

Assessment of New Approaches to Food Security in West Oakland**Nicholaus K. Harris**

Abstract Responding to a shortage of accessible, affordable, healthy food in West Oakland, new community food programs have formed in order to improve food security there. Going beyond the typical food bank, these programs have taken new approaches in the form of community gardens, mobile markets and local farmer's markets. In the spring of 2005, I conducted an assessment based on interviews with program leaders and forty-five West Oakland residents to determine how the programs work, if they are improving resident access to food, how many residents are benefiting and what strategies may lead to future program improvements. Results suggest that residents are generally aware of how to eat healthily, but are unable to do so due to lack of proximity to vendors that stock those healthy foods. Many in the community used the farmers market, but few relied on the other community food programs. Location was an important factor, with those close to the farmer's market and community gardens typically reaping the benefits more than their peers in other parts of the community. Implications of this study are that educational campaigns are necessary to inform West Oakland residents of new food options, and that access must be improved by placement of additional food programs in the community. Making healthy food convenient and affordable to purchase is the key to improving food security in West Oakland.

Introduction

Food security refers to an individual's ability to continually access enough food for an active, healthy lifestyle (Nord *et al* 2003). According to national studies conducted by the Census Bureau and the US Department of Agriculture, hunger and food insecurity affect more than 30 million people each year in the United States, with low-income households composing the majority (Nord *et al.* 2001). Food insecurity in California is estimated to affect over 2.2 million low-income residents, with minority populations most significantly impacted (Harrison *et al.* 2002). Reliance on high-fat, high-carbohydrate fast food diets has become a significant problem and prevents individuals from pursuing a healthy lifestyle. The Surgeon General released a report stating, "Overweight and obesity may soon cause as much preventable disease and death as cigarette smoking" (Satcher 2001). In order to be food secure, an individual must possess knowledge of what is healthy and have access and the ability to afford it in the community.

West Oakland is home to 24,000 primarily African American and Latino residents, approximately 35% of whom live in poverty (Rongerude 2002). With thirty-six liquor/convenience stores, a grocery store, and numerous takeout/fast food restaurants, there are many places for residents to purchase food. With the exception of just a few convenience stores, the availability of fresh produce and affordable healthy food in these establishments is minimal. Low income and unemployed residents have trouble affording any kind of food, while individuals with a steady income simply do not have the same kinds of purchasing options their counterparts in more affluent communities do (Harvey 2005, pers. comm.). Studies of similar areas have shown that residents want to eat healthily, but cost and access barriers, abundance of fast food, lack of nutritional knowledge, time constraints and in-store marketing discourage or prevent residents from pursuing healthy diets (Tsai 2003, Hecht 1996, Feenstra 2002). Much of the population of West Oakland is denied the basic right to food security because they simply do not have continual access to the types of food necessary to pursue healthy lifestyles.

Responding to food insecurity in West Oakland, a variety of new community food programs have formed in recent years. Food banks have existed in the area for decades, but new approaches are focusing on utilizing food grown at community gardens and at small, sustainable farms located close to West Oakland. Using these sources, a farmer's market called the Mandela Market, a mobile market named Peoples Grocery, and a small neighborhood store called Neighbors Grocery are now offering residents healthy, affordable food. Urban gardens run by

Oakland Butterfly and Urban Gardens (OBUGS) and City Slickers Farms (CSF) grow produce on what used to be blighted space and encourage residents to become involved in growing crops, offering harvests to the community at little or no charge.

During the spring of 2005, I conducted an assessment based on interviews with residents of West Oakland and leaders of the community food programs in an attempt to determine: 1. how new community food programs work and are trying to achieve their goals, 2. how effectively the new food programs in West Oakland are at enabling and promoting healthier eating habits, 3. how much of the population of West Oakland is benefiting from these programs, and 4. what further steps can be taken to significantly improve community food security.

Methods

Starting in the spring of 2005, I began routine visits to West Oakland to interview individuals involved with an oversight committee called the West Oakland Food Collaborative (WOFC). The WOFC works with all of the new food programs in the community and is in charge of the Mandela Farmer's Market and the produce section of Neighbor's Grocery. Dana Harvey from the WOFC and Malaika Edwards from People's Grocery were interviewed. Information was also obtained from the websites of OBUGS and CSF. I conducted semi-structured open-ended interviews with individuals responsible for each program. Topics covered during these interviews included residents served, goals, strategies and outreach. More detailed interview questions can be found in the appendix of this paper.

