



## **2018 Resident Food Equity Advisors Application Analysis**

Completed by  
Johns Hopkins Center for a Livable Future

On behalf of  
Baltimore Food Policy Initiative  
Baltimore Office of Sustainability

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## Background

The Resident Food Equity Advisors (RFEA) constitute a corps of Baltimore residents who serve as key informants on food policy issues, participating in community-informed programming and policy development with the Baltimore Office of Sustainability. The Baltimore Food Policy Initiative (BFPI) created the RFEA program in 2017 as part of its efforts to prioritize more inclusive food policies that reflect community needs. To establish its team of RFEAs, the BFPI recruits residents -- from all Baltimore City council districts -- who are willing to share their first-hand experiences with food.<sup>2</sup> When included in the decision-making process, residents provide a clear understanding of the issues confronting their neighborhoods. The BFPI seeks applicants who are Baltimore City residents at least 17 years old, engaged in their community, prepared to provide feedback, and interested in food policy issues.<sup>2</sup>

## 2017 RFEA Application and Selection

In late 2016, the Baltimore Office of Sustainability issued a call for applications for the first cohort of RFEAs, and 79 Baltimore City residents responded.<sup>1</sup> The 2017 application consisted of four open-ended questions related to perspectives on grocery stores, corner stores, transportation, and local food.<sup>1</sup> The BFPI team chose at least one advisor to represent each City Council district, resulting in a final team of sixteen RFEAs, selected to reflect the diversity (e.g., in terms of background and age) of Baltimore City neighborhoods.<sup>1</sup>

## 2017 RFEA Activities

In the program's first year, RFEAs attended six meetings between January and June. During each meeting, discussions focused on one specific element of the Baltimore food system (e.g., urban agriculture, food environment mapping). Key local stakeholders, including staff from the Johns Hopkins Center for a Livable Future, the Baltimore Development Corporation, and the Baltimore City Health Department, often joined the RFEAs in these meetings. Each discussion yielded specific action items to promote progress on the particular topic area at hand.

## 2018 RFEA Application and Selection

Following a late 2017 call for candidates for the second class of RFEAs, 81 Baltimore City residents applied for positions. Applications featured five questions (described in detail below) that covered a variety of food access issues but focused primarily on corner and convenience stores. Phone interviews took place February 23-24, 2018. Applicants ranged in age from 19 to 79, and the majority was female. While there was at least one applicant from every council district, most applicants applied from Council Districts 13, 8, and 10. See Table 1 for applicant demographic breakdown information, and Figure 1 and Table 2 for details on geography of applications.

Applicants came from a wide range of socioeconomic backgrounds. At least five applicants mentioned working in the food service industry, and 11 mentioned working in areas related to public health, including roles as medical doctors, public health researchers, community health workers, public health nurses, and other healthcare providers. One applicant reported working on grassroots organizing and obtaining a degree in policy. Many applicants did not mention a profession but expressed that their salaries were a barrier to purchasing healthy foods.

# Qualitative Review of 2018 Applications

Though only sixteen applicants were chosen for the second class of RFEAs, the perspectives shared by all applicants have the potential to inform the priorities of the BFPI, especially as it places an increasing emphasis on resident-driven program priorities, and on mechanisms that translate community insights into policy. Sussman and Bassarab conducted a qualitative analysis of applications for the first cohort of Advisors in 2017 (2017). In highlighting similarities and differences across applicant perspectives, their report informed RFEA priorities in 2017 and 2018 (Sussman & Bassarab, 2017).

Like Sussman and Bassarab's report, this 2018 analysis has the potential to streamline communication between the community and the BFPI's leadership and stakeholders.<sup>1</sup> It aims to integrate more voices into the food access conversation, allowing real community concerns to shape the priorities of the BFPI.

## Methods

In order to perform the qualitative analysis of all 2018 applications, the research team imported all 81 applications, provided by BFPI staff, into QDA Miner qualitative analysis software. All applications include the following five questions, though some respondents provided incomplete answers.

1. *Why do you want to be a Resident Food Equity Advisor? Why do you care about food access and other food issues in Baltimore City? Share a personal story or experience.*
2. *Tell us why you are interested in corner and convenience stores. Share with us the interactions and the relationship you have with these stores in your neighborhood and why you want to make a difference.*
3. *How do you think racial equity plays a role in the condition of corner and convenience stores today? What issues or factors do you think are important to discuss when having conversations about corner and convenience stores?*
4. *Resident Food Equity Advisors focus specifically on moving policies to improve the food environment citywide. Tell us why you want to be involved in a group that focuses specifically on food policy rather than programs and services.*
5. *BFPI is looking for advisors who are active in and committed to their communities. Being involved can take many forms and does not necessarily equate to a specific leadership position or title. Tell us about your community and describe how you are involved and how others in the community view you.*

Based on conversations with Baltimore Food Policy Director, Holly Freishtat, and BFPI Food Access Planner, Alice Huang, we limited our analysis to Questions 1-4. Question 5 responses consisted mostly of commitment and membership lists, rather than insights that could enrich the analysis.

After discussing relevant principles of qualitative analysis and reviewing several full applications, the research team developed and agreed upon a code book with themes relevant to the responses for Questions 1-4. These codes were developed based on the relevance of the topic to BFPI and the frequency of the topic throughout applicant responses. Each researcher coded all the responses for one question. Once the team members completed independent coding, they compiled their observations and discussed key themes. This report is organized by a summary of the themes that emerged during the analysis of responses to Questions 1-4, incorporating direct quotations, paraphrases and stories from relevant applications. These quotations are cited using application numbers from BFPI files to preserve each applicant's anonymity

Reflecting the BFPI's priority topics for the year, applications included over 26 mentions of the essential nature of corner and convenience stores to the community. In applicant discussions of these stores -- and food access, broadly -- the following four key themes emerged:

1. **RELATIONSHIPS.** Codes in this category include mentions of the neighborhood, children, older adults, approaches to community engagement, worry about the next generation, relationships with store owners, and potential avenues for collaboration.
2. **RACE.** Codes in this category include racial disparities, diversity, experiences of racism and racial tension, the history of redlining in Baltimore, and applicants' descriptions of their own cultures.
3. **EQUITY.** Codes in this category include explicit mentions of equity or inequity, differences in income, experiences with poverty, health disparities, and neighborhood disparities.
4. **POLICY.** Codes in this category include the role of city government, potential of legislation, need for advocacy, and the sustainability of policy over programs.

The following analysis reviews the ways applicants described or incorporated each of the four aforementioned themes in their responses.

## Question 1: “Why do you want to be a Resident Food Equity Advisor? Why do you care about food access and other food issues in Baltimore City? Share a personal story or experience.”

