FOOD DESERTS IN CHICAGO

A Report of the Illinois Advisory Committee to the United States Commission on Civil Rights

October 2011
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Letter of Transmittal

Illinois Advisory Committee to the U.S. Commission on Civil Rights

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The Illinois Advisory Committee to the U.S. Commission on Civil Rights submits this report, “Food Deserts in Chicago,” as part of its responsibility to examine and report on civil rights issues in Illinois under the jurisdiction of the Commission. The Committee has been monitoring the issue of health disparities in Chicago for several years and this report is the culmination of research, a briefing, numerous working group sessions, and, finally, a fact finding meeting on the issue in August 2010. The report was approved by a vote of 18 to 1.

At the start of this project, it did not take long to realize that many Chicago neighborhoods are considered food deserts because of the difficulty residents of these areas have in accessing fresh, nutritious foods, in particular fruits and vegetables. Of note to this Committee is the fact that these food desert neighborhoods are almost exclusively in African American neighborhoods. Therefore, the problem of food deserts in Chicago is not simply a public health issue, but an urgent civil rights issue. This report treats it as such.

Although the Committee could have focused this report on the numerous reasons food deserts exist and debated which cause was most responsible, the Committee instead chose to focus on solutions. As with most urban problems that disparately impact communities of color, all parties involved share, to varying degrees, responsibility for the current problem and the responsibility for solving it. This report is the first organized attempt at compiling the many efforts made by government, food retailers, nonprofits, community organizations, and others to address the food desert problem in Chicago.

Finally, the Committee would like to thank Martin Castro, Chair of the U.S. Commission on Civil Rights and formerly the Chair of the Illinois Advisory Committee, who spearheaded the project and presided over the many meetings on the subject.

Respectfully,

Barbara Abrajano, Chair
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INTRODUCTION

The Illinois Advisory Committee ("Committee") to the U.S. Commission on Civil Rights ("Commission") has been monitoring the issue of health disparities in Chicago for a number of years. The topic originally came to the Committee’s attention after research showed that, between 1990 and 1998, health disparities between Black and White communities actually increased in Chicago for the large majority (20 of the 22) of health indicators studied —despite the improvement in racial health disparities for the rest of the country over the same time period.¹ In response to this civil rights issue, the Committee held a briefing meeting where it heard testimony from numerous health providers, health policy analysts, academics, government agencies, and community activists.

After the initial briefing, the Committee voted to examine and undertake a formal report of health disparities in Chicago, but it faced two decisions. First, the Committee had to narrow down the broad issue of health disparities in order to produce a research project with meaningful results. Second, the Committee had to determine the “civil rights nexus” and strategic focus for its project that would distinguish its report from those produced by public health agencies. To make these decisions, the Committee formed a working group that met with health policy experts, health providers, and researchers as well as representatives from community organizations over the course of approximately six months. As a result of these “brainstorming” sessions, the Committee decided that it would focus its health disparities project around issues impacting Chicago-area food deserts² and access to quality interpreter services in Chicago health care facilities. Given the divergent topics, the Committee determined that these topics deserved separate consideration and two distinct reports. The second report, “Health Facilities in Illinois and Patient Access to Quality Language Interpreters,” will be issued separately but in tandem with this report. The Committee held a fact finding meeting in August 2010 in preparation for these two reports. See Appendix B.

The Committee found the issue of food deserts sufficiently narrow to undertake intensive research and produce meaningful recommendations. It also determined that this topics was foremost a civil rights issue. The data that the Committee unearthed found that food deserts disparately impacted communities of color in Chicago. A study by the Mari Gallagher Research & Consulting Group (Gallagher Group) in 2006 concluded “African Americans are the most disadvantaged when it comes to balanced food choices” and this group “travels the farthest distance to any type of grocery store, and their low access communities cluster strikingly. Chicago’s food deserts, for the most part, are exclusively African-American.” This conclusion is

² For the purpose of this report, a food desert is a neighborhood that is considered by local researchers to have low access to healthy and nutritious foods, particularly fresh fruits and vegetables. The Committee recognizes food deserts exist throughout the state of Illinois, particularly in rural communities. See http://www.ers.usda.gov/data/fooddesert/fooddesert.html. However, the Committee’s focus was better understanding the health disparities problem of Chicago, and it determined that the civil rights nexus was found in the fact that food deserts disparately impact communities of color in Chicago.


reinforced by the similar findings of Dr. Daniel Block, who provided his research to the
subcommittee at one of their brainstorming meetings.³

In addition, Executive Order 12898, “Federal Actions to Address Environmental Justice
in Minority Populations and Low-Income Populations,” issued in February 1994, orders federal
agencies, “to the greatest extent practicable and permitted by law,” to “make achieving
environmental justice part of its mission by identifying and addressing, as appropriate,
disproportionately high and adverse human health or environmental effects of its programs,
policies, and activities on minority populations and low-income populations in the United
States.”⁴ Thus, investigating the actions federal agencies undertake to improve access to healthy,
nutritious foods in neighborhoods of color is a mandate under this Executive Order. Finally, First
Lady Michelle Obama has made food deserts a primary issue of her “Let's Move!” campaign to
develop healthy lifestyles in communities of color and low-income communities. Therefore, the
Committee concluded that a study of food deserts in Chicago is an important and appropriate
civil rights topic to study.

³ See Daniel Block, Noel Chavez, Judy Birgen, “Finding Food in Chicago and the Suburbs,” A Report of the
Northeastern Illinois Community Food Security Assessment, June 3, 2008,
FOOD DESERTS IN CHICAGO

1. Chicago Demographics

Chicago is the third largest city in the United States with a population of approximately 2.7 million people. It is one of the most densely populated cities in the country with approximately 12,750 people per square mile. The 2007 community survey for the U.S. Census Bureau showed the racial makeup of the city to be 42 percent white, 36.8 percent black, and 4.4 percent Asian. The survey found that 26 percent of the population was Hispanic of any race.

Figure 1: Neighborhood Map of Chicago


Chicago is a city of neighborhoods. Residents identify themselves, and oftentimes pride themselves, based upon the neighborhood in which they live. More importantly for this report, researchers study the problem of food deserts by looking at neighborhoods. See Figure 1. The
neighborhoods these researchers have identified as food deserts exist largely on the south and west sides of Chicago.

Unfortunately, in addition to being known as a city of neighborhoods, Chicago is also known as one of the most segregated cities in the United States. The 2010 U.S. Census found that overall integration is down from the 2000 Census, despite the Hispanic population being slightly better integrated.\(^5\) However, the *Chicago Sun Times* found that in order for blacks to be as evenly distributed as whites in the city, 81 percent of Chicago’s African Americans would have to move.\(^6\) Today, as shown in Figure 2, African Americans largely reside in the city’s west and south sides – areas that correspond with what researchers have found to be Chicago’s food deserts.

**Figure 2: Map of Chicago Black Population Centers**


## 2. Introduction to Food Deserts

Generally, the term “food desert” describes neighborhoods and communities that have limited access to affordable and nutritious foods, but there is no standard definition of food

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\(^6\) Ibid.
desert that is uniformly used among researchers. However, the use of the term has spread throughout the world over the past couple of decades. In the early 1990s, an ethnographic researcher studying residents of a public sector housing project in Scotland quoted a resident who called her housing area a “food desert.” This is believed to be one of the first uses of the term “food desert” as applied to an urban environment. Since then, the term has been used consistently to describe areas and identifiable communities that lack access to healthy foods.

One aspect of the term is clear: food deserts are closely affiliated with communities that are generally of poorer health than communities with ready-access to nutritious food. In Chicago, food deserts are also a civil rights issue. Although food deserts exist in cities, suburbs, and rural areas and impact all races nationwide, in Chicago food deserts tend to disparately impact African American communities and are intimately aligned with the city’s racially segregated housing patterns. Food deserts carry great costs to those who live in them and society as a whole. As one researcher stated:

A food desert is the antithesis of progress, and the costs associated with living within one will be borne directly by those residents through their quality and length of life, and indirectly by the health industry, by employers, by government agencies, and by others who take on the financial burden of pre-death treatments.

In addition to a lack of clear definition, some presenters expressed concern about the use of the term “food desert.” For example, Mr. Bloyd, after mentioning that some researchers prefer to label the issue as “food apartheid” instead of labeling neighborhoods “food deserts,” told the Committee:

I actually don't prefer that term [food desert]. You know, it works to get the point across and so I interchange it, but really I think for many people the suggestion is that the problem is within the community, it's a desert, it's bad, and really that is not accurate. The solutions lie within the communities and the residents themselves.

