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Food Insecurity and Nutrition in Franklinton

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Food Insecurity and Nutrition in Franklinton

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Franklinton

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Submitted To:

Franklinton Hunger Task Force

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April 6, 2015

Franklinton Hunger Task Force
1234 W. Broad Street
Columbus, Ohio 43125

Dear Franklinton Hunger Task Force,

We are a nonprofit organization attempting to raise awareness about food insecurity and nutrition in Franklinton. We are writing this report to bring attention to how food insecurity is a problem in Franklinton; to make suggestions to solve the food insecurity problem; and to get people involved with the solutions.

Enclosed in this report are our findings about the problem of food insecurity in Franklinton and nutrition facts. All possible solutions and recommendations are enclosed to help solve the problems of food insecurity in the Franklinton area. There are several approaches that could be adopted by the Franklinton Hunger Task Force, but we advocate that they pursue the Community Food Systems Approach.

In this report, there is a description of the problems at large in a global perspective as well as issues focusing on the Franklinton community. Following is a description of our investigation and our findings. Then our recommendations and solutions to help solve the problem come next. After concluding our findings, you will find a list of sources and acknowledgements of those that have helped us during our investigation.

Thank you for your attention,

Kelsey Seltzer

Ryan Thombs

Hannah Baker

Tanner Graham

Ashley Mullins

Executive Summary

Overview/ Description

In this report, we, Fit For Franklinton, a non-profit group located in Columbus, OH, will introduce to you a rising problem that is occurring throughout the nation, more specifically, in the Appalachian Region. That problem is Food Insecurity within low income neighborhoods. This has begun to take a toll on many families as they face difficult financial decisions such as buying groceries, paying for gas and/ or other types of transportation, and paying rent/ utility bills. It is affecting everyday life.

Objective

That's where we come in. The goal of our organization is to raise awareness about this problem and help the citizens of Franklinton. When dealing with Food Insecurity at a local level, there are three typical approaches used to solving this problem. These approaches are "charitable," "household improvements and support," and "Community Food Systems". Our group has chosen to advocate the "Community Food Systems" approach while working in Franklinton. This approach will attempt to maximize self-reliance and social justice in the given area. It will also bring together local government and local organizations who are working to localize and democratize food. We feel that this approach will give our organization the greatest chance to be successful as we focus on how to combat food insecurity and nutritional issues in Franklinton. We now challenge the Franklinton Hunger Task Force to implement these strategies into action.

Fit
For 
Franklinton

Food Insecurity and Nutrition in Franklinton

A rising problem today in the United States, more specifically in the Appalachian region, is the question, “Where will my next meal come from?” Unfortunately, an estimated 10% of the United States is suffering from food insecurity today (Holben, 446). The definition of food security is having access at all times to enough food to live a healthy, active lifestyle without needing to rely on emergency food supplies, begging, stealing, or scavenging for food. Insecure families have limited access to food and sometimes have to rely on unacceptable ways of obtaining it. Food insecurity can be related to anything from the size of your household, availability to food sources near you, and most commonly, the price of food.

In Franklinton, families suffer from food insecurity for these and other reasons. Over the last 30 years, the population of the neighborhood has decreased dramatically by roughly 20,000 citizens. Because of such a decrease in size, it is now a struggle for families to survive due to such limited resources, one of those being a grocery store to buy food to feed their families. For a grocery company to place a store in a neighborhood, there has to be a certain number of citizens covering a given radius to ensure that the store will be successful. The 10,000 or so citizens currently living in Franklinton do not meet the necessary requirements. This now means that families have a much harder time finding healthy food to feed themselves. Food insecurity can have many negative impacts on one’s life, and they must be addressed before solutions can be considered.

A Frustrating Dilemma

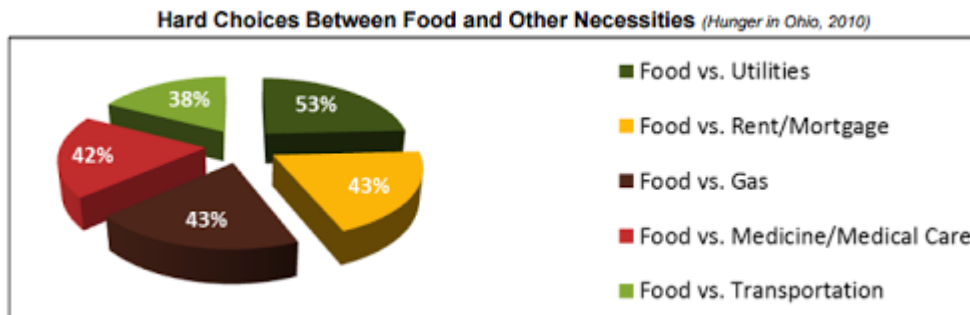
The problem of food insecurity and poor nutrition for urban Appalachians and for economically disadvantaged people anywhere is farther reaching than most people realize. As of 2010, the total number of hungry people in Ohio made up 16.4% of the state’s population. That means more than one out of every ten people in Ohio is food insecure, which is higher than the national average (Ohio, 2). A study from Michigan State University states that you don’t have to be below the poverty level to suffer food deficiency. 40% of hungry people are technically 185% above the poverty line and still do not have enough food for their families (Rose, 1).

