

Creating Healthy Food Shelves

homegr**é**wn -south

Resources, Information and Next Steps to a Healthier Food Shelf

Environment





About *Creating Healthy Food Environments in Food Shelves:* This toolkit was created by The Open Door, a food shelf dedicated to ending hunger through access to healthy food, located in Eagan, MN. Homegrown South is a healthy food program area of The Open Door that seeks to support a healthier local food system in the south metro through policy and systems change.

The Open Door developed this publication with funding from the Dakota County Public Health Department through the Minnesota Department of Health's Statewide Health Improvement Program. Additional funding was provided by the Center for Prevention at Blue Cross and Blue Shield of Minnesota.

The goal of this tool kit is to assist other hunger relief organizations across the State of Minnesota in assessing, adopting, implementing and evaluating healthy food approaches.

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Checklist for Rollout

- □ Survey stakeholders & analyze results
- Target policies and practices





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Introduction

In spring 2015, The Open Door contracted Wilder Research to implement a pilot survey in Dakota County to assess food shelf challenges and opportunities in adopting and implementing healthy food approaches. The survey was conducted in two parts:

1) A client survey (paper version): focusing on clients' views on, desires for, and experience with healthy food inventory and programming. The survey also collected demographic information like ethnicity, income and education level, and chronic disease prevalence in their household.

2) A staff, volunteer and board survey (electronic version): focusing on site-specific opportunities and challenges to implement healthy food approaches. It also attempted to identify where there was the greatest perceived needs, interests, and acceptance related to healthy food approaches among staff, volunteers and board members.

Ten Dakota County food shelves took part in the study, representing all food shelves in the county. In exchange for their participation, food shelves received:

- Clear instructions and a survey tool kit packet
- Technical support from Wilder Research in implementing the survey
- Individualized report of findings for their food shelf
- Aggregate report of findings with the combined Dakota County
- Invitation to a workshop series called Creating Healthy Food Environments in Food Shelves, for which this toolkit was created.

The purpose of this toolkit is to provide an in-depth case study of the Healthy Food in Hunger Relief survey and its various applications in the hunger relief sector, with a focus on assessing, adopting, implementing and evaluating healthy food approaches in the food shelf environment. Templates, examples and additional case studies are provided in the hope that hunger relief organizations across the region can learn from and adapt the processes and practices discussed in this toolkit in their own organizations.

The following section provides the architecture of the survey process—relevant templates, communications and the survey materials themselves. The complete Healthy Food in Hunger Relief countywide (aggregate) results are available on The Open Door's website at theopendoorpantry.org. For privacy purposes, individual food shelf results are not publicly available.





Suggested Timeline

The timeline below reflects a countywide survey with multiple participating agencies.

- Weeks 1-4: Contract third party researcher to administer surveys and analyze results
- > Weeks 5-12: Develop survey instruments and data collection protocol, invite peer agencies
- Weeks 13-16: Administer survey
- Weeks 17-24: Analyze survey results and develop reports
- Weeks 25-28: Deliver reports to participating agencies; host training
- Weeks 29-32: Share study results with the public

Templates

The templates on the following pages were used in the pre-planning and implementation of the Healthy Food in Hunger Relief survey in Dakota County.

Client Survey Toolkit

- EMAIL: Invitation for peer agencies to participate in survey from Lead Organization SUBJECT: Healthy Food Shelf Survey: Will you participate?
- EMAIL: Survey Instructions to participating food shelves (pre-implementation) SUBJECT: Survey time is almost here! What you can do now
- > PRINT: Healthy Food in Hunger Relief: Client Survey Packet

Web Survey Tookit (for use with staff, board, and volunteers)

- EMAIL: Web Survey Email Instructions
- EMAIL: Web Survey Email Invitation
- > WEB: Web Survey (formatted for Google Forms)





EMAIL TEMPLATE: Invitation for peer agencies to participate in survey from Lead Organization

SUBJECT: Healthy Food Shelf Survey: Will you participate?

Hello [Peer Agency Contact],

[Lead Organization] has created a survey with [list applicable partners] to assess food shelf needs around healthy food approaches in [your region]. We would like [peer agency] to participate in this survey.

If you agree to participate, you will receive a survey tool packet in the few weeks. There are two parts to this study:

1) A client survey (paper): This focuses on your clients' views and desires for food inventory, programming, etc. This will also collect demographic information like ethnicity, income and education level, and chronic diseases prevalent in their household.

2) A staff/volunteer/board survey (online): This focuses on the capacity of your food shelf to implement healthy food approaches and attempts to help you identify where the greatest perceived needs are related to healthy food.

As a member of this study you will receive:

- Detailed instructions on implementing the online survey with your staff, board and volunteers
- Client survey tool packet (included: copies of client surveys, return envelopes, and detailed instructions)
- Assistance as needed in surveying your clients and food shelf leadership
- A report of findings for your food shelf and the combined [regional] findings
- [Optional] An invitation to a workshop series on healthy food approaches using the Creating Healthy Food Environments in Food Shelves Toolkit developed by The Open Door.

What we ask today is that you decide who would be the best people to take this survey among your staff, volunteers, and board members. We would like to have at least 10 people from each food shelf respond to the online survey. When we send you the client survey packet there will be information on how to implement with clients.

Thank you for your partnership in this effort! We will follow up in the few weeks with the survey tools. If you have any questions about this process, please contact me at any time at [contact information].

Sincerely, [Lead Organization Contact]

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EMAIL TEMPLATE: Survey Instructions to participating food shelves (pre-implementation)

SUBJECT: Survey time is almost here! What you can do now

Dear [Participating Agency Contact],

We are gearing up to implement the [survey name] with [applicable partners] in [your region]. You should receive the Client Survey Packets in the mail the week of [insert date]. The packet will be addressed to you.

The client survey packets will include *detailed* instructions on implementing your survey. Below are just some general information that may help you get a head start on implementing the surveys at your food shelf.

The data collection period will be a two-week window from [date] – [date]. You will need to collect a minimum of 25 client respondents and 10 web survey respondents in order to receive your individualized food shelf report. The two portions are:

- 1. Client Survey (paper version)- attached to this email for reference only. This is for <u>returning</u> food shelf clients only.
- 2. A staff/volunteer/board survey (electronic version)- You will be sent the survey link in an email and then you will be in charge of forwarding this survey to your list of staff/volunteer/board members.

Although data collection won't begin until the week of [date], there are several things you can do now to prepare for implementing the surveys.

- 1. Assemble (in excel), a list of your most consistent volunteers, as well as staff and board members and include their first name, last name, email address in separate columns. Aim for at least 40 people on this list. These are the people you will send the web survey to. You may consider emailing them a heads-up email to let them know to look for the survey in their inboxes in the coming weeks.
- 2. Talk to your food shelf operations staff (if that is someone other than you) about implementing the Client Survey. In most food shelves, the Client Survey will be administered by volunteers so start developing a plan now of who and how you will approach clients about completing the survey. We recommend making the survey part of their check-in process.





EMAIL: Survey Instructions to participating food shelves (pre-implementation) SUBJECT: Survey time is almost here! What you can do now

3. **Consider an incentive for clients who will be asked to complete the Client Survey.** While it is extremely important that you do not require clients to complete the survey in order to receive their regular package of food, you may choose to provide an incentive for clients to complete the survey, and that incentive could be an additional food item. If you choose to offer an additional food item as an incentive, we recommend allowing clients to choose their item (maybe from a set of options) or choosing an item that is generally popular with clients. While it may be tempting to offer a fresh fruit or vegetable as the incentive because it relates to the theme of the survey, that strategy will bias the results by encouraging participation especially among clients whose families enjoy that fresh fruit or vegetable. For this reason, fresh fruits and vegetables may be included among a set of incentive options that clients may choose from, but they should not be the only incentive option.

[Research Analyst] will need to receive your completed Client Surveys by [date]. A preaddressed/postage paid return envelope will be included in your Survey Packet.

Thank you for your partnership! If you have any questions about participation in this survey, please contact me at any time at [contact information].

Sincerely,

[Lead Organization Contact]





The template below was created verbatim from the Client Survey Packet provided by Wilder Research to participating food shelves in Dakota County for the Healthy Food in Hunger Relief Survey.

COVER LETTER

[Date]

Dear [Participating Agency Contact],

Thank you for your willingness to help with the **Client Survey** for the [survey name]! This study aims to learn about the interest in and feasibility of implementing what we call a "healthy food approach" (a focus on increasing the availability of healthy foods, such as fresh fruits and vegetables) in food shelves in [region].

In appreciation of your food shelf's participation in this study, [Research Administrator] will provide you with an individualized summary of your clients' responses to this survey. In order to receive this summary, you must complete **the target of 25 completed Client Surveys and mail them back to us by [date]**. You may submit up to 100 surveys (provided in this packet).

These results for your individual food shelf will **not** be publicly available. However, [Lead Organization and Applicable Partner Agencies], will receive **de-identified** summary results for each food shelf in order to understand the unique combination of circumstances at each food shelf. If you have any questions or concerns about how data will be used or shared in this study, please contact [Lead Organization Contact].

In addition to your individual survey results, [Researcher] will produce a report combining the client survey results of all participating food shelves in [region]. As this is a public report, your individual food shelf's responses will not be identifiable and will be displayed only as part of the aggregate county-wide results.

The next page provides detailed instructions for administering the client survey at your food shelf. If you encounter any problems or questions, please do not hesitate to contact [Research Administrator].

Thank you!

[Research Adminsitrator]





The template below was created verbatim from the Client Survey Packet provided by Wilder Research to participating food shelves in Dakota County for the Healthy Food in Hunger Relief Survey.

Client Survey Guidelines

Instructions for food shelf staff

Please review the instructions on the next page, which should be shared with the staff or volunteers who work the check-in desk (or other client contact role where you expect the survey to be completed). Note the following highlights:

- The client survey is optional; clients should be clearly informed that they will receive their normal package of food even if they do not complete the survey.
- The client survey is confidential; completed surveys should go directly into the envelope labeled "completed surveys" and should not be read by food shelf staff or volunteers. (Small white envelopes are provided for clients who would like to seal their surveys.)
- Your food shelf may wish to provide an incentive to encourage clients to complete the survey. Incentives have been shown to be extremely effective in increasing response rates, and we encourage you to provide one. If you do, please consider the information below, and please note instructions about the incentive in the indicated space on the next page.

Incentive guidelines

While it is extremely important that you do not require clients to complete the survey in order to receive their regular package of food, you may choose to provide an incentive for clients to complete the survey, and that incentive could be an additional food item. If you choose to offer an additional food item as an incentive, we recommend allowing clients to choose their item (maybe from a set of options) or choosing an item that is generally popular with clients. While it may be tempting to offer a fresh fruit or vegetable as the incentive because it relates to the theme of the survey, that strategy will bias the results by encouraging participation especially among clients whose families enjoy that fresh fruit or vegetable. For this reason, fresh fruits and vegetables may be included among a set of incentive options that clients may choose from, but they should not be the only incentive option.





The template below was created verbatim from the Client Survey Packet provided by Wilder Research to participating food shelves in Dakota County for the Healthy Food in Hunger Relief Survey.

Submitting completed survey forms

Before you submit the completed surveys, please answer the questions on the cover sheet and enclose it in the box with your completed surveys. Please also include the refusal tracking sheet.

You may return the completed surveys to us by mail as soon as you have finished collecting them, but please put them in the mail no later than [date]. Please try to submit at least 25 surveys, or as many as 100 if you would like your survey results to represent a larger subset of your client population. Please simply place the completed surveys in the box in which the surveys arrived, seal the box, put the enclosed postage label over the existing one, and leave the box for your mail carrier to pick up with the rest of your outgoing mail. If you misplace the box or postage label, please contact us.





The template below was created verbatim from the Client Survey Packet provided by Wilder Research to participating food shelves in Dakota County for the Healthy Food in Hunger Relief Survey.

Instructions for client check-in staff and volunteers

Why are we doing a client survey? This survey will help us learn about client needs and preferences related to healthy food options in food shelves in [region].

Who should complete the survey? Any <u>returning</u> client who visits our food shelf during the data collection period [date] – [date]. Because the survey asks about the client's prior experience at the food shelf, new clients should not be asked to complete the survey. Please request only one survey per household.

When should clients complete the survey? You may ask clients to complete the survey at any point during their visit, though it may be most convenient for clients to complete the survey after checking in and before picking up their food, or during any wait time during their visit.

Do clients get anything for completing the survey? *Food shelf staff: please list instructions here for any incentive for clients who complete the survey.*

Do clients have to complete the survey? <u>No.</u> Clients are not required to complete the survey if they do not want to, and as it states in the script for the staff/volunteers who check clients in, clients should be allowed to receive their normal package of food regardless of whether they complete the survey, and they should be clearly told this <u>before</u> they are asked to decide about taking the survey.

What should I do if a client does not want to complete the survey? Please allow the client to proceed normally with their visit. In order to keep a record of the number of clients who refused to complete the survey, there is a survey completion tracking section on the next page. For each day, please provide the number of households who visited, the number of households that were asked to complete the survey (which should generally equal the number of households that visited), and the number of surveys completed.





The template below was created verbatim from the Client Survey Packet provided by Wilder Research to participating food shelves in Dakota County for the Healthy Food in Hunger Relief Survey.

Where should I put the completed surveys? The survey is confidential, so when you give the survey to the client, please also give them an envelope to seal their survey. When the client returns the survey (in the envelope), please put the completed surveys in the return envelope.





The template below was created verbatim from the Client Survey Packet provided by Wilder Research to participating food shelves in Dakota County for the Healthy Food in Hunger Relief Survey.

Script (for staff/volunteers to invite clients to complete the survey)

Would you be willing to fill out a short survey for us today? We're collecting input from our clients to learn what we're doing well and what we could improve to serve our clients better. You <u>do not have to</u> complete the survey, and you'll still get your food if you don't complete it, but we'd really appreciate your input. It should only take about 10 minutes.

(*If yes*) Great! The survey is confidential, which means no one at this organization will see your responses. The completed surveys will be sent to an outside organization to be analyzed. Here is an envelope where you can put your survey before you give it back to me.

(If no) Please proceed as usual with client's visit.

Survey Completion Tracking

Survey response rates (the percentage of people who complete the survey when asked) are an important indicator of how well the surveyed group represents the full population of food shelf clients. In addition, because this is a pilot study, the response rate could indicate whether the length and content of the survey are appropriate, allowing us to modify it (if needed) for use in other counties. Please fill out one row of the form below for each day to help us calculate the response rate.

Date	Number of households that visited	Number of households asked to complete survey	Number of surveys completed

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The template below was created verbatim from the Client Survey Packet provided by Wilder Research to participating food shelves in Dakota County for the Healthy Food in Hunger Relief Survey.

Survey Completion Tracking

	Number of	Number of households asked	Number of surveys
Date	households that visited	to complete survey	completed

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The template below was created verbatim from the Client Survey Packet provided by Wilder Research to participating food shelves in Dakota County for the Healthy Food in Hunger Relief Survey.

Client Survey Return Cover Sheet

Food shelf name: _____

Number of completed surveys enclosed:

Did clients receive any incentive (additional food item, for example) for completing the survey?