Next, I interviewed residents in West Oakland. I divided the community into four study areas in order to geographically represent most of West Oakland and to test the effect proximity to a food program has on responses in each study area (fig. 1). Interviews took place between the hours of 11AM and 5PM on Wednesdays and Saturdays between March 20th and May 7th. Subject selection occurred via door to door recruitment and recruitment of individuals on the street while walking alone or in the company of an individual familiar with the neighborhood. A total of 45 subjects were interviewed using semi-formal, open-ended interviews. Topics covered included perception of what is healthy, access to healthy food, diet, lifestyle effect on diet, food preparation, knowledge and opinion of food programs, diet change and ideas for program improvement. The appendix contains the complete set of resident interview questions.

Interview responses were analyzed to determine the difference between knowledge of healthy eating and actual diet, resident access to healthy food, and how effectively each program improved access to healthy affordable food. Responses to questions regarding perception of healthy food and actual diet were placed into four categories depending on the relative healthiness of items mentioned in those responses (Table 1). Categories were created based on dietary recommendations issued by the US government (ODPHP 2005). Responses to the access question were categorized on a scale of one to four, with one representing no access, and four representing definite access. Subject ratings of individual programs were categorized on a scale of one to four depending on how much they used the program and how much it improved their access to healthy, affordable food (Table 2).

Relationships between food program location and study area were analyzed to determine the effect proximity had on an individual's use and awareness of food programs. I analyzed the overall effectiveness, community awareness and total usage of West Oakland food programs. The analysis sought to answer the basic questions posed in the introduction while at the same time revealing general community knowledge of what healthy food is and why or why not residents are eating it.

Table 1. Food categories

Category	Types of food
1 - unhealthy	junk food, fast food, lack of veggies or fruits, nothing fresh
2 – somewhat unhealthy	limited focus on fresh fruits and vegetables, mostly meat and sugars
3 – somewhat healthy	fresh fruits and vegetables, grains, some meat, but still some sugary and fatty foods
4 - healthy	organic fresh produce, whole grains, very limited sugar and fat, whole foods

Table 2. Program ratings

Category	Response
1 – poor	Program does not help and I don't go
2 – marginal	I have heard of it or gone, but I don't have much to say about it
3 - ok	It helps me sometimes
4 - good	It helps me a lot and has improved my diet



Figure 1. Four study areas in West Oakland

Results

Community Food Programs The results of the interviews and research involving community food programs are summarized in Table 3 following this section. Programs and organizations are discussed in detail below.

Dana Harvey started the West Oakland Food Collaborative in 2001 with a small grant. The goal of this organization is to support community based health and nutrition programs that improve access to healthy food. One of the first projects the WOFC undertook was the

formation of a farmers market in West Oakland, run by community members, and stocked with products produced in community gardens or by farms partnered with the community. Mandela Market is the result of these efforts, and takes place every Saturday at the corner of Mandela Pkwy and 5th Street, next to the West Oakland Bart Station (fig. 1). Mandela Market is composed of a collection of local vendors and area farmers and caters to low-income individuals with food stamps and WIC vouchers. Tallies by members of the WOFC show an average of 200-250 visitors to the market each Saturday, representing a sizable group, but only a fraction of the community. Outreach efforts have focused on utilizing house-to-house flyer placement to inform the community of the market. Mrs. Harvey pointed out that the Mandela Market has farmers lined up to provide additional produce if demand increases.

The WOFC considers education and awareness the main obstacles it faces in promoting the market and community food programs. In addition to Mandela Market, the WOFC administers a fresh produce section in Neighbor's Market on the corner of Market and 9th street. Produce is provided at very low prices to the store in exchange for the ability to place it in the market. The WOFC hopes to determine if residents will actually purchase the produce, and the potential to place fresh produce stands in other small stores. Future plans of the WOFC include placing fresh produce in additional neighborhood markets, and placing a cooperative grocery store in the community.