### RELATIONSHIPS

Mentioned 42 times across applications, relationships emerged as a major theme in the first question. Applicants wrote about their concern for the children in their neighborhood (24 times), specifically the ways in which corner stores influence negative behavior and fail to promote good eating habits. Many of the applicants further described their work with youth through community organizations – participating in community service, holding cooking classes, or providing education. Several of the applicants were parents or caretakers of young children, and described caring about food access for the children.

Improving food access for the next generation is also related to this theme. One applicant described how a current pregnancy had led them to a new relationship with food that emphasized staying healthy (1004). Another applicant referenced the life-long impacts of food access on youth.

Older adults were also mentioned frequently in responses to this first question - at least nine times. Some applicants expressed concern for their elderly neighbors; other applicants were older adults themselves. There was consensus among applicants that seniors need healthier food options available to them, and simultaneously find it more difficult to travel to a grocery store. One applicant mentioned that residents of her community started an urban farm that transported fresh produce to seniors by bike to break down some of these barriers (1406).

Aspects of community engagement were mentioned at least 16 times. A few applicants mentioned serving as active members of their local neighborhood associations, from which they heard about the RFEA program. Several applicants expressed a desire to become more engaged with the community on food access issues. A few of the applicants also mentioned modeling food shopping, preparation, and cooking behaviors to help engage neighbors and teach them about healthy habits.

Another commonly discussed theme was the customer-corner store owner relationship. One applicant explained that people avoid stores they have a bad relationship with, which in turn affects the cleanliness around the stores and the availability of food options inside. (303). As the relationships between the community and the store owners deteriorate, applicants reported that more owners stand behind partitions, handing customers their food through small windows. Applicants perceived these barriers to be an expression of dislike at times. Some also acknowledged the store owners' fears and the actual risks of crime in certain neighborhoods. Applicants broadly expressed interest in improving the quality of corner stores and working to facilitate communication between the community, the stores and the city government.

## RACE

In relation to food access and other food issues, applicants did not mention race-related themes as often as those related to relationships. For Question 1, race-related codes were used at least ten times. In general, applicants agreed that food access should not be based on race, or the geographic separations (i.e., results of redlining) that have historically been imposed based on race. One applicant commented on the connection between the issues of food access and race with the explanation that, "the lack of nutritious foods, is widely recognized as influencing health outcomes, as well as contributing to persistent racial and income-based health disparities" (1006). At least two applicants specifically name the black and/or Latino communities as having limited food access. Applicants also described that race differences between a store owner and customer base can contribute to racial tension in these communities. In particular, some applicants attribute high prices and other unfair treatment (e.g., giving incorrect change) to these differences.

## EQUITY

Of all equity-related codes, equity as a general concept was mentioned the most in responses to Question 1 - at least 16 times. Income was mentioned 14 times, and poverty and health disparities were each mentioned eight times.

More than half of the applicants who discussed food equity mentioned an awareness that inequities exist. Some of the applicants discussed factors that contribute to inequity, such as class, income, geography, economic difficulties, community violence, and poor infrastructure (807, 1001).

With regard to income and poverty, several themes were mentioned frequently. Many applicants discussed the complicated relationship between income, food access, and health. One expressed concern "that having access to affordable, decent food makes a big difference in health, wellness and healing" (902). Several applicants mentioned the link between neighborhood income and food access. Those from low-income neighborhoods complain of poor customer service, canned food that might be full of additives, and lack of fresh produce at their local stores. Those who visited stores in high-income neighborhoods felt that the service was very different. One applicant recalled the first time they shopped in a high end supermarket outside their neighborhood, and the observable distinctions between class, money and location in regard to healthy food availability. (807). Mentions of health disparities largely covered two major topics - the need for healthy food for general wellness, and the connection between food access and diet-related disease. Notably, one applicant referenced food assistance programs, reflecting on the inability to use food stamps to buy fresh produce in her neighborhood (602).

## POLICY

In responses to Question 1, legislation was the most common policy-related theme - with 14 mentions. Goals were mentioned at least 11 times, but not all of the applicants' goals were related to policy. Advocacy, government, and city government were all mentioned five times. The goals of

applicants in joining the RFEA program ranged from getting more healthy foods on store shelves to contributing to positive changes in the city government. Not all the goals were directly related to policy, but often the programs they described or the “sustainable solutions” desired were envisioned as leading ultimately to policy (1205). Among those applicants who discussed legislation, there was a strong emphasis on the importance of implementing policies in an equitable manner. Applicants see policy, as well as advocacy and government, as part of the solution to decreasing health disparities and differences in food access across Baltimore neighborhoods. Some applicants indicated prior experience working with the BFPI, and many expressed the need for further discussions on food access issues before policies can be enacted.

**Question 2: “Tell us why you are interested in corner and convenience stores. Share with us the interactions and the relationship you have with these stores in your neighborhood and why you want to make a difference.”**

## RELATIONSHIPS

Relationships relating to corner and convenience stores centered on interactions, both positive and negative, between store owners (55 times) and the neighborhood/community. Many applicants begrudged corner store owners they described as “foreign,” citing them as apathetic towards the community and as reluctant to interact or support the neighborhood. Many applicants juxtaposed the corner stores of the past – recalled as local businesses owned by neighborhood residents who knew and cared about the community – with modern corner stores, described as establishments run predominately by owners who live outside of the neighborhood and rarely interact with the community. Applicants also wrote about current owners not catering to the needs of the neighborhood and not hiring local community members to work at their stores. In general, applicants expressed that while corner stores do conveniently provide some of their basic needs, many of the business owners charge higher prices, disregarding the community and the community’s health: “they give as much to the community as they take away” (502).

While two applicants expressed some understanding of the difficulty of running a small business and surviving despite narrow profit margins, there was an overwhelming sense across applications that the corner store owners were unwilling to work and engage with the community. Throughout the applications, a common sentiment was the desire for corner stores to re-engage and include community members, so much so that one applicant wished they would “put pictures up of the community” (303).

A few applicants described positive relationships with store owners: one applicant mentioned having known a local owner for over 20 years. The remaining positive mentions came from multiple applicants’ desire to “connect” (902), “partner” and hold meetings (1005), and “have more interactions with owners” (1101) as ways to engage with owners and increase productive dialogue. Many applicants cited these relationships as motivation for their applications: they want to find ways for current store owners to both turn a profit and partner with their neighbors and local community (1008).

## RACE

Resident relationships with corner stores overlap substantially with issues of race and racial tension between store owners and applicants. Five applicants provided personal experiences of racial profiling when visiting corner stores: they were either suspected of stealing something or followed around the store. There were a few mentions of how a majority of store owners disrespected the community, seemed disconnected from the community, or were owned by a “foreign element” (503). These descriptions of “foreign” and “different” were interpreted as racial differences leading to racial tension and lack of community engagement. While some applicants saw racial tension as more of a natural occurrence due to differences in cultures, most interpreted racial tension as the fault of corner store owners. Language was also mentioned in a few applications as a barrier to communication between community members and store owners.