\square^1 Yes \rightarrow	b. What were clients given if they completed the survey?
□² No	

Please return the following to [Research Administrator] by [date] (postmark date):

- **Completed surveys**
- **G** Survey completion tracking sheet(s)
- **This cover sheet**

Steps to submit the completed surveys:

- 1. Place the completed surveys in the box in which the surveys arrived
- 2. Seal the box and put the enclosed postage label over the existing one
- 3. Leave the box for your mail carrier to pick up with the rest of your outgoing mail on or before [date].

If you misplace the box or postage label, please contact us.

[Research Administrator Contact Information]

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Healthy Food in Hunger Relief	1	Wilder Research
Client Survey		April 2015

Client Survey

Your response to this survey will help us to understand our clients' needs and preferences so we can improve food programs at this food shelf and others. The survey will take about 10 minutes to complete. Your answers will not be attached to your name and you will not be identified to anyone. Everyone's answers, with no names, will be kept by the Dakota County Public Health department to help them improve programs. You do not have to fill out this survey if you do not want to. You will still receive food even if you do not complete the survey.

- 1. About how much of your food comes from this food shelf each month?
 - \square^1 Less than half
 - \square^2 About half
 - \square^3 More than half
 - \square^4 Nearly all
- 2. Do you also get food from other food shelves or community meal programs?

□1 Yes →	b.	How mu	ch of your food comes from these other sources ?
		1	Less than half
		2	About half
		3	More than half
		4	Nearly all

2	No, I do not get food fro	om other food shelves	or community meal	programs
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3. Please tell us how strongly you agree or disagree with the following statements.

	Strongly agree	Agree	Neutral/ Not sure	Disagree	Strongly disagree
 a. I believe that clients of all backgrounds are treated equally at this food shelf 	1	2	3	4	5
b. I believe that my privacy is respected by food shelf staff and volunteers		2	3	4	5
c. I believe that I am treated with respect at this food shelf.	1	2	3	4	5
d. I feel welcome at this food shelf	1	2	3	4	5
e. I would recommend this food shelf to others	1	2	3	1	2

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2

Healthy	Food	in	Hunger	Relief
Client Su	irvey			

4. Please tell us how satisfied are you with the following aspects of the food and programs available to you **at this food shelf**?

How satisfied are you with	Very satisfied	Somewhat satisfied	Not satisfied
a. the number of different kinds of food?	1	2	3
b. the quality of food?	1	2	3
c. the availability of foods that are a good fit for your culture and religion?	1	2	3
d. the availability of foods that fit your dietary needs?	1	2	3
e. the availability of healthy foods at the food shelf?	1	2	3
f. the availability of programs (like garden programs or cooking classes) that emphasize healthy food?	1	2	3

5. Please tell us how much you agree or disagree with the following statements.

		Strongly agree	Agree	Neutral/ Not sure	Disagree	Strongly disagree
a.	I would like to provide more fresh fruits and vegetables for my family if I could	1	2	3	1	2
b.	Someone in my household knows how to prepare many fruits and vegetables	1	2	3	1	2
C.	My family is too busy to use fruits and vegetables in most of our meals	1	2	3	1	2
d.	There is a grocery store near my house that sells a variety of fruits and vegetables	1	2	3	1	2
e.	My family generally likes to eat fruits and vegetables	1	2	3	1	2
f.	It is hard for me to get fresh fruits and vegetables for my family	1	2	3	1	2
g.	My family can't afford fresh fruits and vegetables	1	2	3	1	2





Healthy Food in Hunger Relief	3	Wilder Research
Client Survey		April 2015

6. If you could change the selection of foods available at this food shelf, what would you change?

Wo	ould you change the selection of:	Have more available	Have less available	Would not change
a.	Proteins (meat, fish, beans)	1	2	3
b.	Fresh fruits and vegetables	1	2	3
C.	Dairy (milk, butter, yogurt)	1	2	3
d.	Eggs	1	2	3
e.	Whole grains (brown rice, wheat bread, etc.)	1	2	3
f.	Pastries (donuts/cakes/cookies)	1	2	3
g.	Ramen/canned pasta	1	2	3
h.	Candy/soda	1	2	3
i.	Chips/other salty bagged snacks	1	2	3
j.	White bread (sliced, hot dog buns, hamburger buns)	1	2	3
k.	Other (which item?)	1	2	3

Remember, your answers to these questions do not affect your eligibility to receive food today.

- 7. Do you receive SNAP benefits (food stamps)?
 - \square^1 Yes
 - \square^2 No, I am not eligible
 - \square^3 No, I am eligible, but I don't get them
 - \square^4 I do not know if I am eligible
- 8. Do you or does someone in your household receive WIC benefits?
 - \square^1 Yes
 - \square^2 No, I am not eligible
 - \square^3 No, I am eligible, but I don't get them
 - \square^4 I do not know if I am eligible

- 9. What is the <u>most important</u> reason for your use of the food shelf at this time? (CHECK ONE)
 - \Box^1 Ongoing need for food/insufficient income
 - \square^2 Temporary job loss
 - \square^3 Unexpected household expense
 - \square^4 Permanently disabled
 - \square^5 Temporary health problem
 - \square^6 Experienced a disaster
 - \Box^7 Other (Please specify):







Healthy Food in Hunger Relief Client Survey 4

Wilder Research April 2015

These last questions are to make sure we have asked a wide range of people to tell us what they think. As with your other responses, they will be kept private. You can skip any question that you do not want to answer.

- 10. In what year were you born? _____ (Year)
- 11. Were you born in the United States?
 - \square^1 Yes

□² No → 11a. In what country were you born?

- 12. What is your gender?
 - \square^1 Male
 - \square^2 Female
 - \square^3 Other
- 13. Are you of Hispanic or Latino origin?
 - \square^1 Yes
 - \square^2 No
- 14. Which of the following describes your race? (CHECK ALL THAT APPLY)
 - \square^1 American Indian or Alaska Native
 - \square^2 Black, African or African American
 - \square^3 Asian or Pacific Islander
 - \square^4 White
 - \square^5 Other (Please specify: _____





Healthy Food in Hunger Relief Client Survey 5

Wilder Research April 2015

15. What is the highest level of education you have completed? (CHECK ONE)

- \Box^1 Did not complete high school
- \square^2 High school diploma/ GED
- \square^3 Trade/Vocational school
- \square^4 Some college
- \square^5 Associate degree
- \square^6 Bachelor's degree
- \Box^7 Graduate/professional degree
- 16. Including yourself, how many adults (age 18 or older) live in your household?
 - ____ Number of adults in household
- 17. How many **children** (age 17 or younger) live in your household?
 - ____ Number of children in household
- 18. What language do you speak most at home?
 - \square^1 English
 - \square^2 Spanish
 - \square^3 Hmong
 - \square^4 Somali
 - \square^5 Vietnamese
 - \square^6 Russian
 - □⁷ Arabic
 - \square^8 Amharic
 - □⁹ Other language (Please specify: _____





Healthy Food in Hunger Relief Client Survey 6

Wilder Research April 2015

- 19. What was your household's annual household income in 2014 from all earners and all sources, before taxes?
 - \Box^1 Under \$10,000
 - □² \$10,000 \$19,999
 - □³ \$20,000 \$29,999
 - **□**⁴ \$30,000 \$44,999
 - □⁵ \$45,000 \$59,999
 - \square^6 \$60,000 or more
 - \square^7 Prefer not to answer

This last question asks about common health concerns that you or a member of your household may have. Knowing more about the health concerns of families who use this food shelf will help guide our selection of foods.

20. Has a doctor or other health care professional ever said that you or someone in your household:

	Yes	No
a. should lose weight?	1	2
b. has hypertension, also called high blood pressure?	1	2
c. has high cholesterol?	1	2
d. has heart disease (or cardiovascular disease)?	1	2
e. has diabetes or sugar disease, including borderline or pre-diabetes?	1	2





EMAIL TEMPLATE: Web Survey Email Instructions

SUBJECT: Link to Web Survey and Instructions

Dear [Participating Agency Contact],

Thank you for your willingness to help with the **online survey of staff, volunteers, and board members** for the [survey name]!

Recently, you received a message from [Lead Organization Contact] at [Lead Organization] that briefly described the two components of this study. The first component is a client survey, which you should have received in the mail. The second component is a survey of staff, volunteers, and board members, which is linked below. Please complete this survey and share it with your staff, volunteers, and board members.

A few important notes about the online survey:

- The survey should take about 15 minutes to complete. (It may take a bit longer for those who handle food ordering at your organization.)
- Everyone at your organization can use the same link to complete the survey. You can copy the link and paste it into your own message to your contact list, or you can use the sample message at the end of this email.
- Unfortunately, there is no way to save a partially completed survey and come back later to finish it. Please plan to complete the full survey in one sitting, or leave your browser open to come back to it if you get interrupted.
- Please complete the survey by [time] on [day of week, date].

You can find the online survey [link here]. If that link doesn't work, try copying and pasting the following into your web browser of choice:

[long web address]

If you have any questions or encounter any problems with the web survey, please feel free to email me at [Research Administrator Email].

Thank you for your time! We appreciate your insights and help in learning more about this topic.

Sincerely,

[Research Administrator]

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EMAIL TEMPLATE: Web Survey Email Invitation to Board, Staff and Volunteers

Here is a sample message to send to the contact list you should have already compiled in Excel. Please feel free to use this in its entirety, modify it as you see fit, or draft your message from scratch if you prefer. Please include the bulleted notes in your message.

SUBJECT: Healthy Food in Hunger Relief: PLEASE PARTICIPATE in this online survey

Dear staff, volunteers, and board members,

Our organization is participating in the [survey name] study, which aims to learn about the interest in and feasibility of implementing a healthy food approach in food shelves in [region]. As a part of this study, we are implementing both a client survey and a survey of food shelf staff, volunteers, and board members, to collect a range of perspectives about issues related to healthy foods in food shelves.

We would greatly appreciate your help in completing this online survey, which will help our food shelf leadership to better understand the perspectives of our staff, volunteers, and board on these issues.

You can find the online survey [here]. If that link doesn't work, try copying and pasting the following into your web browser of choice:

[long web address]

A few important notes about the online survey:

- The survey should take about 5-15 minutes to complete. (It may take a bit longer for those who handle food ordering.)
- Unfortunately, there is no way to save a partially completed survey and come back later to finish it. Please plan to complete the full survey in one sitting, or leave your browser open to come back to it if you get interrupted.
- Please complete the survey by [time] on [day of week, date].

If you have any questions or encounter any problems with the web survey, please contact me or [Research Administrator] at [Research Administrator Contact Info].

Sincerely,

(Your Name)





Healthy Food in Hunger Relief1Web Survey for Food Shelf Staff, Volunteers, and Board

Web Survey for Food Shelf Staff, Volunteers, and Board

This study is being conducted by Wilder Research on behalf of Dakota County Public Health (DCPH). It aims to learn about the interest in and feasibility of implementing a "healthy food approach" (a focus on increasing the availability of fresh fruits and vegetables for food shelf clients) in food shelves in Dakota County. This survey addresses a wide variety of questions about your food shelf and your role in it. With your help in completing this survey, DCPH hopes to improve their understanding of food shelf structures and policies, along with the interest in and barriers to a healthy/fresh foods approach.

Your responses to this survey will be combined by Wilder Research with the responses of staff, volunteers, and Board members at this food shelf and the others in Dakota County to produce a county-wide report. This report will not include any information that can identify you personally, and Wilder will not use direct quotes unless you give permission to do so. Your food shelf will also be given a site-specific summary of the responses from staff, volunteers, and Board members at your food shelf.

In addition to the county-wide report, in order to help DCPH to understand the unique combination of circumstances at each food shelf, DCPH (as well as their contractor, The Open Door) will receive deidentified summary results for each food shelf. For example, they would see that at Food Shelf A, five respondents strongly agreed on question 2, but only three strongly agreed on question 3. The Open Door will **not** know the name of Food Shelf A. In this way, DCPH and The Open Door can better understand the ways that they can be most helpful, without needing to know which set of results belongs to which food shelf.

You will not be asked for your name at any point in the survey, only the name of your food shelf and your role(s) there. While The Open Door will only receive de-identified information for each food shelf, DCPH will receive the full survey dataset, including all individual responses and the food shelf name. This data set will be kept by DCPH, and may be shared with the Minnesota Department of Health, solely for the purposes of program improvement, and no data or reports will be released by them that would identify any individual respondent or food shelf.

This survey should take approximately 15 minutes.

A. What is the name of the food shelf where you work or volunteer? (If you work, volunteer, or serve on the board for more than one food shelf, please enter the name of the food shelf that was listed in your invitation email.)

Throughout this survey, please think only of the food shelf listed above and not of any other food shelves that you may be involved with.

Healthy Food in Hunger Relief

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Web Survey for Food Shelf Staff, Volunteers, and Board

May 2015

First, we have a few questions about your role at <<site name>>.

1. In your role at <<site name>>, do your duties regularly include any of the following?

Do	you	Yes	No
a.	Order food from food bank(s)	1	\square^2
b.	Perform other food procurement duties (coordinating donations, organizing food drives, etc.)		D ²
C.	Recruit, schedule, or organize volunteers		D ²
d.	Stock food		\square^2
e.	Oversee food stocking		\square^2

- 2. How long have you been involved with this food shelf (as a volunteer, staff member, board member, or any other role with regular, scheduled involvement)?
 - \square^1 Less than 6 months
 - \square^2 6 11 months
 - \square^3 At least 1 year but less than 3 years
 - \square^4 At least 3 years but less than 6 years
 - \square^5 At least 6 years but less than 10 years
 - \square^6 At least 10 years but less than 15 years
 - \square^7 15 years or longer

3. Which of the following best describes your current role in <<site name>>? (Select one. If more than one of these options fits your current role, please choose the one closest to the top of the list.)

- \square^1 Paid staff (full-time)
- \square^2 Paid staff (part-time)
- \square^3 Board member
- \square^4 Volunteer
- □⁵ Other (please describe
- 4. (For volunteers and board) Why do you choose to work with this food shelf as a volunteer or board member?

Healthy Food in Hunger Relief

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Wilder Research





Web Survey for Food Shelf Staff, Volunteers, and Board

May 2015

STAFFING (ask staff and anyone who has responsibilities a, b, c, or e in question 1)

These next questions address current staffing and the role of staff and volunteers in your food shelf.

How many paid staff members are employed by this food shelf? Please separately identify the 5. number who work part-time (<40 hours per week) and full-time (40+ hours per week) part-time full-time

Don't know

6. At this food shelf, are the following duties typically fulfilled by a paid staff member or a volunteer?

Г

				- 4	N/A	Don't know
		Paid staff	Volunteer	Both		
a.	Manage a food inventory budget	1	1 ²	1 ³	-6	
b.	Manage the food inventory (coordinating food procurement, retail rescue)			D ³	-6	
c.	Coordinate or manage food drives		1 ²	1 ³	— -6	∎®
d.	Manage volunteers (recruiting, training, scheduling, retaining)			D ³	-6	□8
e.	Supervise volunteers on a shift		1 ²	3	-6	∎*
f.	Supervise daily food shelf operations		1 ²		-6	∎8

7. Please tell us how much you agree or disagree with the following statements.

		Strongly agree	Agree	Neutral/ Not sure	Disagree	Strongly disagree	Rather not answer
a.	This food shelf has enough staff and volunteers to effectively serve our current clients			D ³		5	7
b.	Finding or recruiting quality volunteers is a challenge for us	1	D ²	□3	1 4	□5	7
C.	Retaining quality volunteers is a challenge for us	1	D ²	□3	1 4	□5	7
d.	Staffing/volunteer limitations prevent us from expanding the number of clients we serve	1	D ²	□3	1 ⁴	5	7
e.	Our team of staff and volunteers reflects the demographics of our clients	1	1 ²	□3	1 4	5	7





Healthy Food in Hunger Relief4Web Survey for Food Shelf Staff, Volunteers, and Board

PROCUREMENT (this section is only for respondents who handle ordering or other procurement)

Next, we have a few questions about the sources of food received by this food shelf during the last year.

