

POLITICS OF FOOD ACCESS IN FOOD INSECURE COMMUNITIES

By

Darcy A. Freedman

Dissertation

Submitted to the Faculty of the  
Graduate School of Vanderbilt University

for the degree of

DOCTOR OF PHILOSOPHY

in

Community Research and Action

August, 2008

Nashville, Tennessee

Approved:

Professor Paul W. Speer

Professor Monica J. Casper

Professor Kenneth A. Wallston

Professor Craig Anne Heflinger

Professor Marino A. Bruce

To my mother and grandmothers,  
Donna Stayin Sens, Esther Feiner Freedman, and Viola Tomin Stayin.

## ACKNOWLEDGEMENTS

Saying thank you and publicly acknowledging the myriad people involved with this research is humbling. Although I will try, words cannot express my gratitude for each of you. First and foremost, this research would not have occurred without the support of funding from the Baptist Health Trust, Vanderbilt Center for Community Studies, Vanderbilt Center for Ethics, and Global Feminisms Collaborative. Along with this financial support, I also received immeasurable amounts of wisdom, guidance and assistance from Sarah Bellos, Barbara Clinton, Royce Fentress, Kim Harrell, Cassi Johnson, Kate Lassiter, Jeff Middlebrooks, Mary Kate Mouser, Sharon Shields, and Bobby Lee Smith as well as from the directors and staff at the Boys and Girls Clubs. Thank you for your willingness and openness to work collaboratively as we transformed the Boys and Girls Clubs into farmers' markets during the summer of 2007.

An extra special thank you is extended to Shavaun Evans, Shacora Moore, and Courtney Williams, the research assistants on this project. Each of these individuals added to the dynamics of this research endeavor. Without one of them, the project would most certainly have ebbed and flowed differently. We spent many hours laboring together—physically, emotionally, intellectually, and spiritually—and through this process my understandings of the politics of food access as well as my general sense of self were challenged and enriched. Thank you. Thank you.

I would be remiss if I did not express special gratitude to all of the research participants involved in this project. In addition to teaching me much about food access, you also taught me how to make an oven roasted chicken, determine the freshness of a

watermelon, and find the best food bargains in Nashville. These were just a few of the many unintended benefits of this research. I also wish to thank the children and youth involved with this research. This project would not have been the same, would not have been “this” project, without the involvement of the children and youth from the Boys and Girls Clubs. You were the highlights of the project. You embody the “discourse of possibility and resistance” I came to understand through this research. You are my hope for transformation and transgression.

This research was also supported by my dissertation committee including Paul Speer, Craig Anne Heflinger, Ken Wallston, Monica Casper, and Marino Bruce. You allowed me to create my own box as I developed this research, never once limiting or constraining my process. At times you nudged and suggested movement in new directions but always left it up to me to explore how these new pathways diverged and converged with my understandings. I am also grateful to several others for their willingness to listen to and/or read earlier iterations of this work including members of the Global Feminisms Collaborative and my peers in the Center for Ethics Dissertation Writing Groups.

Finally, and perhaps most importantly, I wish to extend thanks to my family. You supported me throughout the ups and downs of dissertating. To my parents in particular, thank you for never saying no, for always letting the sky be the limit. And last but certainly not least, I wish to thank Heath Blackard, my friend and confidant. If anyone knows the trials and tribulations of this dissertation, it is you. You have been endlessly supportive and helpful. I love you.

## TABLE OF CONTENTS

	Page
ACKNOWLEDGEMENTS .....	iii
LIST OF TABLES .....	viii
LIST OF FIGURES .....	ix
Chapter	
I. INTRODUCTION.....	1
Food Politics.....	2
<i>Food and Power</i> .....	4
<i>Food Insecurity in the United States</i> .....	5
<i>Food Insecurity-Obesity Paradox</i> .....	7
<i>Politics of Research</i> .....	9
Framing Health.....	11
<i>Biomedical Model</i> .....	12
<i>Population Health</i> .....	13
<i>Critiques of Population Health</i> .....	16
Activating Population Health.....	18
Constructing a New Theory-Methods Package.....	22
<i>Praxis-oriented Research</i> .....	23
<i>Example of Praxis-oriented Research: A Dialogical Approach to Praxis</i> .....	30
Materialist Praxis: A New Theory-Methods Package .....	32
<i>Three Propositions for the Employment of Materialist Praxis</i> .....	33
Dissertation Chapters.....	38
II. METHODOLOGY.....	41
Genesis of Research Approach.....	42
Research Question .....	47
Action Component.....	48
<i>Farmers' Markets</i> .....	48
<i>Nutrition Education</i> .....	51
Research Component .....	52
<i>Ethnographic Methods</i> .....	52
<i>Food Store Audits</i> .....	58
<i>Surveys</i> .....	59
<i>Human Subjects Research</i> .....	63
Reflection Component .....	64

<i>Semi-structured Focus Groups</i> .....	64
Data Analysis .....	67
<i>Qualitative Analysis</i> .....	67
<i>Quantitative Analysis</i> .....	74
III. POLITICS OF SPACE .....	80
Food Maps.....	82
<i>Availability of Food Stores near Boys and Girls Clubs</i> .....	82
<i>Availability of Healthy and Unhealthy Products</i> .....	86
<i>Segregated Stores</i> .....	89
Good Food is Far Away.....	101
<i>Convenience Stores: Convenient for Whom and for What?</i> .....	102
<i>“You can’t even go buy an onion out of there...”</i> .....	104
<i>Intersections</i> .....	105
Conclusion.....	112
IV. PRODUCING PRODUCE.....	114
Produce Procurement .....	115
Market Set-up.....	121
<i>Entrée into the Boys and Girls Clubs</i> .....	121
<i>Children and Youth Assistants</i> .....	125
<i>Arranging the Market</i> .....	129
<i>Fruit and Vegetable Orientation</i> .....	131
Selling Food .....	135
<i>Volume and Cost of Produce Procured for the Farmers’ Markets</i> .....	135
<i>Selling Fresh Fruits and Vegetables</i> .....	138
Closing the Farmers’ Markets .....	158
Conclusion.....	161
V. REAL, FRESH, AND GOOD .....	163
Healthier.....	165
<i>Food as Antidote</i> .....	166
Superior.....	170
<i>Taste of Food</i> .....	170
<i>Composition of Food</i> .....	172
<i>Food Production</i> .....	173
Costly .....	175
<i>Price Tags</i> .....	176
<i>Pocketbooks</i> .....	179
Time Consuming .....	182
<i>Spatiality of Real, Fresh, and Good Food</i> .....	183
<i>Public versus Private Transportation</i> .....	184
<i>Work Schedules</i> .....	188

Conclusion.....	190
VI. DISCUSSION .....	193
Introduction and Application of Materialist Praxis .....	195
Farmers' Markets as Theaters for Change .....	198
<i>Farmers' Markets as Classrooms</i> .....	200
<i>Farmers' Markets as Health Clinics</i> .....	200
<i>Farmers' Markets as Laboratories</i> .....	202
New Insights Regarding the Social Production of Health .....	204
<i>Power and Space</i> .....	205
<i>Revealing and Dismantling Hierarchies</i> .....	206
<i>Economy of Food Access</i> .....	208
Limitations and Strengths .....	210
Future Research .....	212
Conclusion.....	215
Appendix	
A. SAMPLE NEWSLETTER.....	217
B. INTERVIEW GUIDE .....	218
C. FOOD STORE SURVEY .....	222
D. SURVEY .....	228
E. CONSENT FOR INTERVIEWS AND FOCUS GROUPS .....	237
F. CONSENT FOR SURVEYS .....	239
G. FOCUS GROUP TOPICS: RESEARCH STAFF .....	241
REFERENCES.....	244

LIST OF TABLES

Table	Page
<i>1. Participant observations recorded at farmers' markets, 2007.....</i>	54
<i>2. Demographic characteristics of interview participants, by site and overall. ....</i>	55
<i>3. Demographic characteristics of survey participants, by site and overall. ....</i>	61
<i>4. Emergent themes and sub-themes related to the politics of food access. ....</i>	70
<i>5. Ordered situational map, version November 1, 2007 (formal). ....</i>	76
<i>6. Distribution of food stores across the Boys and Girls Club sites, May 2007. ....</i>	85
<i>7. Number and percentage of food stores near Boys and Girls Clubs selling select fruits and vegetables, May 2007. ....</i>	87
<i>8. Number and percentage of food stores near Boys and Girls Clubs that sell tobacco and alcohol products, May 2007. ....</i>	89
<i>9. Demographic characteristics of census tracts in which the three Boys and Girls Clubs are located compared to Davidson County, TN. ....</i>	91
<i>10. Demographic characteristics of children and youth enrolled in the three Boys and Girls Clubs, summer 2007. ....</i>	123
<i>11. Average weekly cost and volume of food purchased for the three farmers’ markets, summer 2007. ....</i>	138
<i>12. Volume of produce purchased for and sold at the three farmers’ markets, summer 2007. ....</i>	156
<i>13. Self-reported consumption of fruits and vegetables over the past week, survey participants. ....</i>	168
<i>14. Combined fruit and vegetable consumption over the past week among survey participants compared to national and state averages reported in 2005. ....</i>	169
<i>Table 15. Self-reported health status among interview and survey participants compared to national and state averages reported in 2006. ....</i>	170



