

CONFERENCE CALL NOTES
NOPREN Rural Food Access Working Group
December 15, 2015 11:30PST/2:30EST

CALL SUMMARY:

1. Welcome and introductions
2. Presenter: **Dr. David Procter of Kansas State University, on the Rural Grocery Initiative.**

Dr. Procter is director of the Center for Engagement and Community Development, which was established with the aim of assisting the state of Kansas.

Top 7 challenges of small rural grocery stores:

1. Competition with big box stores (such as those on urban fringes that rural residents drive long distances to shop at)
2. Operating costs (mainly energy)
3. Labor (quantity /availability)
4. Government regulations
5. Lack of community support
6. Low sales volume
7. Meeting minimum buying requirements

Slide 11: Modified a community dialogue model called FEAST (originated from Oregon Food Bank), that brings together a variety of stakeholders to discuss ways to strengthen various points of the food system. They've done multiple discussions in small communities to help communities create roadmap to improving food system.

Slide 12: Supply chain challenge: Held a national conversation about this in October 2015. 50 people from across US came to participate, representing food wholesalers, financial institutions, extension professionals, SNAP, academics. Identified 4 areas that need examined to make inroads into supply chain:

1. Grocery stores as centers of community life: make them more of a gathering place and center of activity. This will increase sales.
2. Small grocery stores can serve as food hubs: feasibility studies of stores as nexus of food hub for local growers to sell in. Bring farmers market into parking lot. Consider value added processes.
3. System of regional food distribution centers. Creating food distribution centers that can buy from national wholesalers, but then distribute through regional center to smaller grocery stores. Could be co-op or private business model.
4. Sustainable grocery ownership model: 6 models identified across U.S. Sole proprietorship is most prevalent but increasingly difficult. Cooperatives, community-owned, school-based enterprise (college, university, or high school own and operate), public/private partnership (public dollars used to start and maintain; managed by private individual/s); non-profit 501c3 as part of broader nutritional mission

Two current studies:

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1. USDA funded study: influence healthier purchases by local customers, and improve healthy food profile in grocery store. 2015 did 3-month baseline study of 3 grocery stores to ID shopping patterns. Using loyalty card program to measure food purchasing patterns. After 3-month baseline, did 4 months where one store introduced Nu-Val nutritional scoring system with accompanying education component on how to use it for buying food. In other stores, did Extension nutrition education modules for consumers. Data is being collected, will be analyzed soon. Hope is that buying patterns will change to more healthy, and that store owners will shift to healthier foods stocked.
2. Kansas Health Foundation grant: develop infrastructure on K-State campus for statewide technical assistance collaborative and learning laboratory (Slide 16)

How to get more involved with the Rural Grocery Initiative: website, Twitter, 5th Rural Grocery Summit on June 6-7, 2016 in Wichita, KS. Find out more at website:

<http://conferences.k-state.edu/ruralgrocery/>

Questions for Dr. Procter:

1. *Within smaller stores (non-grocery stores), such as those in Native communities, what are recommendations?* A: Dr. Procter is working with very small communities, that have opened up a store with only 2 aisles. Another store is a mix between a grocery store and convenience store. Gas station in front. Dr. Procter has done a bit of work with native populations, and is very interested in this work.
2. *Has research been focused on seniors in rural areas?* No, however, many requests they receive are from civic leaders in rural towns who are concerned about stores remaining in community. Rural communities tend to be characterized by more aging people. Transportation services not great. For people with jobs or who are younger, it's easier to drive 30-40 miles to buy food, but may pose hardship for seniors. Without a local grocery store, seniors may not be able to travel to a food store.
3. Follow-up discussion: How to spend the \$1,000 stipend from NOPREN: *postponed until January meeting*
 - Idea 1: Publishing fee for a RFAWG-authored paper – previously published or future submission?
 - Idea 2: Support for in-person meeting to support a major group project (similar to concept mapping project)
 - Idea 3: Support multi-site data collection
 - Idea 4: Fees for specialized training consultant and/or use of proprietary data collection methods (such as the Community Coalition Network Analysis we wrote into the Bright Spots grant)

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4. RWJF Building a Culture of Health proposal update (Marilyn):

This project is looking at role of healthy food systems for creating equity in various populations. One aim is to use secondary data to look at populations with high proportion of healthy eaters, but also look at communities where there is a lower gap between those with low and high healthy eating. A similar study was done on obesity, to look at gap in obesity rates between low and high SES populations. Now Marilyn is considering looking at a smaller region than the whole US, where there may be availability of sub-county-level data. After identifying positive outliers, then do case studies to assess social and policy reasons why healthy food access may be more equitable. *Please email Marilyn Sitaker (SITAKERM@battelle.org) for more information or to get involved in this grant project.*

5. Other announcements and updates

- Stephanie had her baby! Chance Dail Pitts was born on Nov. 18.
- Scheduling for next semester: We will need to change our meeting time due to Alice's schedule. Possible times are: Mondays at 1pm, the 3rd Tuesdays at 1pm, and the 4th Thursdays at 11am. *Esther will send out a survey to group members to get feedback about availability.*