Similarly, Dr. Angela Odoms-Young of the University of Illinois at Chicago stated that the term food desert implies an undertone of victimization that can do more harm than good. She argued that focusing on what is lacking will not necessarily attract grocery stores to the South

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8 Jim Bloyd, testimony before the Illinois Advisory Committee to the U.S. Commission on Civil Rights, hearing, Chicago, IL, August 10, 2010, transcript, p. 49 (hereafter cited as Hearing Transcript).
13 Ibid, p. 50.
Side of Chicago. Kathleen Duffy, of Dill Pickle Food Co-op, did not like the term “food desert” because the label did not touch on some of the other factors that produce low-access to healthy foods such as poverty and transportation issues. She told the Committee, “The best term that we’ve been able to come up with is underserved areas because it does not imply just this geographic dearth of food options.”

The Committee takes seriously the concerns expressed regarding the use of the term food deserts. In addition, the Committee agrees that these neighborhoods do not need further stigmas attached to them. However, in order to remain consistent with the prevalent research and to foster clarity, the Committee will use the term “food desert” in this report. When possible, a more nuanced description of neighborhoods will be included.

The study of food deserts is important because the lack of easy access to healthy food choices, as provided by large grocery stores, supermarkets, or indigenous, community-led initiatives – e.g., farmer’s markets, urban gardens, etc. – presents issues of inequality and may have a significant impact on the health of communities. The United States Department of Agriculture (USDA) concluded that the majority of studies conducted on the issue have found “that better access to a supermarket or large grocery store [in particular] is associated with healthier food intakes.” Without these supermarkets or large grocery stores, residents of neighborhoods often must turn to convenient stores, which the USDA finds “provide a more limited range of foods, usually excluding fresh produce.”

In one Chicago zip code, which has been labeled a food desert, between 45 and 55 percent of the residents suffer from stage 2 chronic kidney disease, according to research by the National Minority Quality Forum. The study cited the lack of access to healthy foods as one of the reasons for this apparent epidemic in addition to the related problems of obesity, poverty, lack of access to health care, and unaffordable health insurance. In addition to health factors associated with food deserts, these areas are also important to study because of their financial costs. Dr. Damon Arnold, Director of the Illinois Department of Public Health, told the Committee that although there is no proven causation between obesity and food deserts, there is a clear correlation. In addition, he stated that obesity, as a public health problem, costs the state of Illinois $3.4 billion a year because of the secondary diseases with which it is associated. Thus, he believes addressing food deserts is one way to address the exorbitant costs associated with the public health problem of obesity.

On a national level, the federal government considers the problem serious enough to invest a significant amount of resources and time to understanding and combating food deserts. When Congress passed the Food, Conservation, and Energy Act of 2008 (also known as the

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15 Kathleen Duffy Testimony, Hearing Transcript, p. 175.


17 Ibid., p. 62.


19 Ibid.

Farm Bill), it directed the USDA to conduct a one-year study on food deserts. The study assessed the extent of the problem of limited access to nutritious foods, identified characteristics and causes, considered the effects of limited access on local populations, and outlined recommendations to address the problem. The findings of this study were published in June 2009, entitled, “Access to Affordable and Nutritious Food: Measuring and Understanding Food Deserts and Their Consequences.” In addition, as part of First Lady Michelle Obama’s “Let’s Move” initiative, the White House Task Force on Childhood Obesity submitted a report to the President entitled, “Solving the Problem of Childhood Obesity within a Generation,” which in part focused on food deserts. Both reports found that millions of low-income Americans live in food deserts and are “constrained in their ability to access affordable nutritious food.”

3. Quantitative Data on Food Deserts in Chicago

In Chicago, a number of researchers have studied the issue of food deserts and reached a consensus that food deserts exist, and they exist mainly in communities of color, making it an important civil rights issue. In 2006, the Gallagher Group concluded that the majority African American communities in Chicago have the lowest access to “1) chain grocery stores, 2) independent and smaller grocery stores, and 3) all grocery stores.” However, this same study concluded that African American communities also have “roughly equal access to fast food restaurants compared to other racial groupings.”

In 2008, a joint project conducted by the Chicago State University Frederick Blum Neighborhood Assistance Center and the University of Illinois at Chicago School of Public Health (“Chicago State-UIC”) found that of 22 Chicago communities that had no large grocery stores or supermarkets, 15 were predominantly African American communities and the remaining five were mixed-race South Side neighborhoods. See Figure 1. When the Chicago State-UIC researchers analyzed actual distance to supermarkets, the results reinforced the fact that predominantly African American neighborhoods have low access to nutritious food in Chicago. The analysis found that “a large area of the south side averages over a mile to the nearest supermarket, a level similar to most outer ring suburbs, but in a relatively densely populated area with many households not having cars.” See Figure 2.

In comparison, the Chicago State-UIC researchers found that predominantly Latino neighborhoods are closer than predicted to independent supermarkets, either large or small, but further than predicted from chain supermarkets. See Figure 3. As Professor Block explained to the Committee, “the [chain supermarkets] Jewel and Dominick's don't tend to be as much in the Hispanic communities as in predominantly white communities, just like they don't tend to be in African American communities either. But what Hispanic communities have are other kind of stores that are specifically targeted to that community.” Dr. Block went on to distinguish Latino communities from African American communities in Chicago by stating that, unlike Latino communities, these communities have stores specifically targeted to their needs.

23 Ibid.
24 Ibid., p. 49.
26 Ibid. p. 17.
27 Block, et al., “Finding Food,” p. 13. See also Figure 1.
28 Ibid., 14.
29 Ibid., 19.
30 Daniel Block, Hearing Transcript, p. 113.
Figure 3: Chicago Community Areas With No Supermarkets, 2007, and African American Communities

Sources:
Supermarkets: Company Websites and in-person Surveys, Summer, 2007

Northeastern Illinois Community Food Security Assessment
Funded by the Sears Foundation of the Chicago Community Trust
Map and Research Completed by
Chicago State University, Neighborhood Assistance Center
April 2008
Figure 4: Distance to the Nearest Large Supermarket and Predominantly African American Communities in Chicago, 2007
Figure 5: Distance to the Nearest Full-Service Chain Supermarket and Predominantly Latino Communities in Chicago, 2007

communities that have numerous independent stores targeting them, “independent and small chain stores . . . that specifically targets the African American community . . . aren’t there with the exception of a few.”31

31 Ibid., p. 134.
Because population density and other factors like transportation influence whether a neighborhood has easy access to nutritious foods, analyzing merely the presence of stores in neighborhoods based upon their predominant racial makeup does not allow one to conclude that these neighborhoods are actual areas of low food access. Therefore, the Chicago State-UIC researchers implemented a method that accounted for differences in population density to find out which areas “seem particularly well or poorly served by any one store type.” Figure 4 shows the results. The maps in this figure is what these researchers consider their most accurate “food desert” maps.

After analyzing these maps, the researchers concluded generally:

Food access is particularly bad in African-American neighborhoods because of a lack of full-service supermarkets, whether independent or chain. Food access in Hispanic communities is generally better than in African-American neighborhoods due to the presence of independent and small chain supermarkets, but full-service chains are missing. Changes between 2005-2007, in general, have brought more discount stores, but few others, to African-American communities.

There is positive quantitative data regarding Chicago food deserts. The Gallagher Group released an update on its 2006 food deserts report. In this more recent analysis, it concluded that Chicago was making progress in reducing the areas that they would label as food deserts. They found that “between 2006 and 2009, roughly 23,000 fewer people were in the Food Desert, and between 2009 and 2010 roughly 58,000 fewer people were in the Food Desert.” A second update released in June 2011 concluded that “the Food Desert population decreased from 550,382 to 383,954.” However, the report concluded that “well over 100,000 [Food Desert] residents are children.” In addition, the issue remains primarily an African American problem as African Americans are about 70 percent of the total Food Desert population.