## LIST OF FIGURES

Figure	Page
<i>1. Food insecurity rates by household characteristics, United States, 2006.....</i>	<i>7</i>
<i>2. Obesity rates by socio-demographic characteristics, United States, 2006. ....</i>	<i>8</i>
<i>Figure 3. Self-reported obesity rates by annual income status, United States, 1995-2006. ....</i>	<i>10</i>
<i>4. Diagram of biomedical model.....</i>	<i>12</i>
<i>5. Diagram of population health perspective.....</i>	<i>14</i>
<i>6. Diagram of structuration theory. ....</i>	<i>21</i>
<i>7. Model of research as praxis. ....</i>	<i>24</i>
<i>8. Model of materialist praxis. ....</i>	<i>33</i>
<i>9. Visual representation of the interconnectedness between human agents and social structures through food and food practices. ....</i>	<i>37</i>
<i>10. Overview of research, reflection, and action components of the materialist praxis research approach. ....</i>	<i>42</i>
<i>11. Banner advertising the Boys and Girls Club farmers' markets. ....</i>	<i>50</i>
<i>12. Messy situational map.....</i>	<i>72</i>
<i>13. Ordered situational map, version October 11, 2007 (informal). ....</i>	<i>75</i>
<i>14. Customers shopping at the Hopetown farmers' market. ....</i>	<i>81</i>
<i>15. Definitions, number, and examples of the food stores located within one mile of the Boys and Girls Clubs, May 2007. ....</i>	<i>84</i>
<i>16. Number of food stores near Boys and Girls Clubs that sell milk products, May 2007. ....</i>	<i>88</i>
<i>17. Median household income by county and by site, measured in U.S. dollars in 1999, Davidson County, TN. ....</i>	<i>92</i>

18. Racial composition (percent African American) of population living in census tracts by county and by sites, Davidson County, TN.....	93
19. Access to supermarkets, local markets, and convenience stores by site and racial composition (percent African American) of census tracts, May 2007.....	94
20. Access to fresh oranges and grapes by site and racial composition (percent African American) of census tracts, May 2007. ....	95
21. Access to fresh tomatoes and carrots by site and racial composition (percent African American) of census tracts, May 2007. ....	96
22. Access to supermarkets, local markets, and convenience stores by site and median household income of census tracts, May 2007.....	97
23. Access to fresh oranges and grapes by site and median household income of census tracts, May 2007.....	98
24. Access to fresh tomatoes and carrots by site and median household income of census tracts, May 2007.....	99
25. Access to tobacco products by site and by racial composition (percent African American) and median household income of census tracts, May 2007.....	100
26. Gradients in food access by site. ....	101
27. Regionalization of Lincoln Court site. ....	127
28. Seasonality of food at the farmers' markets, summer 2007. ....	132
29. Measuring produce at the farmers' market.....	135
30. Most common fruits and vegetables purchased for the three farmers' markets, summer 2007. ....	137
31. Number of customers frequenting the three farmers' markets, summer 2007. ....	147
32. Average purchase per customer at the three farmers' markets, summer 2007.....	158
33. Spatiality and temporality of food shopping patterns for person without private transportation. ....	186
34. Spatiality and temporality of food shopping patterns for person without private transportation, missed the bus. ....	187
35. Visual representation of gradations in food access by level of income. ....	191

*36. Former and current logos for public health campaigns focused on increasing fruit and vegetable consumption. ....202*

*37. People shopping and not shopping at the Ridgetop farmers' market.....204*

## CHAPTER I

### INTRODUCTION

*Food rules are part of a usually unscrutinized cultural ideology that continually leads to the reinforcement of life as it is. ...Yet because they [food rules] reflect and re-create the gender, race, and class hierarchies so prevalent in American society, deconstructing food rules is part of the process of dismantling the hierarchies that limit the potential and life chances of subordinate groups.*

Counihan, 1999, p. 114-115

In this dissertation, I strive to address Counihan's (1999) concern by scrutinizing the "unscrutinized" and in this process explore the relations of power constructed and reproduced through the inanimate, although animating, medium of food. Food—at once social and physical, personal and political—is at the center of this research which serves to both reveal and dismantle hierarchies by disrupting the material conditions of community settings characterized as "food deserts" or areas with limited or no access to healthy food options. The "disruption" – a performance in the theater of space – includes the establishment of farmers' markets at three Boys and Girls Clubs in Nashville, Tennessee. The thesis of this research is developed through two steps. First, I posit the need for a new theory-methods package for examining the social production of health. Second, based on an analysis of data collected through this new methodological approach, I reveal relations of power influencing food access within a specific time-space context.

In this chapter, I provide a brief overview of research that highlights the social relations of power reflected and recreated through food and food practices and illustrate the ways that power is manifested through two food-related health conditions: food insecurity and obesity. Next, I situate this research within the broader realm of population health, a theoretical perspective that views health and illness as social productions rather than products of individual factors. Following these overviews, I introduce a new research methodology, “materialist praxis”, for studying the politics of food access through ongoing cycles of research, reflection, and action that *begin* by addressing the material conditions in a community. In this process, I establish the relevance of materialist praxis for both examining and addressing the relations of power influencing public health in general and food (in)security<sup>1</sup> and obesity in particular. Finally, the chapter concludes with an outline of the remaining dissertation chapters.

## Food Politics

This research is focused on food because it is “a product and mirror of the organization of society on both the broadest and most intimate levels” (Counihan, 1999, p. 6). Thus, seemingly mundane questions such as, “What should we have for dinner?”, and the answers these questions inspire, are in fact conveyers of meaning, reflecting and producing one’s location in the social hierarchy. In contrast to the views of bestselling author and food critic Michael Pollan (2006), “What should we have for dinner?” has always been and continues to be one of the most complicated and revealing questions to

---

<sup>1</sup> In this research I use the terms “hunger” and “food insecurity” interchangeably. The U.S. Department of Agriculture defines food insecurity as a state when a household’s “access to adequate food is limited by a lack of money and other resources” (Nord, Andrews, & Carlson, 2006).

answer. Although Pollan and his writings admittedly broaden discussions related to food production and consumption, his social position as a white, educated, and financially stable man living in the United States (U.S) seems to obscure his vision and perspective as only one with privilege would have the audacity to begin a book by stating that “What should we have for dinner?” was ever a “simple” question (2006, p. 1). Indeed, food labor including planting, harvesting, preserving, procuring, and preparing has long been and remains concerning for many. The American history of slavery, the very system that permitted whites to freely answer the question, “What should we have for dinner?”, also served to constrain responses from enslaved African descendents laboring in the fields without pay, without ownership, without value. For a number of women, “What should we have for dinner?” is a question whose answer is likely to yield violence or abuse. For persons living in poverty, “What should we have for dinner?” is a recurrent reminder of insecurity—insecurity in food, shelter, income, and other basic needs. Indeed, the food and food practices<sup>2</sup> that allow one to answer the question, “What should we have for dinner?”, are reflective of and reproduce social relations of power.

In addition to focusing on the question, “What *should* we have for dinner?”, a growing number of researchers are interested in answering the question, “What *did* you have for dinner?” In the U.S., food-related health conditions such as obesity and food insecurity are largely understood on a population level by measuring just one individual behavior—food consumption or lack thereof. Open the latest issue of a health-related academic journal or even the local newspaper and you will quickly discover that we as

---

<sup>2</sup> I use the term “food practices” to represent behaviors and beliefs related to food production, distribution, procurement, and preparation. I use the term “food practices” rather than “foodways” or “food rules”, terms introduced by Counihan (1999), because of my overarching emphasis, based on the work of Giddens (1984), on *social practices* as tools for producing and reproducing both structure and agency.

health scientists are quite interested in knowing “What did you have for dinner?” Measurement of food consumption is becoming quite an industry with specialized questionnaires emerging to more accurately assess, among other things, cruciferous vegetable intake (Thomson et al., 2007), dietary d-limonene intake (Hakim, McClureb, & Lieblerb, 2000), and fat intake (Coates et al, 1995). In so doing, these measures contribute to the production and reproduction of health-related discourses focused on compliance and adherence. Despite the development of more precise tools for measuring food consumption patterns, a paucity of research is focused on measuring the social relations of power influencing patterns of food consumption. In fact, I have yet to see a survey dedicated to understanding how the history of slavery in the U.S. influences peoples’ access to fruits and vegetables; how peoples’ experiences with physical, emotional, or sexual abuse influence food consumption patterns; how income is procured so that people can purchase foods within the parameters of the infamous food pyramid; or how one navigates the local transit system to access food stores.

We as a society are obsessed with the questions: “What should we have for dinner?” and “What did you have for dinner?” Mundane as they are, these questions and the answers they inspire reveal a great deal about interrogators and respondents alike (Bourdieu & Passeron, 2000). These questions are entrées into the multifaceted relationship between food and power.