People's Grocery was co-founded in 2001 by Malaika Edwards with the intention of establishing a "community based local food system and local economy" in West Oakland (Edwards 2005). The most visible project the group runs is a bi-weekly mobile market, which includes a truck filled with locally grown fresh produce and healthy bulk foods at affordable prices. The truck makes visits to all four of the study areas assessed in this project (fig. 1). People's Grocery also runs a community garden, a youth entrepreneur program, and a summer youth camp. Based on the interview with Malaika, it was hard to get an idea of how many people the mobile market was serving, but she suggested awareness and demand have been steadily growing since the mobile market started. The organization has focused on utilizing "grassroots and street level marketing/organizing techniques," including placing a solar powered sound system on the mobile market truck that plays culturally popular music to announce the arrival of the market. The goals of People's Grocery are to increase food production and to develop further entrepreneurial programs in the community (Edwards 2005).

OBUGS was founded in 1998 with a mission to “strengthen families and build community through educational programs offered in a network of neighborhood gardens, green spaces and farmers markets” (OBUGS 2005). CSF was founded in 2002 with a similar goal of increasing “self-sufficiency in West Oakland by creating organic, sustainable, high-yield urban farms and back-yard gardens” (Rosenthal 2005). OBUGS and CSF run a network of community gardens in West Oakland, and are key members of the Mandela Market. These organizations also run school and youth driven programs that seek to educate children in West Oakland about how to eat a healthy diet, grow food, and become entrepreneurs in the community. The community gardens involve many individuals in the neighborhood and the educational programs involve nearly 300 area students.

Table 3. Community Food Programs in West Oakland

	WOFC	People's Grocery	OBUGS	City Slickers
Founded	2001	2001	1998	2002
Goals	access, economic development, community health, education and collaboration	local food system and local economy	community gardens, education, outreach	community gardens, education, outreach
Strategy	farmers market, affordable health food in neighborhood markets	mobile market, entrepreneur programs, youth camps	urban gardens, education, school programs	using empty space for new gardens, local produce in community
Residents involved	200-250	100-200	300+	200
Outreach	flyers	grassroots, word of mouth, creative marketing	community involvement, schools	press releases, community outreach
Future plans	cooperative grocery store, fresh produce in neighborhood markets	more local food production, additional education programs	more gardens, greater community involvement	more gardens, greater community involvement

Interviews with West Oakland Residents Most subjects were knowledgeable about what a healthy diet is (Fig. 2), although there were a few who tended to think meat and junk food were good choices. Typical responses were “vegetables, fruit, oatmeal, beans, sweet potatoes, pies and some sweets,” and “chicken, fish, potatoes, bread, milk, fresh fruits and vegetables.” There also was awareness of the unhealthiness of fast food, with one individual markedly commenting that “McDonalds is the worst goddamn place you can go to!” When asked what they actually

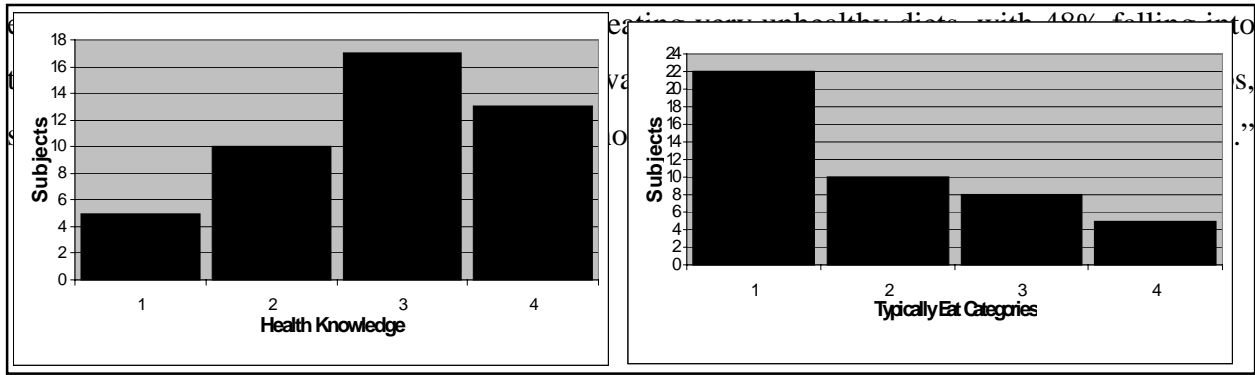


Figure 2. Resident knowledge of healthy diet and actual reported diet.

