store projects to sustainability. Each of the plan's three elements – **technical assistance, collaborative research, and policy development** – will be discussed in more detail in this section, followed by a table that prioritizes activities within each of these areas.

Priorities for Technical Assistance

Technical assistance from highly skilled practitioners is a cost-effective strategy for building the capacity of healthy corner store advocates and owners. Most of the pioneering corner store interventions relied on an experimental model to design their effort. Given the complexities of the corner store business environment and the limited availability of research and evaluation in this field, knowledge exchange between technical experts and advocates can focus time and resources more effectively.

In 2008, the HCSN conducted a survey of its membership to identify what kinds of technical assistance would be most useful to them. The network aims to provide a portfolio of technical assistance approaches to meet the varied needs of its membership, but given its limited resources, technical assistance efforts should be focused where the demand is greatest. Basic written materials and peer-to-peer learning were clear priorities.

The HCSN website (www.healthycornerstores.org) includes a resource section, which is the most comprehensive collection of resources available on this topic – but many of the available materials are several years old and lack specifics on implementation. The strong demand for basic written materials may reflect the relatively high proportion of HCSN participants who are in the earliest stage of project development. Over the next several years, we can expect these needs to shift as more projects advance to implementation.

Meanwhile, peer-to-peer learning is well suited to an emerging field like healthy corner store work, where the availability of documentation and formal materials is limited and many advocates are seeking practical information to guide their efforts. Successful models and lessons learned can be rapidly transferred to others via peer learning. Survey respondents requested in-person training and networking opportunities. The HCSN's quarterly conference calls provide a more limited but accessible form of peer learning; calls typically draw between 40 and 100 participants.

Survey respondents identified a need for targeted technical assistance. Some healthy corner store projects can access technical support through their own contacts, but the demand from advocates currently outpaces the available resources to fund this work, and we can expect this demand to grow as more and more organizations embark on corner store work.

While there is no single model for healthy corner store projects, a number of common challenges have emerged as advocates begin to pilot interventions. Survey respondents identified their top four areas for technical assistance:

- 1. Shifting distribution patterns to healthy and locally grown foods**
Approximately 98 percent of respondents asked for technical assistance in changing distribution systems to increase the availability of healthy foods. Another 89 percent specifically identified a need for understanding how to increase the availability of local foods. The high level of interest among corner store advocates in connecting corner stores to local farmers presents a unique set of challenges for distribution, merchandising, and pricing.
- 2. Identifying sustainable funding strategies and gaining local policy support**
More than 95 percent of respondents said they needed assistance identifying sustainable funding strategies for their work. They clearly identified local government as a key partner in financially sustainable corner store projects, with 88 percent requesting training on how to work with local government officials. Respondents also indicated a high level of interest in coupling financial incentives with local public policies such as zoning.
- 3. Providing business development assistance to corner store merchants**
About 75 percent of respondents said they needed more training to assist business owners with business plan development. Almost 90 percent said

Percentage of survey respondents indicating these tools would be "most helpful"

Case studies of model projects	63%
Fact sheets on best practices	58%
Website for sharing resources	57%
Toolkits on how to implement projects	53%
In-person training	50%
Networking opportunities	50%

Many survey respondents indicated they were not yet implementing corner store projects but planned to do so in the next two years. Many others were still in the early stages of implementation and will have different technical assistance needs as their work evolves. HCSN co-conveners plan to reassess participants' technical assistance needs annually. Also, in 2008 the Community Food Security Coalition (CFSC) conducted a detailed evaluation of HCSN's technical assistance activities, which will be used to guide future efforts.

they needed technical assistance to help store owners make changes to layout, equipment, and infrastructure.

4. **Developing effective social marketing materials**

About 86 percent of respondents said they needed to learn more about social marketing to be more effective corner store advocates. Another 86 percent wanted to learn how to assist store owners with product placement and merchandising to promote healthier choices.