4. Qualitative Data on Chicago Food Deserts

The quantitative data regarding Chicago’s food deserts are informative, but, like all quantitative data, it does not tell the entire story. To better understand the issues regarding these low access food areas, faculty at the University of Illinois at Chicago and staff at Chicago’s Department of Public Health – Englewood Neighborhood Center collaborated in conducting 103 in-depth, ethnographic interviews with African Americans who lived on Chicago’s South Side. The results of these interviews reveal that there is more to the issue of food deserts than opening up

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33 Ibid.
34 Ibid., 34.
36 Ibid.
38 Ibid., p. 3.
39 Ibid.
40 A Collaborative Report from Faculty at the University of Illinois at Chicago and the City of Chicago Department of Public Health Englewood Neighborhood Health Center, “When We Have Better, We Can Do Better: Family Food Access Report,” (December 2010), p. 7.
more grocery stores. In these interviews, many families expressed concern “related to the product availability and quality, specifically fruits and vegetables.”41

41 Ibid., 14.
In addition, many respondents felt that stores marketed items to them differently so that when they walked into their neighborhood stores they “first saw chips instead of fruits and vegetables.”\(^{42}\) Residents also expressed concern over the lack of small, African American-owned, independent stores in their community, which reinforces the findings of the Block, et al, research. Related to the issue of store ownership, the qualitative study found tensions between the members of the African American neighborhood and the Arab American store owners in their neighborhoods.\(^{43}\)

In addition, residents cited other factors as impediments to their shopping at neighborhood stores.\(^{44}\) For example, residents mentioned the environment inside of stores, including poor upkeep and customer services, as well as issues outside the store such as community violence and proximity to liquor stores.\(^{45}\) To exemplify some of these environmental concerns, the ethnographers noted that in Englewood/West Englewood over half of the stores that were part of the in-person audit had bulletproof glass.\(^{46}\) Unfortunately, these stores may have bullet proof glass for a very genuine reason. Joseph Harrington of the City of Chicago’s Department of Public Health pointed out that “if you look at the map of food deserts and those maps of those community areas in the City of Chicago with the highest all cause mortalities, there’s a real degree of overlap. So it says something about the quality of neighborhoods that people live in well beyond this issue of access to healthy food.”\(^{47}\)

Finally, the problem of low access to nutritious foods also has a personal behavioral component. As Dr. Arnold stated in the hearing, “The common pathway for over 90 percent of chronic disease is the mouth. Cigarette smoke, alcohol, illegal drugs, and food that is not in the correct caloric amount and poor quality. That’s really what we have to control is our hand, which is controlled by our behavior.”\(^{48}\) In addressing this behavioral point, Dr. Monica Peek of the University of Chicago Medical Center stated:

For the African American community, so much of how we choose to purchase food and prepare food goes back to slavery where we were given animal parts that no one wanted to eat, that had no nutritional value, and all these other things that . . . we pass on. So it’s not just about fruits and vegetables, we need to be able to talk to people and educate people about ways to prepare foods in our tradition that still works and can be healthy.\(^{49}\)

In addition to addressing unhealthy eating habits that are at least partially the result of a cultural tradition, some presenters discussed the realities of people of lower economic class living in communities oftentimes replete with less healthy fast food options. Dr. Odoms-Young said that encouraging children to eat healthy foods in these food deserts is “difficult to do when healthy foods are not available, when heads of households have to work multiple jobs and have

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\(^{42}\) Ibid., 15. In a telephone interview on June 23, 2011, Steven Casey of Fresh Moves stated that a reason that corner stores stack more chips and other junk food is because they sell those items on consignment. On the other hand, these corner stores must first purchase fruits and vegetables from suppliers and then hope they sell enough to earn their investment back and hopefully make a profit. Thus, Mr. Casey concluded there exists very little economic incentive now for these corner stores to stock and sell fresh fruits and vegetables.

\(^{43}\) Ibid., p. 14.

\(^{44}\) Ibid., p. 16.

\(^{45}\) Ibid.

\(^{46}\) Ibid., p. 11.

\(^{47}\) Joseph Harrington, Hearing Transcript, 51.

\(^{48}\) Arnold, Hearing Transcript, 18.

\(^{49}\) Monica Peek, Hearing Transcript, ., 98-99.
little time to cook at home, relying on eating out; and when families are targeted to eat unhealthy foods on television and when they enter the stores.”50 Steven Casey, who helped start a mobile fruit and vegetable store called Fresh Moves stated that he did not even consider selling organic fruits and vegetables initially because of the high cost and lack of accessibility to these items.51 He said residents of food deserts for the most part were simply priced out of the organic fruit and vegetable market.

5. Efforts Being Made to Address Food Deserts in Chicago: Improving Access

The positive news regarding Chicago food deserts is that data shows the number of Chicagoans who live in food deserts decreased by over 39 percent since 2006.52 However, the Gallagher Group reported that today more than 283,900 Chicago residents live in communities where “they have to travel farther to buy a fresh apple than they do to get a bag of potato chips or a greasy burger.”53 Although the number of individuals who still reside in food deserts is staggering, the progress made in the past five years did not occur by chance. Several companies have made the commitment to opening stores in these communities, many communities have taken it upon themselves to start community gardens and farmers’ markets, numerous researchers have implemented models to address the problem, and the city has taken a more proactive role in addressing the problem. In this section, some of these efforts will be discussed.

The obvious solution to the food desert problem is for more supermarkets and groceries to open in underserved areas. As the Gallagher Group report quantifies, this has happened to some extent. For example, Food 4 Less, a full-service grocery store, opened in Englewood in 2006 and was only the second full-service grocer within a nine square mile area at that time.54 By 2010, the store operated at the third highest profit margin out of the 15 Food 4 Less stores in the Chicago region despite having the highest security expenses.55

In February 2011, Save-A-Lot, a hard-discount, limited assortment grocery retailer, announced the opening of five new stores in Chicago’s South Side neighborhoods, which will nearly double its presence.56 In addition, the company, which is wholly owned by SUPERVALUE, Inc., stated that it will open five more stores by February 2012.57 Save-A-Lot is also a national sponsor of the American Diabetes Association and works with researchers at the University of Chicago to provide grocery store tours in the hopes of teaching the communities in which the stores are located how to read food labels, how to understand the healthiest choices, and how to prepare vegetables so that they taste better.58

Food desert neighborhoods are becoming home to larger food retailers as well. After announcing plans in April 2006 to begin entering urban markets across the country with their

50 Angela Odoms-Young, Hearing Transcript, ...
51 Steven Casey, telephone interview, June 23, 2011 (hereafter cited as Casey Interview).
55 Ibid.
57 Ibid.
58 Tonya Roberson, Hearing Transcript, p. 105.
general merchandise stores, WalMart faced resistance from some community activists, labor unions, and aldermen in Chicago. However, despite the efforts of these groups to pass a “Big Box Ordinance,” which would have increased the wages stores like Walmart would have to pay employees, Walmart opened its first store in Chicago in the Austin neighborhood in 2006. By March 2011, WalMart Stores were introducing food retail stores, announcing that they would open a Walmart Express and a Walmart Market (formerly Neighborhood Market) in the West Englewood neighborhood, an area the company called the “heart of Chicago’s food desert.” These stores are scheduled to open in the first half of 2012 and will be preceded by the opening of a Walmart Express in West Chatham in the summer 2011. The company had previously announced the opening of two of its supercenters: one again in West Chatham in 2010 and another in Pullman in 2013. A senior Vice-President for Walmart stated that the company would continue this trend of identifying locations in Chicago food deserts.

In addition to discount grocery stores and megastores opening in some of these low access neighborhoods, non-traditional stores, specifically drug stores, have begun to stock fresh fruits and vegetables to fill the void in these neighborhoods. Walgreens has no plans to become a full service grocery store, but it has opened 10 food centers in Chicago as of August 2010, with one of these stores dedicating 40 percent of its space to food. The company also announced in June 2011 that it plans to have 50 Chicago drugstores offering fresh fruits and vegetables by the end of 2013. Many of these stores will be in areas labeled food deserts. Furthermore, Walgreens is working jointly with Northwestern Medicine and Near North Health Service Corporation to pilot a program designed to educate residents in food desert communities about the link between healthy food choices and preparation and better management of chronic illnesses like diabetes. As part of the program, patients will receive discounts on featured items at several Walgreens locations where shelf tags are posted to help patients easily identify healthy foods.

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61 Jones, “Walmart Market.”
63 Ibid.
65 Zwiebach, “Wal-mart.”
Another drug store, CVS, also announced that it would be doubling its nonperishable food items at some locations in areas designated as food deserts.

Another nontraditional grocer that has begun focusing on food deserts in Chicago is the online grocer Peapod. It has partnered with Neighbor Capital to launch a Healthy Families Project. As part of this project, Peapod has hired a researcher to conduct block-by-block analysis to identify areas where Peapod can positively impact the greatest number of residents. It also conducted community forums in areas labeled food deserts to discuss how residents, many of whom may not have computer access, may place grocery orders. Finally, Peapod initiated a fresh fruit drop off program where they sell a 10-piece bundle of fresh fruit for $2.99 at select sites such as libraries within these low access neighborhoods.

In addition to the opening of new grocery stores, community gardens have made a larger presence in Chicago food deserts. Erika Allen told the Committee about the work her organization, Growing Power, is doing throughout the city in some of the areas with the worst access to nutritious foods. Specifically, she gave details regarding how these community gardens not only provide fresh and healthy foods to neighborhoods, but they also empower and improve the community:

I just look at my experience at Altgeld Gardens and seeing that community. There's so much passion around folks having the ability to change those conditions that they normally have very little control and to survive in pretty horrific conditions, violent conditions. There's one store food access which is predominantly liquor, everything is behind glass, there's no way for folks to directly even touch a product, and it's the most inhumane food access situation that I've seen in my life. So that's one community that folks are as segregated as I've ever seen a community in all ways, and we're building a farm there. And, you know, I think that will make a huge impact in how that community can begin to transform its ability not only to consume more healthy food but actually have that access.