### *Food and Power*

On the one hand, food *is* power in the sense that it is a necessity for life, and on the other hand, food *reveals* power by demarcating roles and identities and, in turn,

legitimizing nations (Sokolov, 1991), faiths (Roof, 2001; Sack, 2001), and bodies (Kilbourne, 1994; Witt, 1999), among other things. Food is regularly ingested among all peoples regardless of age, race, class, gender, geographic location, sexuality, and so on. No human is free from the need for food. Food has been described as “power in its most basic, tangible and inescapable form” because of its relation to survival (Arnold, 1988, p. 3, quoted in Counihan, 1999). Lack of stable access to food or food insecurity is considered to be an “absolute sign of powerlessness...a stark indication that one lacks the ability to satisfy one’s most basic subsistence need” (Counihan, 1999, p. 7). The centrality of food to the production of the body politic is exemplified in the following statement from the President's Task Force on Food Assistance (1984, p. 2): “It has long been an article of faith among the American people that no one in a land so blessed with plenty should go hungry. ...Hunger is simply not acceptable in our [American] society.”

### *Food Insecurity in the United States*

Despite strong anti-hunger sentiments such as those made by the President’s Task Force on Food Assistance over two decades ago, food insecurity has existed and continues to exist in the U.S. The prevalence of household food insecurity, measured through the Food Security Supplement of the Current Population Survey, has remained relatively unchanged since it was first measured in 1995 (Nord, Andrews, & Carlson, 2005). The prevalence of household food insecurity was 10.3% in 1995 (Bickel, Carlson, & Nord, 1999) and 10.9% in 2006 (Nord, Andrews, & Carlson, 2007).<sup>3</sup> These findings

---

<sup>3</sup> Differences in rates of food insecurity between 1995 and the present are largely due to changes in the timing of survey implementation (seasonal effects on food security) rather than to the prevalence of food



reveal that the U.S. is making little headway in terms of achieving its goal of reducing food insecurity by half or more by 2010.<sup>4</sup> Static measures in food insecurity rates are alarming considering that a surplus of food exists in the U.S. In 2007, for instance, more than *one billion pounds* of surplus food was donated by food retailers to America's Second Harvest Food Bank (2008). Therefore, the existence of food insecurity in the U.S. is less about scarcity than about the maldistribution of resources (Lappé & Lappé, 2003).

Further examination of food insecurity rates in the U.S. illuminate patterns in food (in)access such that persons living substantially above the federal poverty line (5.3% experience food insecurity), those with white skin<sup>5</sup> (7.8%), as well as those living in households with a married couple (10.1%) experience much lower rates of food insecurity compared to persons living below the federal poverty line (36.3%), those representing minority racial and ethnic backgrounds (black, non-Hispanic, 21.8%; Hispanic, 19.5%), and families headed by single, females (30.4%) (Nord, Andrews, & Carlson, 2007) (see Figure 1). Thus, if hunger represents a “sign of absolute powerlessness” (Counihan, 1999, p. 7) then these data suggest that persons with disproportionately less power<sup>6</sup> include those marginalized because of social characteristics related to class, race, gender, and the intersections of these social factors. Patterns in food insecurity rates reveal the existence of systemic and systematic processes

---

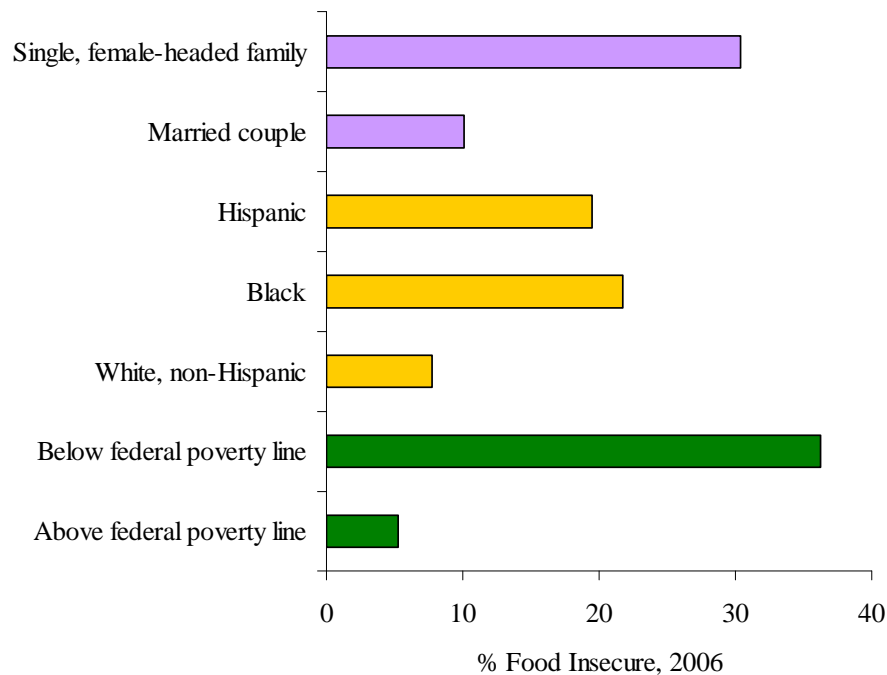
insecurity (Andrews, Nord, Bickel, & Carlson, 2000; Cohen, Nord, Lerner, Parry, & Yang, 2002; Ohls, Radbill, & Schirm, 2001).

<sup>4</sup> *Healthy People 2010* (U.S. Department of Health and Human Services, 2000), a document that provides public health goals and objectives for the U.S., includes a goal to increase food security among U.S. households from 88% in 2000 to 94% in 2010 and, in so doing, reduce hunger. “Food security” is defined by the U.S. Department of Agriculture as “access at all times to enough food for healthy, active living” (Nord, Andrews, & Carlson, 2007).

<sup>5</sup> I will argue later in the chapter that the color of one's skin is meaningless unless it is situated within a political context in which value and privilege are ascribed through skin color.

<sup>6</sup> I assume that all peoples have power; no one is powerless. The ability to assert power and take action, however, is controlled by a variety of social forces.

or “structural violences” through which social structures and social relations harm people by constraining or denying access to basic subsistence needs (Galtung, 1969).



*Figure 1. Food insecurity rates by household characteristics, United States, 2006*  
**Source: Nord, Andrews, & Carlson, 2007**

---

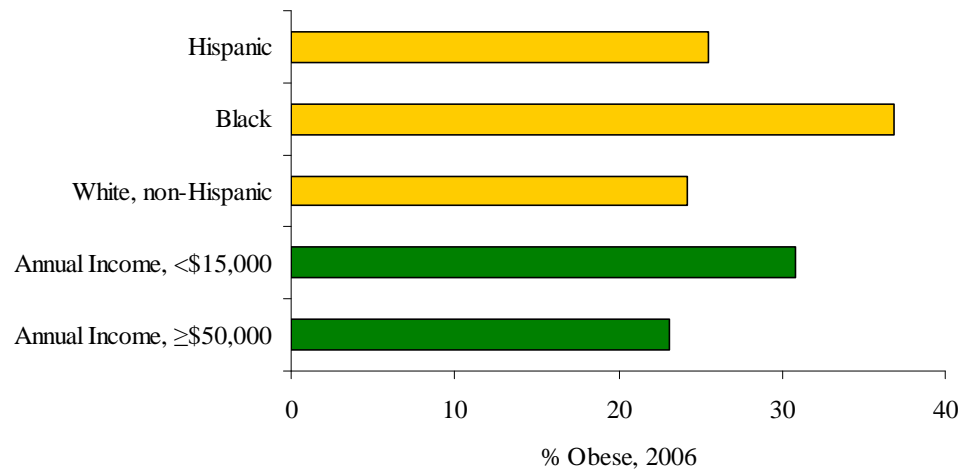
### *Food Insecurity-Obesity Paradox*

Paradoxically, among both adults (Adams, Grummer-Strawn, & Chavez, 2003) and children (Casey et al., 2006), food insecurity is strongly correlated with obesity.<sup>7</sup> In other words, populations with the highest rates of food insecurity are the populations most likely to be obese. This is due in part to the fact that some of the social relations of power that place one at risk for food insecurity also increase one’s risk for obesity.

---

<sup>7</sup> Obesity is defined as having a very high amount of body fat in relation to lean body mass, or body mass index (BMI) of  $\geq 30$ .

According to self-reported data collected via the Behavioral Risk Factor Surveillance System (Centers for Disease Control and Prevention, 2006), obesity rates—like food insecurity rates—are higher among racial and ethnic minorities (black, non-Hispanic, 36.8%; Hispanic, 25.5%) compared to whites (24.2%) and among persons earning less than \$15,000 per year (30.8%) compared to those earning \$50,000 or more (23.1%) (see Figure 2).