While healthy corner store projects will always be rooted within specific local contexts, investing resources strategically could produce targeted materials appropriate for a wide audience. The HCSN is an excellent vehicle for disseminating this information nationwide through its email discussion list, website, conference calls, and in-person meetings. But individualized technical assistance also is crucial to help clarify the information and show how it can best be applied to particular situations.

As the field matures, there will be a growing need to invest in the capacity of technical assistance providers to meet this demand for specialized expertise – whether by building a corps of expert corner store project organizers or by engaging technical experts in applicable fields, including business development, distribution systems, policy development, and marketing. Organizations that have pioneered corner store projects, such as The Food Trust and Literacy for Environmental Justice, are currently inundated by requests for technical advice but do not have the dedicated funding to provide this support.

Priorities for Collaborative Research

One of the core functions of the Healthy Corner Stores Network is to identify common challenges faced in implementing healthy corner store projects. Five key questions emerged in surveying advocates:

1. **How can distribution systems be changed to make it easier for store owners to stock healthy foods, including local fruits and vegetables?**

More than 88 percent of healthy corner store advocates ranked collaborative research around distribution systems as most critical to their work.

2. **How can public policies (such as planning and economic development) provide support for healthy corner store projects?**

About 60 percent of respondents said that understanding public policy tools was most helpful to their work, and almost 90 percent said they needed to learn how to engage local government officials more effectively.

3. **What types of funding strategies are most likely to be sustainable for corner store work?** About 60 percent of respondents ranked this research area as most helpful for their work.

4. **How can corner store owners develop a business plan that supports sales of healthy foods over the long term?** Business planning was a top-ranked research question for 62 percent of healthy corner store advocates.

5. How can social marketing strategies within the store and in the surrounding community improve the success of healthy corner store projects? Research around social marketing ranked as a slightly lower priority than the research areas identified above, with a majority of respondents identifying social marketing research as somewhat helpful to their work.

These research questions closely align with the technical assistance needs identified earlier. While corner store pilot projects have offered partial answers to the questions above, a more thorough and detailed look at these five areas would serve the movement well as a whole. These research efforts should be closely coordinated with and guided by healthy corner store advocates who are engaging with these questions in their communities, and the findings should inform technical assistance to advocacy organizations.

Priorities for Policy Development

There are many opportunities for policy change that, if pursued, could strengthen the corner store intervention model. The authority of local governments to regulate local land use and economic development lends itself to a number of policy interventions in particular.

In some instances, new policies would have to be created; in others, existing policy resources would simply have to be redirected to specific projects. Either way, however, the movement needs significant legal and policy research to develop models that communities around the nation could adopt. This work would include evaluating the effectiveness, feasibility, and cost of potential strategies, and translating this research into memos, fact sheets, or toolkits on strategy and rationale. Substantial formative research may be required to develop and implement new policies. The following list is not meant to be exhaustive, but rather to highlight the breadth of policy change opportunities.



Policy Intervention	
Financing	Target façade improvement grants/loans to corner stores
Store Development and Layout	Require developers to assess food retail levels in neighborhood as part of approval process; if food retail index is lower than X, developer must build food retail or pay into food retail development fund
	Require X% of total square feet to be fruits and vegetables if selling tobacco or liquor
	Link low-income housing development subsidies to the attraction/development of healthy food retail options
Product Sourcing and Purchasing	Require fresh produce in stores as a condition of operating a store in an underserved community (a type of policy known as “deemed approved”)
	Require a minimum stocking level of healthy foods as a condition of operating a grocery store
Marketing	Create a “healthy food rating” program: add nutrition to criteria used by health inspectors; assign grade/score to stores that must be prominently displayed
	Limit the number of advertisements generally in a community or a zone by enhancing existing laws

Corner store advocates vary in their level of sophistication around the tools of public policy. As noted earlier, more than 88 percent of advocates have requested training materials around engaging local government officials in healthy corner store projects; a similar percentage want more information about how public policies such as planning and economic development could support healthy corner store projects. Details about available policy options should be disseminated along with materials training advocates on how the public policy process works and how to partner with local government officials.