## EQUITY

As with relationships and race, equity and race are closely interlinked in the Question 2 answers provided by applicants. There were nine specific mentions of equity, including one applicant’s mention of equity as personal motivation for applying; this individual stated that being an RFEA would offer a direct platform for food equity (101). Another applicant described that grocery stores are not a silver bullet, that “quality access doesn’t always indicate equity,” and that “grocery stores can contribute to an inequitable food system” (809). Additional applicants discussed general disparities within their neighborhoods, mentioning poverty and food access issues. There were 44 references to the applicants’ neighborhoods and their limited food options for healthy, fresh produce. Others mentioned that they lived in underprivileged areas, with one applicant touching on all three equity issues, stating explicitly that “poverty and inequality [have] to do with food” (1107).

## POLICY

Most of the applicants in Question 2 described references to policy through the lens of advocacy or community engagement. These references included reflections on how “advocacy makes the difference,” and excitement that policy can make the change they want to see (902). One applicant expressed optimism in describing the ways planning could bring about change: “there is little question that convenience and corner stores are abundant in Baltimore City and because residents look to these [stores] and have often built relationship with the owners, the potential to provide healthy food is [there] and the tactics to do so have to be well thought out. There needs to be a sustainable plan when providing this access” (1002).

**Question 3: “How do you think racial equity plays a role in the condition of corner and convenience stores today? What issues or factors do you think are important to discuss when having conversations about corner and convenience stores?”**

## RELATIONSHIPS

Similar to Question 2, mentions of relationships in Question 3 primarily referenced the relationship between store owners (44 times) and the communities they serve. This relationship commonly involved descriptions or mentions of racial tension between black communities and Asian or Middle-Eastern store owners. Applicants felt store owners were “out of touch” with the



neighborhoods they serve, often exploiting low-income individuals of differing races, and failing to engage or support the surrounding community (1307). Fifteen applicants also commented on the profit-making motives of corner store owners and the lack of incentives for owners to stock healthy or higher-quality foods. One major suggestion was to provide incentives for corner stores to engage and invest in their communities to motivate them to stock healthier foods. Twenty-seven applicants also mentioned wanting to see improved collaboration and communication between store owners and communities. Some applicants also suggested collaborating with law enforcement, farmers, distributors, government, and health care providers.

## RACE

Racial disparities were mentioned 69 times, representing the most commonly mentioned theme in Question 3. Many applicants described that minority communities have limited access to food, particularly healthy foods. Specifically, applicants discussed the abundance of unsafe corner stores in poor condition and the lack of grocery stores in minority neighborhoods. About ten applicants also mentioned the lack of transportation in neighborhoods of color. The role of racial disparities in health outcomes, redlining (11 mentions), and racism (13 mentions) were also significant themes. One applicant observed that corner store owners “communicate to those of African American descent as if they are worthless” (31).

## EQUITY

There were many mentions of racial, income (31 mentions), and food access disparities. Several applicants described the staggering differences in the food environment from one neighborhood to the next. In particular, the over-abundance of corner stores with limited healthy foods in low-income, black, and minority neighborhoods was often mentioned, while higher-income white neighborhoods were often cited as having more grocery stores, markets, and overall food availability. Most applicants described a lack of choice for individuals in low-income minority communities when selecting their foods, expressing a sense of indignation regarding this reality.

## POLICY

There were minimal mentions of policy-related themes throughout Question 3. The most common relevant theme was the need for increased law enforcement, particularly community policing (mentioned four times). There were also a few mentions of the need for increased collaboration with city government.

**Question 4: “Resident Food Equity Advisors focus specifically on moving policies to improve the food environment citywide. Tell us why you want to be involved in a group that focuses specifically on food policy rather than programs and services.”**

## RELATIONSHIPS

Relationships featured in discussions of policy in two main ways: in the context of the policy-making process, and in the context of policy outcomes related to the corner store owner-customer relationship.

In discussing the dynamics of the policy-making process, some applicants described the importance of communication and respectful working relationships among diverse stakeholders. Other applicants cited store owner-customer relationships as a problematic element of the Baltimore food environment. They argued that programs and services are generally too artificial to address the underlying tension between store staff and customers, but that policy represents a more promising alternative; its long-term implications make it an approach with the potential to strengthen relationships. For example, one applicant explained that in order “to see some improvement and increased positive relations between store owners and citizens...there must be some systemic policy that helps makes this a reality” (502).

Applicants ranged, however, in their understanding of the ways policy could affect corner store owner-customer relationships. One applicant, for example, imagined policies to “help stores owners [become] more empathetic on the health and wellbeing of its customers” (1306). Another suggested that policy should involve discussions with store owners on “which products would not only benefit the bottom line in gross sales for the store, but which products that are most in demand, what should be suggested to the patrons and assure affordable price” (1202). One applicant offered a broader perspective, explaining that policy-making should help “the community and owners of certain stores to create a better working relationship without either feeling attacked” (701). Another echoed this sentiment, hoping that policy inspires people to “respect one another and treat each other with equal rights” (1303).

Though answers focus mostly on the specific relationship between corner store staff and customers, one applicant offered rich insight into the ways food access issues can have profound implications for family and community relationships, and for the broader urban fabric. In discussing a troubled youth, the applicant wondered, “if that young man’s granddad didn’t die of diabetes or cancer, he would have a positive role model. Maybe if that student didn’t have so much processed sugar before school, they could concentrate, sit still, and not disrupt the class. One more educated student, one less broken family, one less resource lost” (1104).

## RACE

In the context of discussions of policy versus programs, race did not emerge as a common theme; it was explicitly referenced only twice. When applicants mentioned race in this question they did so in two contexts. One applicant cited race as a motivating factor for policy, explaining that racial disparities inspired her to pursue involvement in policy-making conversations: “I want to be involved in a group that focuses on food policy because there are far too many instances of gaps in food impacting poor health outcomes for people of color and low-income populations in Baltimore City” (1301).

Other applicants alluded to race as an important factor for consideration during the policy process. In discussions of the importance of collaboration and community engagement, they cited a diverse set of opinions as a cornerstone of effective policy-making. One applicant was most specific, highlighting that the success of a past food-focused program intervention was due, in large part, to that fact that “all cultures were involved” (601).