A hunger situation can be caused by sudden changes in financial situation, losing a job or food stamps, or increasing in family size (Rose, 2). It is also found prevalently among people who are immigrants, disabled, or victims of domestic violence. These problems create instability in people’s lives that makes food insecurity more likely to occur. Appalachian people are a form of immigrant, though technically migrants or descendants of migrants. Like immigrants, they do not understand as well how to succeed in a new system, be accepted by native people, or have the foundation for success that everyone else has. However, if these conditions exist but the government income requirement is not met, people’s hunger goes unaddressed.

Hunger continues to go unaddressed by other governmental attempts. The commonly conceived solution of food banks can be plagued with unforeseen complications. In order to

simply apply to receive food from a food bank, there is considerable paperwork that must be completed, which is already overwhelming if an Appalachian person lacks the educational or experiential ability to fill out such forms. Other basic obstructions exist as well, such as having enough time off work, transportation to distant or multiple offices, or sheer reserved mental energy; all of these can keep people from completing all the paperwork necessary (Ohio, 6). Food is not as reasonably accessible for people in need as one would hope.

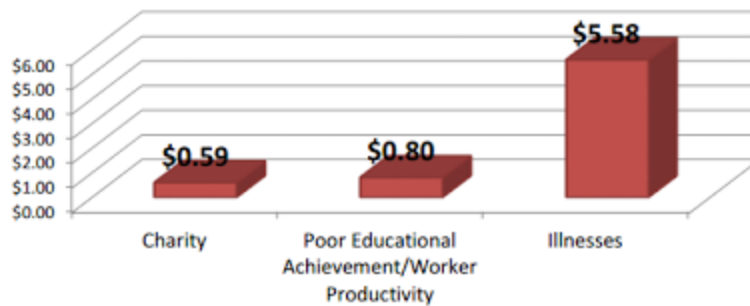
This can result in people only getting foods from local convenience stores, gas stations, or fast food stops, which are extremely lacking in fresh foods and nutritional value. In the worst case, it results in needing to choose between eating at all and other basic necessities. The figure below from Ohio Food Banks depicts how many food insecure people must choose between money for food and other life essentials.



The effects of these difficult choices are seen among people with food insecurity on a daily basis. If they choose food over one of these other basic necessities, they could become homeless because they were unable to keep up with residential payments. They may get fired from a job because they do not have money for transportation or gas. They will also experience greater health issues from lack of basic medical attention. Problems like high blood pressure and heart disease will go unchecked. Obesity will also be a negative health result for adults and lead to a shorter life span (Current, 57).

The cost does not stop with the people who suffer directly from low nutrition and food insecurity; Ohio pays a price as well. The graph below details the amount of money the state of Ohio and its citizens spent on hunger related issues in 2011.

Ohio's Hunger Bill
(Amounts in billions of 2010 dollars)



The greatest future loss will be felt by the households with children in them. Lack of important nutrients like calcium and iron in a mother's diet can result in mental and physical deficiencies for her unborn child. This affects a child's future ability to learn and fulfil an effective societal role in their later lives (Current, 54). Food insecurity and poor nutrition will also affect children's education as they become frequently sick and miss days of school or have trouble focusing in class. They also have greater chances of developing depression or diseases like diabetes early in their lives. The psychological effects of living with home stress can deplete their general morale as well as school performance. Learning development can be stunted and these children fall behind. As they progress to adolescence, emotional and behavioral issues only intensify with a greater likelihood of substance abuse and suicidal thoughts (Current, 56). When children are adversely affected by food insecurity and poor nutrition, there is no one who does not pay the price.