Some of the policies outlined above place restrictions on how private businesses operate. To maximize compliance and effectiveness, these restrictive policies should be linked to voluntary incentives: for example, a requirement to dedicate X% of total square footage to fruits and vegetables could be coupled with technical assistance on sourcing and display and/or grants or loans for store improvements. Any restrictive policy should be implemented after carefully considering and exhausting incentive-based programs. Where communities do opt for a restrictive policy, advocates may wish to first pilot a voluntary program to justify subsequent restrictions. New York City’s ban on trans fat, for instance, was initiated as a voluntary program before it became public policy.

While many policies to support corner store projects could be implemented locally, state and federal policies may carry more resources and bring new allies to the table. Advocates should pursue federal-level policy options, including

the Farm Bill and the Child Nutrition Reauthorization Act. The changes in the Women, Infants, and Children (WIC) food package adopted in 2007, discussed in detail on the following pages, also present a unique opportunity for healthy corner store advocates.

Special Opportunity: Changes in Federal WIC Policy

With a \$5.8 billion budget nationwide, the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) provides prescriptive checks for healthy foods to about 8 million at-risk, low- to moderate-income women and children. In December 2007, the U.S. Department of Agriculture (USDA) changed the WIC food packages for the first time in 20 years.

This change aligns WIC-eligible foods with the 2005 Dietary Guidelines for Americans and infant feeding practice guidelines of the American Academy of Pediatrics. State agencies have until October 2009 to implement the changes. The USDA will then accept comments on the changes through February 2010, after which the USDA will issue a final rule.

The new WIC food package includes, for the first time, fresh fruits and vegetables, whole-grain cereals, and new flexibility in meeting the needs of culturally diverse populations (including whole wheat tortillas, soy beverages, tofu, and brown rice). New cash value vouchers will make available to WIC participants \$6 to \$10 per month for fresh, frozen, or canned fruits and vegetables. The fruit and vegetable vouchers can be redeemed at any authorized WIC vendor or farmers' market.⁶

The changes in the WIC food package represent a significant opportunity to improve the health of low-income women and children. To participate in the program, vendors must carry every type of food group authorized by the WIC program (current food groups include milk, eggs, cheese, cereal, juice, peanut butter, beans/peas/lentils, infant cereal, infant formula, tuna, and carrots).⁷ Within each of these food groups, there are specific foods that are allowable. However, vendors do not have to carry every single authorized food item. When the new food package takes effect, currently authorized stores will need to add the new foods in order to remain in the program. Any new vendors will also be required to stock at least two types of fruits and vegetables and one whole-grain cereal.



⁶ The redemption at farmers' markets is a state option.

⁷ For a copy of the current WIC authorized food list, see: [www.wicworks.ca.gov/resources/wafl/WAFL-EN%20\(o8-07\).pdf](http://www.wicworks.ca.gov/resources/wafl/WAFL-EN%20(o8-07).pdf).

What this Change Means for Corner Stores

The WIC food package changes have the potential to have a far-reaching impact on food access in underserved areas. There are three broad categories of WIC vendors: supermarkets, WIC-Only stores, and neighborhood stores.⁸ The extent to which the changes will impact current product selection varies by store type.

Many authorized WIC vendors are supermarkets that presumably already stock a full selection of fruits and vegetables. While supermarkets may be a desirable shopping location, many low-income families live in urban and rural communities without supermarkets. These families often travel significant distances to the nearest supermarket or shop at WIC-Only or neighborhood stores in their community.

WIC-Only or “above 50 percent” stores derive more than half their total annual food sales revenue from the sale of supplemental foods obtained with WIC vouchers.⁹ These stores are often located in low-income neighborhoods where large concentrations of WIC families live, and in states with WIC-Only stores, a significant percentage of WIC vouchers are redeemed there. However, since these stores only serve WIC participants, changes in their product selection will not benefit the broader community.