- 8. Are you responsible for food ordering or other procurement for your food shelf?
 - \square^1 Yes (Continue to 9)
 - \square^2 No (Skip to 13)

9. In the last year (since June 2014), did you receive food from the following sources through either donation or purchase?

		Donation	Purchase	Both	Neither	Don't know
a.	The Food Group (formerly EFN)			1 ³		
b.	Second Harvest Heartland			1 ³	\square^4	
C.	Retail rescue (direct with grocery stores)			1 ³	\square^4	
d.	Retail rescue via Second Harvest Heartland			1 ³	\square^4	
e.	Small local growers (less than 100 lbs per delivery)			1 ³	\square^4	
f.	Large local growers (100 lbs or more per delivery)	1	1 ²	3		□ ⁵
g.	Local food drives	1	1 ²	3		□ ⁵
h.	Shared food with other food shelves		1 ²	3		□ ⁵
i.	Other (specify)	1	1 ²	1 3		□ ⁵

10. How often do you order the following foods from food banks? (randomize order of items)

		At least once a week	1-3 times per month	1-2 times per quarter	1-3 times per year	Less than once per year	We do not order this item at all	Don't know
a.	Fresh fruits and vegetables		D ²	□ ³		□5	— 6	□8
b.	Canned fruits and vegetables		1 ²	□3	4	□ ⁵	1 6	□8
C.	Frozen fruits and vegetables		1 ²	□3	4	5	6	D ⁸
d.	Milk		1 ²	□3	\square^4	□ ⁵	1 6	
e.	Butter/yogurt/ cheese			3		5	1 6	

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Healthy Food in Hunger Relief5Web Survey for Food Shelf Staff, Volunteers, and Board

Wilder Research May 2015

10. How often do you order the following foods from food banks? (randomize order of items)

		At least once a week	1-3 times per month	1-2 times per quarter	1-3 times per year	Less than once per year	We do not order this item at all	Don't know
f.	Eggs		1 ²	3		□ ⁵	6	∎8
g.	Meat/fish – fresh/frozen			D ³	\square^4	□⁵	1 6	∎*
h.	Meat/fish - canned			□3	\square^4	□ ⁵	1 6	
i.	Canned pasta/Ramen noodles					□5		
j.	Canned soup - condensed		D ²	□3		5	1 6	□8
k.	Canned soup - hearty/chunky		1 ²	□3		5	1 6	∎8
I.	Boxed dinners (skillet dinners, macaroni and cheese)		 ²	 ³		□ ⁵	— 6	□ ⁸
m.	Chips			□3		□⁵	1 6	∎8
n.	Cookies		1 ²	□3		□ ⁵	1 6	∎8
0.	Bread			□3	\square^4	□⁵		∎®
p.	Bakery sweets (cakes, pies, donuts)			 ³		5	1 6	∎®
q.	Peanut butter			□3		□⁵	1 6	∎8
r.	Dried beans/rice			□3	\square^4	□⁵	1 6	∎8
s.	Pasta		1 ²	□3	\square^4	□ ⁵	1 6	∎8
t.	Baking goods (flour, sugar, oil)		D ²	□3	1 ⁴	□ ⁵	6	∎®





Healthy Food in Hunger Relief6Web Survey for Food Shelf Staff, Volunteers, and Board

11. If you could change the selection of foods available from our local food bank(s), how would you change the availability of each of the following items? (*randomize order of items*)

		I would <i>not</i> change the availability of this item	I would like a larger selection of this item	I would like a smaller selection of this item	l would rather not have this item available at all	Don't know
a.	Fresh fruits and vegetables		2 ²			1 8
b.	Canned fruits and vegetables		 ²	□ ³	\square^4	
C.	Milk	1	1 ²	□3	□4	∎8
d.	Butter/yogurt/ cheese	1	1 ²	□3	1 4	∎8
e.	Eggs	1	1 ²	□3	1 4	∎8
f.	Meat/fish	1	1 ²	□3	1 4	∎8
g.	Canned pasta/Ramen noodles		 ²			
h.	Canned soup - condensed		D ²	3		1 8
i.	Canned soup - hearty/chunky				\square^4	
j.	Boxed dinners (skillet dinners, macaroni and cheese)			□ ³		D ⁸
k.	Chips	1	2 ²	□3	4	1 8
Ι.	Cookies	1	2	□3		1 8
m.	Bread	1	2 ²	□3	4	1 8
n.	Bakery sweets (cakes, pies, donuts)				1 ⁴	1 8
о.	Peanut butter	1	2	□3	4	1 8
р.	Dried beans/rice	1	1 ²	□3	□4	1 8
q.	Pasta	1	1 ²	□3	□4	1 8
r.	Baking goods (flour, sugar, oil)		 ²		□4	∎8





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Web Survey for Food Shelf Staff, Volun	teers, and Board	May 2015

12. Please tell us how much you agree or disagree with the following statements.

	Strongly agree	Agree	Neutral/ Not sure	Disagree	Strongly disagree	Rather not answer
a. Since I started ordering food for this food shelf, I have made changes in our food orders to offer more healthy/fresh foods			□3		□5	7
b. If I wanted to, I could make changes in our food orders to offer more healthy/fresh foods		D ²	 ³	□4	□ ⁵	





Healthy Food in Hunger Relief8Web Survey for Food Shelf Staff, Volunteers, and Board

DISTRIBUTION (Ask all)

Now we'd like to learn a bit more about the system you use to distribute food to clients.

13. Which of the following best describes your food shelf's current process of distributing food to clients? (If the approach differs for particular groups of clients or particular items, please choose the approach that applies to most clients and most items.) Note to reviewers: don't get hung up on the formatting of this item, because the web survey will be programmed to make the follow-up questions only appear where needed. Please do consider, though, whether this seems to offer a comprehensive and mutually exclusive set of response options. Is there a better way to represent the options?

□ ¹ Clients receive pre-assembled boxes/bags of food prepared with no client input →	b.	 Which of the following best describes your system for determining the contents of the pre-assembled boxes/bags of food? (Select one.) ¹ Predetermined list of items, by category (e.g. 1 soup, 1 cereal, 3 vegetables, 1 skillet dinner, etc.) ² Predetermined list of items, by weight (e.g., 5 lbs produce, 15 lbs cans, etc.) ³ No defined method, decided as bags are packed 	
		Other system (please describe)	
□ ² Clients receive pre-assembled boxes/bags of food, customized to fit the client's preferences \rightarrow	b.	Which of the following food preferences do you use to customize bags? (Check all that apply.)	
		 Allow clients to choose individual items from list Low sodium Low sugar Low fat Culturally specific foods Other (please describe) 	





Healthy Food in Hunger Relief9Web Survey for Food Shelf Staff, Volunteers, and Board

□ ³	Clients choose their own food →	b.	Do you use any of the following structures to guide or limit the items that clients may choose? (Check all that apply.) 1 Shopping list 2 Weight or volume limit 3 Total item limit 4 Item limit per category 5 Other limit (please describe)
			□ ⁶ No limits
	Other (Please describe)
	■ ⁸ Don't know		

14. In an ideal world, if you could easily and seamlessly change your food shelf's process of distributing food to clients, would you change it?

 □1 Yes, I would change it →
 b. To which of the following models would you change your process of distributing food to clients? (Select one.)

 □1 Clients choose their own food
 □2 Clients receive pre-assembled boxes/bags of food prepared with no client input

 □3 Clients receive pre-assembled boxes/bags of food, customized to fit the client's preferences

 □4 Other (please describe______)

D⁸ Don't know





Healthy Food in Hunger Relief	10	Wilder Research
Web Survey for Food Shelf Staff, Volunt	teers, and Board	May 2015

15. In the next year, do you expect any major changes in your food shelf's process of distributing food to clients?

\square^1 Yes, I expect the process to change \Rightarrow	mod	r these changes have taken effect, which of the following lels will best describe your process of distributing food to
	clier	nts? (Select one.)
		Clients choose their own food
		Clients receive pre-assembled boxes/bags of food prepared with no client input
	1 3	Clients receive pre-assembled boxes/bags of food,
		customized to fit the client's preferences
		Other (please describe
)
— 2		
\square^2 No, I do not expect any major	changes	
Don't know		

16. From your perspective, what are the most significant barriers to changing your food shelf's process of distributing food to clients?

	There are no significant barriers
--	-----------------------------------





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SERVING DIVERSE CLIENT POPULATIONS (Staff and volunteers only)

17. Are culturally specific foods usually available at this food shelf?

Yes 🗲	b.	For which groups?
		□ ¹ Hispanic/Latino
		D ² Native American/American Indian
		□ ³ Somali/East African
		Southeast Asian/Pacific Islander
		□ ⁵ Russian
		□ ⁶ West African
		\square^7 Other (which group(s)?)
	c.	Are there other types of culturally specific foods that you wish you could provide for
	clie	nts?
		□ ¹ Yes (Which ones? <i>Provide list</i>)
		\square^2 No

\square^2 No, but I think we should have culturally specific foods available \rightarrow	b.	For which groups?
		 ¹ Hispanic/Latino ² Native American/American Indian ³ Somali/East African ⁴ Southeast Asian/Pacific Islander ⁵ Russian ⁶ West African ⁷ Other (which group(s)?)
\square^3 No, and I don't think we need	them	1

□° No, and I don't think □⁸ Don't know

18. (Skip if respondent selects item 3 or "don't know" above.) What (if anything) makes it difficult to provide culturally specific foods for clients?

 \square^1 There are no challenges/barriers





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Web Survey for Food Shelf Staff, Volun	teers, and Board	May 2015

19. To your knowledge, which of the following characteristics of clients are tracked at this food shelf?

Do	you track	Yes	No	Don't Know
a.	Age (or age group, including youth/adult/senior)		1 ²	□8
b.	Race and/or ethnicity		1 ²	□8
c.	Income (or income range/group)		\square^2	
d. Primary language (or language spoken at home)		1	1 ²	□ ⁸
e.	Current housing situation		1 ²	□8
f.	Level of education	1	1 ²	□ ⁸
g.	Other (please describe)		\square^2	

20. Does this food shelf have informational materials about the food shelf in any languages other than English?

□ ¹ Yes →	b. In which languages?
	□ ¹ Spanish
	□ ² Hmong
	□ ³ Somali
	□ ⁴ Russian
	☐ ⁵ Amharic
	□ ⁶ Arabic
	□ ⁷ Vietnamese
	□ ⁸ Cambodian (Khmer)
	■ ⁸ Laotian
	Other (which language(s)?)
	c. Are there other languages in which you would like to make informational materials
	available?
	\square^1 Yes (Which ones? <i>Provide list</i>)
	\square^2 No





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\square^2 No, but I think we should \rightarrow	b.	In which languages?
		□ ¹ Spanish
		\square^2 Hmong
		□ ³ Somali
		□ ⁴ Russian
		□ ⁵ Amharic
		□ ⁶ Arabic
		\square^7 Vietnamese
		Cambodian (Khmer)
		□ ⁸ Laotian
		\square^{10} Other (which language(s)?)
\square^3 No and I don't think we need	L	

- \square_{1}^{3} No, and I don't think we need to
- **D**⁸ Don't know





Healthy Food in Hunger Relief14Web Survey for Food Shelf Staff, Volunteers, and Board

21. Does this food shelf have staff or volunteers who speak languages other than English?

□ ¹ Yes →	b.	In which languages?
		□ ¹ Spanish
		□ ² Hmong
		□ ⁴ Russian
		□ ⁵ Amharic
		□ ⁶ Arabic
		\square^7 Vietnamese
		Cambodian (Khmer)
		□ ⁸ Laotian
		Other (which language(s)?)
	с.	Are there other languages that you wish were spoken by a staff member or volunteer?
		\square^1 Yes (Which ones? <i>Provide list</i>)
		\square^2 No

\square^2	No, but I think we should 🗲	b.	Which languages?
			□ ² Hmong
			□ ³ Somali
			□ ⁴ Russian
			□ ⁵ Amharic
			□ ⁶ Arabic
			□ ⁷ Vietnamese
			□ ⁸ Cambodian (Khmer)
			\square^{10} Other (which language(s)?)

 \square^3 No, and I don't think we need to

□⁸ Don't know





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Wilder Research May 2015

22. If a new client walks into this food shelf by herself and speaks no English (though she does speak one of the other common languages in your area), could she navigate your enrollment process and services?

¹ Definitely
² Probably
³ It depends (on what?______)
⁴ Probably not
⁵ Definitely not
⁶ N/A - the area served by this food shelf has very few residents who do not speak English
⁸ Don't know

23. Does this food shelf have a client advisory board that oversees or helps to guide the food shelf's programs and/or policies?

 \square^1 Yes

b.	Would you like there to be a client advisory board at this food shelf?
	 □¹ Yes □² No □⁸ Don't know

24. Does this food shelf provide any other opportunities for clients to guide the food shelf's programs and/or policies?

□ ¹ Yes →	b.	Please briefly describe these opportunities.
\square^2 No		

D⁸ Don't know





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Web Survey for Food Shelf Staff, Volunt	teers, and Board	May 2015

FOOD STORAGE CAPACITY

The next couple of questions are about this food shelf's capacity to receive, store, and distribute foods.

- 25. Does this food shelf currently have enough cooled, refrigerated, and frozen capacity to **receive and store** perishable foods?
- \square^1 Yes \square^2 No What kind of space do you need more of? b. → b1 Do you need more refrigerated/cooled storage space ? \square^1 Yes \square^2 No **D**⁸ Don't Know b2 Do you need more frozen storage space? \square^8 Don't Know \square^1 Yes \square^2 No b3 Do you need more of some other kind of space to receive and store perishable items? \square^1 Yes \square^2 No **D**⁸ Don't Know (Please describe

26. Does this food shelf currently have enough cooled, refrigerated, and frozen capacity to **display and distribute** perishable foods?

	Yes		
\square^2	No	b.	What kind of space do you need more of?
			b1 Do you need more refrigerated/cooled storage space ? □ 1 Yes □ 2 No □ 8 Don't Know ?
			b2 Do you need more frozen storage space? □ ¹ Yes □ ² No □ ⁸ Don't Know
			b3 Do you need more of some other kind of space to display and distributer perishable items?
			\square^1 Yes \square^2 No \square^8 Don't Know (Please describe)





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27. Do you have any of the following **building-related barriers** to acquiring more cooled, refrigerated, or frozen spaces?