*Figure 2. Obesity rates by socio-demographic characteristics, United States, 2006.*  
**Source: Centers for Disease Control and Prevention, 2006**

---

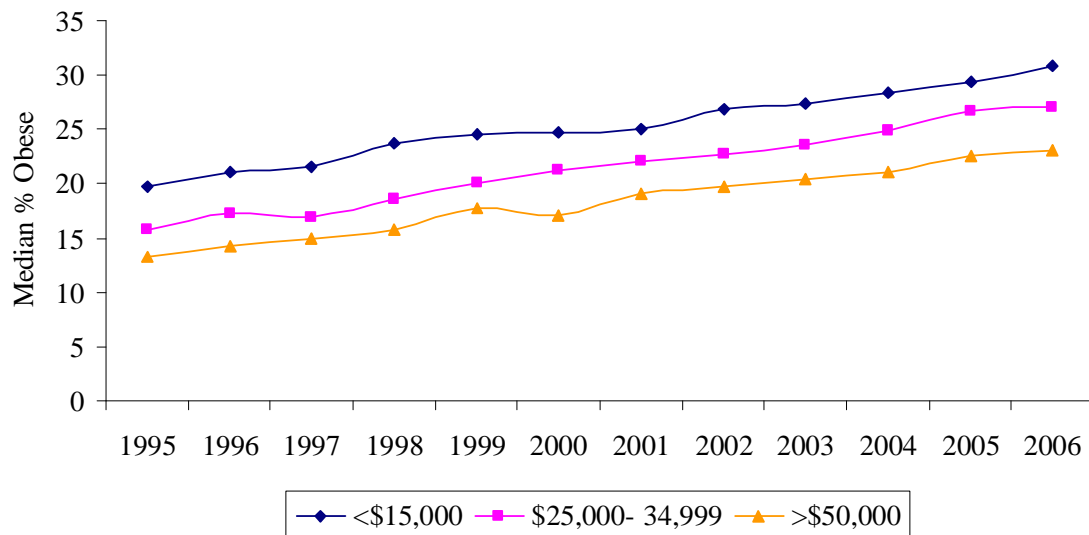
The paradoxical relationship between food insecurity and obesity is complex and, like all issues related to food and food practices, is imbued with power. Some scholars purport that food insecurity and obesity are correlated because healthier food options cost more than unhealthy food items (Alaimo, Briefel, Frongillo, & Olson, 1998; Drewnowski & Specter, 2004; Jetter & Cassady, 2006). Others suggest that geographic factors such as the presence or absence of grocery stores within community settings explain the paradox

(Alwitt & Donley, 1997; Baker, Schootman, Barnidge, & Kelly, 2006; Chung & Myers, 1999; Jetter & Cassady, 2006; Moore & Diez Roux, 2006; Morland, Wing, Diez Roux, & Poole, 2002; Zenk et al., 2005). Regardless of the explanation, patterns in food insecurity and obesity rates exist such that those representing marginalized social positions and/or residing in marginalized social contexts experience disproportionately higher rates of these health conditions compared to their more privileged peers.

### *Politics of Research*

While patterns in food insecurity and obesity rates exist, the two health issues are often interpreted through different lenses. The American Dietetic Association, in its recent position statement on food insecurity and hunger in the U.S., acknowledged that food insecurity is a “preventable threat” (p. 446) and reported that the causes of food insecurity include unemployment and other employment-related problems, poverty or lack of income, high housing costs, high utility costs, medical or health costs, high childcare costs, reduced public benefits, substance abuse, mental health problems, and homelessness (Holben, 2006). The National Institutes of Health (NIH), however, reports that the primary cause of obesity is individual rather than social: people are simply not achieving the proper balance between energy intake and energy expenditure (2006). Other factors identified by the NIH as causes of obesity include the environment, genetics, and certain health conditions. Under the rubric of “the environment”, risk for obesity is described as being related to the fast-paced American lifestyle, which makes people reliant on quick, high-fat, and high-calorie foods and leaves limited extra time for exercise or leisure. Poverty is also described as a risk for obesity, although the report by

the NIH indicates that the “link between low socio-economic status and obesity has not been conclusively established” (NIH, 2006, p. 3) despite the fact that national-level data collected by the U.S. government *consistently* reveal gradients in obesity prevalence between persons with high, middle, and low income statuses (see Figure 3).



*Figure 3. Self-reported obesity rates by annual income status, United States, 1995-2006.*  
**Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System**

**Caption Figure 3. Obesity = Body mass index (BMI) of  $\geq 30$**

These variations in causal explanations further reveal the politics of food by highlighting the politics of research. The frames researchers construct to understand the causes of and solutions to health problems are undeniably but often unwittingly a statement of power, exposing the worldviews and biases influencing particular understandings of phenomena (McFague, 2001). In the next section I attempt to explain why disparate conceptualizations of food insecurity and obesity exist even though these health conditions are frequently co-morbid.

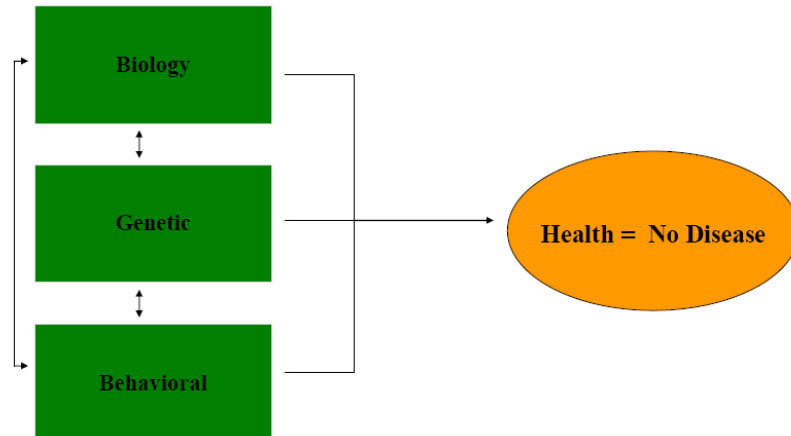
## Framing Health

According to framing theorists, frames serve as “an interpretive schemata that simplifies and condenses the ‘world out there’ by selectively punctuating and encoding objects, situations, events, experiences, and sequences of actions within one’s present or past environment” (Snow & Benford, 1992, p. 137). Frames are not objective; rather, they are constructed by people to facilitate specific understandings of phenomena (Rochon, 1998). As noted in the previous section, frames are employed by researchers to simplify and condense information into discrete “problems” such as obesity or food insecurity with well-defined “causes” and “solutions”. Theories are codified representations of these frames. In the health sciences, the “biomedical model” is the dominant theory underpinning research and practice while “population health” represents an emergent<sup>8</sup> and divergent theoretical perspective. Both of these theories will be introduced in this section by way of exploring how population health diverges from the biomedical model.

---

<sup>8</sup> Despite the increased uptake of population health perspectives, the definition of population health remains somewhat contested (Cohen, 2006; Kindig & Stoddart, 2003). In a review of various definitions of population health, Kindig and Stoddart (2003) propose a refined definition by stating, “...we propose that *population health as a concept of health* be defined as ‘the health outcomes of a group of individuals, including the distribution of such outcomes within a group’” (p. 381, emphasis in original). This definition purports a focus on the health of aggregates, including groups bounded by context (i.e., nations, communities, neighborhoods), by social positionality (i.e., race, ethnicity, gender, class), and/or by experiential similarities (i.e., prisoners, mothers, disabled).

## *Biomedical Model*



*Figure 4. Diagram of biomedical model.*

---

The biomedical model represents the dominant theoretical framework underpinning health sciences research and practice (Evans, Barer, & Marmor, 1994; Institute of Medicine, 2003; Shi & Singh, 2005; Weber, 2006). The biomedical model purports that health, defined as the absence of disease, is a function of individual-level factors including biology, genetic composition, and behaviors (see Figure 4).

Informed by the biomedical model, the topic of obesity may be addressed in the following manner. “Health” would be defined as “not being obese” and this health problem may be solved if individuals engaged in the following individually-oriented obesity prevention recommendations drafted by the NIH (2006, p. 3):

- Learn to choose sensible portions of nutritious meals that are lower in fat.

- Learn to recognize and control environmental cues (like inviting smells or a package of cookies on the counter) that make you want to eat when you are not hungry.
- Engage in at least 30 minutes of moderate intensity physical activity (like brisk walking) on most, preferably all, days of the week.
- Take a walk instead of watching television.
- Eat meals and snacks at a table, not in front of the TV.
- Keep records of your food intake and physical activity.

These recommendations are congruent with the biomedical model. They situate the causes of and solutions to obesity within individuals and are devoid of the socio-political context in which eating patterns take place.

### *Population Health*

Population health represents an alternative theoretical perspective developed by public health, medical, and social science scholars and practitioners seeking to understand how and why health is socially produced. Based on a growing body of public health research that suggests social conditions and social positions matter (e.g., Cassel & Tyroler, 1961; Haan, Kaplan, & Camacho, 1987; Kawachi & Berkman, 2003b; LaVeist, 2002; Marmot & Syme, 1976; A. J. Schulz & Mullings, 2006) and grounded in the notion that all diseases have two causes—one pathological and the other political,<sup>9</sup> population health attempts to move beyond conventional explanations of morbidity and mortality

---

<sup>9</sup> Physician-activist, Rudolf Virchow (1821-1902), avowed that all diseases have two cases, one pathological the other political.



that view health as the absence of disease and as a function of individual factors (Evans, Barer, & Marmor, 1994; Institute of Medicine, 2003; Shi & Singh, 2005; Weber, 2006).