Small grocers in underserved areas are the WIC vendors that have the most potential for improving the food retail environment for the benefit of low-income families. There are no minimum size requirements for stores that wish to participate in the WIC program. These neighborhood stores may or may not currently stock produce; however, many of these stores lack the infrastructure to sell and maintain the quality of fresh fruits and vegetables.

Many advocates of healthy corner stores are evaluating whether additional neighborhood stores could be brought on as WIC vendors. Could participation in the WIC program be an incentive to store owners to begin stocking fruits and vegetables? Are there any strategies for offsetting the administrative challenges associated with participating in the WIC program? What would it take for neighborhood stores to begin selling produce? Currently authorized WIC stores as well as potential WIC vendors who do not already offer produce will likely need assistance with infrastructure (such as refrigeration and scales), as well as technical expertise to properly stock fruits and vegetables.

Neighborhood stores wishing to become WIC vendors will also have to develop systems to prevent the theft of infant formula. Infant formula, which is one of the required foods in the WIC food package, is frequently shoplifted for its high resale value – either on the black market or by drug dealers who use it to

⁸ Since October 2006, WIC participants have been allowed to redeem vouchers at any authorized WIC vendor. Prior to this change, WIC participants were required to select the store where they would redeem their vouchers.

⁹ WIC-Only or above 50 percent stores are dominant in Puerto Rico, where they control 100 percent of the WIC market. Other states with WIC-Only stores include California, Texas, Virginia, Florida, and Oklahoma.

cut any number of drugs. Many grocery stores now store infant formula behind lock and key.

Healthy corner store advocates wishing to work with corner store retailers should also be aware of the impact that WIC-Only vendors may have on the neighborhood food retail environment. Because WIC-Only stores stock only WIC products and serve only WIC customers, they are not subject to the same competitive market forces as corner stores that serve the whole neighborhood.

Advocates for healthy corner stores will play a critical role in supporting store owners in beginning to stock fruits and vegetables. As a federal nutrition program, the WIC Program does not provide technical assistance or advice on how to establish or operate a grocery business. Moreover, the USDA did not allocate additional funds to states to assist with implementing the new WIC rule. Federal guidelines prohibit local WIC agencies from entering into (or appearing to enter into) any conflicts of interest between their role as benefit providers and the grocers' financial interest in WIC voucher redemption.

Moving to Sustainability: A Three-Stage Strategic Action Plan

Public Health Law & Policy (PHLP) worked with healthy corner store advocates to prioritize a number of actions for advancing corner store projects toward sustainability. These strategies are guidelines for the future direction of the movement as a whole; they will need to be implemented through collaborative action, participatory research, and new partnerships.

Technical Assistance to Programs

Stage 1	Stage 2	Stage 3
<ul style="list-style-type: none"> ▪ Use the Healthy Corner Stores Network website to promote best practices, publicize projects, and disseminate resources. ▪ Develop a series of fact sheets for advocates on how to use the tools of land use planning to support corner store work. ▪ Develop fact sheets for advocates on how economic development tools could advance projects. ▪ Present on healthy corner store best practices at major national conferences. ▪ Offer quarterly national conference calls on topics relevant to healthy corner store advocates. ▪ Offer in-person networking opportunities at regional and national conferences. ▪ Offer targeted technical assistance to new and emerging healthy corner store projects. 	<ul style="list-style-type: none"> ▪ Develop the capacity of technical assistance providers to offer tailored support to local projects. ▪ Offer specialized technical assistance to more mature healthy corner store projects. ▪ Develop case studies of healthy corner store projects. Analyze across case studies to highlight successes and challenges. ▪ Work with individual communities to adopt local policies to support healthy corner stores. ▪ Provide training to advocates on how to work with redevelopment agencies in blighted urban areas. ▪ Evaluate existing toolkits for corner store conversion and identify any gaps as more data becomes available. ▪ Continue to offer quarterly conference calls, in-person networking opportunities, and email list. ▪ Expand HCSN website to include case studies and fact sheets. 	<ul style="list-style-type: none"> ▪ Implement 2–3 regional trainings for healthy corner store advocates. ▪ Continue to offer quarterly conference calls, in-person networking opportunities, and email list. ▪ Continue to develop the capacity of technical assistance providers to provide specialized assistance to local projects. ▪ Develop training materials for corner store owners who wish to sell produce.