## EQUITY

In Question 4, more than one-third of applicants alluded to equity in their response, either in terms of age, income levels, race, or socioeconomic status. Each of these variables – in relatively even measure – was identified as an underlying factor in the inequitable access to food in Baltimore. Like race, equity issues figured predominantly as motivating factors for applicants. As a goal of food-related policy discussions, equitable access to healthful foods inspired applicants to join the conversation, especially among the eight applicants who framed access to healthful food as a human

right. Applicants characterized inequities as “systemic” and “entrenched,” characterizing them, thus, as targets more appropriate for policy than for programs and services (1301).

In Question 4 responses, applicants also discussed equity in the context of representation in the policy process. Five applicants explicitly noted that, as RFEAs, they hoped to give voice to marginalized community members in policy-making discussions (1201, 1401, 1404, 502, 603). Applicants recognized fair representation in the policy-making process as critical to food policies grounded in equity.

## POLICY

In drawing comparisons between programs and policies, applicants highlighted many factors that make policy an appropriate avenue for food systems improvements. Sustainability was the most commonly cited characteristic distinguishing policy from programs. Almost half the applicants described the way policy can lead to long-lasting, far-reaching change, whereas programs and services generally yield short-term results that tend to be geographically limited with key residents liable to “fall through the cracks” (807).

Applicants also showed that they viewed the sustainable nature of policy solutions as stemming from the fact that policy and programs addressed problems at different depths. One applicant, for instance, viewed programs and services as addressing “symptoms,” in contrast to policy, which offers “a cure” (1104). Another echoed this sentiment, equating programs to “giving a man a fish and feeding him for a day,” and policies to “teaching a man to fish” (1205).

Applicants did not, however, dismiss programs and services altogether. One highlighted that “while programs and services definitely play a necessary role, they must be supported by policies that encourage systemic change” (1201). Another explained that, “for programs and services to be sustainable and tailored to the needs of the group...they need to be rooted in policy” (1305). In one case, policy was connected specifically to existing food assistance programs: “By collectively updating, creating and implementing policies, individuals in the affected communities will have a better opportunity to use benefits such as SNAP, WIC and food vouchers that they receive from programs they are deemed eligible for” (701).

Below are the core principles that emerged most commonly among applicants in discussions of the policy-making process.

- **Collaboration:** Many applicants cited the importance of collaboration among stakeholders with diverse backgrounds and areas of expertise. They established that policy-making should occur in conversation with those who are passionate about making positive change, and may include representatives of local government, along with local community members. It should be a collective effort of “lawmakers together with citizens” (808), including “a group of residents – passionate about a similar interest, from various socioeconomic backgrounds, coming together to brainstorm, thus representing the whole on any given subject matter” (3).
- **Community engagement:** Several applicants also discussed the importance of community engagement in policy making. Empowering citizens to share their voices was identified as a key step toward needs-based policy making. Ensuring representation of marginalized groups represented a key source of inspiration for many of the applicants, one of whom expressed frustration with the fact that “in too many instances laws are made without the input of those [affected]” (808).

There was less consensus on the appropriate pace of the policy-making process for food systems issues. Applicants generally formed two distinct camps. One called urgently for radical change that could “shift the paradigm in food access in Baltimore City,” using language suggesting a sweeping

transformation of local food policy (808). The other group focused on strategic planning, issuing more measured calls for patience to support calculated, incremental changes, based on the belief that “change often happens slowly, usually on a micro-level, which then grows into larger resolutions in years following” (1205).

## Discussion

### Other Key Themes

Though relationships, race, equity, and policy emerged as the most compelling themes across all applications, many stories and perspectives referenced topics that fell outside of these themes. Listed below are the most common such topics:

- **Transportation:** Across all applications, transportation was mentioned 19 times. Many applicants demonstrated an awareness of links between transportation and food access, reflecting on the impact of poor transportation access to poor food access and health-related outcomes.
- **Education:** The majority of applicants either expressed a desire to educate their neighbors on health-related topics, or attributed poor eating habits to a lack of education. Education was mentioned 37 times across all applications.
- **Cost:** Income disparities (47 mentions) and cost (53 mentions) were also common themes, with several complaints about the high price of corner store food despite poor quality (e.g., expired products) and selection.
- **Other food sources:** Other than corner stores, some of the food sources that were mentioned were carry-out restaurants, farmers markets, mobile farmer’s markets, CSAs, vegetable gardens, soup kitchens, and grocery stores. Of these food sources, grocery stores were mentioned 49 times, farm-sourced foods (CSAs, farmers markets, vegetable gardens) were mentioned 40 times, and food banks were mentioned five times (203, 701, 805, 806, 501).
- **Health:** Health was frequently cited as a motivating factor for applicant involvement with BFPI. The most common health-related themes were unhealthy foods (70 mentions), diet-related health problems (49 mentions), healthy foods (49 mentions), and the general concept of living a healthy life (49 mentions). Applicants saw a lack of healthy food in their neighborhoods; limited knowledge within the community on how to be healthy and eat healthfully; and resulting high rates of diet-related disease (202, 603, 701, 1102).

### Limitations

Several limitations to this qualitative analysis should be recognized. First, this project was completed as part of community-based practicum, so time and resource constraints limited the depth and rigor of the analysis. Second, because only three of four group members had access to qualitative analysis software to code phrases from the applications, one researcher completed coding and analysis manually. Though this may have limited the analysis slightly, researchers were able to provide summary statistics that fully accounted for all codes. Additionally, several codes were added to the codebook throughout the analysis process, leading to some cases of overlapping codes and inconsistent use of newly added codes. Finally, approximately 16 of the applications were handwritten. While these applications were transcribed into a digital format, the accuracy of these transcriptions cannot be guaranteed.

## Conclusions

This analysis concentrates on four key themes: relationships, race, equity, and policy. Based on the depth of discussion about these topics, the BFPI leadership should prioritize them as it collaborates with the 2018 RFEAs in ongoing development of food policy for Baltimore City. It is also important, however, for the BFPI to consider other commonly mentioned topics, including transportation and education, when structuring this year's priorities. Insights from all RFEA applications represent valuable foundation for BFPI's activities in 2018 and beyond.

Key takeaways that are particularly relevant to policy decisions include:

- Neighborhood organizations are well suited to connect the city government with constituents.
- Many communities already possess the people and resources to educate residents through classes, recipe demonstrations, etc. These assets could be formally leveraged to promote health and decrease diet-related disease.
- Rather than calling for new types of stores with new owners, residents desire to work with current store owners to improve customer relations and inventory quality.
- As critical figures in their local food environments, corner store owners should be included in food-related policy conversations in Baltimore.
- More research is needed to understand the will of corner store owners to participate in City policy efforts.
- Children and seniors need a safety net; there is a heightened awareness of hunger among these vulnerable communities. People recall poor food access during their own childhoods, and observe it as a problem for children and seniors who live in their neighborhoods currently. The BFPI could harness the relationships already existing in these communities to reach vulnerable individuals.
- The city needs innovative policies to improve the offerings of healthy food and fresh produce at corner stores (e.g., connecting farms with corner stores, helping stores to identify profitable healthy foods).
- Policies need to take into account the diverse population of Baltimore City.
- Policies, not just programs and services, are widely understood as the best avenue for change in the food environment, especially given policy's potential for sustainable, inclusive impact.
- Food assistance programs play a role in food access, and residents value the networks of food pantries and soup kitchens in their neighborhoods.
- Personal stories can provide context for future transportation and built environment policies, which represent an important part of the food access conversation.