Do	you track	This is a barrier	This is NOT a barrier	Don't Know
a.	Lack of space in the building		1 ²	
b.	Need for electrical work/lack of electrical capacity			
c.	Increased maintenance or utility cost		1 ²	
d.	Other (please describe)		1 ²	1 8

28. Please tell us how much you agree or disagree with the following statements.

	Strongly agree	Agree	Neutral/ Not sure	Disagree	Strongly disagree	Rather not answer
a. We frequently have to throw out food or turn away donations due to a lack of cooled, refrigerated, or frozen storage space.				1 4	5	7
b. We would like to serve more clients than we do right now.		 ²	1 3	□4	□5	7
c. We would be able to serve more clients if we had a larger space.		 ²	□3	□4	□5	7
d. We would be able to serve more clients if we had more cooled, refrigerated, or frozen space.				1 4	□ ⁵	7
 We could distribute a more nutritious selection of foods if we had more cooled, refrigerated, or frozen space. 	1	D ²	□3	4	□ ⁵	7
f. We could distribute more produce if we had more counter and/or shelf space to display non-refrigerated fruits and vegetables		D ²		1 4	□ ⁵	7





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HEALTHY/FRESH FOODS

This next set of questions asks about the current policies, practices, and interests related to a "healthy/fresh foods approach" at your food shelf. For purpose of the questions below, we'll define a "healthy/fresh food approach" as a set of policies and/or practices that prioritize ordering and distributing nutritious and fresh foods.

29. If you had to choose, which of these is your higher priority when providing food support to clients?

- \square^1 Volume of food
- \square^2 Nutritional quality of food

30. Below are several healthy food practices used by some food shelves. Does your food shelf currently practice (or have plans to practice) any of the following healthy food approaches? (If your food shelf is currently in the process of developing one of these practices, please select, "We do not currently do this but want to do this in the future.")

L

L

L

	We currently do this	We do not currently do this but want to do this in the future	We do not do this and have no plans to do this in the future	Don't know
a. Purchase CSA shares for food shelf inventory		\square^2		
b. Purchase bulk produce from a farmers market or local farmer at wholesale cost			□3	
c. Buy healthier versions of a category of food (e.g., popcorn or whole grain crackers instead of potato chips)	1		□3	1 8
d. Glean seconds from local farms/farmers markets			□3	□ ⁸
e. Ask donors to sponsor CSA shares for your food shelf or match sponsors with specific food shelf clients/families	1		□3	□8
f. Collect donations from community and backyard gardeners (Plant an Extra Row, Giving Gardens)			□3	
g. Set up an onsite garden and engage food shelf staff and volunteers in growing produce for the food shelf				
h. Set up garden plots where food shelf clients grow food for themselves			□3	
i. Rescue fresh food from retail stores that can no longer be sold (retail rescue)			□3	□8
j. Partner with local organizations, schools, businesses, and places of worship to host a healthy food drive or targeted food drives for specific items (e.g., spices, peanut butter, rice and beans)		 ²	3	1 8

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	We currently do this	We do not currently do this but want to do this in the future	We do not do this and have no plans to do this in the future	Don't know
k. Have a teaching kitchen at the food shelf where clients can prep and make meals or watch demonstrations			3	8
I. Provide recipe cards or cooking preparation/instructions for unfamiliar foods			□3	8
m. Encourage volunteers and staff to guide clients in healthy food choices		1 ²	□3	8
n. Use a visual cue system to promote healthy choices (e.g., 1, 2, 3 stars or Go, Slow, Whoa rating system)				8
o. Have extra produce distribution days (in addition to regular distributions)		 ²	□3	8
p. Place colorful, easy to read signage on shelves and throughout the food shelf to highlight healthy food options (e.g., "Choose Me, I'm Healthy")		D ²		8
q. Put healthy options first and at eye level				8
r. Incorporate "healthy" language and imagery in all organization communication and branding				8
s. Educate donors on the need for healthy foods for food shelf clients and how it impacts their health				8
t. Conduct surveys of clients to identify what they want and share findings with staff, donors, and volunteers		 ²		8
u. Use item limits to allow clients to take home only a certain number of unhealthy items		 ²		8
v. Eliminate one or more unhealthy items from food inventory		 ²	□3	8





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31. Does this food shelf have a specific policy or set of policies that define a healthy/fresh food approach (that is, does this food shelf have any policies related to the nutritional quality of food that is ordered or distributed by this food shelf)?

□1 Yes →	b.	Please briefly describe what your policy covers (incoming donations, food shelf inventory, staff and volunteer events, etc.).

□² No

 \square^8 Don't know

32. Please tell us how much you agree or disagree with the following statements. (*Break this series into multiple screens.*)

	Strongly agree	Agree	Neutral/ Not sure	Disagree	Strongly disagree	Rather not answer
 a. IF YES above: I support this food shelf's healthy/fresh food approach. 			D ³			
 b. IF NO above: I wish this food shelf had a healthy/fresh food approach 			□3		□ ⁵	
 c. IF NO above: It would be difficult to implement a healthy/fresh food approach at this food shelf 	1	D ²	□3		□5	7
d. I am satisfied with the nutritional quality of the food we offer to our clients.	1		 ³		5	7
e. I believe our clients are satisfied with the nutritional quality of the food available to them.					5	
 f. Our clients typically do not want fresh fruits and vegetables 	1	D ²	 ³	□4	D ⁵	7
g. Healthy/fresh foods are too expensive to prioritize in our limited budget	1	D ²	□3	□4	□ ⁵	7





Healthy Food in Hunger Relief21Wilder ResearchWeb Survey for Food Shelf Staff, Volunteers, and BoardMay 2015

32. Please tell us how much you agree or disagree with the following statements. (*Break this series into multiple screens.*)

	Strongly agree	Agree	Neutral/ Not sure	Disagree	Strongly disagree	Rather not answer
 h. The local community around this food shelf is generally supportive of a healthy/fresh food approach at this food shelf 	1	 ²	3	1 4	D ⁵	7
i. The Board of this food shelf is generally supportive of a healthy/fresh food approach at this food shelf		D ²	1 3	□4	□ ⁵	7
j. Our staff and volunteers are generally supportive of a healthy/fresh food approach at this food shelf			1 3	□4	□ ⁵	1 7
k. I play a large role in shaping the overarching goals of this food shelf		D ²	□3		□ ⁵	7
I. I have a good deal of influence the day-to-day operations of this food shelf		1 ²	□3	1 4	1 5	7

32m. Thinking about all of the issues covered in this survey and any others that you can think of, what are **currently** the one or two most significant barriers to implementing a healthy/fresh food approach at this food shelf? (*Require response to this question.*)

 \square^1 There are currently no challenges/barriers

33. In reporting the results of a survey like this one, we often find that the results are best illustrated using direct quotes from the open-ended responses. Please select an option below to tell us how you would prefer that we use your open-ended responses. Note that we will never include your name with the quote, and we only include the name of your food shelf if you select the first option below.

- \square^1 You may use direct quotes of my responses and **include** the name of my food shelf
- \square^2 You may use direct quotes of my responses but **do not include** the name of my food shelf
- \square^3 Please **do not use** any direct quotes of my responses





Healthy Food in Hunger Relief22Web Survey for Food Shelf Staff, Volunteers, and Board

Wilder Research May 2015

34. Our goal was to capture the interest in and barriers to implementing a healthy/fresh foods approach in food shelves in Dakota County. Thinking about the questions we've asked in this survey, did we miss anything important? Were there other questions we should have asked? Please tell us in the space below.

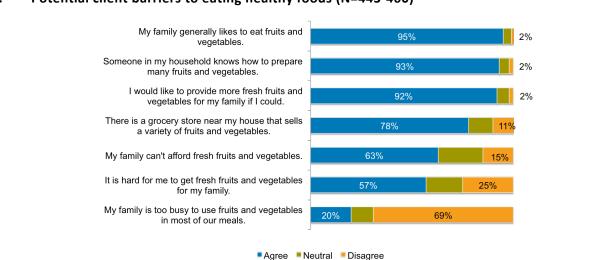




Aggregate results from the Healthy Food in Hunger Relief Survey conducted in May and June 2015 were compiled from the client and web survey results from all ten participating food shelves in Dakota County. The following are some key findings from these aggregate results that may indicate needs for future technical assistance to food shelves in Dakota County, as well as opportunities for collaboration between food shelves for collective impact in the hunger relief food system. ¹The full countywide report with in-depth analysis by Wilder Research is available at www.theopendoorpantry.org.

Between the 10 participating food shelves, 472 clients responded to the paper survey and between 48 and 135 clients responded at each site. A combined 99 board members, staff, and volunteers responded to the web survey, with between 3 and 35 respondents at each site.

The vast majority of clients report an interest in providing more healthy foods for their families. The high cost of fruits and vegetables is their main barrier to doing so. Client preference for and understanding of healthy foods and food preparation is generally *not* a barrier (Figure 10).



10. Potential client barriers to eating healthy foods (N=443-460)

Note: "Agree" includes both "Strongly Agree" and "Agree" responses. "Disagree" includes both "Disagree" and "Strongly Disagree" respons

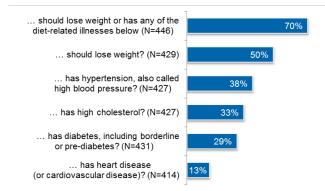


¹ Key findings in this section are adapted from the Healthy Food in Hunger Relief Countywide Report authored by Wilder Research on behalf of The Open Door (September 2015). All charts were created by Wilder Research and are published in the countywide report.



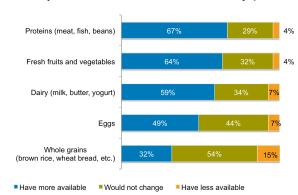
Half of surveyed clients said that they or someone in their household have been told by a health care professional that they should lose weight, and almost two in five client households (38%) have someone with high blood pressure (Figure 3). Seventy percent of households fell into at least one category.

3. Has a doctor or other health care professional ever said that you or someone in your household...



In general, clients are in favor of maintaining or increasing the availability of healthy food staples such as proteins, fresh fruits and vegetables, and eggs and dairy at their food shelf (Figure 12).

12. Client preferences on food availability (N=442-448)

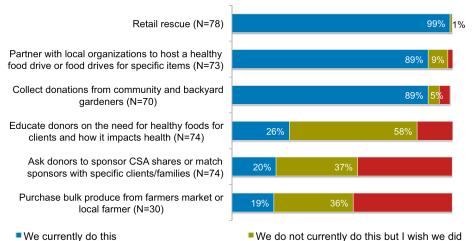






The promising practices in healthy food distribution are not as commonly implemented as the procurement practices. The most common procurement practices are retail rescue, healthy food drives and donations from community and backyard gardeners (Figure 14).

14. Healthy food procurement policies and practices



We do not currently do this but I wish we did

We do not do this and I don't think we need to

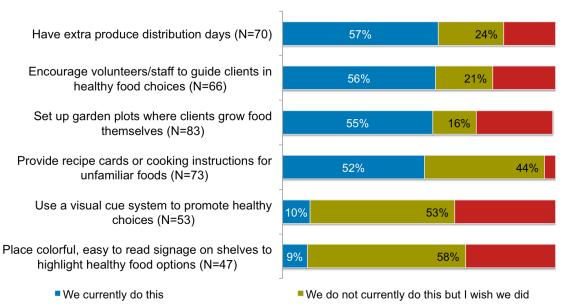
Note: Due to the varied number of respondents who answered each question, the number of responses is shown in parentheses after each item.





Opportunities for increasing the implementation of healthy food distribution practices might include signage and other visual cues to promote a healthier food environment, as more than half of respondents said they wish their food shelves would implement these strategies (Figure 15).

15. Healthy food distribution policies and practices



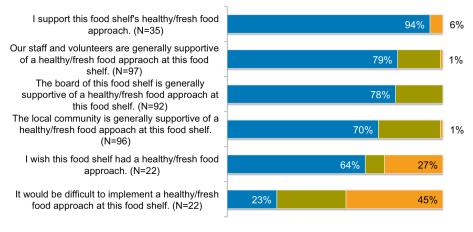
• We do not do this and I don't think we need to





Healthy/fresh food approaches are popular, both among those whose food shelves currently have them and among those who do not (Figure 20). The majority of respondents expressed support for a healthy/fresh food approach and believed that their food shelf's staff, volunteers, board, and community all support such an approach as well.

20. Support for healthy/fresh food approach



Agree Neutral/not sure Disagree

Cost was the most frequently identified barrier to implementing a healthy/fresh food approach, while space and storage capacity were also mentioned as challenges for many respondents (Figure 23).

23. What are currently the one or two most significant barriers to implementing a healthy/fresh food approach at this food shelf? (N=99)²

	Ν
There are no barriers/we do this well	22
We don't have enough money/the cost is too high	35
We don't have enough space/storage capacity is too low	24
There are not enough healthy foods available	11
There are logistical concerns/the implementation would be too complex	8

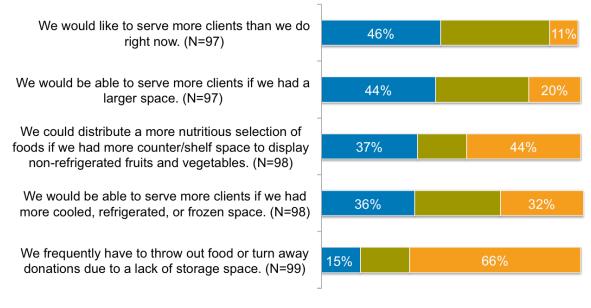


² Chart represents barriers most commonly identified in survey. Other answers included not enough volunteers or staff; available fresh foods are near expiration; We need to balance quality and quantity of food for our clients; and others.



Space constraints are the main physical barrier to increasing the number of clients served or the selection of fruits and vegetables available in the food shelf (Figure 31).

31. Physical barriers to serving more clients/increasing capacity



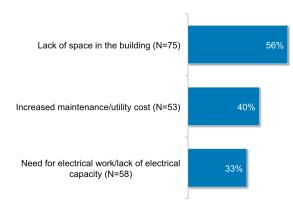
Agree Neutral Disagree





These space constraints include the size of the overall building space as well as their capacity for storing and displaying fruits and vegetables (Figure 30).

30. Do you have any of the following building-related barriers to acquiring more cooled, refrigerated, or frozen space?



Reflection

Use the Discussion Guide and Take Action! Guide on the last two pages of this section to reflect on your individual results or these countywide results, and determine priority areas for healthy food policy and practice changes in your food shelf environment.





Discussion Guide

After you've reviewed the data for your food shelf and/or the countywide findings, take 10 minutes to yourself to reflect on the questions below. Later, share your answers in small groups.

Where did you learn something new?

Where did you notice the most extreme answers?

Where was there agreement between clients and staff, board & volunteers?

Where was there difference between clients and staff, board & volunteers?

Did your individual data match the county aggregate data? Where was there similarity? Difference?



Take Action!

Now that you've analyzed your food shelf's data and seen how it compares to the countywide aggregate data, it's time to put your thoughts into action. Based on your data, what are three possible priority areas you might begin exploring for policy or practice changes? Write them out below and point to the data that supports these changes. Note: you do not need to think of goals, strategies or tactics for addressing these priorities yet. Simply state the need.

O Priority Area 1:					
-					
-					
O Prio	rity Area 2:				
-					
-					
O Prior	ity Area 3:				
-					
-					





Section II: Adoption

- i. Introduction... p. 61
- ii. Case Study... pp. 62–63
- iii. Healthy Food Approaches... pp. 64–71
- iv. Why a Healthy Food Policy?... pp. 72–76
- v. Goal Setting...pp. 77–78



Checklist for Rollout

- ✓ Survey stakeholders & analyze results
- ✓ Target change priority areas
- □ Explore healthy food approaches
- Consider a healthy food policy
- □ Set policy- or practice- change goals





Creating Healthier Food Environments in Food Shelves | © The Open Door 2015 www.theopendoorpantry.org





Introduction

This section will focus on adopting **healthy food policy or practices** at your food shelf. Adoption of healthy food approaches means setting goals for changes within your organization based on the assessment carried out in the previous section, and building broad support for proposed changes through messaging and community organizing best practices. Any practice or policy changes you adopt should be supported by assessment results, and involve the input of key stakeholders.