Subject access to healthy, affordable food was generally low, varying by study area (Fig. 3). When asked why access is low, 26 subjects cited lack of convenient markets that sell healthy food in the community, 21 lack of personal transportation, 15 low income, and 14 that it was a lot easier to just get fast food or takeout. A typical quote was “lots of people here don’t drive or have good transport and the corner stores is where they go, and there is bad selection and it’s not fresh there.” Subjects in the “definite access” category typically responded that having personal transportation enabled them to travel outside of the West Oakland to supermarkets such as Safeway, Berkeley Bowl, Pak ‘N Save, and Costco. Individuals reliant on public transportation were much less likely to eat the types of food they considered healthy. These individuals said they typically purchased what they could afford at neighborhood stores close to their homes.

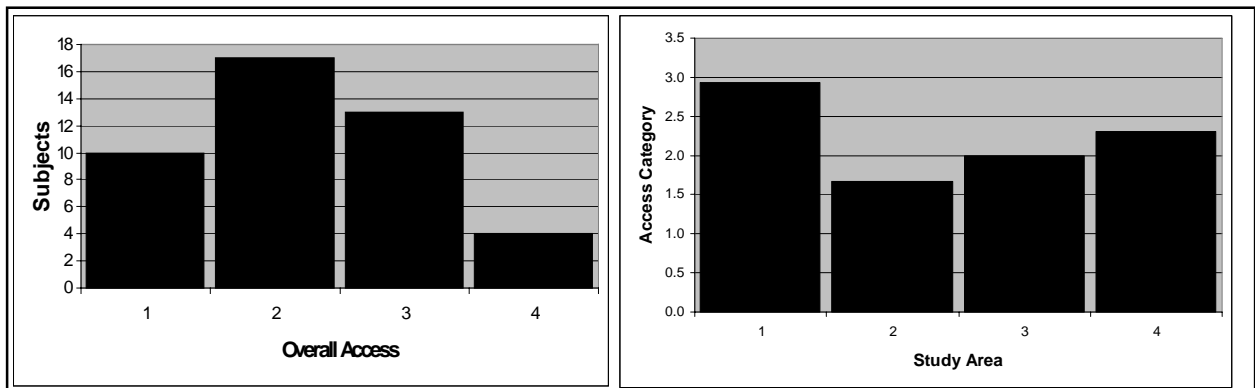


Figure 3. Overall access and average access in each study area.

Convenience was a dominant theme, with subjects preferring to shop at places easy to access be it via car, on foot, or on public transportation. A typical response was given by a man in area one: “lots of people around here don’t drive or have good transport, and the corner stores is where they go, and there is bad selection and it’s not fresh there.” Another man in area two said that “most of the neighborhood stores have stuff that is expensive and not very fresh.” Living situation and food preparation have proven to have little effect on the way subjects eat. The only comment so far was by a younger lady in area one who said “my mom is in charge of the cooking and I eat what she cooks.”

Subject awareness of individual food programs is summarized in figure four (Fig. 4). Out of the programs, the best known were the Mandela Farmers Market and People’s Grocery while far fewer knew of the other programs. Aware subjects tended to view the Mandela Farmers Market quite positively and were likely to attend while those aware of People’s Grocery knew about it but had not actually used it (Fig. 5). There was not enough awareness of the other programs to yield any useful program perception results.