For Franklinton specifically, the current issues affecting the Appalachian population and other poor minorities is a lack of affordable fresh food sources, lack of education about the nutritional value of fresh produce, and lack of income to afford such produce. The area of Franklinton is also known as a food desert, which means that spots where food is easily accessible are very limited. The older generation of people, grandparents often raising their grandchildren, are teaching the future generation non-nutritious food habits. For example, the mashed potatoes on the table could have a pound of butter in them and little donuts as a snack can become a main course. These are all things located in the corner convenience stores, and these items are cheap and can be bought for sometimes less than a dollar. They are quick and easily affordable, but in the long run they lead to multiple health problems that are often seen in Franklinton's current population of Appalachians: diabetes, high cholesterol, over time congestive heart failure, and ultimately death.

A woman in this area, unemployed and living off EBT or food stamps, could have two children with no father to speak of and no one to help. Her food stamp money has to last the family the whole month. So what does she do? She goes to the store and buys the cheapest off-brand junk food possible. It will last the whole month because this is what the government is expecting her to buy in the first place. Food Stamps are based off of what the government calls typical meals. Foods are priced out to make said meals and how many people need to be fed, and this is the allowance given to anyone on government aid. What is a typical meal? Beans and

weenies, a hamburger with chips, spaghetti and meatballs, sloppy-joes with mac-n-cheese and a bologna sandwich on white bread (USDA).

Clearly none of this is healthy. Where are the vegetables and fruits that people should be eating? Where is the food that is going to keep them fuller for longer and help fight off disease and diabetes? Where is the food that is going to let them live longer lives? It may be 2.99/lb., but people cannot buy it because not only is it not in their budget, it is not included in the government's budget for them and their family to begin with.

It is mostly because of this meal plan layout that people do not understand the value of fresh produce. They do not understand the health benefits of it because they have never had it in their lives to start with. They have never been allowed to experience fresh fruit or vegetables on a consistent basis to make it a food habit because the government feels they do not need it. The government feels that they do not need to ratify the budget to include these very important and nutritional foods to help save people's lives because poor people are living just fine off of potato chips and 80/20 ground beef. On the other hand, if the people eating this food do not understand the difference, how could anything change for the better?

There is also a lack of reliable transportation in the area. Some people cannot leave their homes to shop and have to call for disability transportation. This means they cannot go out as often as they would like for groceries, and fresh produce which tends to go bad within a week and more needs to be purchased if they maintain healthy eating habits.

All of these factors can lead to massive food insecurity for the area of Franklinton. If a mother spends her EBT allowance on fresh produce that will help keep her kids healthy, she then risks them going hungry for the last week or so before the stamps are renewed. The disabled grandma raising her grandchildren cannot leave her house to buy food as often as she likes, so she stocks up on processed foods with high sodium content because it will last her and her grandchildren until next month when she is picked up by disability services and can then shop.

Not only do new food habits need to be learned within the area, but they must also be allowed to be learned. If the federal budget for SNAP doesn't already account for fresh produce to be included within the daily, diet then new habits cannot be formed and future generations cannot lead healthy lifestyles and pass them onto their children, and so forth.

Methods and Results

This report sought to accomplish several goals. First, this report described the problem of food insecurity and nutritional problems. Second, the report described ways to combat the problem of food insecurity, and establish ways that government and non-profits in Franklinton could better mitigate food insecurity.

Fit For Franklinton gathered information from several different sources. The majority of the information came from scholarly journals. There has been a vast amount of research that has been done on the issue of food insecurity and nutrition in general if not for Appalachians specifically. Information was also gathered from several local individuals who have worked on the issue of food insecurity in Franklinton. These individuals are Jackie Haight (Children's

Hunger Alliance), Harmony Cox (Fresh Foods Here Manager), and Gale Gray (City of Columbus). All three of these professionals provided Fit For Franklinton with invaluable information that was used for this project. E-mail was the primary mode of communication between these three people. Harmony Cox also directed us to additional information on Fresh Foods Here's website that was used in this report.

Recommendations, Solutions, and Implications

Food insecurity in the United States is being addressed by a number of ongoing efforts, including federal food assistance programs such as the National School Lunch Program; the Food Stamp Program; and the Special Supplemental Nutrition Program for Women, Infants, and Children. While these programs have made great strides in improving diet quality, they are not able to reach all individuals in need.

“A little over half of food-insecure households get help from at least one of those programs,” said Nord (2009). The American Dietetic Association has called for a number of interventions, including providing adequate funding for the programs and increasing their use, making nutrition education a part of the programs, and promoting and supporting the economic self-sufficiency of individuals and families in the programs (Holben, 446-458).