Policy vs. Practice Change

Healthy food **practice changes** are strategies you take to improve the physical food shelf environment or adjusting processes around procuring or distributing food to emphasize healthy foods for your clients, or improving the food shelf environment to store, distribute or promote healthy food items.

A **healthy food policy** is a written document that guides internal and/or external practices and processes around procuring and distributing healthy food. It provides a framework for health that can be easily followed and enforced by food shelf leadership. Healthy food policies in a food shelf environment normally limit the procurement and/or distribution of unhealthy food items, and emphasize the procurement and/or distribution of healthy food items. A healthy food policy will nearly always necessitate practices changes, whereas practice changes do not require (but might be enhanced by) a healthy food policy.

The examples in the Case Study that follows on pages 58–59 represent just a fraction of the possible policy or practice changes you may choose to adopt at your food shelf. After the case study, you can explore additional examples of policy and practice changes that food shelves from across the Twin Cities metro region have adopted to create healthier food shelves.

After you've been inspired by the possible approaches to healthy food access in your food shelf environment, set goals that you will use to frame the implementation process in Section III.



Case Study: Acme Food Shelf

Acme food shelf provides pre-packed bags of food to 100 households each week. After implementing a healthy food assessment, they discover that 70% of their clients (or someone in clients' homes) have a chronic diet-related healthy condition, and nearly 80% of clients receive half or more of their food from the food shelf each month. Acme decides to adopt some policy and practice changes to improve access to healthy food for their clients.

Policy Changes

Healthy Food Policy: The Food Shelf Operations Manager feels a long way from where he wants the food shelf to be in terms of healthy food procurement and distribution. He decides a Healthy Food Policy will be the best way to articulate the organization's values and provide a framework around proposed healthy food changes at the food shelf. He proposes the following healthy food policies to be adopted by the Board of Directors:

- Acme food shelf recognizes the link between hunger and health, and supports a healthy food environment for our clients. We are committed to procuring healthy food options for our clients to contribute to their improved health.
- Acme food shelf defines healthy food as food items that are low in added sugars, fat, and sodium (per the American Association of Dieticians). We emphasize distributing fruits and vegetables, dairy, protein and whole grains as part of a healthy diet, and our food-purchasing budget reflects this priority.
- As of January 1, 2016, Acme will no longer purchase food items that are high in added sugars, fat and sodium, such as pastries, candy, chips and other salty bagged snacks, and sugary beverages. The food shelf will purchase fresh fruits and vegetables when available and will prioritize the purchase of canned and frozen fruits and vegetables, low-fat dairy, lean proteins (such as chicken, fish and beans/legumes), and whole grains when the choice is presented in our purchasing decisions. Furthermore, we will work with our donors and retail partners to increase healthy food donations.
- Internal Healthy Food Policy: Acme will no longer serve foods high in added salt, sugar, or sodium at organizational functions.



Case Study: Acme Food Shelf

Practice Changes

Changes to Processes: The survey of volunteers, board and staff demonstrates broad support for a "choice" distribution model, where clients shop for their own food. Currently, food is prepacked in paper bags and all clients receive the same food.

With their previous pre-packed food distribution model, clients were automatically provided with a box of pancake mix and a bottle of pancake syrup, in additional to other less healthy items. The food shelf decides to continue offering pancake mix and syrup as it is available through its donated food stream, but will no longer purchase these items per the new Healthy Food Policy.

According to its client survey, 75% of clients want either want the same or less pancake mix and syrup available at the food shelf. On the other hand, 80% of clients want more protein available, 67% wanted more fresh fruits and vegetables, and 63% wanted more eggs and milk. The food shelf operations manager will concentrate on making these healthy items more available through purchasing and donation strategies.

In order to increase their healthy food inventory, Acme Food Shelf joins a local food bank that offers a wide selection of donated or reduced cost healthy food items. The goal of the Operations Manager is to divert spending on healthy foods to the food banks, rather than what was previously being spent on vouchers for milk and eggs at retail stores.

Finally, to better track and evaluate healthy food changes, Acme will weigh perishable and nonperishable food separately when it is distributed to clients. The operations manager sets a goal of 20% perishable food distributed by the end of the next year. This is an aggressive goal given that under the pre-packed bag model, all food distributed was non-perishable.

Changes to the Food Shelf Environment: In order to provide more healthy foods for their clients and to accommodate a choice model, Acme Food Shelf needs to purchase additional refrigerator and shelf space to store and display food. According to their assessment, 65% of staff, board and volunteers thought that refrigeration was a barrier to distributing and displaying more healthy foods.

Acme also recognizes the need to create a new layout and signage for display of food inventory as clients will now be shopping for their food rather than receiving pre-packed bags.





Examples of Healthy Food Approaches

The Case Study of Acme Food Shelf represents just a small sampling of possible healthy food approaches you might take at your food shelf. Below you'll find additional examples of healthy food practice changes that have been adopted at food shelves across the Twin Cities metro.

Healthy Food Approaches: Purchasing Practices

- Join a food bank. Food banks are large wholesale suppliers to food shelves. Think of a food bank like a product warehouse and food shelves as individual grocery stores. Some examples of food banks in the Twin Cities metro area are The Food Group and Second Harvest Heartland. Food banks allow food shelves to purchase product at below-retail price or even free.
- Build relationships with local farmers/growers
 - Purchase CSA shares: you can try asking for a discount from the local farmer, or you might encourage your regular donors to sponsor a share as a new way to give.
 - Arrange to buy bulk produce from a farmers market or local farmer at a wholesale price. You may be able to get a discounted rate if you purchase leftovers at the end of the market day.
- Re-evaluate inventory list
 - Stretch purchasing dollars by buying frozen or canned produce to supplement fresh items

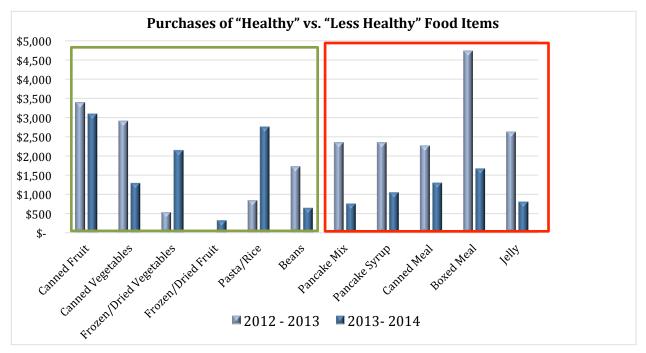
Food for Thought

The Open Door developed a "seconds" purchasing program with local farms starting in 2013. "Seconds" means excess produce that is either not market grade (odd shape or blemishes), was grown in excess. Struggling local farms were supported through the purchase of product without a primary market, and the food shelf got fresh local produce to distribute to their clients at a reduced price. Win: win!

- Buy in bulk to reduce cost (beans, rice)
- Prioritize using budget to buy healthy items when available whole grain, low sodium, low sugar, low fat
- Instead of eliminating a category of food (e.g. snacks), buy healthier versions/alternatives (e.g. popcorn, whole grain crackers versus chips)







Valley Outreach Food Shelf in Stillwater, MN evaluated its existed inventory with the help of a registered dietician from the nearby Lakeview Hospital. Chart used with permission.

Healthy Food Approaches: Donation Practices

- Glean seconds directly from local farms
- Build relationships with farmers market managers or individual vendors; develop arrangements to collect surplus produce on a regular basis
- Ask people to sponsor a CSA shares for your food shelf or match sponsors up with specific food shelf clients/families
- Collect donations from community and backyard gardeners (Plant an Extra Row, Giving Gardens). Be proactive about seeking out these relationships.
- Set up an on-site garden and engage food shelf staff, volunteers, and clients in growing produce for the food shelf
- Give your retail partners feedback on pre-packed bags; ask for healthier items





Healthy Food Approaches: Donation Practices

• Solicit donations from customers at grocery stores (Seward Co-op's "SEED" program or Valley Outreach's Fresh Green Bucks Dollars to purchase produce)



Open Hands is a certified organic farm in Northfield that donates and sells produces to The Open Door. Clients also have the opportunity to visit the farm through The Open Door's Garden to Table® program.

- Build relationships with retail food outlets; develop arrangements to collect donated produce or other healthy food items on a regular basis
- Partner with local organizations, schools, businesses, and places of worship to host a healthy food drive or targeted food drives for specific items (e.g. spices)
- Join a food bank to receive donated foods through healthy food rescue.

Healthy Food Approaches: Client Demand & Education Practices

- Offer taste testings and cooking demonstrations to allow clients to sample unfamiliar healthy foods before they select their items to take home (plan monthly themes based on what's in season)
- Utilize UMN Extension SNAP educators, The Food Group's dietician, or other agency's educators to provide nutrition education or demos





Healthy Food Approaches: Client Demand & Education Practices

- Provide recipe cards or cooking/prep instructions for unfamiliar foods
- Educate volunteers and staff about the importance of healthy eating and how they can help clients select healthy foods
- Encourage volunteers to provide excellent customer service to clients by accompanying them through the food shelf and engaging in a conversation about healthy eating and healthy meal preparation
- Teach kids about healthy foods and have them tell parents (connect with schools)
- Have bonus items be healthy items instead of unhealthy
- Have produce-only distributions to help raise awareness about fresh fruits and veggies
- Teach clients to add spices to food for flavor instead of salt
- Remember limited literacy skills
- Remember time or facility restraints of families

Healthy Food Approaches: Communications Practices

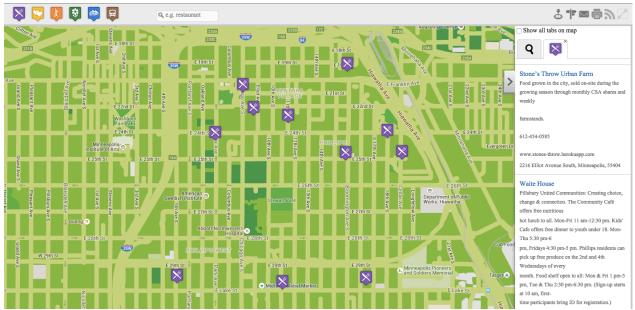
- Create/distribute written materials listing out the foods you'd like to receive and those you don't need (e.g. healthy food drive lists, specific items you always need)
- Focus on being proactive help people understand what you want
- Make "healthy" the backdrop of all your organization's communication and visuals (organizational culture/branding)
- Educate donors on the need for healthy foods and the health problems that can arise when food shelf clients don't have access to sufficient healthy food options
- Humanize the effort through stories (don't focus just on facts)
- Send out newsletter or mailing (or post on social media/website) to let donors know that you are able and would like to receive fresh produce and other healthy items





Healthy Food Approaches: Communications Practices

Use healthy "maps" as a resource for clients, like the one seen below from the Phillips ٠ (Minneapolis) Healthy Living Initiative.



Phillips Healthy Living Initiative interactive map lists healthy food establishments, bike routes, recreation activities, healthy clinics and more. Available at www.phillipscommunity.org

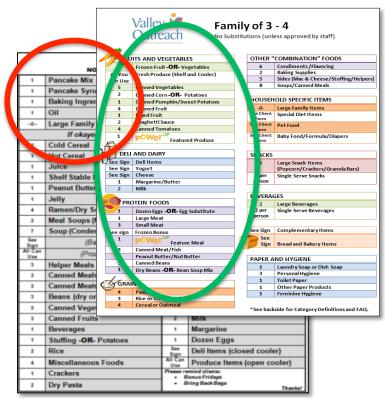
- Emphasize a message of choice we provide most expensive items to free up clients' budgets to purchase what they want
- Conduct surveys of clients to identify what they want and demonstrate that to donors, staff, volunteers
- Ask donors to make financial donations that can be used to purchase healthy foods at wholesale prices from food banks or other sources (emphasize that food shelves can stretch their dollars better than an individual purchasing food items can)





Healthy Food Approaches: Environmental Changes Merchandising and Layout

- Make healthy foods visible and appealing keep everything clean, fresh, and easy to sort through
- Use baskets or other nice displays versus cardboard boxes; angled shelves for produce.
- Place colorful, easy to read signage on shelves and throughout the food shelf to highlight healthy food options (e.g "Choose Me, I'm Healthy", "Don't Forget Fresh Produce", "Choose Healthy Foods")
- Use color-coded laminated signs with nutrition facts and how to use/cook the inventory on the shelves
- Group healthy items together (that are typically found in the food shelf) that clients can use to make a meal or snack; add a healthy recipe card
- Put healthy options first and at eye level; "front and face" each item and organize everything in categories like a grocery store; put processed food last.
- Remember:
 placement can impact
 demand for a specific
 item—this includes
 shopping lists, like the
 one seen at right from
 Valley Outreach Food
 Shelf in Stillwater, which was
 reorganized by food group with
 the healthiest options first.



Client selection of healthy foods increased at Valley Outreach Food Shelf when the shopping list was reorganized to promote healthy foods.





Healthy Food Approaches: Environmental Changes Merchandising and Layout Practices

- Find donors or other experts who have retail merchandising expertise and can help your food shelf do an enhancement
- Invest in energy efficient refrigerators and coolers to increase storage capacity for healthy, perishable food items (partner with Rotary Clubs they often have money to help food shelves purchase equipment)
- Use coolers or refrigerators/freezers with glass doors so that clients can see inside without having to open the door

Healthy Food Approaches: Environmental Changes Client Demand & Education

- Use a visual cue system to promote healthy choices and limit unhealthy choices (e.g. 1, 2, 3 stars or Go, Slow, Whoa rating system)
- Use pictures/visuals for people with LEP or low-literacy levels
- Include a teaching kitchen at food shelf where clients can prep and make meal or watch demos
- Stock shelves with culturally appropriate healthy foods that are familiar to clients
- Make produce (no-limits) available in the waiting area





Healthy Food Approaches: Additional Resources

• The Food Group:

"Promote Fresh Produce Toolkit" includes: Nutrition Outreach Resources, Staff & Volunteer Education Resources, Merchandising Resources, and Evaluation Resources: http://thefoodgroupmn.org/promote-fresh-produce-toolkit/

"Healthy Foods Policy Information" includes information and worksheets for creating your own healthy food policy: http://thefoodgroupmn.org/agency-corner/71-2/

• University of Minnesota Extension:

"Promoting Healthy Eating at Food Shelves:" http://www.extension.umn.edu/family/healthand-nutrition/toolkits-and-resources/healthy-food-access/docs/guide-promoting-healthyeating-at-food-shelves.pdf

In some areas, SNAP Educators are also available to come to your food shelf to assess your food shelf environment and make recommendations to promote healthy foods at your food shelf. Contact your local Extension office for more information.