Ms. Allen told the Committee that to build this garden, Growing Power partnered with the Chicago Housing Authority (“CHA”) “where CHA identified two and a half acres of land to establish a farm. That farm is currently being built, and we have been able to employ 150 adults and 40 youth to build a farm.” Important, for Allen, is the fact that this project allowed youth from one CHA complex “to be able to go in and train their counterparts. Our youth are very aware that that is what they are doing and that they have been trained over the years to be able to do that. That is something that took literally eight years.”

One of the more creative efforts at addressing food deserts began in 2006 when community activists formed the nonprofit group, Food Desert Action. After first considering a

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69 Ibid.
72 Ibid.
73 Ibid.
74 Erica Allen, Hearing Transcript, pp. 152-153.
75 Ibid., p. 149.
76 Ibid., p. 150.
corner store vegetable stand, the group determined such an effort would require too much capital and would not reach a large enough population that needed fresh fruits and vegetables.77 So, the group decided that it would make its corner store mobile. After negotiating with the Chicago Transit Authority (“CTA”), Food Desert Action bought a used CTA bus for one dollar, retrofitted it to become a fruit and vegetable stand, and now sells fruits and vegetables twice a week out of it in the Austin and North Lawndale neighborhoods, which were neighborhoods labeled as food deserts.78 The bus, named the “Fresh Moves Mobile Produce Market,” operates on Wednesdays and Thursdays. Steven Casey, Board President of Fresh Moves, said that the hope is to work the “kinks” out of their service in the summer when food desert is not as large an “issue” for people, so that they will get it right for the winter when it is much more difficult for residents to travel to get fresh fruits and vegetables.79

Fresh Moves improves physical access to fresh fruit and vegetables, but it also improves financial access. It has lower overhead than conventional stores. It also has worked cooperatively. When Fresh Moves originally began selling fruits and vegetables on their bus, they did not even consider organics because of the cost of these items. The bus could improve access to fresh fruits and vegetables, but it could not improve personal finances to the point where most residents of food deserts could afford organics. However, Goodness Greeness, an organic supplier in the Englewood neighborhood, reached out to Mr. Casey after seeing a story on the local news and offered to supply organic fruits and vegetables at a price that residents of food deserts could afford.80

Despite this success, Fresh Moves faces challenges. Their business plan did not foresee them being profitable, but the recent increase in fuel costs has heightened their reliance on grant money and donations. Also, it was reported that the city licensing laws require sales to take place only while the bus is parked in private lots.81

a. Local, State, and Federal Government Initiatives

The issue of food deserts appears to be on the radar of Chicago’s new mayor, Rahm Emanuel. During his campaign for mayor, Mr. Emanuel made expanding access to fresh, healthy foods part of his platform. He laid out a plan to combat food deserts that he said was “based on finding creative solutions that draw on the strength of the public-private partnerships, community organizations and corporate investment.”82 In June 2011, less than two months into his administration, Mayor Emanuel held a Food Desert Summit. According to reports, the summit consisted of Mayor Emanuel meeting with six CEOs of large retail grocery stores and “selling

79 Casey Interview.
80 Ibid.
81 Bowean, “Next Stop.”
the South Side.” He reportedly told the retailers that he wanted low-income neighborhoods to be within a one-mile walk of a store with fresh fruits and vegetables.

At the summit, the participating executives – Greg Wasson, president and CEO of Walgreens; Bill Simon, president and CEO of Walmart USA; Steven Burd, president and CEO of Safeway; Bob Mariano, CEO of Roundy’s; Pete Van Helden, executive VP of Supervalu; and Charles Youngstrom and Jason Hart, co-presidents of Aldi – told the Mayor and city officials “where each had faced the greatest challenges in opening stores, from highways to transportation, security, real estate and bureaucratic red tape.” According to Bill Simmons, Policy Director for Mayor Emanuel, the next step is to “look at the City Code, put together a set of reforms so that we can minimize the stress points, the city obstacles and make it as convenient as possible [for retail stores] to locate in a food desert.” In addition, Simmons added that by the end of July, Mayor Emanuel will issue reforms to make urban agriculture easier by cutting zoning prohibitions, allowing fresh produce to be sold on-site without rezoning, identifying small plots that could become farms or community gardens, and expanding permits to mobile food trucks.

Furthermore, the State of Illinois has also begun to address the problem. The Illinois State Legislature established the Fresh Food Fund in 2009 as part of Illinois Jobs Now! capital bill. This fund consists of $10 million to incentivize and facilitate the creation of grocery stores in urban environments. Maaria Mozaffar, Chair of the Illinois Fresh Food Fund Task Force, told the Committee that they are working to make sure the money goes through the food desert neighborhoods instead of directly to retailers in order to “protect the community.” She said the goal was to establish relationships and partnerships between the communities and retailers and urban gardens.

The federal government also has taken a proactive role in addressing the problem of low access to nutritious foods and these efforts have benefited Chicago. First Lady Michelle Obama announced in July 2011 that as part of her Let’s Move campaign, she had received commitments from major food retailers nationwide to open or expand over 1,500 stores in areas that currently do not have easy access to fresh, nutritious foods in the United States. Furthermore, federal

86 Ibid., p. 11. It was reported that the executive received a book with 14 different commercially zoned parcels in food desert sites that the city identified. Eleven of the sites offered good revenue potential and three optimal.
87 Ibid.
88 Rahm Emanuel, “Expanding.”
90 Ibid.
91 Maaria Mozaffar, Hearing Transcript, p. 27.
92 Ibid.
agencies have a number of programs that provide funding to assist in efforts that include combating food deserts. For example, the USDA has an initiative entitled, “Know Your Farmer, Know Your Food,” which promotes farmers’ markets, farm stands, and community supported agriculture enterprises. The USDA also has a number of grant and loan programs including the Farmers’ Market Promotion Program, Specialty Crop Block Grants, Community Food Projects, Community Facilities Program, Business and Industry Guaranteed Loan Program, Healthy Urban Food Enterprise Development Center, and the Sustainable Communities Regional Planning grants. The U.S. Department of Health and Human Services (“HHS”) has a Community Economic Development Program, and the U.S. Department of Housing and Urban Development has the Community Development Block Grant Choice Neighborhood Initiative. Finally, the USDA’s Agricultural Marketing Service set aside approximately $500,000 in competitive grants funding for fiscal year 2009 to assist farmers’ markets in establishing wireless point-of-sale equipment or other EBT projects, which should encourage federal Supplemental Nutrition Assistance Program (“SNAP”) participants to shop at these markets.

The HHS Region V; the City of Chicago Department of Public Health; and the American Medical Association partnered to create “Building a Healthier Chicago,” a collaboration of local and national stakeholders working to strengthen efforts to promote the health of Chicago residents and employees. Among other things, this collaboration is working in concert with the Let’s Move! campaign to address childhood obesity. It also has released “Market Guide to Keep It Fresh: Everything You Need to Set Up and Run Your Neighborhood Market,” a manual that was created by a team of DePaul University MBA students. This manual serves as a very useful guide for community members looking to begin a farmers’ market in their neighborhood.

b. Private Efforts

Private resources through nonprofit organizations have also addressed the problem of low access to nutritious foods. Specifically, Wholesome Wave began its Double Value Coupon Program in 2008. This program doubles the value of Illinois LINK cards used by participants of SNAP when they shop at participating farmers markets in Illinois. Currently, the following Chicago farmers’ markets participate in this program, and a few of them are located in areas with low access to nutritious foods:

- 61st St. Farmers Market
- Lincoln Square Farmers Market
- South Shore Farmers Market
- Beverly Farmers Market
- Division Street Farmers Market

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• Bronzeville Community Market
• Englewood Farmers Market
• North Lawndale Farmers Market
• Daley Plaza

6. Efforts to Address Food Deserts in Chicago: Modifying Personal Behaviors

Although improving access to nutritious foods is a crucial first step, researchers told the Committee that it is only the first step. As Dr. Odoms-Young of the University of Illinois at Chicago told the Committee during the fact finding:

There have been national studies that have looked at the relationship of new grocery stores and dietary intake, and some of those studies have actually not shown an impact. So when we look at solutions for communities the sort of one-size-fits-all, just bring in the large grocery store, only solution may not actually result in changes [in health.] We need to link building a new store in a community to increase in consumption [of nutritious foods] and we need to link that to lower rates of disease if we are going to address disparities in health.100

In order to improve the health of neighborhoods deemed to be food deserts, the residents of these neighborhoods must also purchase, prepare, and consume these nutritious foods in lieu of unhealthier alternatives. This may be simpler than it sounds, particularly for people in lower economic classes. The time costs of preparing healthy foods, especially in relation to the ease and low price of acquiring less healthy fast food is a significant factor.101 The USDA concluded that there needs to be a stronger public health campaign, low-income consumer incentives, access to already-cut-and-cleaned fruits and vegetables, or healthier prepared food options for residents of food deserts.102