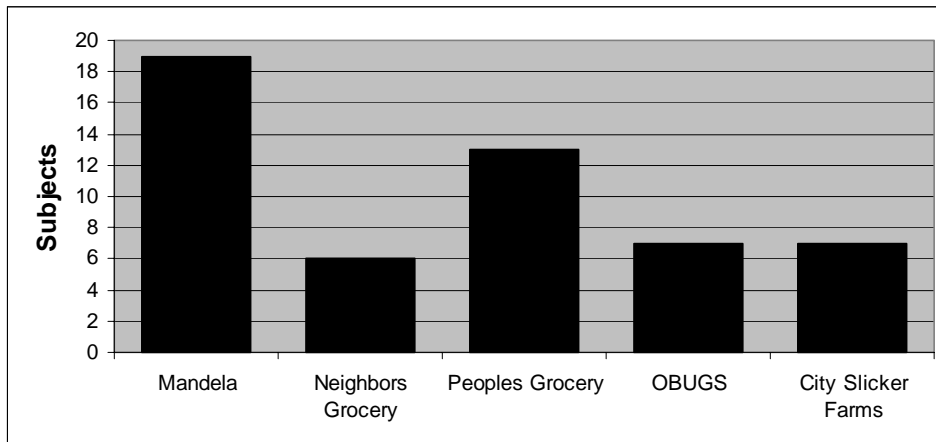


Figure 4. Resident awareness of programs

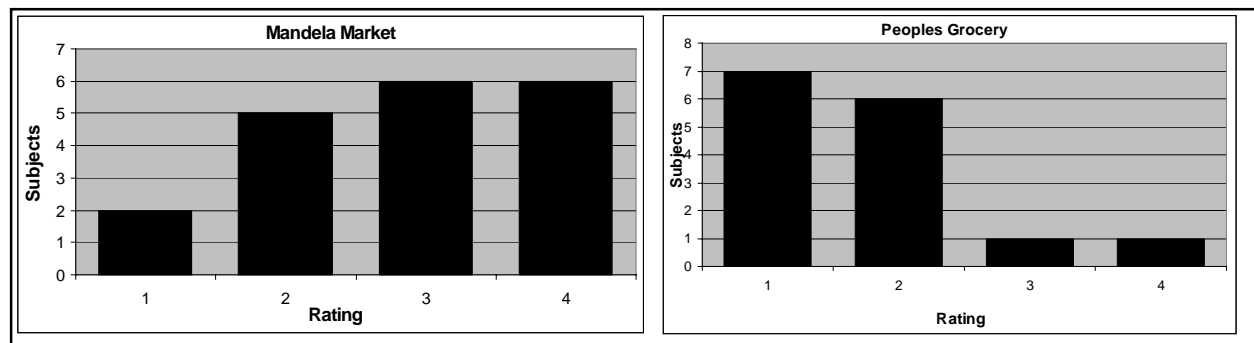


Figure 5. Subject perception of Mandela Farmers Market and Peoples Grocery

It was common for residents to state that the Mandela Farmers Market was “good” and was “helping the community a lot.” Another typical response was “we get lots of greens and fruits and find good prices there.” Additionally, Mandela Farmers Market appears to have been relatively successful in changing the diets of aware residents, with over half of those who had visited the market responding that since they began visiting the market their diets have become healthier. Of the individuals who had heard of People’s Grocery, most had seen the truck or read about the group in the news, but few had actually purchased anything from them. A typical response was, “yeah, I’ve heard of them and seen them around, but I ain’t never got anything from them.” Neighbor’s Market was virtually unheard of, and the few that did know about it did not have anything positive to say, with one respondent stating, “they are just like any other corner/liquor store and they don’t have anything fresh.”

The final interview question proved to be a difficult one for subjects to answer. Typical categories of responses were, 1. increase knowledge about programs with outreach, 2. make it convenient to get healthy food by putting it in stores, 3. hold the farmer’s market more often and in more places, 4. give free food to they needy, 5. educate residents about how to eat right, and 6. nothing ever seems to work so I have no idea. An individual in area four suggested, “there needs to be an organization to hand out food in neighborhoods.” Other typical responses were, “If there was more healthy food here, we would eat more,” “More people need to come to the market instead of stores, and flyers need to be put up,” and “It would be better if more stuff was going on during weekdays when people get off work.” Subjects also suggested that people in the community do not know what “good food” is anymore. One individual stated, “people are so used to eating garbage that they probably wouldn’t even like real food anymore.” Many subjects simply suggested that the community food programs should just keep on “doing what they are doing.” A few individuals who were not aware of any or most of the community food programs suggested that there should be much more community outreach so that others like themselves could be made aware of existing options.

Discussion

Based on results from organization and resident interviews, new community food programs in West Oakland are reaching only a limited portion of the population. According to the leaders of the programs, they are gaining momentum, but results from resident interviews do not

necessarily support this assessment. Organization goals to integrate the community, local farmers, educational programs and development projects are coming into fruition through the creation of new community gardens on blighted space, school programs, placement of fresh produce in neighborhood markets, mobile grocery trucks, and farmers markets. Results of this study, specifically the lack of subject knowledge of the programs, suggest that increasing awareness of these new food programs is necessary in order for more residents to benefit from them.