## References

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# APPENDICES

## Appendix A: Applicant Demographic Data Tables and Map

Age of Applicants*		Gender of Applicants*	
Range	19-79	Female	52 (67%)
Average	43	Male	25 (33%)
Mode	30 (7 applicants)		
*Not all applicants disclosed demographic information			

Council District	13	8	10	12	11	14	9	3	5	2	6	1	4	7
# of Applicants	9	8	8	7	6	6	5	4	4	3	3	1	1	1

### Neighborhoods Represented

Abell	Essex	Northwood
Arlington	Falstaff	Old Town/Jonestown
Beechfield	Glen Oaks	Oliver
Bel Air	Govans	Orangeville
Belair	Greater Mondawmin	Park Heights
Berea Community	Greenmount West	Parkside
Bolton Hill	Gwynns Falls	Pigtown
Broadway East	Harlem Park	Poplar Grove
Brooklyn	Hunting Ridge	Remington
Butcher's Hill	Irvington	Ridgeley

Caton Ave	Langston Hughes	Southwest
Cedonia	Laurel	Stonewood/Pentwood/Winston
Coldstream/Homestead/ Montebello	McEllery	Upper Fells Point
Downtown	Milton/Preston	Upton
Druid Heights	Moravia-Waltherson	Westport
East Baltimore	Mount Clare	Woodmere
Edmonson Village	Mt. Vernon	Wyman Park/Hampden
Ednor Gardens	North Roland Park	



## Appendix B: Coding Frequency Table

<b>Coding Frequencies Summary</b>								
Family	Code	Count	Family	Code	Count	Family	Code	Count
Access	food access	134	Disparities	neighborhood disparity	24	Process/Change	next-generation	8
Disparities	racial disparity	74	Food	nutrient density	24	Process/Change	nonprofits	8
Food	unhealthy food	70	Food	food safety	23	Relationships	support	8
Corner Stores/Access	availability	77	Race	racial tension	21	Corner Stores	branding	7
Corner Stores	owners	67	Relationships	family	20	Food	local food	7
Relationships	neighborhood	66	Urban Issues	safety	20	Culture	gathering	6
Relationships	community engagement	65	Health	well-being	20	Access	"healthy food priority area"	6
Food	cost	53	Access	Transportation	19	Process/Change	make a difference	6
Health	diet-related health issues	49	Health	cooking	17	Food	organic	6
Food	healthy food	49	Process/Change	communication	16	Access	positive experience	6
Health	being healthy	48	Process/Change	empowerment	16	Process/Change	radical change	6
Disparities	income disparity	47	Food	farming/agriculture	16	Relationships	corner store/customer	6
Corner Stores	customer service	46	Opportunity	local business	16	Culture	appropriate	5
Corner Stores	essential to community	46	Health	being healthy	15	Food	comfort foods	5
Process/Change	programs/services	46	Access	location	15	Access	food Banks	5
Opportunity	career	43	Urban Issues	poverty	15	civics/policy	government	5
Food	quality	43	Corner Stores	profit	15	Disparities	educational disparity	4
Opportunity	education	38	Civics/Policy	advocacy	14	Culture	history	4
Corner Stores	presentation	37	Access	Food Assistance	14	Process/Change	paradigm shift	4

Disparities	equity	36	Process/Change	goals	14	Civics/Policy	patience	4
Access	grocery stores	36	Race	racial diversity	13	Civics/policy	teaching/learning	4
Corner Stores	healthy corner stores	36	Access	grocery stores	13	Process/Change	leadership	3
Relationships	community	34	Relationships	older adults	13	Civics/Policy	mistrust of institutions	3
Food	choice	33	Health	population health	13	Corner Stores	storage	3
Corner Stores	convenience	33	Race	racism	13	Process/Change	fatigue	2
Culture	personal stories	33	Race	redlining	13	Health	mental health	2
Opportunity	teaching/learning	32	Process/Change	planning	12	Process/Change	self-efficacy	4
Process/Change	collaboration	31	Urban Issues	development	11	Process/Change	transformation	2
Process/Change	helping	31	Relationships	social cohesion	11	Opportunity	work	2
Relationships	children	30	Food	food insecurity	10	Opportunity	business	1
Access	health food priority area	30	Civics/Policy	enforcement	9	Civics/Policy	government	1
Civics/Policy	legislation	29	disparities	health disparities	9	Food	incentives	1
Process/Change	sustainability	29	Civics/Policy	city government	8	Access	insecurity	1
Health	basic needs	26	Disparities	homelessness	8	Civics/policy	leadership	1
Urban Issues	crime	24	Food	human right	8	Process/Change	masterplan	1
Access	farm sourced food	24	Culture	identity	8	Civics/Policy	power	1

## Appendix C: Excerpts by Theme

- I. Key Themes
  - i. Relationships
  - ii. Race
  - iii. Equity
  - iv. Policy
- II. Other Themes
- III. Personal Stories

### I. KEY THEMES

#### i. Relationships

When the relationship is bad you see people go out of their way to not spend money at that store, the cleanliness of the area around the store disappears and the youth suffer from the lack of food options available (303, Q1).

What I have learned so far is that the kids' needs to learn more about food and the benefit of eating quality food even if takes time to be prepared. They are learning to balance their finances and make a healthy tasty meal on a budget but they must have a guaranteed access to food. I feel education, together with the proliferation of healthy corners, will make a positive and lasting change in the lives of our youth (401, Q1).

Children eating potato chips for breakfast at the bus stop, folks walking a long ways with heavy bags, the nearest grocery store several miles away but liquor stores on near every corner, unhealthy fast food in many locations when I'm out and about (1001, Q1).

They have been constantly listed in the health department notices as being in violation due to unsanitary conditions. I refuse to let my grand-daughter shop in there for food (903, Q1).

There was vacant commercial zone in the middle of the neighborhood that a small group of residents helped to transform into a productive and thriving urban farm selling fresh produce on site and through a mobile bike market for the senior residents (1406, Q1).

I grew up right next door to a corner store on Winston Avenue and the relationship between the small business corner store and the community played the integral part in the flow of the neighborhood (303, Q1).