In addition to time costs, as a result of living in food deserts, residents of these areas may lack the experience and knowledge that comes from being exposed to fresh fruits and vegetables. For example, Mayme Buckley, director of external affairs for the Healthcare Consortium of Illinois, was quoted as saying in regard to residents of the Roseland neighborhood:

I think that first of all, most of the moms with kids are young parents. If they're not exposed to fresh fruit or vegetable, how do they know how to eat? We were just talking about “what is a squash?” Some of the kids didn’t know because they hadn’t been exposed to it. They have been exposed to fast food: some tomatoes on a hamburger.103

Similarly, dieticians who go out with the Chicago Food Depository’s two mobile produce vans, reported that only about half of the clients receiving food knew what zucchini and asparagus were and how to prepare them.104 They reported that even a smaller number knew how to prepare them healthfully. However, efforts are underway to provide residents of food deserts

100 Odoms-Young, Hearing Transcript, pp. 125-126.
101 USDA, Access Report, p. 112.
102 Ibid.
103 Hanney and Hills, “Food Deserts,” p. 11.
104 Ibid., p. 12.
the exposure to fresh fruits and vegetables as exemplified by the Chicago Food Depository dieticians going out to instruct clients and hand out flyers and recipes.105

Another effort at increasing the education and experience level residents of food deserts have with fresh fruits and vegetables is funded by the Merck Company Foundation. It formed the nationwide “Alliance to Reduce Disparities in Diabetes.” This program supports comprehensive, multi-faceted, community-based programs that address key factors to improve health outcomes for people living with diabetes.106 One Alliance partner, the University of Chicago, is developing these community-based programs. A major part of this program is addressing the challenges that residents of the Southside of Chicago face in terms of access to healthy foods and education about nutrition and eating healthy foods.

A significant component of the program, according to Dr. Monica Peek of the University of Chicago, consists of:

addressing a lot of the very real cultural norms around food, both the historical issues that African Americans have around food preparation and [also] the modern day issues with fast food access and how we get used to eating those tasty cheeseburgers and fries . . . and how to sort of re-acclimate your taste buds so that you start liking things that taste different.107

The program includes a mock grocery store where the community can find foods that are available in their own groceries.108 People are then taught about the foods, how they are prepared, and which things should be eaten. In terms of preparing foods, the program has partnered with Kennedy King College as well as City Fresh Foods to provide demonstrations and cook-offs so people can learn how to cook these healthy foods about which they may know little.109 For example, Tonya Roberson, project manager for Improving Diabetes Care and Outcomes on Chicago’s South Side, told the Committee, “If it’s asparagus and the these communities are not accustomed to eating asparagus, they’ll show them how to prepare asparagus, give them recipes and different herbs and spices that they can use to enhance the flavor of these vegetables so they can be tasty for them and they can have them with their family.”110 Also as part of the program, City Fresh Produce, in partnership with the University of Illinois at Chicago, provided fresh fruits and vegetables one day a week at various clinics for patients.111 The program additionally partners with urban farming projects to teach people how to plant, preserve seeds, build gardens, and even develop high wind tunnels so fresh fruits and vegetables can be farmed in the winter.112

Finally, the program also partnered with Save-A-Lot stores, one of the leading retailers in terms of opening new stores in neighborhoods labeled as food deserts. Working collaboratively, grocery store tours are being conducted to teach local residents how to “shop right.”113 According to Lucinda Perry of Save-A-Lot stores, these grocery store tours are a win-win for the

105 Ibid.
107 Peek, Hearing Transcript, p 99.
108 Ibid.
109 Ibid., pp. 102-103.
110 Roberson, Hearing Transcript, p. 103.
111 Ibid., pp. 102-103.
112 Ibid., p. 104.
113 Ibid., p. 105.
stores and the communities in which the stores are opening.\textsuperscript{114} She said that grocery stores themselves are an underutilized resource to the community and can play a larger role in the health of families. However, Ms. Perry added that logistics need to be worked out because hard-discount stores like Save-A-Lot keep prices low in part by minimizing their staffing levels. So there needs to be someone to take the lead on coordination to determine the “manageable number of tours” and when these tours should take place.\textsuperscript{115} She concluded that Save-A-Lot would like to see the grocery store tours that are being created on the Southside become a turnkey program that can be easily replicated at other stores, but work needs to be done before that is achieved.\textsuperscript{116}

On a more targeted level, a number of presenters suggested that efforts should be made to educate children on the importance of healthy eating. As Dr. Odoms-Young said, “When we talk about changes in food access, we want to target early childhood because we already see disparities in overweight rates between African Americans and whites and Latinos and white as early as the three- to five-year-old range.”\textsuperscript{117} Changes in WIC food packages implemented in some states include greater incentives for recipients of WIC to purchase low-fat milk and whole grains, and vouchers for purchasing fruits and vegetables. States were required to adopt new food packages in 2009. The changes that Illinois made were “the biggest in 30 years.”\textsuperscript{118} These changes may produce increased and steady demand for these foods in stores in neighborhoods with high concentrations of WIC participants and may encourage small store operators to offer these healthier foods.

In regard to the marketing of unhealthy foods to young children in Chicago’s food deserts, Dr. Odoms-Young informed the Committee:

\begin{quote}
The Rudd Policy Center at Yale, as well as a research group at UIC, has shown that African American children were exposed to more TV ads that marketed unhealthy food. There was a recent study comparing English and Spanish language television that shows that on Spanish language television there was more marketing of unhealthy products. So we also have to think about policies related to food marketing and targeting towards low income or minorities or communities of color.”\textsuperscript{119}
\end{quote}

After the fact finding meeting, it was reported that several federal government agencies announced a proposal where they would urge companies to only market foods to children ages 2 through 17 if they are low in fats, sugars, and sodium and contain specified healthy ingredients.\textsuperscript{120}

\begin{footnotes}
\item[114] Lucinda Perry, Telephone interview, March 23, 2011.
\item[115] Ibid.
\item[116] Ibid.
\item[117] Odoms-Young, Hearing Transcript, p. 123.
\item[119] Hearing Transcript, pp. 127-128.
\end{footnotes}
7. Recommendations for Addressing Chicago’s Food Deserts

From the beginning of the project, the Illinois Advisory Committee’s goal has been to explore various approaches to solving the civil rights problem of food deserts in Chicago. To that end, the Committee asked all the presenters at the fact finding meeting to make recommendations on the problem as part of their presentations. One of the recommendations made by Dr. Odom-Young of the University of Illinois at Chicago was:

We need to expand our [recommendations] to not only include bringing stores in but also do people have the ability to purchase food or the resources to purchase food? Do they have the nutrition education to choose food? Do they have transportation to carry food from one place to another? What are the facilities like? What’s the quality of the food? So, [we need] to really think deeper.”

The Illinois Advisory Committee thinks the presenters at the fact finding meeting took Dr. Odom-Young’s challenge to “think deeper” seriously. The Committee breaks these recommendations into two general categories: improving access and education and improving the federal food stamp program.

a. Improving Access and Education

Although presenters told the Committee that simply opening stores will not adequately address the problem of food deserts, improving access to nutritious food is the crucial first step toward building healthier communities. The individual behavior issues such as residents who do not like the taste of healthy foods or do not know how to prepare healthy foods cannot even begin to be addressed unless these same individuals can first purchase healthy foods. In addition, as Dr. Odoms-Young of the University of Illinois at Chicago told the Committee, “We have very few individual behavior change approaches that work . . . so focusing on the environment is really because we know people can’t make healthy decisions when foods are not available for them to make those decisions.”

Not surprisingly then, the Committee heard a number of recommendations regarding improving access to fresh, nutritious foods in areas labeled as food deserts.

First, a number of presenters supported providing more funding of the Illinois Fresh Food Fund. Many presenters referenced a similar initiative in Pennsylvania that they claim has been a successful public-private partnership fostering the development of new supermarkets or other grocery stores in underserved areas. According to a USDA study, $41.8 million in grants and loans had funded 58 stores and 1.4 million square feet of retail space. In contrast, the state of Illinois dedicated $10 million in its Capital Bill to create the Illinois Fresh Food Fund. Kathleen Duffy told the Committee that this funding needs to expand because the initiative “supports a broad range of nutrition, public health, food security, economic and community development projects, and is designed to encourage and enable people throughout to make those

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121 Odoms-Young, Hearing Transcript, pp. 126-127.
122 Odoms-Young, Hearing Transcript, pp. 124-125.
things happen in their neighborhood. It’s very much worth funding.”\textsuperscript{125} Malik Nevels stated that this fund provides “seed money” to assist groceries in defraying some of the $25 million it costs to open a major supermarket, and he therefore says it is crucial to continue.\textsuperscript{126}

Another common recommendation presented to the Committee was for Chicago to eliminate restrictive zoning ordinances. These changes would encourage healthier environments by making it easier for grocery stores to open and community gardens to sprout. Because Illinois is a home rule state,\textsuperscript{127} Chicago can make these zoning decisions, and, as abovementioned, Mayor Emanuel has supported exercising this power to address food deserts with plans to be released by the end of July 2011.