Collaborative Research		
Stage 1	Stage 2	Stage 3
<ul style="list-style-type: none"> How can corner store owners develop a business plan for a successful corner store conversion? What funding resources are currently available from federal, state, and local governments to support healthy corner stores? What are the gaps in funding? Who are the critical partners for sustainable corner store projects beyond public health advocates and corner store owners? What are the most effective strategies for engaging business owners in this new business model? 	<ul style="list-style-type: none"> Given that cultural factors play an enormous role in people’s decisions on where to shop, how do the dynamics of cross-cultural merchandising of produce affect the success of corner store conversions? (Research should include focus groups with grocers representing different cultural backgrounds.) What are the training needs for corner store owners who wish to sell produce? What distribution model is appropriate for corner grocers wishing to sell healthy foods? How would this distribution model vary regionally? What kinds of targeted marketing (both within the store and in the community) are needed to influence consumer behavior? How can we create demand for healthy products? How do we compete with industry-sponsored advertising for unhealthy choices? How can project organizers engage local nonprofit community development entities and merchants associations in healthy corner store work? 	<ul style="list-style-type: none"> How can planning for healthy food retail become a core part of low-income housing development and low-income neighborhood revitalization? What are the unique challenges of connecting local farmers to underserved customers through corner stores? How can they be addressed? What kind of merchandising/product placement choices are needed to influence consumer purchases? What are the opportunities for working through existing or new distribution networks to influence the availability of healthier processed snacks in corner stores? What are the unique needs of small grocers in rural areas?

Policy Development		
Stage 1	Stage 2	Stage 3
<ul style="list-style-type: none"> Support efforts already under way to enact healthy food retail policy at the federal level through the Child Nutrition Reauthorization Act. Identify opportunities to maximize the health impact of the new WIC food package in corner stores. Identify local economic development, redevelopment, and land use policy strategies that could support corner stores moving to healthy food options. 	<ul style="list-style-type: none"> Explore possible statewide or local incentive program for “quality stores” to encourage food retailers to meet criteria for designation (e.g., San Francisco’s Good Neighbor initiative). Develop new policy tools for advocates to adopt in local communities, such as zoning ordinances or coordinated business services programs. Identify opportunities for connecting healthy corner store work to other community improvement policies such as public safety efforts, pedestrian improvements, or green building initiatives. 	<ul style="list-style-type: none"> Explore feasibility of adding food quality and/or nutrition to environmental health inspections.

Conclusion

The healthy corner store movement has great potential to improve both the physical and economic well-being of underserved communities. The successes and challenges of early healthy corner store projects have created a basis from which advocates can collaborate on strategic research questions, identify best practices, and pursue policies at all levels (local, state, and federal) that support healthy food retail environments.

There is a clear demand for technical expertise, policy development, and information on best practices. Advocates do not have access to practical, how-to information or clear, implementable policy strategies to create long-term success and sustainability – and few organizations have the capacity to provide in-depth, targeted technical assistance to healthy corner store projects. To move the healthy corner store model forward, advocates must work collaboratively to identify best practices, inform policy development, and deepen technical expertise.

This report has outlined a series of priorities for further action in the area of technical assistance, collaborative research, and policy development. Over the next several years, advocates will need to build new partnerships, seek out and develop their own technical expertise, and strategically leverage funding. Together, participants in the Healthy Corner Stores Network can build greater capacity to make substantial changes in the food retail environment in low-income neighborhoods.



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