Corner stores are embedded in cultural identity of many communities in urban areas around our nation (101, Q2).

ii. Race

<p>While all the white residents owned cars and could drive to the suburbs or other neighborhoods to buy groceries or go to the farmer's market, most of the black residents were limited to their shopping selection due to limited time and transportation options (1406, Q1).</p>
<p>I would like to be part of the Resident Food Equity Advisor because I have been a resident of Baltimore City for most of my life and has seen the Red line experience first-hand in my community with no low food cost, no supermarkets, no healthy foods and would like the chance to participate in the process in seeing it change (201, Q1).</p>
<p>I believe that race has been and continues to be a significant determinant of health outcomes among Baltimore residents, and it is unfortunate that many of the neighborhoods with the poorest availability of healthy foods also tend to be the neighborhoods with greater numbers of Black residents (1103, Q3).</p>
<p>It really shouldn't matter what ethnicity you are, what should matter, is the purpose of the establishment and the value of the services being brought into the community and its benefits to the community (1202, Q3).</p>
<p>So far the term "racism" has been avoided because of its polarizing nature. But the fact is that racism plays a key role in supporting and perpetuating disparities that disproportionately plague communities of color. At the same time it should be emphasized that racism harms all of us; whites and nonwhites. Understanding how race can influence perceptions, policies and action helps develop greater awareness of the challenges facing all small and non-commodities farmers. There's no doubt about it; race is a complex topic. Heap on issues of poverty and other socially divisive constructs and we've got a super-sized problem on our hands. Yet it's solvable (59, Q3).</p>
<p>Areas where the majority of food access is limited to corner and convenience stores represent the impact of systemic racism. Low-income communities, particularly communities of people of color, are disproportionately affected by poor health status (904, Q3).</p>
<p>Predominantly black communities in Baltimore City have long suffered from economic disinvestment, while predominantly white communities have continued to thrive. This pattern helps to explain the disparities in healthy food access across neighborhoods where there is disinvestment, there are going to be fewer stores, and fewer incentives for new stores to open or for old ones to improve (503, Q3).</p>

### iii. Equity

<p>It's frustrating to see blocks full of dilapidated homes, rising poverty and crime, as well as mass health disparities based on the neighborhood someone happens to live in (904, Q1).</p>
<p>I experience the lack of equity and access to food in my neighborhood on a daily basis (502, Q1).</p>
<p>The corner stores are not equipped with the more healthier food options for ... residents. The lack of nutritious foods, is widely recognized as influencing health outcomes, as well as contributing to persistent racial and income-based health disparities. And diet-related health problems are disproportionately higher in areas without supermarkets due to the poorer quality of foods sold by smaller grocers (1006, Q1).</p>
<p>I would like to be a Resident Food Equity Advisor because I believe that having access to healthy and affordable food should be a basic human right, and is a necessary first step towards shrinking the health, economic, and environmental disparities that exist across Baltimore City neighborhoods (503, Q1).</p>
<p>I'm tired of it, but I'm even more tired of not feeling like I have a voice (203, Q2 [in reference to access to healthy food]).</p>
<p>All Baltimore City residents deserve a menu of fresh and healthy foods (301, Q2).</p>
<p>I believe that policy implementation is the crux of sustainable systemic change, especially when concerning social inequities (805, Q4).</p>
<p>Healthy food should be a right, not a privilege for the wealthy. I want to be able to talk with people directly about their hopes and desires for their daily meals and bring that back to the meetings to make sure their voices are heard (1107, Q4).</p>
<p>Children and the elderly fall victim to the lack of nutritional food availability based on income and environment and social status. This is totally unfair. Baltimore City needs improvement in programs and services yes, however food policy and resources are the lowest common denominator in relation to survival, healthy lifestyles and food equality (602, Q4).</p>
<p>I hope that BFPI becomes one of these spaces that can advocate for people that may not have a voice in how policy is shaped (1201, Q4).</p>
<p>I want to have the opportunity to give a voice to the voiceless and have their concerns addressed (1401, Q4).</p>
<p>Additionally, the policy-making process empowers citizens to have a voice in how regulations are developed and address issues of inequity through this process (1404, Q4).</p>

#### iv. Policy

<p>In a city where development and businesses continue to grow, we should also focus on the food deserts that plague our city residents. This is something, I believe, should be addressed to policy makers which is why I would like to be a Resident Food Equity Advisor (1102, Q1).</p>
<p>I am interested in being involved in Baltimore City's discussion on food equity because I think efforts such as these are widely needed and require support, both through increased awareness and informed city-wide policies (1105, Q1).</p>
<p>There was vacant commercial zone in the middle of the neighborhood that a small group of residents helped to transform into a productive and thriving urban farm selling fresh produce on site and through a mobile bike market for the senior residents. Through this experience with urban farm, I witnessed the difference this could make with one neighborhood but am interested how revised policies and community initiatives can improve previous inequalities inflicted on urban populations (1406, Q1).</p>
<p>Access to fresh food is of paramount importance to the citizens of Baltimore City who often find themselves marginalized and under-represented when it comes to regulations and policies which impact them directly (603, Q1).</p>
<p>there is little question that convenience and corner stores are abundant in Baltimore City and because resident look to these and have often built relationship with the owners the potential to provide healthy food is available, the tactics to do so have to be well thought out and there needs to be a sustainable plan when providing this access (1002, Q2).</p>
<p>...programming is short term and while the takeaways can be long-lasting policies tend to have a more permanent, lasting result (1002, Q4).</p>
<p>A program may only impact certain neighborhoods or groups of individuals, but a policy can touch the entire city and reshape how a health issue is addressed in the future (1404, Q4).</p>
<p>While programs and services can be beneficial to communities, the drawback is that people who don't fit the specifications of that program's target demographic tend to fall through the cracks. Policy has its flaws as well, but something that is written into law can still catalyze change citywide (807, Q4).</p>
<p>It's great to serve but service is not the cure. I am tired of meeting the issues where they are. Baltimore needs solutions. Policies will bring about a cure to our dysfunction as opposed to treatment (1104, Q4).</p>
<p>Focusing specifically on food policy rather than programs and services helps to address the root of the problem rather than treating the symptoms (503, Q4).</p>
<p>I find that addressing the underlying cause of an issue is a more effective way to obtain a desired outcome than treating a symptom. Influencing policy is an optimal way of accessing the cause of something (904, Q4).</p>

## 2. OTHER THEMES

### TRANSPORTATION

I've personally witnessed friends and family going out of their way to find decent grocery stores that sell fresh produce and food that are not available in stores or marts closer to home (1005, Q1).

We have seniors who cannot go far to shop for quality food as well as neighbors with small children who only have corner stores who sell non-nutritional food as their only choice (504, Q1).