In considering zoning changes, Mayor Emanuel may seek the experience of other cities for guidance. For example, the New York Food Retail Expansion to Support Health (FRESH) Program was recently established to promote grocery stores in underserved areas of New York City by combining financial and zoning incentives.\textsuperscript{128} Although Chicago will need to determine which zoning incentives best attract retailers, it is worth considering that New York City determined that they needed:

- additional floor area for grocery stores in mixed use buildings (e.g. in a residential building, one additional square foot of residential floor area is allowed for every square foot provided for a FRESH food store up to 20,000 square feet); (2) a reduction in the number of required parking spaces in pedestrian-oriented neighborhoods for which current parking requirements are unnecessarily high; and (3) larger as-of-right stores in light manufacturing areas (eliminating the need for a special permit and its costly and lengthy review). Participating stores must be certified as FRESH by meeting certain criteria, including dedicating at least 30 percent of the selling area to the sale of perishable goods that must include dairy, fresh produce, and frozen foods, and may include fresh meats, poultry, and fish. The program also requires a continuing commitment from the retailer.\textsuperscript{129}

Zoning changes can also include making it easier for food retailers to overcome the fixed costs of obtaining land and permits for building a new store. Including provisions that reduce these costs or subsidize development of new or expanded stores may be effective policy solutions.\textsuperscript{130} Other zoning changes to consider include limiting the number of fast food establishments in food deserts or creating some sort of healthy ratio between fast food and food retailers that stock nutritious food.

Finally, zoning changes should also encourage community gardens and other community-led efforts to increase access to healthy foods. Erika Allen of Growing Power told the Committee how she was ticketed for making her entire yard a garden.\textsuperscript{131} Sensible zoning laws would not

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\textsuperscript{125} Kathleen Duffy, Hearing Transcript, p. 165.
\textsuperscript{126} Malik Nevels, Hearing Transcript, p. 172.
\textsuperscript{127} Ill. Const. of 1970 art. 7, § 6.
\textsuperscript{130} USDA, Access Report, p. 104.
\textsuperscript{131} Erika Allen, Hearing Transcript, p. 170.
prohibit and punish such beneficial efforts by residents of food deserts, as Ms. Allen was doing in the West Side. Ms. Allen provided the Committee with the strong sentiment that Chicago should use a light hand on initiatives for people who want to grow their own food.

Another commonly repeated suggestion was for Chicago to offer tax incentives to attract food retailers to low access neighborhoods and help defer some potential higher security costs that may prevent retailers from opening. Dr. Arnold of the Illinois Department of Health and others told the Committee that health disparities impact an entire community’s ability to make a productive contribution to their own neighborhood and society in general, so the use of tax dollars to draw grocery stores should be encouraged. However, potential drawbacks include whether the use of tax revenues to encourage grocery stores is more beneficial to low-income areas than other uses of the revenue. The USDA concluded that buy-in from consumers will affect the ultimate success so if a community does not believe tax dollars being spent to bring in a large grocery store is a priority such concerns need to be addressed upfront. The USDA urged local governments to prioritize with communities whether a particular low-income neighborhood that may lack access to banking, health care services, and well-functioning schools needs the scarce resources spent on subsidizing a supermarket.

Other ways exist to improve access to healthy foods other than building new grocery stores. For instance, the USDA recommends that stakeholders consider various modifications that may improve access because the modification of existing stores is less expensive and time consuming than opening new stores. Modifications include increasing availability of healthy food, decreasing the availability of less healthy food, changing the relative prices of both of these types of foods, or changing the physical layout of foods within stores. Instead of opening new stores, some areas may implement programs that work with existing neighborhood corner stores or convenient marts to offer more healthy options and fewer less healthy options. For example, Steve Casey of Fresh Moves said this is best done by creating economic incentives for convenient stores to stock nutritious foods. He said such incentives are in place for convenient stores to sell chips so similar incentives need to be in place for them to sell nutritious foods.

The Committee heard recommendations that local and state government do more to develop community gardens and other community based solutions by encouraging entrepreneurship, particularly in African American neighborhoods that lack independent groceries. One model for stakeholders to evaluate is the HOPE Collaborative in Oakland, California. This non-profit organization seeks to maximize local ownership and control of food retail. In addition, community-level programs, like farmers’ markets, community gardens, or mobile carts or trucks that sell fruits and vegetables may improve local food environments. According to the USDA, these programs “are often less expensive, require less space, and can be quicker to implement than programs that encourage new store development.”

The current problem many cities face with home foreclosures may offer an opportunity for these cities to think creatively. In Cleveland, a quasi-government land bank was created to

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133 Ibid., pp. 106-107.
135 Ibid., p. 105.
136 Casey Interview.
137 Ibid.
offer lenders who owned foreclosed homes a deal. The land bank would not require lenders to pay the often exorbitant costs of code violations in return for the lenders paying to have the homes demolished. As a result, lenders save on marketing these properties which usually cannot sell, cities get abandoned buildings removed, and homeowners on these blocks get prices stabilized. In Cleveland, the city then turned some of these vacant lots over for community gardens.

At the fact finding meeting, the Committee also heard how community gardens could involve the children of the communities and provide them with productive and useful experiences. However, as the work of Ms. Allen at Growing Power exemplifies, these programs also operate on a more limited scale in terms of quantity of food and seasons in which they can provide food. Community gardens also require more significant time commitments on the part of providers and consumers.

Dr. Arnold of the Illinois Department of Public Health encouraged the development of community gardens but also provided a warning: “regulate them to some extent to make sure that proper procedures followed so they are distributed safely.” He told the Committee, “My background is also in industrial medicine toxicology and some plants will bioaccumulate toxins in the inner city environment with mercury and also with lead. We have to be careful . . . going forward, making sure that people who are growing understand the process.”

In regard to mobile healthy food carts, Steven Casey of Fresh Moves, the organization that bought a used CTA bus and retrofitted it into an organic fruit and vegetable stand on wheels, made a number of recommendations. First, all stakeholders need to think differently about the food desert problem. He added that, “We aren’t forced to do that now.” Second, he recommended that addressing the problem requires cooperation. He said that for nonprofit organizations, in particular, “By doing it all on your own, you tend to fail. We sought out not to do it on our own.” To that end, he stated that Fresh Moves partnered with Kendall College’s business school to get the bus running. He has plans to partner with Kendall College’s culinary school to provide the educational element. He mentioned that the culinary school may provide recipe cards on the bus and eventually include instruction on how to clean and prepare fresh fruits and vegetables. He said that they have even challenged the culinary school to make recipes without math because in some communities “people do not have measuring cups or know what two-thirds of a cup means.”

Implementing a mobile food cart system is not an easy task. New York City has been trying to implement their own “Green Cart” program, which is intended to increase the number of mobile carts that offer fresh fruit and vegetables in underserved areas with the assistance of private foundations offering micro-loans to finance carts for vendors. This program has found

141 Ibid.
142 Ibid.
144 Arnold, Hearing Transcript, p. 79.
145 Ibid., pp. 79-80.
146 Casey Interview.
147 Ibid.
148 Ibid.
149 Ibid.
recruiting vendors to be more difficult than expected as these vendors are subject to the same permit process as other vendors. In addition, the carts are restricted to operate only in underserved areas, serve fruits and vegetables, and at first did not accept food stamps.

b. Improving the Federal Food Stamp Program

The federal Supplemental Nutrition Assistance Program (“SNAP”), formerly known as the Food Stamp Program, is “the first line of defense” against malnutrition and hunger for U.S. citizens in need. Retailers authorized to participate in SNAP must sell staple foods for home preparation and consumption. In addition, the store must offer for sale, on a continuous basis, three different varieties of foods in each of four staple food categories, with perishable foods in at least two categories; or have more than 50 percent of total gross sales in staple foods. Most stores are authorized under the first criterion because a store can technically meet this criterion with a small number of items that meet the variety and perishable requirements.

SNAP benefits are provided on the Link Card for Illinois residents. In Chicago, SNAP has received criticism because of the criteria the state uses to authorize SNAP retailers. The Gallagher Group conducted an initial evaluation of Chicago food stamp retailers in 2007 and found that most of these retailers are what is termed “fringe” food establishments, which include liquor stores, gas stations, bakeries, specialty food stores, convenience stores, dollar stores, and pharmacies. Specifically, the study found that, “Out of the 1,372 Chicago establishments that carry [SNAP] status, 120 (roughly 9 percent) appear to be primarily liquor stores rather than the original government designation of convenience store, medium or small grocer, or supermarket.” The study concluded that 44 of these 120 liquor stores carrying this special status are located in neighborhoods that are considered food deserts.