In contrast to the biomedical model and informed by the social justice imperative of public health (Beauchamp, 1976; Foege, 1987; Levy & Sidel, 2006), population health asserts a holistic view of health by taking into account the myriad ways in which health is socially produced. Figure 5 illustrates the range of social issues considered to be important to the production of health including socio-cultural and economic conditions, living and working conditions, social networks, and individual behaviors, among other things.

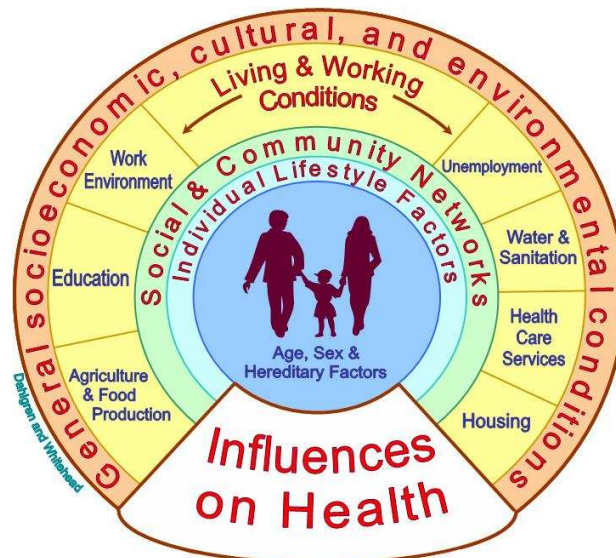


Figure 5. Diagram of population health perspective.  
Source: Centre for Enabling Health Improvement (2007),  
modification of Dahlgren & Whitehead (1991).

In its movement toward the social production of health, population health serves as a call for research and action that examines and addresses heterogeneities (often called “disparities”) in health status among peoples experiencing different and often marginalized social contexts, social conditions, and social positions. Thus, scholars informed by a population health perspective may respond to the aforementioned recommendations for obesity prevention made by the NIH (2006) by asking the following questions:

- Why are foods that are high in fat and low in nutrition so affordable and prevalent, especially in low-income communities?
- Why can’t people access food when they *are* hungry?
- Why do some people need to work more than one job, leaving them without free time for exercise?
- Why are grocery stores or farmers’ markets missing within certain communities?

Another tenet of population health is its critique of the healthcare system. Population health challenges the hegemonic view among health scientists and practitioners that access to and receipt of high quality healthcare is the best predictor of population-levels of health status (Evans, Barer, & Marmor, 1994). As the following excerpt highlights, enhancements to the healthcare system are not necessarily related to substantial enhancements in health status:

A highly developed, expensive, labor and capital intensive medical care system is not, however, necessary to [produce] the great reductions in death rates. ...[M]ost countries experience most of the possible death rate decline before they develop a large medical system, and many very poor countries have achieved almost the

whole of this decline simply by better distribution of existing food, mass public health campaigns, and immunization, without even mass use of antibiotics (Eyer, 1984, p. 25).

Eyer (1984) highlights that insofar as health promotion efforts are disproportionately based on improvements to the healthcare system, then the achievement of population-level health goals will be unlikely.<sup>10</sup>

### *Critiques of Population Health*

Despite its laudable movement to expand the concept of health to include social, political, and economic factors and conditions, population health, like most theoretical perspectives, has a few shortcomings. In an effort to develop a critical approach to population health research, Labonte and his colleagues (2005) proffered four substantive weaknesses of existing population health perspectives.

First, there appears to be a reliance on empirical studies to create meaning and understandings about population health with less emphasis on the generation and use of theory. When theory is utilized, it is often oversimplified and limited (Coburn et al., 2003; Hayes, 1994). Lack of theoretical astuteness may be due in part to the educational curricula used to train medical, nursing, and public health researchers and practitioners. These training programs tend to emphasize individual-level rather than societal-level causes of morbidity and mortality as a result of the hegemony of both the biomedical model and individualism (Krieger, 1994; Powles, 1974). Accordingly, even when

---

<sup>10</sup> There is strong evidence that addressing social and political issues, such as women's rights, rather than facets of the healthcare system is a profoundly effective approach for improving population health, particularly with respect to infant mortality and life expectancy (Hertzman, Frank, & Evans, 1994).

societal-level causes of morbidity and mortality are acknowledged, corresponding intervention strategies often revert to the mass implementation of lifestyle and behavior change programs—individually-oriented interventions—instead of addressing relations of power associated with poor health outcomes (Ciliska et al., 2000; Wallack & Lawrence, 2005).

A second shortcoming of population health is related to methodology. The overwhelming majority of health research is quantitative, devoid of the subjectivity and contextual nature of health issues (Labonte, Polanyi, Muhajarine, McIntosh, & Williams, 2005). While mixed methods research approaches are increasingly utilized, there still remains a dearth of studies that rely wholly or mostly on qualitative research methods. As a result, social determinants of health are neatly categorized and measured, and the complexity, nuances, intersections, and contextuality of health is blurred or lost altogether.

The third critique of population health is its tendency to ignore or hide the human actor behind health outcomes; this may be a function of aggregated data wherein the faces of ‘respondents’ or ‘subjects’ are unintentionally lost (Labonte, Polanyi, Muhajarine, McIntosh, & Williams, 2005). By ignoring human agency, population health scholars have overlooked the role of human actors as change agents prepared to confront and address health disparities observed at the population level.<sup>11</sup> Labonte and colleagues (2005, p. 9) highlight this weakness by stating, “[I]n effect, the study of population health determinants was largely segregated from the study of how such determinants might be

---

<sup>11</sup> The relentless efforts of collective action groups focused on the health of women and persons of color exemplify the “power of the people” to create change and promote health (Morgen, 2002; White, 1990).

changed.” Moreover, deemphasizing human agency reveals an understanding of individuals and social structures as separate entities rather than interactive units.

The final critique presented by Labonte et al. (2005) focuses on the potential for co-optation of population health concepts. As a result, concepts developed by population health scholars, such as the notion that access to healthcare is not the best predictor of health outcomes, may then serve as evidence to justify policies and practices such as cuts to state-supported health insurance. While population health scholars maintain that healthcare systems *alone* will result in limited changes in health status among populations and purport that changes to the healthcare system will do very little to address disparities in health, they nevertheless support many of the preventive medicine options provided by the healthcare system, especially if these services were provided more equitably (Evans, Barer, & Marmor, 1994).

Each of these criticisms of population health is warranted. However, I will organize a response to these critiques by focusing on the third because I believe a focus on *action* facilitates opportunities for also addressing theoretical and methodological concerns. In the next section, I propose several strategies for *activating* population health perspectives.

### Activating Population Health

Michael Marmot, a prominent population health scholar, recently stated: “It is, still, an unusual idea that diseases have social causation and that the remedies for social causation might be social in nature. ...If the remedies of the social causes of health should be social, what should we do?” (2005, p. 3). As Marmot points out, a gaping hole

exists between processes of understanding the social production of health and processes of taking action to create change (Cohen, 2006; Labonte, Polanyi, Muhajarine, McIntosh, & Williams, 2005; Syme, 2005). To be sure, results from a recent qualitative study conducted by Benita Cohen (2006) with public health practitioners in Canada revealed that despite widespread training in population health, most practitioners were ill-prepared to take action to address pressing social determinants of health:

Although virtually all public health nurses identified *low income* as the key determinant of health affecting the people whom they dealt with in their practice, these same nurses stated that low income was the determinant of health that they were *least* likely to influence. (Cohen, 2006, p. 1575, emphasis added)

Cohen also found that:

[R]elatively few participants defined population health as an approach to health promotion that emphasizes *taking action* on the determinants of health. The need to reduce social and economic inequalities in health status was barely acknowledged as a key element of a population health perspective (2006, p. 1575, emphasis in original).

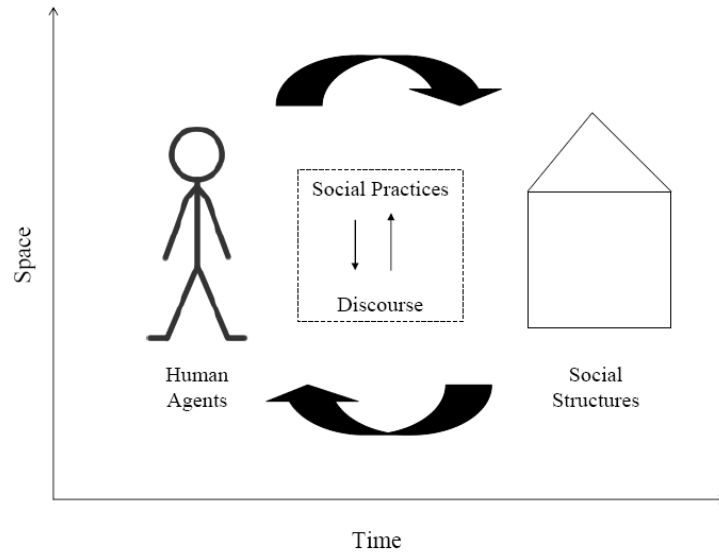
These findings highlight that population health in practice is limited not only because it deemphasizes action, but also because it has an underdeveloped conceptualization of how change processes ought to occur. If we consider just one social determinant of health, low-income, many questions regarding change processes emerge. Does change involve the allocation of fair wages to employees and/or does it include a reevaluation of wage systems developed through capitalism? The answers to these questions are less important than the fact that population health researchers and practitioners have ignored

the importance of making the connection between theories of population health and corresponding action.