I used to have to walk to Shoppers Food Market on Caroline St, the closest supermarket, then carry heavy bags or transport my groceries home in a shopping cart. I have seen families... walking up Central Ave to go to the supermarket. On their return home each family member shared in carry the groceries home. And to shop at Giants requires a bus trip and sometime returning home with groceries on the bus (1208, Q1).

For many people without transportation, corner stores can be the only available option for where to obtain food (1403, Q2).

Corner Stores for many is the only source [of food] as transportation can be limited for some of our less fortunate population (301, Q2).

I believe that this type of behavior results from the fact that many of the residents do not own cars and therefore have few options outside of the stores that exist in their vicinity (502, Q2).

Most of the people I know choose to walk two minutes to the corner store for a chicken box rather than catch the bus or walk (often with a cart) a mile or so to the supermarket. A trip to the supermarket is seen as an event that will take at least two hours, while you can walk to the corner store and back in a fraction of that time. That being the case, I want more healthy food options to be available in these corner/convenience stores at more affordable prices, so that everyone in my neighborhood has the same opportunity to make healthier choices for themselves and their families (807, Q2).

Without a car or access to public transportation you are paying 3x the price for less quality goods at your convenience store (1004, Q3).

The [corner store] owners know the people in the neighborhood may not have transportation therefore they are subject to whatever with no choices (1309, Q3).

### EDUCATION

Healthy cooking classes, expanded offerings of fresh fruits and vegetables, and possibly community space for nutrition classes are a possibility if incentives to expand were offered to the owners of stores such as these (1205, Q1).

I also think there has to be continued effort to educate city resident on the regulations and guidelines surrounding SNAP and other safety net programs (1002, Q1).

...Too often, many people with lower education and income levels see these stores as having cheap costs. However, in the long run, these stores are more costly from a health standpoint, and economically, per unit, the products are more costly than grocery stores (202 Q2).

With the high numbers of folks with illnesses and disease related to poor diet and unhealthy lifestyles, it is extremely important to inform our neighbors and our children. There are other creative ways to provide healthy, nutritious foods aside from corner stores, convenience stores, and fast food places (such as food coops, grow your own, raised and vertical beds for growing, producing foods). I would like to share my gardening experiences with others (adults and children) and to help shape the choices and involve others to become invested in their health and food choices. Train/assist others in how to grow their own, as well as to participate in community discussions/planning that directly impact them and their families (603, Q2).

Stores should be engaged and it needs to be education of the customers and the operators (1106, Q2).

I was once at the farmers market and there was a farmer selling carrots with the greens on them.

A women asked what the carrot was and when he said it was a carrot she looked at him with disbelief and said, 'Oh, no, I don't thinks so!' and she pulled her children along with her through the market. This made me realize the lack of experience and education that so many Baltimore residents have (1107, Q2).

Owning a neighborhood convenience store provides opportunities that far surpass the purchasing of snacks and fast food. A store, managed correctly land with an open mind, can become a blessing to a community, encouraging partnerships, teachable moments and better health choices for the surrounding neighborhood (602, Q2).

As a Resident Food Equity Advisor it is paramount that we make healthy foods more attractive by educating the communities on low cost ways of incorporating healthy eating (101, Q3).

Education... for people of color cannot happen without the understanding of equity (3, Q3).

People aren't given the education they need to understand what fresh produce even is (1107, Q3).

### **COST**

Food deserts can exist in any neighborhood when food is out of the price range in the communities in which the markets exist (1205, Q1).

Of course, there are the stores across the street in the Mall and the Dollar Store on Orleans, but their prices are higher than some supermarkets. \$3 for a loaf of bread? I remember when Wonder Bread of 25 cents for a half loaf. \$1 and change for a small can of fruit (1208, Q1)?



I feel that they are not actually a part of the neighborhood and that they are positioned here to reap a financial harvest (502, Q2).

Food is often overpriced, expired, or stores have received bad grades from the health department (701, Q2).

From my experience, it is largely due to considerations like these (mobility, childcare, cost, energy, distance, transportation) that most of the people I know choose to walk two minutes to the corner store for a chicken box rather than catch the bus or walk (often with a cart) a mile or so to the supermarket (807, Q2).

Most of the corner and convenience stores that do serve communities have canned food which may outdated, cans dented, cost higher than in supermarket which is not cost effective for senior citizens (902, Q2).

I am interested in these types of businesses because they seem to be located in areas perceived to be underprivileged and the grocery stores are not conveniently located, they seem lack real nutritional items and sometimes items are stale and overpriced (1206, Q2).

I limit my interaction with my neighbor stores one because of the higher prices (1208, Q2).

Wholesale resources and healthy, fresh, foods and services at a reasonable price that will bring in revenue as well as establish consistent and committed customers (602, Q3).

If you are signing a lease that takes 75% of your monthly check, how are you going to eat and pay utility bills... So to go to the corner store to purchase food, where will the money come from. If you do have a little cash, you end up purchasing bologna and hotdogs for dinner several times a week, hoping that the meat is still good. The corner store owners go to Walmart and buy those boxes of snacks and hot pockets. Then they put them in the stores and sell them as individuals and charge three times the amount because they know that the community people will buy them for lack of funds (903, Q3).

#### **OTHER FOOD SOURCES**

There was vacant commercial zone in the middle of the neighborhood that a small group of residents helped to transform into a productive and thriving urban farm selling fresh produce on site and through a mobile bike market for the senior residents (1406, Q1).

What excites me about this moment in the Baltimore food system – is that there is opportunity to redirect our culture from poor food choices to nutritious choices that meet the needs of individuals that have to get through the day. The work at the Lexington Market to identify healthy choices, stores like ALDIs and Walmart, city gardens are opportunities that are making nutritious choices available (1305, Q1).

Two assets I valued highly were the Giant supermarket five blocks from my house, and the year around Farmers Market at 32nd and Barclay. I loved that both were accessible to me on foot or by

bike (1001, Q1).

It was great to go the Market, take part in a CSA, get fresh local foods and see folks from all over the city. I was at there almost every Saturday morning and always ran into neighbors? which led to sharing information and good will (1001, Q1).

My family lives in a neighborhood where the nearest grocery store is two minutes away, and on the rare occasion where that store does not have what we're looking for, there are at least ten other grocery stores, convenience stores, specialty food stores, and farmers markets within a two-mile radius that we can try (503, Q1).

On a more personal level, I have had the opportunity to join a community garden and reap the many benefits of the community gardening experience (1301, Q1).

Every summer, I grow fresh vegetables in my garden (803, Q1).

There are not a lot of good food resources in the area, and many people don't know that there are many pantries in your local area, that I was one of these persons introduce to fresh food pantry now I am eating more healthy (1101, Q1).

There were times I had to depend on churches and food pantries to have staples in the home (808, Q1).