In an interview, Mari Gallagher stated that she had two problems with the SNAP program as it relates to food deserts in Chicago: 1) the standards to become a SNAP retailer are too low, and 2) the standards are not followed. Understanding the reality that liquor stores are a significant retailer to food deserts, Maaria Mozaffar, as a board member of the Inner City Muslim Action Network (“IMAN”), told the Committee that IMAN has started a dialogue with liquor stores who provide food in these low access neighborhoods. She specifically asked the Committee and the Commission to investigate the requirements to be a designated a SNAP retailer because, in her opinion, the requirements are “few” and “liquor stores are not meeting them.” She also added that USDA needs to “go store by store in the areas where the food deserts are designated” and conduct audits to determine whether the stores are accurately

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152 Ibid.
155 Gallagher, “120 USDA,” p. 3.
156 Ibid., p. 1.
157 Ibid.
158 Ibid.
159 Mozaffar, Hearing Transcript, p. 23.
reporting their stock of fresh fruits and vegetables, healthy carbohydrates, or healthy protein, for example. However, these concerns must also be considered in light of the USDA’s goal, which is to balance access to a sufficient number of neighborhood stores with availability of a continuous supply of required food. There are tradeoffs to restricting small stores from SNAP authorization and to increasing access to large grocery stores or supermarkets.

The Committee also heard from a cooperative grocery store facing a different problem with SNAP. Kathleen Duffy explained that in opening the Dill Pickle Co-op, “from the time we got our business license, which was not until just before we opened, it took us 45 days to be approved and be able to offer acceptance of the Link Card. That was a month and a half in our neighborhood where folks who rely on the Link Card for food could not use it at our store. It was not helpful in establishing a first impression . . . that 45-day period is a big barrier for establishing that impression right off the bat.”

Finally, the Committee heard a number of presenters recommend that the value of the Link Card purchases on fresh fruits and vegetables should be doubled. The Committee learned that as part of the Food, Conservation, and Energy Act of 2008, Congress authorized $20 million for pilot projects to evaluate health and nutrition promotion in SNAP. The goal of the pilot projects is to determine if incentives provided to SNAP recipients at the point-of-sale increase the purchase of fruits, vegetables, or other healthful foods.

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161 Ibid., pp. 63-64.
163 Duffy, Hearing Transcript, pp. 164-165.
165 The Committee notes that the Farm Bill is due to be reauthorized in 2012. A number of presenters expressed concerns that subsidies are given to farmers for corn production that produces inexpensive bags of chips and other snacks while the farm system as a whole does not produce enough fruits and vegetables to feed every American if he or she were to consume the five daily servings that is recommended.
8. Summary of Committee’s Findings and Recommendations

- **Address Food Deserts in Chicago as Civil Rights Issue**
  Food deserts are a public health problem throughout Illinois. Neighborhoods and communities in both urban and rural areas can experience limited access to fresh, nutritious fruits and vegetables. However, the Committee finds the issue of food deserts in Chicago to be a civil rights issue. Food deserts exist almost exclusively in African American neighborhoods within the city. Furthermore, but for family food retailers present in Latino neighborhoods, food deserts would also exist in many Latino neighborhoods.

- **Define “Food Desert” or Find New Description of Problem**
  The term “food desert” does not define accurately the problem neighborhoods face. Based upon the obesity epidemic in communities of color, scarcity of food is not the problem. The problem is providing increased access to healthy, nutritious fruits and vegetables at a reasonable cost. Furthermore, federal resources are being spent to study “food deserts” yet there is not a clear definition of what the term means. The Committee recommends that the USDA define food desert or offer a new term with a clear definition for this problem of access to healthy, nutritious foods.

- **Recognize Diversity of Communities**
  Presenters at the fact finding stressed that the problem must be addressed in a way that recognizes neighborhoods are different. In Chicago, food deserts predominate in African American communities, but they also exist in Latino communities. These two communities are generally very different. Furthermore, there are great challenges within African American communities and Latino communities themselves as each neighborhood has its own variations with respect to access to public transportation, rates of car ownership, crime, number of fast food options present, availability of vacant land, zoning restrictions, quality of existing stores, and many other specific factors. The Committee concludes that seeking one cure-all or a one-size-fits-all approach to addressing the food desert problem is futile. Solutions must be derived community-by-community while considering all of these and other relevant factors.

- **Expand Focus Beyond Solely Opening New Stores**
  The Committee heard numerous presenters state that simply opening grocery stores is not the sole goal and will not solve the problem. The Committee finds that efforts to address food deserts must also focus on increasing food and nutrition education, understanding cultural traditions, and addressing economic hurdles to healthy eating. These efforts can be done through communities themselves in partnership with city agencies, food retailers, and nonprofit organizations. It can also be addressed to children through the public education system. Further, the Committee recommends the city should consider using Chicago’s numerous neighborhood festivals and block parties as opportunities for education about purchasing and preparing fresh vegetables in a healthy manner.
• **Improve Community Involvement**

The Committee determined that the community must be a primary participant in any efforts to address nutritious food access in their neighborhoods. For food retailers to succeed, the neighborhoods in which they are located must support and buy-into those stores. Neighborhoods labeled as food deserts struggle in numerous areas, and the residents of these neighborhoods need to determine their own priorities and strategies with the assistance and support of government, non-profit organizations, food retailers, and other interested parties and potential stakeholders.

• **Expand Retailer Involvement and Investment**

Just as the Committee concludes that community buy-in is crucial to opening new stores in these neighborhoods, food retailers have an important role to play in aiding in the behavioral changes needs. Retailers must recognize the educational needs, cultural traditions, and economic challenges residents of food deserts face. In addition, retailers should partner with nonprofit organizations and academic institutes as frequently as possible to aid efforts at addressing community concerns. Working consistently with communities is the best way to achieve a win-win situation for food desert neighborhoods and food retailers.

In addition, retailers should consider the opportunities that the depressed real estate market may present. Despite the difficult economy, there may be opportunities available for buyers to purchase property at below market rates. Further, investing in neighborhoods labeled food deserts during difficult economic times will harness significant community goodwill and support.

• **Continue and Widen Current City Efforts**

Mayor Emanuel and the city of Chicago have made serious efforts to address the food desert problem. These efforts most clearly consist of reaching out to food retailer executives to better understand the hurdles they face in opening stores in neighborhoods labeled food deserts. Addressing the concerns and obstacles that food retailers say they face is a crucial first step.

However, Chicago also needs to take steps in other areas to address the problem. First, the city needs a plan to address the crime and poverty problems that are prevalent in these neighborhoods.

Second, the Mayor should consider another summit that includes community organizations and nonprofits that are trying to improve access to healthy and affordable foods in the food deserts. Although these organizations may face similar zoning and permit hurdles as larger food retailers, the city would benefit from hearing about these issues from the organizations themselves.

Third, the Chicago Public Schools and City Colleges system should be utilized as a resource for food retailers and other organizations trying to increase education about food. Students of these schools need to learn more about raising or purchasing and preparing healthy foods. These students can then make a difference in their communities.

Fourth, the city should consider establishing a land bank to negotiate with lenders who own foreclosed homes in neighborhoods considered food deserts. These lots of land should be turned into productive community gardens instead of remaining foreclosed properties that destabilize property values and contribute to other neighborhood ills.
• **Understand Disparity in Independent Food Retailers**

Both African American communities and Latino communities in Chicago lack access to large grocery stores in Chicago. However, Latino communities are better served by small, independent grocers who primarily serve Latinos; whereas, African American communities do not have comparable independent groceries. The Committee itself should explore why more independent stores in Latino communities than African American communities. In addition, the Committee understands that some efforts are currently underway, but the city should strive to streamline the process for entrepreneurs and nonprofit organizations that wish to serve food desert neighborhoods with nutritious foods, such as fruit and vegetable carts or independent grocers. The city should also ensure that zoning or other ordinances do not discourage or prohibit residents from starting personal or community gardens.

• **Develop a Clearinghouse of Information**

There currently is no clearinghouse of information on food deserts in Chicago. The Committee finds that organizations and even government agencies are addressing the problem largely in isolation from each other, and the Committee believes more can be accomplished if these groups begin to work more cooperatively. For example, Fresh Moves partnered with Goodness Greeness to provide organic fruits and vegetables to neighborhoods, but it was achieved largely by chance. More intentional efforts need to be made to create these synergies. Nonprofit organizations and entrepreneurs need a source for help in accessing the state and federal funding that is currently available for efforts to address food deserts and in navigating the city zoning and permit process. Retailers need a source to consult for getting help from academic institutes, health researchers, and nonprofit organizations to provide kitchen demonstrations and grocery store tours, for example. The Appendix at the end of this report can be a start of the type of clearinghouse that needs to be created.