Moreover, I purport that a theory of population health constructed without complementary action is substantively deficient. In short, my argument is that an examination of the social relations of power influencing health in the absence of a process of learning through practice is an insufficient method for both understanding and addressing social determinants of health. This is an epistemological concern and therefore represents an argument regarding knowledge creation. I avow that a theory of population health or any theory that addresses the social ought to include an iterative process of learning by doing or praxis.

In addition, I contend that a robust understanding of humans as agents of change and of social structures as malleable forces is essential to further the theoretical base of population health as it moves towards activation. Although population health takes into account the relationship between an array of social forces on health outcomes (see Figure 5), and thus challenges the biomedical model, it is nevertheless limited because it does not provide a rigorous understanding of how social structures emerge or how they may be changed. Consequently, I suggest that population health scholars consider the theory of structuration to address this concern. The theory of structuration (Giddens, 1984) purports that human agents and social structures are mutually constitutive (see Figure 6). Giddens's (1984) argues that human agents create social structures through social practices as well as through discourse which, in turn, influence the social practices and discourses of agents. Thus, what one does (e.g., What did you eat for dinner?) and the language one uses to describe his/her actions (e.g., What should we eat for dinner?) are

always already involved in the formation of social structures. These social structures are understood as “the structuring properties allowing the ‘binding’ of time-space in social systems, the properties which make it possible for discernibly similar social practices to exist across varying spans of time and space and which lend them ‘systemic’ form” (Giddens, 1984, p. 17). The recursive and dynamic reciprocity between human agents and social structures is bound by space and time and is perpetuated through the most mundane, regularized, and routinized of activities.



*Figure 6. Diagram of structuration theory.*

---

To illustrate this concept, let us briefly consider the relationship between food practices and social structures. Human agents—through their food practices including food production, distribution, procurement, and preparation and through discourses related to food—engage in an ongoing process of production and reproduction of the social structures that make food (in)accessible to people: socially, spatially, and



temporally. Likewise, social structures related to food—including food systems, food products, and food venues—foster “discernibly similar social practices to exist across varying spans of time and space” (Giddens, 1984, p. 17) and, thus, create and recreate human agents as well as food-related health conditions. I will be returning to and expanding on this point later in the chapter as well as throughout the entirety of this dissertation as it is central to my overall analysis.

Finally, I avow that a movement toward action within population health scholarship necessarily involves a shift in research methodology. No longer can one justifiably examine the social production of health from a bird’s eye view. A transition from the biomedical model and its individual focus to population health and its social focus requires new methodologies. These methodologies ought to be participatory and interactive, situated and localized, reflective and attentive to power and privilege, and take into account the role of human agents as well as social structures in the production and reproduction of social phenomena.

### Constructing a New Theory-Methods Package

In this section I return to and attempt to answer Marmot’s (2005, p. 3) question, “*If the remedies of the social causes of health should be social, what should we do?*” by introducing a new theory-methods package<sup>12</sup> that responds to my concerns regarding the activation of population health. This new theory-methods package, “materialist praxis”, challenges the dichotomy between *knowing* about various determinants of health (social

---

<sup>12</sup> In accordance with other scholars (e.g., Clarke, 2005; e.g., Star, 1989), I use the term “theory-methods package” to emphasize the intersection of these concepts. Our methods convey our theories of knowledge production and social transformation and vice versa.

or otherwise) and *doing* something about them by asserting that both are intricately connected—one cannot know without doing and vice versa. Materialist praxis also emphasizes the reciprocity between social structures and human agents through a process of research that *begins* by addressing the material conditions of specific time-space contexts. I develop materialist praxis by elaborating on theory and methods underpinning praxis-oriented research, and therefore introduce materialist praxis by first reviewing praxis-oriented research. Next, praxis-oriented research is differentiated from a materialist praxis approach. Concepts related to the politics of food access are integrated into this section since this is the substantive topic explored in this dissertation; however, I envision materialist praxis to be a generalized methodology that may be used to study other topics.

### *Praxis-oriented Research*

The relationship between knowing and doing or theory and practice is often described as *praxis*. Praxis represents an ongoing commitment to knowledge generation through experience in and with the world; an approach to research employed transdisciplinarily by critical, feminist, liberation theology, Marxist, participatory action, and popular education scholars. Openly emancipatory in intent, praxis-oriented processes strive to understand, deconstruct, and redress social injustices (Freire, 2005; Lather, 1991). Patti Lather suggests that “[T]he requirements of praxis are theory both relevant to the world and nurtured by actions in it, and an action component in its own theorizing process that grows out of practical political grounding” (1991, pp. 11-12). Thus, praxis-oriented researchers develop theory through a reciprocal and iterative process of research,

reflection, and action that is participatory, situated, and action-oriented (Lather, 1991) (see Figure 7).

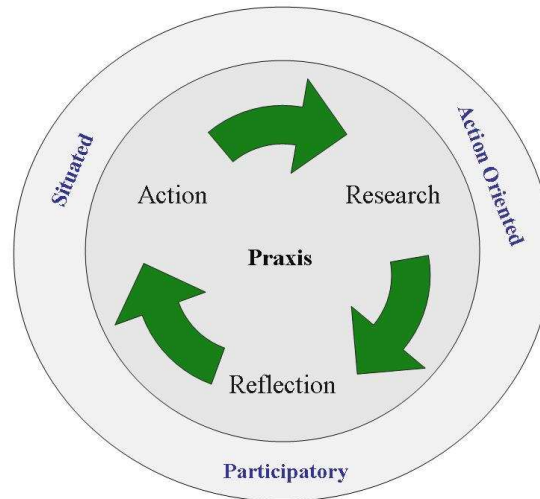


Figure 7. Model of research as praxis.

---

### *Praxis-oriented Research is Participatory*

As a participatory approach to research, praxis builds on methodologies developed by participatory and feminisms-informed researchers. In this dissertation, I use the term “participatory research” as an umbrella for describing a variety of research approaches that aim to increase participant involvement in knowledge generation processes.<sup>13</sup> I use the term “feminisms-informed research”<sup>14</sup> to describe research approaches that are underpinned by a commitment to end domination and oppression

---

<sup>13</sup> Examples of participatory research approaches include participatory action research (Cornwall & Jewkes, 1995; Fals-Borda, 1991; Kemmis & McTaggart, 2000), community-based participatory research (Israel, Schulz, Parker, & Becker, 1998; Minkler & Wallerstein, 2003), and cooperative inquiry (Heron, 1996).

<sup>14</sup> I use the term “feminisms” (the plural form of feminism) to emphasize the plurality and fluidity of feminist theory and practice. Feminisms serves as a rhetorical reminder of the multivocality of research and action focused on interpreting and transforming unjust relations of power (Dietz, 2003; hooks, 2000).

(Dietz, 2003; hooks, 2000).<sup>15</sup> As I reveal in the following section, there are several similarities between participatory and feminisms-informed approaches to research.<sup>16</sup>

*Democratize research processes.* Both participatory and feminisms-informed approaches to research attempt to democratize research processes by including the people most affected by the issues under study as active participants in all stages of the research process including problem formation, project design, data gathering, data interpretation, and dissemination of the results (Israel, Schulz, Parker, & Becker, 1998; Wallerstein & Duran, 2003). In this dissertation, individuals with limited access to healthy foods, including children and adults, are the primary informers of the knowledge generation and social transformation process. In the next chapters, I describe the range of strategies employed to enhance opportunities for participants to inform the research process—from problem generation to data dissemination.

*Promote social justice and social change.* The primary goals of participatory and feminisms-informed research approaches are to promote social justice and social change rather than to develop knowledge for the sake of knowledge (Cornwall & Jewkes, 1995; Dietz, 2003). Both approaches seek to model equity and justice in their research *processes* as well as their *outcomes* and assert that the goals of justice cannot be achieved through unjust means. Goals of social justice and social change are related to the emancipatory intent of praxis, a goal that must be understood within the context of existing oppression and power imbalances such as unequal access to fresh and healthy foods among persons representing different and differently valued positions in the social

---

<sup>15</sup> Examples of feminisms-informed methodologies include decolonizing methodologies (Smith, 1999), feminist approaches to participatory action research (Maguire, 1987), and qualitative methods (Olesen, 2005; Sprague, 2005).

<sup>16</sup> There are also differences between participatory and feminisms-informed research approaches (e.g., Parpart, 2002); however, these will not be addressed in the context of this research.

hierarchy. Feminisms-informed scholars, in particular, strive to uncover the use of socially constructed categories such as race, class, and gender as tools for creating social hierarchies through which some positions are privileged while others are subordinated (Baca Zinn & Thornton Dill, 1996). Accordingly, the relationship between social constructions such as “class” and food insecurity or “race” and obesity may be understood as social injustices associated with the maldistribution of power and privilege rather than as individual problems related to the biology, genetics, and behaviors of individuals representing various class and race backgrounds.