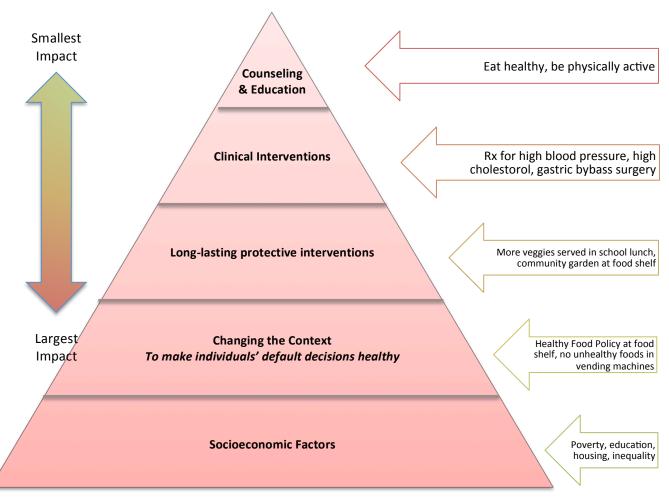




Why a Healthy Food Policy?

A healthy food policy at a food shelf explicitly states what a food shelf does and does not distribute. It may also articulate additional procurement or organizational spending priorities such as allocation of funds for fruits and vegetables, whole grains, and low-fat dairy. Some healthy food policies provide additional context by naming specific issues that the policy hopes to address, like chronic health conditions in low-income communities or affordability of healthy food for low-income people.

But how can a healthy food policy at your food shelf improve the health of your clients?



Factors that Affect Health

The chart above, adapted from the Center for Disease Control by The Open Door, demonstrates that a healthy food policy has a larger impact on health than interventions (i.e. practice changes) that target individual behavior.



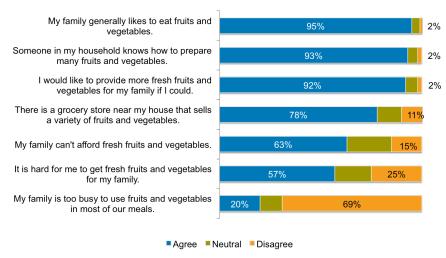


Why a Healthy Food Policy?

Policy, Systems and Environmental (PSE) change strategies recognize that individual choices are made in the context of the larger environment, which include the systems and policies that shape it. According to the Minnesota Department of Health, "health problems are influenced by societal policies and environments that in some way either sustain behaviors or fail to foster healthier choices.¹" PSE changes are a more effective approach to improving the health of individuals and communities as compared to focusing solely on individual behavior change.

At food shelves, we know that low income people experience diet-related chronic health conditions such as diabetes, hypertension, heart disease and obesity at higher rates than the general population. A child living at or under the federal poverty level (\$11,170 for a family of four) is three times more likely to be obese than one at 400% of the poverty level (median income \$92,000 for a family of four) and is 40%more likely to have a chronic health condition². According to the Healthy Food in Hunger Relief survey, 68% of households served by food shelves in Dakota County have children and 70% of all households have at least one person with a chronic diet-related condition.

Clients depend on food shelves to supply healthy foods for their families. According to the Healthy Food in Hunger Relief Study, food shelf clients' understanding of how to prepare a variety of fruits and vegetables is high (93%), and 95% of client households like to eat fruits and vegetables.



¹ Faricy, A. *Understanding Policy, Systems, and Environmental Change to Improve Health* [Powerpoint slides]. Retrieved from lecture notes online:

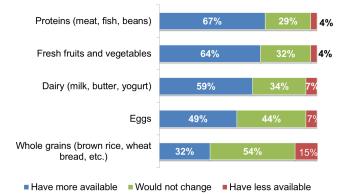
http://www.health.state.mn.us/healthreform/ship/techassistance/pse02222012.pdf ² Children's Defense Fund, *The State of America's Children* (2014). Retrieved online at http://www.childrensdefense.org/library/state-of-americas-children/2014-soac.pdf





Why a Healthy Food Policy?

Furthermore, the most requested foods by clients are healthy foods: proteins, fresh fruits and vegetables and dairy. Clients identified cost as the biggest barrier to consuming more healthy foods.



Simply put, food shelf clients are suffering the health consequences of the unhealthy foods that are already the most available to them. What clients need from food shelves is the healthy food itself, not education on how or why to prepare it.

Food shelves are uniquely situated to address the cost barrier to healthy food access, as 58% of clients in Dakota County get half or more of their food per month from their primary food shelf, and 46% of surveyed clients receive food from another food shelf or meal program in addition to their primary food shelf. As a principal source of food for many clients, food shelves have not only an opportunity, but also a responsibility to be supplying nutritious foods to clients.

A healthy food policy at a food shelf decreases or eliminates the distribution of unhealthy foods, and prioritizes the healthiest food items, such as fruits and vegetables, dairy, lean protein and whole grains. Food shelves with healthy food policies expand healthy choices for their clients by prioritizing healthy food procurement and distribution, ensuring a variety of healthy food options at the food shelf, which are the hardest to purchase for clients in a traditional retail environment. A healthy food policy might also reduce or eliminate unhealthy food items that are already widely available in the traditional grocery retail environment.

Clients and food shelf stakeholders overwhelmingly support this type of shift in food shelf environments. In a 2014 survey of clients at The Open Door Pantry, which had instated a healthy food policy six months earlier, 88% of clients approved of their healthy food policy. According the 2015 Healthy Food in Hunger Relief study, 91% of staff, board and volunteers approved of the organization's Healthy Food Policy.





Why a Healthy Food Policy?

Additional Resources: Healthy Food Policy

The Food Group: "Healthy Foods Policy Information" includes information and worksheets for creating your own healthy food policy: http://thefoodgroupmn.org/agency-corner/71-2/

The Open Door's Healthy Food Policy is available on the next page.





The Open Door's Healthy Food Policy

Adopted by the Board of Directors May, 2013 Implemented September, 2013

Purpose: The Open Door, formerly the Eagan & Lakeville Resource Centers, champions healthy choices in employees, volunteers, and clients. We believe that every person has the right to access healthy foods. A healthy, sustainable food supply decreases chronic diseases, increases productivity in the classroom and workplace, and increases health equity in our communities.

- We commit to offering a high percentage of fresh and perishable food at our food shelves.
- We commit to removing food with low to no-nutritional value from our shelves and food drives.
- We commit to offering healthy food choices at staff meetings, events, and volunteer engagement activities.
- We commit to engaging the public in a healthy, equitable, and sustainable food system.
- We commit to advocating for policy, systems, and environmental change around food justice in the hunger relief community and beyond.

We are committed to distributing:

- fresh, whole foods such as fruits and vegetables, milk, cheese, eggs, meats, and poultry
- foods with high and healthy nutritional values
- low-sugar, low-sodium, low-fat, and whole-grain items whenever possible

We no longer distribute:

- pop or sugar-added beverages
- candy
- bakery sweets including: cake, donuts, cookies, pastries
- ramen noodles
- chips and other salty bagged snacks





Healthy Food Approaches: Goal Setting

What healthy food approaches would you like to adopt in your food shelf environment? Based on the priority areas that you identified as a result of your assessment in the previous section, and drawing inspiration from some of the ideas you've read about in this section, use the space below to create broad goals that will move you toward healthy changes at your food shelf.

Ex. We want to distribute more healthy food.

We don't want to distribute pop or candy.

We want to develop relationships with local growers.

O Goal 1:	 	 	
O Goal 2:	 	 	

🗘 Goal 3: _____

Now Make Them S.M.A.R.T.

S.M.A.R.T. goals are:

Specific: Define a set target. Answers: "Who?" "What?" Ex. fresh fruit and vegetables; whole grains; community gardens

Measurable: Incorporate a quantitative measure you can track. Ex. pounds of food; percentage of whole; # of gardens

<u>Attainable</u>: Start small and build upon your success. Ex. 1000lbs of food; 10% increase in whole grains;

<u>R</u>elevant: Linked to organization goals/mission, strategic plan or interests of key stakeholders. *May be implied.*

Ex. [To serve our mission of hunger relief; to address the root causes of hunger; to engage faith community in hunger relief]

<u>T</u>ime-bound: Give yourself an end date for evaluation of goal.

Ex. By the end of FY2015; by December 31, 2016





S.M.A.R.T. Examples:

- Purchase 500lbs of fresh fruit and vegetable from local farmers by November 1, 2016.
- Develop a plan with 5 community gardens to donate excess produce to food shelf by March 1, 2016 for the 2016 growing season.
- Replace all canned pasta & ramen with healthy substitutes by March 31, 2016.

Now reformulate the goals you stated earlier to make them into S.M.A.R.T goals:

O S.M.A.R.T. Goal 1:	 	
➡ S.M.A.R.T. Goal 2:		
• S.M.A.R.T. Goal 3:	 	





Section III: Implementation

- i. Introduction... p. 81
- ii. Eliciting Critical Messages... pp. 82–88
- iii. Combating Common Myths... pp. 89–90
- iv. Community Organizing Best Practices... pp. 91–92
- v. Implementation Planning... pp. 93–96



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Introduction

Change is hard. The implementation of the goals you set in the previous section will rely on excellent planning based on community organizing principles that will engage your key stakeholders in change. This section will guide you through facilitated exercises—intended for you to be able to replicate with a core leadership team from your food shelf –that will help you identify key stakeholders, and create common messaging you can use to promote healthy food changes at your food shelf.

Once you have a common vision of your audience and the messaging that supports healthy food changes at your food shelf, you will be in a better place to create a work plan to put into action the specific healthy food approaches you identified in Section II. The last part of the Implementation section of this toolkit will help you create a work plan to set a timeline and create a budget for your healthy food changes. Taking the time to identify stakeholders, create messaging and develop a work plan and budget for the changes at your food shelf will prevent unnecessary hurdles in your implementation process.



Eliciting Critical Messages

On the following pages, you will be guided through a series of exercises¹ intended to help you work with a core leadership team at your food shelf to identify key stakeholders and develop messaging to promote your healthy food policy or practice changes.

Doing these exercises as a group will create shared understanding and ownership as you implement healthy food shelf changes. We recommend gathering a group of at least 6–8 people from your food shelf community that you think would be in favor of healthy food changes in order to have a rich discussion. However, you can probably get useful results with as few as 2–3 people. Blank templates and completed examples from a workshop series completed with Dakota County food shelf leaders in October 2015 are also included for your reference..

You will need:

- Large flip chart
- Large plastic table cloth or parachute tarp
- Spray Adhesive Glue
- Recycled paper (blank on one side), cut in half
- Markers

Stakeholders: Define Your Audience

Using the list on the following page (or a scratch piece of paper), have each person brainstorm key community members or groups that may have a stake in the healthy food policy or practices you want to adopt at your food shelf. Be sure to include:

- Existing or potential
- Champions and naysayers
- Internal and external stakeholders

Take about 10 minutes to allow participants to come up with as many stakeholders as possible.

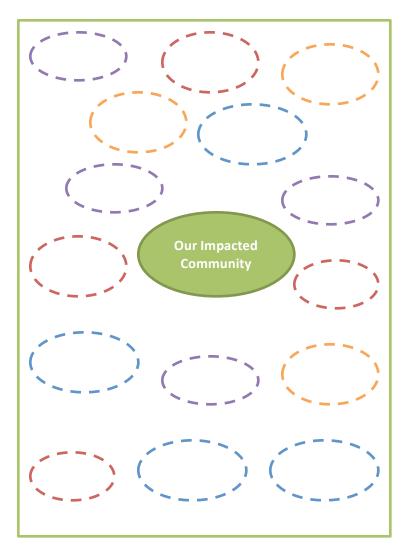
Now, set up a blank piece of flip chart paper at the front of the room. In the middle write "Our Impacted Community" and circle it. Next, encourage participants to share their answers with the larger group, "popcorn style"—no raising hands or going in order necessary. As participants share their responses, write their answers at random on the flip chart dispersed around the circle.

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¹ The exercises described in this section are based on Technology of Participation facilitation techniques. More information on ToP opportunities in Minnesota is available at www.mntop.us



Eliciting Critical Messages Stakeholders: Define Your Audience



Now ask participants to group the answers into categories. Circle each answer from a particular category in a single color, and write the category name in the same color. This will not look "neat" as you do it, but afterwards you can group categories into a typed document and distribute it to the group, as seen in the example on the following page.

What do the categories represent? How might you use these categories to help you create messaging?

Stakeholder Brainstorm

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Eliciting Critical Messages: Food Shelf Stakeholders

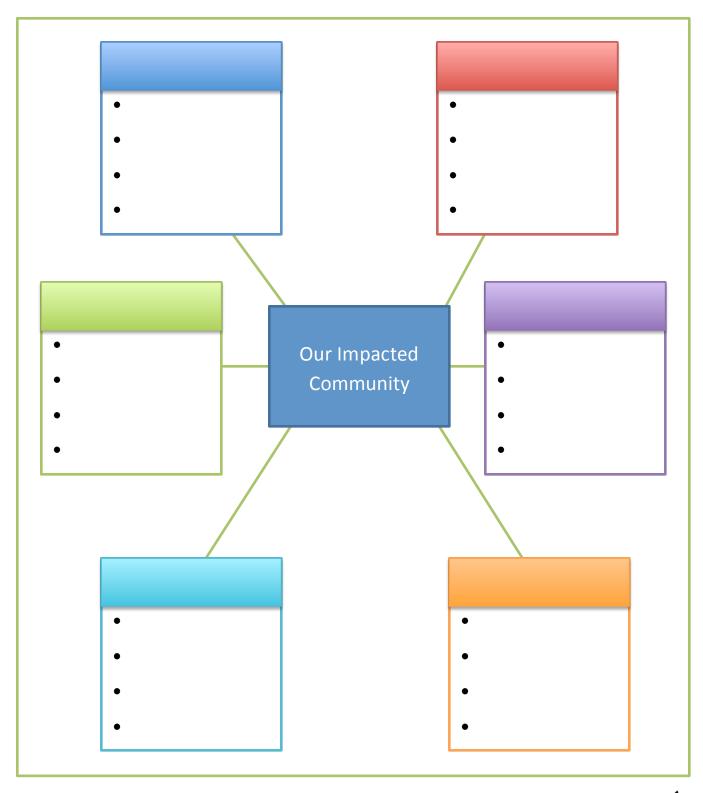
The following example was completed with Dakota County Food Shelves in October 2015. Each category represents a different stakeholder group.







Eliciting Critical Messages: Our Stakeholders



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Eliciting Critical Messages: Sticky Wall Exercise

It is time to break out the sticky wall! Spray your plastic picnic tablecloth or parachute tarp with the spray adhesive glue (you will want to do this before the workshop begins, outdoors or in a well-ventilated area). Give it a few minutes to dry, then tape it up on a large flat area of the wall at the front of the room.

Have participants brainstorm individually their answers to the following prompt(s) or another prompt of your choosing. Have each participant aim for 15 answers:

Why should we prioritize healthy food access at our food shelf?

How does improved access to healthy foods benefit our clients?

Participants then compare their answers with a partner or small group and come up with their top 10 responses. Each pair should then transfer their responses onto a separate half sheet of paper:

It helps to write these

out for visual

instruction.

- One response/thought per sheet
- Short phrases (7 words max)
- WRITE BIG

Now's the fun part! Have each pair select their top 3 answers and hand then to the facilitator. The facilitator then reads off each answer and puts them on the sticky wall in no particular order. Ask participants to find *pairs* of answers that seem to go together. It's ok if pairs turn into groups of 3-4, but try to avoid things getting overly grouped up too early—the goal is several categories.