• **Maximize Existing State and Federal Funding**

The state of Illinois should maximize existing programs (particularly the Fresh Food Fund) and establish new programs to make nutritious food more accessible. In addition, the Committee recommends that private-public partnerships that currently expand the use of Link Cards at farmers’ markets or mobile food carts be supported and grown. The Committee believes other creative uses of SNAP funds should also be considered, such as supporting users’ ability to get to food retailers.
APPENDIX A: CHICAGO FOOD DESERT RESOURCE LIST

**Federal Resources**

Let’s Move
http://www.letsmove.gov/

Building a Healthier Chicago
http://healthierchicago.org/

Center for Disease Control and Prevention
http://www.cdc.gov/Features/FoodDeserts

USDA Know Your Farmer, Know Your Food

USDA Farmers Market Promotion Program
http://www.ams.usda.gov/AM Sv1.0/fmpp

USDA Specialty Crop Block Grants
http://www.ams.usda.gov/AM Sv1.0/ams.fetchTemplateData.do?template=TemplateN&navID=S pecialtyCropBlockGrant0Program&rightNav1=SpecialtyCropBlockGrant0Program&topNav=&l eftNav=CommodityAreas&page=SCBGP&resultType

USDA Community Food Projects
http://www.csrees.usda.gov/nea/food/in_focus/hunger_if_competitive.html

USDA Community Facilities Program
http://www.rurdev.usda.gov/rhs/brief_cp_grant.htm

USDA Business and Industry Guaranteed Loan Program
http://www.rurdev.usda.gov/rbs/busp/b&i_gar.htm

USDA Healthy Urban Food Enterprise Development Center
http://www.csrees.usda.gov/fo/healthyurbanfoodenterprisedevelopmentcenter.cfm

USDA Agricultural Marketing Service
http://www.bing.com/search?q=USDA+Agricultural+Marketing+Service&src=IE-SearchBox&FORM=IE8SRC

HUD Sustainable Communities Regional Planning grants

HUD Community Development Block Grant Choice Neighborhood Initiative
HHS Community Economic Development Program

**State, County, and City Resources**
City of Chicago Department of Public Health

Cook County Department of Public Health
http://www.cookcountypublichealth.org/healthy-initiatives

Illinois Department of Public Health
http://www.idph.state.il.us/

Illinois Fresh Food Fund
http://www.agr.state.il.us/newsrels/taskforcereport-outside.pdf

**Research Centers**
Chicago State University Neighborhood Assistance Center
http://www.csu.edu/NAC/neil_community_food_security.htm

Mari Gallagher Research and Consulting Group
http://www.marigallagher.com/

National Minority Quality Forum
http://nmqf.org/

University of Illinois at Chicago School of Public Health
http://www.uic.edu/sph/

**Fruit and Vegetable Suppliers**
Goodness Greeness
http://www.goodnessgreeness.com/about/

Peapod
http://www.peapod.com/

**Nonprofit, Community Organizations, and Partnerships**
Dill Pickle Food Co-Op
http://dillpicklefoodcoop.org/
The Food Trust  
http://www.thefoodtrust.org/index.php

Fresh Moves  
http://freshmoves.org/

Greater Chicago Food Depository  
http://www.chicagosfoodbank.org/site/PageServer

Growing Power  
http://growingpower.org/

Healthcare Consortium of Illinois  
http://www.hcionaline.org/miss_vision.html

Improving Diabetes Care and Outcomes on the South Side of Chicago  
http://ardd.sph.umich.edu/university_chicago.html

Neighbor Capital  
http://neighborcapital.com/

Wholesome Wave  
http://wholesomewave.org/
AGENDA

FACTFINDING MEETING OF THE ILLINOIS ADVISORY COMMITTEE

Wednesday, August 11, 2010

National Museum of Mexican Art
1852 West 19th Street
Chicago, IL 60608

Introductions and Background to Health Disparities Project
9:00 a.m. to 9:15 a.m.

Marty Castro, Chair, Illinois Advisory Committee

Food Desert Panels
Panel 1
9:15 a.m. to 10:20 a.m.

Damon Arnold, Director, Illinois Department of Public Health
Alderman Freddrenna Lyle, City of Chicago Sixth Ward
Maaria Mozaffar, esq., Chair, Illinois Fresh Food Fund Task Force
Jim Bloyd, Regional Health Officer, Cook County Department of Public Health
Joseph Harrington, Assistant Commissioner, Chicago Department of Public Health

Panel 2
10:30 a.m. to 11:20 a.m.

Daniel Block, Coordinator, Fredrick Blum Neighborhood Assistance Center, Chicago State University
Angela Odoms-Young, Assistant Professor, Department of Kinesiology and Nutrition, University of Illinois at Chicago
Monica Peek, Assistant Professor of Medicine, Section of General Internal Medicine, The University of Chicago
Tonya Roberson, Project Manager, Improving Diabetes Care and Outcomes on Chicago’s South Side, Section of Internal Medicine, University of Chicago
Panel 3
11:30 a.m. to 12:20 p.m.

Erika Allen, Chicago Projects Manager, Growing Power
Malik Nevels, Executive Director, Illinois African American Coalition for Prevention
Kathleen Duffy, Board member, Dill Pickle Food Co-op

Lunch
12:20 a.m. to 1:15 p.m.

Language Barriers Panels
Panel 1
1:15 p.m. to 2:20 p.m.

Elizabeth Jacobs, Associate Professor of Medicine, Cook County Hospital & Rush
University Medical Center
Julie Yonek, Research Associate/Project Director, Center for Healthcare Equity Institute
for Healthcare Studies, Northwestern University
Grace Hou, Assistant Secretary, Illinois Department of Human Services
Arturo Garcia, Supervisory, HIPAA Team Leader, U.S. Department of Health and
Human Services Office of Civil Rights

Panel 2
2:30 p.m. to 3:20 p.m.

Layla P. Suleiman Gonzalez, State of Illinois Latino Family Commission
Marilyn Chapman, Secretary, Chicago Bilingual Nursing Consortium
Karin Ruschke, President and Owner, International Language Services, Inc.
Esther Sciammarella, Director, Chicago Hispanic Health Coalition

Panel 3
3:30 p.m. to 4:20 p.m.

Linda Coronado
Carmen Velasquez, Executive Director, Alivio Medical Center
Mireya Vera, Director of Interpreter and Community Services, Westlake Hospital
Candace King, Executive Director, DuPage Federation on Human Services Reform

Open Session
4:30 p.m. to 5:00 p.m.

Adjournment
5:00 p.m.
APPENDIX C

Statement of Jonathan Bean,
Cartersville, IL

As a new member who had no role in the research phase of this report, I planned to abstain from any comment or vote. After reading the full report, I held several long phone conferences with our chairwoman and the regional director. I also did research on my own (although I was already quite familiar with the topic). After thoughtful consideration, I offer the following constructive criticism, much of it aimed at asking questions of city government.

Concurring: I concur with most of the recommendations because they are noncontroversial—too noncontroversial for reasons I discuss below. The findings are also insufficient.

Dissenting: A failure-to-take-a-stand tone is typical of committee reports but we need to explain why the “food deserts” in Chicago have lacked “full-service supermarket chains.” If we do not know the why, then other cities (and perhaps Chicago) may fall into the same counterproductive dynamic of demanding contradictory things: namely, grocery stores but only the type agreed upon by the entire “community.” The same holds for medical interpreters: we need more but we want better interpreters.

Adverse zoning policies, union opposition and ideological animus toward Walmart all play a role in keeping some Chicagoans food poor. City government is the “elephant in the room” and, as a civil rights body, it is not our job to make those in power comfortable by ignoring these factors. I hope that future investigations tackle the public policy and business environment, rather than dance around issues of zoning, law enforcement, and education—all responsibilities of city government.

References to testimony indicate that the Committee heard criticism of city policies. However, the report mutes these concerns and treats local government with “kid’s gloves.” Also, in attempting to please all sides, it recommends contradictory policies: for example, more medical interpreters from “the community” while calling for levels of training that will limit the number of interpreters and exclude “the community” from participating.

Reading between the lines—whether it is zoning, permit processing, or the city’s Johnny-come-lately attitude toward Walmart—the city of Chicago is the “elephant in the room”: “an obvious truth that is being ignored or goes unaddressed. . . . an obvious problem or risk no one wants to discuss.” The only mention of city officials is praise for the current mayor’s “Food Desert” agenda. A more honest appraisal by outgoing Mayor Daley addresses the decades-old issue of why The Poor Pay More (Caplovitz, 1967) and why those poor consumers are often African American: http://abclocal.go.com/wls/video?id=7514158.