*Engage in co-learning.* In both participatory and feminisms-informed approaches, researchers are viewed as “facilitators” or “co-learners” in research processes rather than “teachers” or “experts” (Ansley & Gaventa, 1997; Williams & Brydon-Miller, 2004). Information exchange between researchers and participants is interactive and bi-directional. In praxis, researchers are transformed as much or more than participants engaged in research efforts, and this is facilitated in part by the employment of reflective strategies (Freire, 2005; Williams & Brydon-Miller, 2004).

*Illuminate and attend to power and privilege.* Finally, participatory and feminisms-informed approaches to research strive to illuminate power and privilege in processes of knowledge development (Chavez, Duran, Baker, Avila, & Wallerstein, 2003; Dietz, 2003; Spivak, 1988). Research is understood to be a political endeavor; no one arrives at the research table as an objective observer. Both researchers (Chavez, Duran, Baker, Avila, & Wallerstein, 2003; McIntosh, 1989) and participants (Wallerstein & Duran, 2003; Williams & Brydon-Miller, 2004) are considered to be bearers of privilege and thus have the ability to contour knowledge creation processes. Accordingly,

participatory and feminisms-informed research approaches problematize for whom, by whom, and how research is conducted by continually asking questions such as:

Who was (dis)engaged in the creation of the research agenda?

Who defined research questions, goals, and intended beneficiaries of the research?

What counts as knowledge? Whose knowledge counts?

How is power acknowledged and shared during the research process?

How will different and differently positioned voices and perspectives be heard?

These questions are explored throughout the entirety of this dissertation.

### *Praxis-oriented Research is Situated*

Praxis-oriented researchers assert that knowledge is produced and consumed by individuals and groups representing specific social contexts, social conditions, and social positions (e.g., Collins, 2000; Haraway, 1988; e.g., Narayan, 2003) and, thus, call for the development of numerous and perhaps even divergent theories that are situated and localized. This is in contrast to research paradigms such as positivism, which purport the existence of one, true, external reality (Guba & Lincoln, 2005). This reality is assumed to be governed by “universal laws that can be known (described, explained, predicted and controlled)” (Nelson & Prilleltensky, 2005, p. 241). Under a positivist paradigm, the purpose of science is to uncover this universal reality through research processes conducted by “disinterested” or “value-free” researchers (Guba & Lincoln, 2005).<sup>17</sup>

Praxis-oriented scholars, in addition to many postmodern scholars (e.g., feminist, critical,

---

<sup>17</sup> Taking the stand that one is “value-free” or “disinterested” is in fact an assertion of both values and interests. No one arrives at a research table (or any table for that matter) as a blank slate, free from particular values and interests (McFague, 2001). Acknowledging and re-acknowledging one’s interests and values is an important part of the research endeavor.

participatory), openly challenge concepts of knowledge and knowledge creation avowed by positivism and assert that “[C]laims of universality are considered naïve at best and much more commonly as hegemonic strategies seeking to silence/erase other perspectives” (Clarke, 2005, p. xxv). Consequently, praxis-oriented scholars support the development of situated, localized, and contested theoretical models for understanding the social world. These models may combine to offer a more generalizable albeit dialectical explanation of social concerns.

Food justice and feminisms-informed scholar, Anne Bellows, argues for the generation of situated and contextualized theories for understanding “food violences”, a term she uses to describe “periodic or chronic physical, psychological, and political harm associated with food availability and food-related work” (2003, p. 251). Accordingly, existing theories related to food and/or the social production of health may be broadened if our research processes sought to uncover and even privilege the perspectives of people shopping at supermarkets with little or no fresh and healthy foods, people attempting to prepare nutritious meals when the month lasted longer than their paycheck, and/or people frequenting convenience stores as a primary source of food for the family. In so doing, a situated perspective on the politics of food access may be uncovered based on the experiences of peoples most keenly aware of and regularly navigating the materiality of food injustices.

### *Praxis-oriented Research is Action-oriented*

Freire (2005) defines praxis as “action and reflection upon the world in order to transform it” (p. 51). He emphasizes that *reflection* in the absence of *action* is merely “verbalism,” words “changed into idle chatter...into an alienated and alienating ‘blah’” (Freire, 2005, p. 87). At the same time, Freire suggests that *action* in the absence of *reflection* is merely “activism” or “action for the sake of action” (Freire, 2005, p. 88).

The compartmentalization of reflection and action is common among scholars. For instance, scholars working within the traditions of community psychology and critical theory both have a commitment to deconstructing and transforming social concerns. However, Davidson and her colleagues (2006) found that community psychologists and critical theorists tend to place greater emphasis on *either* deconstruction *or* transformation to the detriment of the other:

Whereas community psychology is more action oriented than critical scholarship, its actions fall short of challenging institutionalized power structures and the status quo; and whereas critical scholarship is more challenging of the status quo than community psychology in theory, it has failed to produce viable actions that challenge the status quo. (Davidson et al., 2006, p. 35)

Exemplary of Freire’s (2005) notion of “verbalism” and “activism,” Davidson’s et. al’s (2006) analysis challenges praxis-oriented scholars to engage in the trifecta of research, reflection, and action in efforts for social transformation.

“Action” within praxis-oriented research is often based on the concept of “concientization”, a term Freire uses to describe dialogical processes wherein “oppressed” and “oppressors” both deconstruct situations and come to understand social



structures as malleable rather than fixed. Conscientization allows humankind to “*emerge* from their *submersion* and acquire the ability to *intervene* in reality as it is unveiled” (Freire, 2005, p. 109, emphasis in original). This form of action—action as a dialogical process—is employed by many praxis-oriented researchers. To illustrate the key features of a dialogical approach to praxis I will review the work of Patricia Maguire (1987), a feminisms-informed participatory action researcher, because her approach is similar to that of many praxis-oriented scholars.

*Example of Praxis-oriented Research: A Dialogical Approach to Praxis*

Maguire’s (1987) research was underpinned by the notion that dialogue can be a catalyst for change, and thus began with a series of individual interviews with fourteen formerly abused or battered women. Each interview lasted about one to one and one-half hours. Following each interview, Maguire transcribed the qualitative data and provided a copy of the transcript to the female participants, many of whom reported that they did *not* have time to review their transcript in preparation for their second interview. In fact, Maguire indicated that the majority of the women did not even contact her for a second interview; only eight of the fourteen participants completed a second interview after Maguire made an attempt to be in touch with them (1987, pp. 168-169). In the latter stages of her project, Maguire and the female participants acted upon information unveiled during earlier stages of the project by creating a social support group for the women, which eventually led to the development of recommendations and policy changes for a local social service agency focused on the needs of battered woman.

This process of conversation and reflection through which individuals purportedly experience heightened awareness of injustices and perhaps even develop a deeper understanding of the political aspects of personal concerns, represents the prominent change strategy employed by praxis-oriented scholars (e.g., Freire, 2005; Lather, 1991; Maguire, 1987). Although raising awareness about injustices may be an important ingredient for change, the awareness of an injustice, for both oppressors and the oppressed, does not necessarily translate into the capability of agents to do things differently, to change their day-to-day social practices related to particular phenomena.<sup>18</sup> In fact, heightened awareness or conscientization frequently does *not* lead to action, and “[W]e would be naïve if we asserted the idea, totally unsupported by experience, that people only have ‘to know’ in order to mobilize” (Vio Grossi cited in Maguire, 1987, p. p. 55). Furthermore, the salience of dialogue as the impetus for change neglects to take into account the materiality of phenomena. Returning once again to Maguire’s (1987) work, it is evident that her research approach was less attentive to the materiality of the women’s experiences, including their material need for food, shelter, and clothing, perhaps because of the financial costs associated with the provision of these goods. Nevertheless, many of the women indicated that lack of time was a key barrier to taking part in the research process, presumably because their time was needed for other activities such as labor in the public and private spheres so that their material needs could be abated.

---

<sup>18</sup> I am basing my concept of agency in the work of Giddens who indicates “agency refers not to the intentions people have in doing things but to their capability of doing those things in the first place” (Giddens, 1984, p. 9). This conceptualization of agency is similar to concepts proffered by Nussbaum (2000) and Sen (1999).

It would be interesting to examine how the female participants in Maguire’s research might have engaged in the research process differently if the first stage of the project entailed the provision of a living wage, housing, and food for each of the female participants? How might this material intervention influence the ways in which the women re-imagined both themselves and opportunities for social change? These questions, which emphasize the materiality of phenomena, are precisely the focus of materialist praxis.