Now ask for ideas not already up on the board. Continue grouping in columns. As clear categories emerge, ask for participants to give the group a name. Write this name and stick it at the top of the list.

When all of the ideas seem to be represented on the board, and all the categories have names, ask the following questions of the group:

- What have we created?
- What does each category represent?
- How might we use the ideas in this exercise to communicate the value of our healthy food practice or policy change?

Next Steps

Form small groups and assign each group a category from the facilitated sticky wall exercise. Ask each group to come up with a messaging campaign based on their category. They should be able to identify 1) Key message(s); 2) Target audience; 3) Ideas to measure impact of campaign.





Eliciting Critical Messages: Sticky Wall Exercise

The following example was completed with Dakota County Food Shelves in October 2015. Each bullet point represents a single idea put forth by participants. Ideas were later rearranged to form categories and then named.

Why should we prioritize healthy food at our food shelf?

How does improved access to healthy foods benefit our clients?

Direct Impact on Families"	Why Not?!	Health and Wellness	Stewardship	Social Justice
 Increase school performance Supports healthy choices Healthy foods are expensive- help stretch food \$\$ Encourage families to reach out to food shelves Encourage healthy meal preparation with children Save families money 	 Provide a dignified response Families want healthy options Families are requesting more healthy foods Healthy rescued food is available The resources (\$) exists 	 Research shows that increase in intake of fruits and vegetables lowers chronic diseases Emotions (mental health, stress, self- esteem) Long-term health and wellness Less sick days Supports brain development and school success (problem solving) Promotes healthy choices Improve health of our customers (heart disease, obesity, diabetes) 	 Encourage healthy community Support local farmers Decrease food waste (overabundance from harvest) 	 Health equity Dignity of clients Supports a culture of health All people deserve healthy food Continual improvement-challenging existing norms or ideas





Eliciting Critical Messages: Sticky Wall Exercise

Why should we prioritize healthy food at our food shelf?

How does improved access to healthy foods benefit our clients?

•	•	•	•	•
•	•	•	•	•
•	•	•	•	•
•	•	•	•	•
•	•	•	•	•
•	•	•	•	•
•	•	•	•	•
•	•	•	•	•
•	•	•	•	•
•	•	•	•	•





Combating Common Myths

Below are three examples of messaging based on common myths related to implementing healthy food policy. As you look over these examples, think over whether

Myth #1: You're policing poor people Critical Message: Clients want healthy food

Clients asked, we listened! In our recent survey of clients, we asked what clients would like to see more or less of at our food shelf. The majority (67%)² asked for more fruits and vegetables. Over the next few months we're making changed in layout and inventory to make space for more fruits, more vegetables, and other high-nutrition foods that clients asked for.

We are making healthy commitments across the organization, and our healthy food policy is not just for clients. As an organization we are committed to eliminating unhealthy foods from all staff, board and volunteer functions and making health a central value of our employee policies.

Myth #2: Limiting choice Critical Message: Expanding choice

By eliminating unhealthy items, we are reprioritizing our limited

Messaging Best Practices

- Show the importance of the issue
- Put a "face" on the issue
- Be tied to specific audience values, beliefs or interests
- Motivate the audience to think, feel or act
- Be culturally relevant and sensitive
- Be memorable

Adapted from a presentation by Christian Knights ,Communications and Advocacy Principal for Blue Cross Blue Shield of Minnesota, May 2014

food budget, providing an expanded variety of healthy items we know our clients want and need.

The most available foods for clients to purchase at the grocery store are the unhealthiest. Clients are choosing unhealthy items because of the lack of appealing healthy food choices with which they are presented. We don't need to provide more of the same items clients are already able to purchase.

A 2015 study of food shelves in Dakota County found that 63% of clients said they couldn't afford to buy healthy food. We want to address the cost barrier of purchasing healthy foods by making these the priority in our food shelf distribution. The same study showed that clients wanted more protein, fresh fruits and vegetables, and dairy, reinforcing clients' desire for more variety and availability of these healthy food items at their food shelf.



² This figure comes from a survey conducted at The Open Door in 2013 prior to the implementation of its Healthy Food Policy

Combating Common Myths

Myth #3: You're throwing out food Critical Message: Junk food is not real food

A lot of the most affordable food for low-income people is highly processed and includes a lot of artificial ingredients. Not only are these foods not good for you, they're essentially composed of non-foods.

Let's compare the ingredients in a popular peanut butter and caramel filled chocolate bar:

Milk chocolate (sugar, cocoa butter, chocolate, skim milk, lactose, milkfat, soy lecithin, artificial flavor), peanut butter (peanuts, partially hydrogenated soybean oil), peanuts, sugar, corn syrup, lactose, invert sugar, corn syrup solids, vegetable oil (hydrogenated palm kernel oil, palm oil, grapeseed oil and cottonseed oil and/or partially hydrogenated palm kernel oil), less than 2 % dextrose, glycerin, skim milk, salt, calcium carbonate, partially hydrogenated soybean oil, egg whites, artificial flavor, TBHQ to maintain freshness

With Ingredients in a homemade chocolate dessert:

Flour, sugar, oil, eggs, cocoa powder, vanilla extract, baking soda, salt.

Our healthy food policy would no longer allow for distribution of the candy bar itself, which we refer to as "fake" food, but would still allow (and emphasize) distribution of each item listed in the ingredients for the homemade dessert.

Key Messaging

In response to: "Why are you doing this?" The Open Door responded:

We believe that every person has the right to access healthy foods. We want to make the healthy choice the easy choice.





Community Organizing Best Practices

Now that you understand who you stakeholders are, and have developed some messaging to tailor to these audiences, it is time to engage your stakeholders in implementing healthy food approaches at your food shelf. Below are a few best practices in community organizing, developed by Grassroots Solutions.

1. Value stakeholder perspectives and interests

Gather input through ways that are meaningful to your stakeholders. Then demonstrate that you listened by including learnings in your plan. How do you gather input?

2. Provide multiple opportunities for involvement

Involvement can happen on a spectrum. Not everyone can sit on an advisory board, while others are ready to roll up their sleeves and contribute. Tailor opportunities to specific communities based on what you perceive to be their self-interest or stake in the issue. Brainstorm some ideas below:

3. Identify and work with trusted partners

Keep your friends close! People who "get" your work and like what you do will do good work for and with you. Continue seeking ways to build trust with partners outside your trusted circle. Who are your trusted partners? Where are there opportunities for partnership with your healthy food changes?

4. Communicate often and follow up

Establish clear methods of communication that work for your audiences. Consistency and transparency are key. Look back on "Our Impacted Community" Exercise (Stakeholders Template) and try to identify the best communication method for each stakeholder group. Mail? Email? Personal phone call?

5. Remember the details

This is part of consistency. Employ to-do lists. If you're too frazzled or this isn't your thing, identify a staff or volunteer that is good at managing details.

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Community Organizing Best Practices

6. Utilize Critical Messaging

Look back on your assessment results and the goals you set in the Section II (Adoption) of this toolkit, as well as the Critical Messaging and Stakeholder Exercises you completed in Section III. What critical messages apply to the SMART goals you set? Who are the critical messages for? How can you use your assessment results to support your messaging?

0	Critical Message 1:					
0	Critical Message 2:					
~						
V	Critical Message 3:					

7. Make it personal

Include the emotional side of your issue, in addition to the facts. Include real life examples about real people. Speak directly to people in a way that matters to them. What stories of your work have had the greatest impact on you or your organization?

8. Celebrate success!

Gather people to celebrate progress, completion of a project, or the beginning of a new one. Include refreshments that fit your audiences. Include activities that are fun and out of the ordinary. What would be appropriate or unique ways to celebrate the changes you plan to make?





Implementation Planning

As you're planning to implement healthy food policy or practice changes at your organization, it is important to develop a solid implementation plan to hold you and your staff accountable and on track. This will also be important to helping you develop a budget and identify funding needs.

On the next page, we provide an example implementation plan for Acme Food Shelf, which has decided on a few key implementation strategies to reach the goals it set in Section II:

- **Healthy Food Policy:** Acme plans to implement a healthy food policy to guide the organization in making changes. The food shelf operations manager will need to get board approval and develop a communications plan to roll out the changes.
- **Change to a Choice Model:** One of Acme's most dedicated volunteers retired last year from a career in marketing and is excited to offer her services to create new healthy food signage and shelf labels that will encourage healthy food selection by clients. She plans to reach out to a local grocery store chain to see if someone from its merchandising department can tour the existing food shelf and recommend a layout to encourage healthy food selection.

The Work Plan on the following page lists the various tactics the organization will use to implement these two strategies. It also lists the staffing and resources needed, including budget. Finally, Acme works backwards from the strategy goal date to assign a completion date for each step.

Definitions for Completing the Work Plan

- Strategies broad approach to accomplish goal
- Tactics tools and activities you will use to operationalize and implement
- Developing a work plan determine time, budget and staffing needs
 - List all strategies, tactics
 - Under each activity, outline the steps (tactics) to completion
 - Assign a staff person to each tactic (step)
 - Determine resources needed (including budget)
 - Working backwards from the activity completion point, assign a date for each step in the activity
 - Make sure your various strategies line up in time and scope. For example, if you
 are doing a print mailing to announce one strategy, include information about
 other changes in the same mailing if they will be implemented at the same time.



Implementation Planning: Healthy Food Approach Work Plan Acme Food Shelf

		Person		Resources	
Strategy	Tactics	Responsible	Date to Complete	Needed	Budget
	Research and	Food Shelf	Healthy Food	Staff time (10	\$400
	craft language for	Operations	Policy First Draft	hours), volunteer	
	healthy food	Manager	ready by 9/1/15	board members	
	policy, and vet				
	with board				
	members				
	Present healthy	Executive	Receive approval	Volunteer board	\$0
	food policy draft	Director	by 10/1/2015	members, ED	
	to Board of			staff time	
	Directors for				
	approval				
	Create email and	Office Manager	Send and post in	Staff time (20	\$1,500
	print letter for		food shelf by	hours), printing	
	clients and		11/15/2015	budget, email	
	volunteers			software, postage	
	announcing				
Implement a	changes				
Healthy Food	Create training	Food Shelf	Give trainings in	Staff time (40	\$2,000
Policy	and print	Operations	the month of	hours), workshop	
	instructions for	Manager	December 2015	materials, printing	
	food shelf			budget,	
	volunteers about			volunteers	
	new policy				
	Create donor and	Office Manager	Notify all existing	Staff time (40	\$2,000
	food drive		donors and food	hours), graphic	
	materials to		drives scheduled	design program,	
	promote healthy		for 2016 by	printing budget	
	food donation		12/1/2015		
	Healthy Food	Executive	1/1/2016	Staff time,	\$0
	Policy "live"	Director, Food	_, _, _, _010	volunteers	<i>~~</i>
	,	Shelf Operations			
		Manager			



Implementation Planning: Healthy Food Approach Work Plan Acme Food Shelf

		Person		Resources	
Strategy	Tactics	Responsible	Date to Complete	Needed	Budget
	Reach out to retail partners to request layout advice for food shelf redesign	Marketing volunteer	Schedule walk through with retail partner by 10/1/15, redesign layout for approval to ED by 11/1/15	Marketing volunteer, contacts at local grocery stores	\$0
	Purchase shelving, equipment and signage needed for redesign.	Marketing volunteer, Food Shelf Operations Manager	12/1/15	Staff time (20 hours), volunteer time (100 hours), printing budget, equipment and supplies budget	\$6,800
Change to a	Create email and print letter for clients and volunteers announcing changes	Office Manager	Send and post in food shelf by 11/15/2015	Staff time (20 hours), printing budget, email software, postage	\$1,500
Choice Model	Create volunteer sign-up and appointment calendar for clients to reflect new choice model needs	Food Shelf Operations Manager	Sign-up and appointment calendar ready in time for print and email mailings 11/15/15	Staff time (40 hours)	\$1,600
	Create training and print instructions for food shelf volunteers about choice model	Food Shelf Operations Manager	Give trainings in the month of December 2015	Staff time (40 hours), workshop materials, printing budget, volunteers	\$2,000
	Redesign food shelf and reopen as choice model	Food Shelf Operations Manager, Marketing Volunteer	Food shelf closed for redesign between 1/2/15– 1/6/15. Grand re- opening 1/7/15.	Staff time (40 hours), Volunteer time (120 hours)	\$1,600



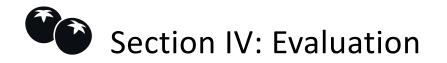


Healthy Food Approach Work Plan

		Person		Resources	
Strategy	Tactics	Responsible	Date to Complete	Needed	Budget







- i. Introduction... p. 99
- ii. Evaluation design and collection process... pp. 100–102
- iii. Post-implementation survey examples... pp. 103–107
- iv. Communicate your success... pp.108-111







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Introduction

You've assessed the need for healthy food changes at your food shelf, adopted policy and practice changes to support them, and then rolled out a plan to implement them. Now how do you know if it's worked? Have your policy and practice changes had the intended results you were hoping for? Have your stakeholders notice? Are your clients pleased with the changes? Evaluating your practice and policy changes is just as important as all the work you've done to put the changes in place.

Now, how can you utilize this data to your advantage? Do you have lingering skeptics? Can you attract new donors or funders? Do you need to make changes to the policy or practice changes to reflect critical feedback, or make your policy or practice stronger through process changes? This section will help you think through your evaluation process and how to communicate your success to maximize the impact of your healthy food changes.

A special thanks to Wilder Research who provided content expertise to inform this section. Please note that this section is meant to be a brief introduction to some aspects of evaluation. If you would like more detail on evaluation and evaluation tools please visit Wilder's site on Program Evaluation and Research Tips.¹

Why evaluate?

Accountability

- Monitor implementation
- Measure impact
- Maintain funding

Improvement

- Tweak plans and strategies
- Identify promising practices
- Influence organizations, systems, and policies



¹ Available at https://www.wilder.org/Wilder-Research/Publications/Studies/Forms/Study/ docsethomepage.aspx?ID=514&FolderCTID=0x0120D52000F239CA0ED16F9A49B139AA1402664580003333A21 DCC750948AD7DA120396FC83C&List=5ffe87fb-8c61-4035-86cc-db1b1907fa0a&RootFolder= %2FWilder-Research%2FPublications%2FStudies%2FProgram%20Evaluation%20and%20Research%20Tips



Design your Evaluation and Create Tools

Primary data collection options

You'll need to factor in your organization's budget and capacity for conducting evaluation, along with solidifying the key questions you want to answer through you evaluation. Once you have arrived at your questions, read through the following four primary data collection options² to weigh their advantages and disadvantages, and decide which one best suits your goals for evaluation.

Surveys (online or paper)

A prearranged set of questions is administered to a sample of the impacted community. Respondents do not see or hear each other's answers and responses are anonymous. *See example post-implementation Volunteer and Client Surveys at the end of this section*

Advantages

- Fairly easy to administer
- Relatively inexpensive to develop
- Allows you to gather information from a large number of respondents
- Data can be easier to analyze

Disadvantages

- Low response rates
- Challenging to write good survey questions
- Less useful if looking for open-ended or detailed information
- May not be the best method for some cultural communities or populations
- Difficult for respondents with low literacy

Focus Groups

A facilitator asks a small group of people from the impacted community a prearranged set of questions. Respondents hear each other's answers in a conversational format. While responses in the focus group are not anonymous, respondents should be reminded to not share information exchanged in the group. Reports conveying the focus group findings should keep respondents' identities private.