The disparity between resident knowledge of a healthy diet and what residents actually claim to eat demonstrates there is potential for significant improvement in diet if access to healthy food is improved. It is likely resident responses to the “what do you typically eat” question were idealized by subjects, so the disparity between knowledge and practice is probably larger than this study revealed. In study areas furthest from community food programs, access was the lowest (Fig. 3), so a potential way to decrease the knowledge/practice disparity would be to implement new community food programs in these parts of West Oakland. At the least, through educational outreach and word of mouth, current programs may be encouraging residents to find places to eat other than typical neighborhood stores such as “Hamburgers and Doughnuts.”

Based on interviews with residents of West Oakland, most people continue to rely primarily on overpriced local convenience/liquor stores and infrequently take advantage of the services community food programs offer. In order to improve access and desire to eat healthy food, new educational approaches are necessary. Educational programs in schools will benefit future generations, but a large scale educational campaign is necessary to inform older residents. Older residents are typically the ones who shop and prepare meals, so altering their patterns of consumption will have an immediate effect on the younger generation living in West Oakland. Given that the obesity crisis and food security have received significant national attention in recent years, there may be significant potential for community food programs to gain funding for such campaigns. This study did not look into possible sources of funding, but given that obesity and food insecurity is estimated to cost the US billions of dollars per year, it seems feasible that efforts to alleviate it would be supported (CFSC 2005; ODPHP 2005).

Given that establishment of new markets and community gardens takes significant time and money, new efforts should aim to place locally produced, healthy, affordable food in places West Oakland residents already frequent often: the convenience/liquor stores. The WOFC is currently

testing the community response to the placement of information and fresh produce in Neighbor's Market, and it will be interesting to see how it is received. This study did not have the capacity to analyze the financial viability of placing fresh produce stands in convenience/liquor stores, but that would be a good focus of future research.

Current food programs are funded by grants and donations, but economic sustainability is a goal commonly mentioned by those working with the community. The fresh produce stand in Neighbors Grocery is subsidized to some extent by the WOFC, but if demand grows following new education and outreach efforts, such stands may become profitable and no longer require outside funding. People's Grocery's entrepreneurial programs may promote the creation of market driven stores and coops that require no outside assistance, essentially providing members of the community new jobs and economic opportunities. The WOFC's goal to create a coop called "Soul Foods" is another idea that has great potential to improve the food security situation in the community, while keeping money within the community. Combined with further outreach efforts and community based economy, a much larger majority of residents in West Oakland may gain access to healthy, affordable food.

Future studies are necessary to gain further insight into the effectiveness of new approaches to food security in West Oakland. This study was limited to a rather small sample size by the relatively short time in which it was conducted. Additionally, complications arose due to resident distrust of the interviewer, so an important future consideration would be to have someone local to the area conduct interviews. Additionally, sampling bias likely arose from the method of approaching subjects on the street due to the likelihood of a larger proportion of homeless individuals in the sample population. Future studies should focus on a larger door-to-door campaign in order to gain further insight into improving access to healthy, affordable foods in West Oakland.

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Appendix

Questions for program leaders:

1. When, how and why did you start your organization?
1. What are the goals of your organization?
2. What is your strategy to meet these goals?
3. How many individuals in the community utilize the services you provide?
4. How have you informed the community of your services and do you have any further plans to increase community awareness of your organization?
5. What obstacles or main limitations do you see to the further promotion of healthy options, and how do you intend to address these challenges?

Interview Questions for Residents:

1. What kinds of food do you think are healthy?
1. Do you have access to these types of food in your neighborhood? Why/why not? Where?
2. What do you typically eat, and where do you usually get it?
3. Do your job, family, or living arrangement affect the way you eat?
4. Who in your household is in charge of preparing meals and shopping?
5. Have you heard of the following, and do they help you obtain affordable, healthy food?
 - a. Mandela Farmer's Market
 - b. Neighbor's Grocery
 - c. OBUGS
 - d. People's Grocery
 - e. City Slickers Farms
6. How much has your diet changed as the result of these programs?
7. In your opinion, how could these organizations make healthy food more accessible to you and your community?
9. Are there any other comments you would like to make?