Experts are working to raise awareness about the circumstances many food-insecure individuals face so that policy makers will be better equipped to make decisions about improvements to food assistance programs. Local food pantries, emergency kitchens, and various state initiatives are also improving access to healthful foods. Physicians, nurses, dieticians, and other health care workers can also help address food insecurity issues. For example, they could educate patients on how to choose nutrient-dense foods in a cost-effective way. Holben has suggested that clinicians ask patients questions such as those related to money for food, participation in food assistance programs, meal habits, quality of diet, food label reading, and food safety (Tscholl, 1058-1060). A number of researchers are working to develop simple screening tools that could be implemented in a clinician's office to determine whether economic access to enough food is a problem for patients.

Experts say that the health effects of food insecurity must be addressed to reach the goal of Healthy People 2010, the Department of Health and Human Services' disease prevention and health promotion objectives for the United States (HealthyPeople). The program aims to help individuals increase life expectancy and improve their quality of life and to eliminate health disparities. “Having a better understanding of the connections between food insecurity and health and disease is paramount to reaching those goals,” said Holben.

Food as a Human Right

Food at its most basic level is vital to human survival; therefore, it should be treated as a basic human right. If local, state, and the federal government began to treat food as a basic human right, a prodigious number of policy changes would occur. First, the U.S. government would be responsible for making sure everyone ate an acceptable amount of food that was healthy and nutritious. It would also facilitate political democracy and empower those who are

affected most by food insecurity. Though the U.S. is the only country in the world besides Australia to not accept food as a basic human right, the United States was behind the idea of the United Nations' Universal Declaration of Human Rights, which includes the right to food (Clinton, 1203).

What would a human rights framework regarding food look like? According to Clinton & Rose, the framework would include three aspects: respect, protect, and fulfill (1203). To respect would mean to not impede anyone's ability to obtain to food. Protect means to not obstruct one's access to food. Lastly, fulfill has two components: 1) "facilitate or create social and economic environments that foster human development," and 2) provide food to people who need it or have no access to it (Clinton, 1204).

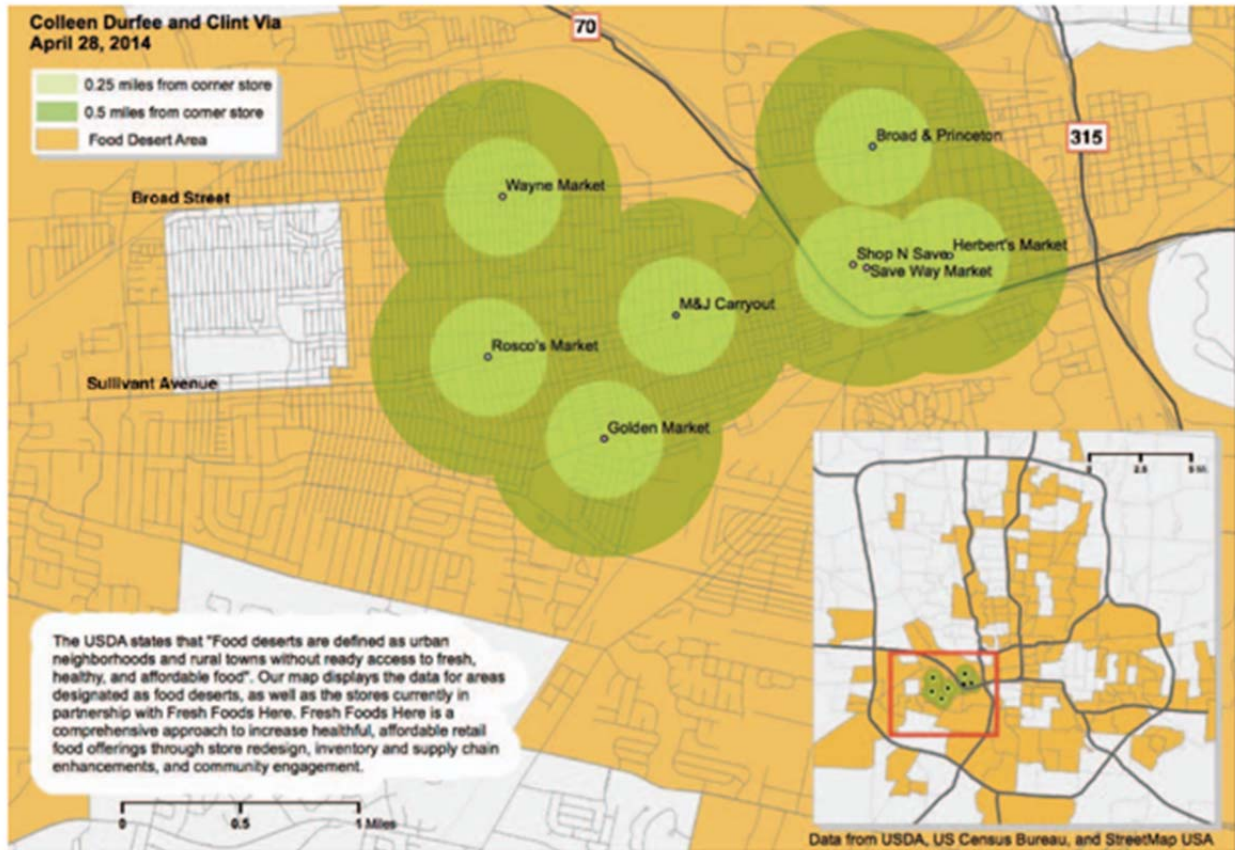
A human rights approach would also have several key elements. Clinton & Rose state that government accountability, public participation, account for vulnerability and discrimination and the connection of policies to health outcomes would be the four key elements to the approach (1204). Increasing government accountability would have several dynamics associated with it. First, the government would monitor all aspects of food insecurity. Second, monitoring would be tied to action, and third, there would be legal ramifications if the government did not follow through with their duty. An increase in public participation would involve the government creating open and easy path to expressing and participating in the political process. Additionally, the government would provide additional nutritional education and provide clear standards for food security. Addressing vulnerability and discrimination would entail focusing on groups who are marginalized because they are the ones most likely to suffer from food insecurity. Finally, linking policy to health outcomes would focus on researching the impacts of food policies and determining their effects and impact on individuals and groups (Clinton & Rose 1204).