Advantages

- Flexibility in the order of questions and how they are asked
- Opportunity to explain and clarify questions
- Topics can be explored in greater depth through follow-up questions
- Respondents can interact with one another

Disadvantages

- Can be time consuming and expensive
- Fewer respondents are reached
- The format of the group is not anonymous
- Data can be difficult to summarize/report
- Need trained facilitator to ask questions appropriately and address group dynamics

² This list was compiled by Wilder Research for a presentation to Dakota County food shelves in October 2015.

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Design your Evaluation and Create Tools Primary data collection options

Interviews

A prearranged set of questions is administered by an interviewer to individuals representing the impacted community. Respondents are individually interviewed, as a result they do not see or hear each other's answers, however responses are not anonymous to the data collector.

Advantages

- Can yield a higher response rate
- Flexibility in the order of questions and how they are asked
- Opportunity to explain and clarify questions
- Topics can be explored in greater depth through follow-up questions

Disadvantages

- Can be time consuming and expensive
- Fewer respondents are reached
- Interviews are not anonymous
- Data can be difficult to summarize and report

Case Studies

Stories from individuals or a group representing the impacted community monitor the impact of a policy or practice change through personal experience. Stories are gathered through one-on-one interviews, and then compiled and shared publicly to represent a specific outcome.

Advantages

- Highlight the experience of one or two people
- Offer additional context to survey results
- Explore personal experience in a more unstructured way
- Have the opportunity to clarify questions throughout the data

Disadvantages

- Limited to a very small number of individuals
- Experience of one or two individuals may not reflect the experience of the majority
- Method can be easily biased by who is selected to participate





Data Collection and Analysis Collecting the data

You'll want to create a data collection plan, similar to the client and web survey packets shared in Section I on assessment. Who will administer the evaluation and for how long? Do you need a special training or instructions for volunteer or staff evaluators? A key factor to consider is how you will protect the anonymity and confidentiality of evaluation data. Ensure a representative sample size by considering the cultural communities you serve in your data collection plan. It goes without saying that evaluation tools should be translated into the main languages spoken by your target audience.

Organize and analyze your data

Once the survey is complete, compile and summarize your findings. Depending on whether you have numerical (quantitiative) data, or descriptive (qualitative) data, the summary process will look different:

Summarize

Summarizing Quantitative Results

- Descriptive statistics (e.g., measures of central tendency and percentages)
- Determining whether results are meaningful or statistically significant
- Inferential statistics (e.g., chi-squares, correlations, t-tests, and analyses of variance)

Interpret your Results

What to look for

- Patterns and themes
- Surprising findings
- Deviations
- Interesting stories
- Recommendations
- Limitations
- Additional data needs

Summarizing Qualitative Results

- Reduce and simply the information
- Decide which information should be emphasized, minimized, or left out altogether
- Identify common themes and code data
- Note key quotes that illustrate themes

Don't forget to...

- Involve stakeholders
- Consider practical value, not just statistical significance
- Watch for, and resolve, inconsistencies
- Consider cultural implications
- Acknowledge limitations



Digitally advatus :-	y: Post-Implementation		The Op	en Door Pantry (2014)
Digitally adminis	tered through Survey M		Survoy	
1 11-11-11-1		ealthy Food Policy	-	
□ Yes	Inteered at The Open D	oor Pantry after Se	ptemper 2013?	
□ No If they answer N	O, the survey will end h	ere.		
	. ,			_
2. Overall, how s	satisfied are you with t	he Fresh Food Appı 3	oach of The Open Do م	or? 5
⊥ Very satisfied	2 Satisfied	3 Neutral	4 Unsatisfied	ح Very Unsatisfied
 More dai More egg More wh More doi More doi More ran More car 	ole grains nuts/cakes nen/canned pasta) Less d Less e Less w Less d Less d Less r Less c	vhole grains onuts/cakes amen/canned pasta	urt)
	comments have you he		out the selection of f	ood at The Pantry?
1	2	3	4	5
	Positive	Neutral	Negative	Very Negative
Very positive				





Volunteer Survey: Post-Implementation Digitally administered through Survey Monkey 2

The Open Door Pantry (2014)

Healthy Food Policy Survey

7. Choose up to 3 values below at which you believe The Open Door excels:

- □ Advocates for community health
- □ Provides fresh, healthy food
- □ Promotes client autonomy
- □ Creates a safe and welcoming atmosphere
- □ Inspires others to give

- □ Fosters an encouraging environment
- □ Utilizes volunteer strengths
- Experiments and takes risks
- Celebrates victories
- Recognizes and values volunteers

8. Choose up to 3 values upon which you believe The Open Door should improve:

- □ Advocates for community health
- □ Provides fresh, healthy food
- □ Promotes client autonomy
- □ Creates a safe and welcoming atmosphere
- □ Inspires others to give

- □ Fosters an encouraging environment
- Utilizes volunteer strengths
- Experiments and takes risks
- Celebrates victories
- □ Recognizes and values volunteers

9. Are you aware of the Healthy Food Policy at The Open Door

- □ Yes
- 🛛 No

10. In general, do you agree with the Healthy Food Policy at The Open Door?

1	2	3	4	5
Strongly Agree	Agree	Neither	Disagree	Strongly Disagree

11. Do you have ideas or suggestions for The Pantry? Please share them with us!





Client Survey: Post-Implementation

The Open Door Pantry (2014)

Instructions to Volunteers for Client Survey

Hello, Volunteers!

Between Monday, June 2nd and Monday June 9th we are conducting a Fresh Food Approach Survey here in Lakeville. This will tell us how satisfied our clients are with the food that they receive at The Open Door, what types of food they would like on our shelves, and how they feel about the fresh food focus of The Open Door.

It is very important that EVERY CLIENT fills out a survey. There are English, Spanish, and Russian versions available. We want to make sure that our clients have a chance to make their voices heard, so please have EVERY CLIENT fill out a survey!

If they are new to The Open Door, they should *still take the survey*. There is a place on the survey to let us know how long they have been coming to The Open Door.

When they turn in a completed survey, please hand them a card to fill out for a chance to receive a \$25 Cub gift card. The winner will be contacted by June 20th.

Thank you! If you have any questions, please call [Contact] at [contact phone] or email at [contact email].



					5.	
Client Surv	ey: Post-In	nplementation	1		The Open Doo	or Pantry (2014)
		Eagan F	Pantry Client Qu	uestionnaire		
1. Overall,	how satis	fied are you with the	e fresh food app	proach at the Eag	an Pantry?	
	1	2	3	4	5	
Ver	/ satisfied	Satisfied	Neutral	Unsatisfied	Very U	nsatisfied
2. What p 109	-	of your monthly food 40% 60% 80%	d comes from T 100%	he Open Door? Other:		
3. How dif	ficult is it t	o provide your fami	ly with healthy	foods, such as fr	esh fruits and	vegetables?
1	· .	2	3		4	5
Very Diff	icult	Difficult	Neutral	Fairly	/ Easy	Very Easy
□ Cos □ My □ My □ The	family doe family doe family doe	store is close to me esn't like fruits and ve esn't know how to pr are not a priority for r	egetables epare a lot of fi			
4. Overall,	how satis	fied are you with the 2	e selection of fo	ods available at 4	The Pantry? 5	
5. Have yo	y satisfied u noticed	Satisfied a difference in the fo een coming to the Par	Neutral ood available at	Unsatisfied The Pantry in th	Very U	nsatisfied
If yes,	what kind	of difference?				
□ Ma □ Ma □ Ma	re fruits/vo re dairy (m re eggs re whole g re donuts/	nilk, butter, yogurt) grains	□ Less □ Less □ Less	s fruits/vegetable s dairy (milk, butt s eggs s whole grains s donuts/cakes		

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Client Survey: Post-Implementation

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The Open Door Pantry (2014)

Eagan Pantry Client Questionnaire

6. If you could change the selection of foods available at The Pantry, what would you change?

- □ More fruits/vegetables
- □ More dairy (milk, butter, yogurt)
- \Box More eggs
- $\hfill\square$ More whole grains
- □ More donuts/cakes
- $\hfill\square$ More ramen/canned pasta
- □ More candy/pop
- □ Other:_____

- □ Less fruits/vegetables
- □ Less dairy (milk, butter, yogurt)
- □ Less eggs
- □ Less whole grains
- □ Less donuts/cakes
- □ Less ramen/canned pasta
- □ Less candy/pop

7. Are you aware of the Healthy Food Policy at The Open Door?

- 🗆 Yes
- 🗆 No

8. In general, how much do you agree with the Healthy Food Policy at The Open Door?

1	2	3	4	5
Strongly Agree	Agree	Neither	Disagree	Strongly Disagree





Communicate your evaluation findings

Now that you understand your results, what are you going to do with what you found out? Perhaps your evaluation was motivated by a specific question. But in most cases, you are going to find out information that is worthy of sharing. Reporting back on evaluation is also an important aspect of building trust and accountability with evaluation participants. Below are some ideas to guide your in sharing your evaluation results.

Know your audiences

- Consider whether each audience is more interested in specific facts or the narrative of the evaluation findings
- Do not use jargon
- Use clear and concise writing, and draw on charts and tables when appropriate
- Consider your audience's level of literacy and whether evaluation findings should be translated into other languages
- Identify evaluation findings that would be relevant to specific cultural communities

Select the right strategy for communicating findings to various audiences

- • Community members may want concise details or the story behind the evaluation findings
- Policy makers may benefit from brief, key findings that focus on the overall impact
- Internal stakeholders could be looking for key points that relate to their work in an organization
- Funders may be looking for a high level of detail and comprehensive overview of funded activities
- ٠

Approaches for communicating findings

- Detailed report
- Handout (with bullets)
- Newsletter
- Brief/snapshot
- Infographic
- Presentations
- Media (letters to editor, interviews, videos)
- Social media (Twitter, Facebook, Instagram)

On the following page, you will see two examples of communications that followed a postimplementation survey at The Open Door in 2014.

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Communicate your evaluation findings Healthy Food Policy Survey Snapshot



formerly the Eagan & Lakeville Resource Centers

A FRESH APPROACH TO ENDING LOCAL HUNGER

Findings from the 2014 Healthy Food Policy Survey at The Open Door, Eagan

New policy reinforces our commitment to health food access

The Open Door's mission is "A fresh approach to ending local hunger through access to healthy food." In September 2013, The Open Door implemented a Healthy Food Policy that formalizes our commitment to serving fresh, healthy foods at our food shelves. The policy also commits our organization to removing food with low to no-nutritional value; offering healthy food choices at staff meetings, events, and volunteer engagement activities; engaging the public in an equitable and sustainable food system; and addressing food justice and hunger relief in our community and beyond.

Our clients' response

In 2014, The Open Door surveyed food shelf clients about their satisfaction with the fresh foods offered at the Eagan Pantry, as well as their overall support for the Healthy Food Policy. Here is what we learned.

- Clients depend on us for access to healthy food. Just over half of the surveyed clients (54%) reported that it is "very difficult" or "difficult" to provide their family with healthy foods, such as fresh fruits and vegetables. Among these clients, most (88%) identified cost as a barrier to providing healthy foods to their families. The Open Door plays an important role in addressing this barrier; 48% of the clients surveyed indicated that at least half of their monthly food comes from The Open Door.
- Clients have noticed changes in the foods we offer since the Healthy Food Policy was passed. Over half (55%) of our clients shared that they noticed a difference in the food available in the past few months. Many of our clients noticed that there were more fruits and vegetables (67%) and dairy products, such as milk, butter, and yogurt (49%). Some clients also noticed less candy/pop (30%) and less donuts/cakes (29%).

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Communicate your evaluation findings Healthy Food Policy Survey Snapshot, p. 2

- Most clients are pleased with the selection of foods currently available. Most of our clients (86%) shared that they were "very satisfied" or "satisfied" with the selection of foods available at The Open Door. However, even with our commitment to providing fresh, healthy foods to our clients, there is still an unmet demand for increased healthy foods.
- When asked what they would change about the selection of foods available at The Open Door, the most common feedback provided by clients was requests for more fruits and vegetables (56%), dairy (54%), and eggs (38%).
- Most clients are supportive of the Healthy Food Policy. Over three-quarters of our clients (78%) reported that they were aware of the Healthy Food Policy and 88% indicated that they "strongly agree" or "agree" with it.

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Where we go next

The results from this survey show us that our clients desire an increased variety of fruits and vegetables, dairy items (such as milk and butter), and eggs. These results also identify our clients' support of The Open Door's commitment to fresh, healthy foods through the Healthy Food Policy.

In 2014, The Open Door increased the financial resources dedicated to sourcing healthy food. In addition to partnerships with local food banks and retail rescue programs, The Open Door seeks alternative sourcing methods through local farms and CSA's, small retailers, and local growers of all sizes.

About the survey

In total, the survey was completed by 166 clients, which represents about 25% of community members who used the Eagan Pantry during the same time period. Data was analyzed by Wilder Research.

Of the 166 clients who completed the survey, 126 indicated that they were aware of the Healthy Food Policy. Over 88% of clients who reported that they were aware of the Healthy Food Policy indicated they "strongly agree" or "agree" with the Policy. When we include those who were not aware of the Healthy Food Policy, 83% of clients "strongly agree" or "agree" with the Policy. This difference may be caused by a stigma associated with the word "policy," or a lack of clarity on the survey question





Communicate your evaluation findings

Press Release Example, The Open Door (2014)

FOR IMMEDIATE RELEASE

The Open Door Fights Hunger with Health

November 12, 2014 Eagan, MN – The Open Door, a hunger relief agency based in Eagan, recently released the results of a food choice survey of its clients with assistance from Wilder Research that shows the link between hunger and health. This survey showed that 69% of respondent households experience a chronic disease related to food, and that clients find it difficult to afford healthy foods (such as fresh fruits and vegetables) that help them manage their disease.

In the surveyed selection of clients at The Open Door, nearly 7 in 10 clients (69%) shared that they or someone in their household has a chronic health condition related to food (Overweight/Obese, High Blood Pressure, Diabetes, High Cholesterol, or Heart Disease). The Center for Disease Control states that access to healthy foods like fruits and vegetables is a social determinant of health, however 54% of clients indicated that it is difficult or very difficult to provide their family with healthy foods, such as fresh fruits and vegetables. When asked what makes healthy food difficult to obtain, most clients (88%) said that cost was a barrier.

The Open Door focuses on innovative hunger relief strategies such as community gardening, farm-tofoodshelf partnerships, and healthy food advocacy in the community. Tammy, a client and gardener in The Open Door's Garden To Table program, said that it is "extremely hard to grow healthy food, but well worth it. Produce is so expensive in the grocery store with the cost of living always going up." When asked what types of food clients wanted to see more of, the most requested items were more fruits and vegetables (67%) and more milk, butter, and yogurt (49%).

This survey shows that clients at The Open Door desire an increased variety of fruits and vegetables, dairy items (such as milk and butter), and eggs. These results also identify clients' support of The Open Door's commitment to fresh, healthy foods. In addition to partnerships with local food banks and retail rescue programs, The Open Door seeks alternative sourcing methods through local farms and CSA's, small retailers, community members, and local growers of all sizes.

Are you interested in becoming more involved with The Open Door? Find information at www.theopendoorpantry.org.





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Valley Outreach Food Shelf

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