The grocery store that was located in my current neighborhood closed down and nothing similar is replacing it (808, Q1).

We were food insecure at different times during my childhood and we had to eat at soup kitchens (806, Q1).

As a struggling professional, I choose between purchasing health foods each month and paying for transportation and electricity (1205, Q1).

The concern I have with Food access is not having a car, sometimes I get a delivery when I can afford the fees. When I am not well, it is different to always walk. For, also the weather, is sometimes a problem, to get food quality food (1302, Q1).

[I] tend to turn to our local grocery stores or farmer's markets instead because they have healthier food options (503, Q2).

I'm interested in working on ways could use them to better serve communities with healthier food options by connecting them with healthier supply chains and local farmers (802, Q2).

I can usually accomplish most of my shopping between the [Punjab Grocery Market in Waverly] and the Saturday Farmer's Market (1201, Q2).

I try to lean more on farmers markets and local coop grocery stores for my food sources (1301, Q2).

Northeast Market, right across from my workplace, there is a well-stocked produce stand

operated by Richardson Farms (1105, Q2).

The Pimlico community there is an overflow of fast food choices and liquor stores that continue to decline the health of the Pimlico community (601, Q3).

There is a chain convenience store nearby, but my predominately White and middle to upper class neighborhood does not have the same density of smaller corner stores that I see traveling through other parts of Baltimore. I also have access to two large grocery stores, both within walking distance of my house (1404, Q3).

We also need to address why and how we can bring fresh/super markets back to the city to allow communities to offer better products, services and encourage us to make healthier choices (4, Q3).

### **HEALTH**

Eating healthy, exercising and living in a better community will improve the quality of life (1210, Q3).

From a food perspective, diets high in processed and canned foods are also high in sodium and sugar and can exacerbate hypertension, obesity, and diabetes worsening health inequities in this city (1403, Q3).

The prefixed meals contribute to the high rate of obesity and ailments that are rampant in Urban Families which tend to be predominantly minorities. The availability of fresh foods through policies will assist in the decline of some of the epidemics plaguing the Urban Communities (301, Q3).

Malnourishment from inadequate food intake and/or food - like products that provide little nutritional value have a substantial impact on health outcomes (904, Q3).

Inadequate nutrition leads to higher rates of illness, which translates to time away from work/school and decreased productivity (3, Q3).

I think it is important to consider... the extent to which the store conceptualizes and responds to its role in shaping the health of the community it serves (1404, Q3).

As a customer of corner and convenience stores the lack of choices in their products affects the overall health of anyone shopping there (1204, Q3).

### 3. PERSONAL STORIES

Working at Real Food Farm and selling fruits and vegetables on the mobile farmers market, I've met a lot of different people throughout the city and on one of our market stops, a woman was complaining about the price of the food, I tried to explain to her that the price was that way because we practice organic methods. And she proceeded to tell me that there is no such thing as organic, which I think she said because she didn't fully understand what organic meant (203, Q1).

Another experience was at another stop, we had apples on the table ready to sell and this boy rode past on his bike and continuously stared at the crate of apples, so we gave him one and when we did, you could see the happiness and excitement on his face. His said thank you, walked off and five minutes later and brought another boy with him who also asked for an apple. We gave it to him and when he bit into it, he then said "This is good" loudly and walked off happy. And that's when I thought, this is why we do this, to bring food into the communities that some don't even get a chance to experience (203, Q1).

While volunteering at Moveable Feast, which is located in a food desert, I walked into what I thought was a grocery store, only to find less than half the shelves stocked and hardly any fresh food available to buy (1102, Q1).

One of the last times I patronized a store within my community, the mice had eaten through the bread and it was still on the shelves to be sold. When I brought it to the attention of the owner, he removed the bread from the shelf and placed it where they make sandwiches. By doing this, the owner further jeopardized the health of individuals within my community by exposing them to fecal matter of rodents. I did call and report this to the health department; however, by the time they arrived, the store was in order to pass an inspection (701, Q1).

... my partner has a chronic health condition that necessitates her diet contain healthy foods primarily. As such, we've been growing fresh organic fruits ... (805, Q1)

As a child other than our monthly trips to the local Super Pride there was not a lot of access to fresh produce. My parents for most of my childhood were food stamp recipients, and for some reason, they thought that all the food for the month had to be purchased in one trip, that often meant that we only had fresh produce for a week or two and after that, we rarely made additional trips to the grocery store (1002, Q1).

Three years ago, I lost my full-time job and had to cut a great deal of my resources, namely financial. Because of lack of income and transportation, I got to know my neighborhood a lot better. Not being used to settling for what was in my environment (clothes shopping, grocery, personal items etc.) I had no choice but to utilize what my neighborhood offered as resources. It was nothing. My children and I used food stamps to supplement not having the income to afford groceries, however there was nowhere to shop to get fresh produce and suitable groceries for healthy eating. I found this to be depressing and sad (602, Q1).

I grew up in Baltimore City in a family that did not make a lot of money. We were food insecure at different times during my childhood and we had to eat at soup kitchens (806, Q1).

In my years with working with food I have realized that so many people not only don't know where food comes from, but what real food is. I have encountered people in Baltimore who have

<p>not known what a carrot with the greens still on looks like and when introduced, they would not let their children eat it because it was so unfamiliar (1107, Q1).</p>
<p>Like most of my peers, I grew up benefiting from the SNAP and WIC programs, which allowed my sister and I to eat relatively healthy. Once my mother made a little more money and no longer qualified for benefits, we had to shop in the most affordable stores available, often discount stores and neighborhood convenience stores that offered food low in nutritional value and high in cost (807, Q1).</p>
<p>When I obtained a job of my own and stepped foot into a Whole Foods for the first time (in the Harbor East neighborhood), I saw the difference that class, money, and geographic location make in having access to healthy food. There are no organic supermarkets in the neighborhoods I grew up in, and the implication was that the only people deserving of healthy, high-quality food are those who can pay lots of money for it (807, Q1).</p>
<p>The corner store Harlem Mini Market is more like a snack shop. Many items are grossly overpriced or no set price or labels. Despite state law, loose ones are consistently sold here. Cashiers often short change individuals, I have witness several verbal altercations between community members and cashiers (1104, Q1).</p>
<p>One personal experience I remember is I went in a Chinese carry out once, when I walked in, there were two young women with an infant sitting waiting for their order. I was surprised that I had to place my order between a little window, because the owner was apparently afraid, when I questioned the two young ladies that were in the store waiting for their orders, one replied, "You know Chinese people don't like us." I responded by asking her if that was the case why are you here. Needless to say I did not purchase any food from them always the place was not clean (501, Q1).</p>
<p>My grandfather opened a bodega in Bronx, NY to cater to the needs of the people in his community... (101, Q2)</p>
<p></p>