Local Initiatives

Moving forward, it would be ideal if funding for public assistance programs regarding food insecurity increased, but that is unlikely to happen given the gridlock in congress at the federal level. The state of Ohio also seems to be unwilling to effectively mitigate the problem. Charities and nonprofits will never be the answer to the problem because they lack the necessary resources to combat the problem on a large scale, but they will continue to play an important role. Luckily, Central Ohio has several organizations that are implementing effective and progressive programs to fight food insecurity. These organizations include: Fresh Foods Here, Gladden, Franklinton Gardens, Life Care Alliance, Children's Hunger Alliance, Holy Family Soup Kitchen, Boys & Girls Club of Columbus and the Mid-Ohio Food Bank.

A major contributor to the food insecurity problem is food deserts. This can limit an individual's access to fresh produce and healthy foods. Fresh Foods Here, which is part of the United Way, is combating the problem of food deserts by providing healthy food options in corner stores throughout the Central Ohio region. They help stores improve their product selection "through store redesign, inventory and supply chain enhancements, and community engagement" (Fresh). This program has been very successful. Among the participating stores, there was a "60.6% increase in the quality of healthy products sold at participating stores" (Fresh, 1).

Figure 1: Food Deserts and Fresh Foods Here participating stores



This chart displays food deserts on the west side of Columbus, and it is overlaid by the participating stores in the Fresh Foods Here program. The visual aid indicates that programs like this are important going forward, especially since grocery stores are unlikely to open stores in areas that do not meet their population requirements.

Three Possible Approaches

When dealing with the issue of food insecurity at the municipal and local level, there are three typical approaches to dealing with food insecurity: "charitable," "household improvements and supports," and "community food systems" (Collins, 139). The first approach, charitable, is usually comprised of food banks. However, this approach is considered to be a desperation measure, not a measure to prevent food insecurity. The household improvements and supports approach establishes community food kitchens, community gardens, and budgeting and cooking skills. This approach suffers from similar flaws as the charitable approach. Lastly, the community food systems approach attempts to maximize "self-reliance and social justice." This approach brings together the government and local food organizations. Ultimately, it attempts to localize and democratize food. However, this approach is sometimes driven by the wants of the middle-class that pushes for "organic" food, and food insecurity is not always the goal of this approach. But this approach is also considered the one with the greatest potential because of its "increased access to food, self-efficacy, dignity and social cohesion" (Collins, 139).

Conclusion

Many people living in the Franklinton Area of Columbus suffer from food insecurity. The federal government and local communities need to account for the growing need for a higher food stamp budget. The right to nutritious food is a human right, and this right needs to be recognized. Even poor people relying on government assistance have a right to fresh fruits and vegetables and so do their children.

The local government of Franklinton and surrounding community must work together to form a Community Food Systems Approach in which food can become easily accessible to all individuals and their families. With this change in how the community receives food, the food insecurity issue within Franklinton will not be an issue future generations have to endure.



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Fit **F**or



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