### Materialist Praxis: A New Theory-Methods Package

In this section, I introduce “materialist praxis” as an alternative to the dialogical process guiding most praxis-oriented research. The remainder of this dissertation is focused on the application of this new theory-methods package to a research endeavor that is focused on understanding and addressing the politics of food access in food insecure communities. Materialist praxis builds on the basic elements of praxis-oriented research, and thus involves an iterative process of research, reflection, and action that is guided by methods that are participatory, situated, and action-oriented. The key distinction between these approaches is related to their differing levels of emphasis on addressing the materiality of phenomena as a part of the broader process of social transformation. I use the term “materiality” to represent the physicality and sociality of concrete objects. Materialist praxis *begins* by addressing the material, and through this process a dialogical component may emerge (see Figure 8). By first addressing the material, physical needs are attended to. Moreover, a focus on material realities allows for further exploration of broader sociological phenomena since the material is also a

conveyor of the social. The following propositions expound on these topics. I situate these propositions in relationship to food and food access, however, the propositions may be extrapolated to understand and address the relationship between other material realities and the health of the public.

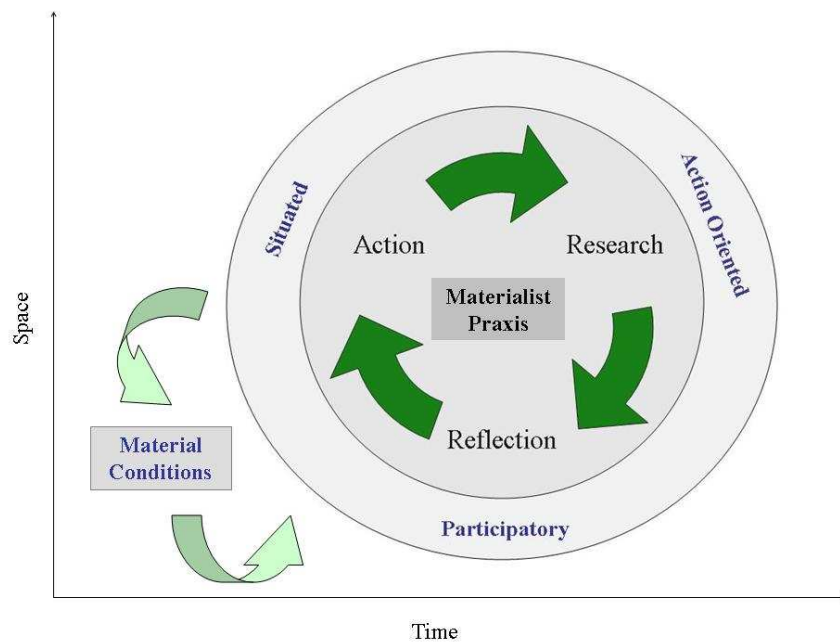


Figure 8. Model of materialist praxis.

### *Three Propositions for the Employment of Materialist Praxis*

#### *Proposition 1*

First, I propose the use of materialist praxis because *an exploration of material dimensions facilitates opportunities for exploring the social relations of power influencing population health*. Lack of access to a material good such as food (or shelter

or clothing and so on) is not merely the physical absence of such goods. Instead, lack of access to food must be considered within the context of the social, economic, and political requisites for food access (Bellows, 2003). Therefore, a focus on the physical invokes a focus on the social. In the case of food, an examination of access to this physical object may facilitate an examination of the sociality of food including but not limited to opportunities to earn fair wages in order to pay for food, the presence or absence of “free time” to purchase and prepare meals, and the quality and quantity of grocery stores and supermarkets located within community settings. In addition, the social messages conveyed through food may be explored. These topics are examined in greater detail throughout this dissertation.

In contrast to emphasizing material needs and realities, the dialogical model employed by many praxis-oriented scholars emphasizes the psychological and cognitive requisites for social transformation, and in this process, shifts the burden of change on to individuals with less emphasis on the broader array of social forces influencing phenomena (Parpart, 2002).<sup>19</sup> Moreover, material deprivation such as being without food or shelter often truncates one’s ability to engage in cognitive, psychological, and/or social transformation processes (hooks, 2000).

### *Proposition 2*

Second, I propose the use of materialist praxis because *the material conditions of communities (e.g., presence of sidewalks, supermarkets, broken windows, vacant lots) are vectors through which health is transmitted*. With respect to food-related health conditions, there is growing evidence that the material aspects of communities contribute

---

<sup>19</sup> The large body of research focused on “empowerment” is exemplary of this phenomenon.

to the health of community members. Living in a “high poverty” community, for instance, is related to decreased access to healthy foods for purchase within the neighborhood (Morland, Wing, Diez Roux, & Poole, 2002) and increased rates of diet-related health conditions such as coronary heart disease (Diez-Roux et al., 1997). Family-level poverty is the best predictor of food insecurity in the U.S. (see Figure 1) (Nord, Andrews, & Carlson, 2006), and practices of racial, ethnic, and class-based segregation result in family-level poverty aggregating in specific community contexts (Kawachi & Berkman, 2003a).

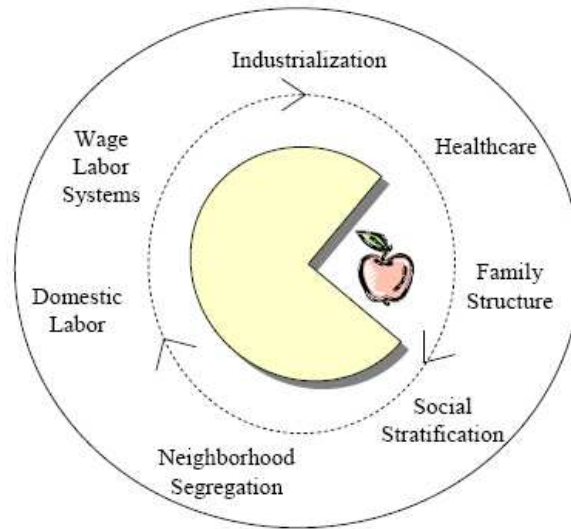
Community conditions are increasingly examined as key predictors of health outcomes. Accordingly, research methods and approaches for examining the unique effects of social contexts have been developed. Hierarchical linear modeling (HLM) represents one of these methodological tools. This quantitative approach allows for the examination of individual-level factors, such as behaviors and choices, as a function of the settings in which individuals reside (Raudenbush & Bryk, 2002). Geographic information systems (GIS) represent another tool for examining the relationship between social contexts and health. GIS is an approach for collecting, organizing, and analyzing data and associated attributes that are spatially referenced to the Earth resulting in the creation of a graphic image or map that provides a visual representation of phenomena under study.

HLM and GIS hold much promise for scholars interested in the relationship between the material aspects of social contexts and health outcomes; however, it is important to highlight that quantitative measures alone are insufficient strategies for understanding the relationship between social contexts and health outcomes because they

ignore the historical, political, and social aspects of context (Kawachi & Berkman, 2003a) as well as the complexity, nuances, and intersections of spatial locations (Labonte, Polanyi, Muhajarine, McIntosh, & Williams, 2005). Moreover, an examination of social contexts divorced from a process of action or learning by doing is, as I argued earlier, epistemologically inadequate. Therefore, materialist praxis expands methods for understanding context by integrating these tools into ongoing processes of research, reflection, and action that not only attempt to understand the material conditions of a specific time-space context but that also attempt to transform them.

### *Proposition 3*

Finally, I argue for the use of materialist praxis because, as I introduced in an earlier section of this chapter, *the material is implicated in the creation and recreation of social structures and social practices related to health*. Therefore, the act of taking a bite out of a particular food item (e.g., an apple) is far more than a physiological moment in time; this routinized and regularized food practice also represents the expression of agency in the production and reproduction of the social milieu. Food practices contribute to the recapitulation of spatially, temporally, and/or socially defined boundaries, a process of differentiating people through the differentiation of foods. Through this process of classification and categorization, foods have been described as “foods for us” and “foods for them”, “foods for wives” and “foods for husbands”, “foods for breakfast” and “foods for dinner” (Lewin, 1997).



*Figure 9. Visual representation of the interconnectedness between human agents and social structures through food and food practices.*

---

Therefore, questioning and/or transgressing these boundaries generates opportunities for not only resisting social categorizations but for also recreating the social systems and structures intricately connected to material objects and related social practices. The social systems and structures related to food and food practices include but are not limited to systems of domestic labor (who prepares food?), wage labor systems (i.e., how does one pay for the food?), neighborhood segregation (i.e., where is food located?), healthcare systems (i.e., what are the consequences of food consumption?), industrialization (i.e., how is food produced?), and globalization (i.e., where does food come from?) (see Figure 10). One starting point for questioning and resisting these boundaries of difference is by challenging and then changing the material conditions in a specific time-space context. This is precisely the focus of this dissertation research, which begins by developing farmers' markets in communities where one is more likely to find



tobacco and alcohol or Cheetos and Doritos than apples and bananas or lettuce and tomatoes.

## Dissertation Chapters

In this dissertation, materialist praxis guided a process of research that began by addressing the material conditions related to food access in three communities in Nashville, Tennessee, by establishing farmers' markets in areas that had limited or no access to fresh and healthy foods. Through this process of increasing access to fresh fruits and vegetables and through the corresponding research, reflection, and action strategies described in Chapter 2, the politics of food access in food insecure communities were explored.

In Chapter 2, I provide an overview of the research methodology guiding this dissertation. The genesis of this research is outlined including a description of the primary research question explored. A detailed account of the research, reflection, and action components included in this research is articulated. The chapter concludes by reviewing the methods used to collect and analyze the qualitative and quantitative data examined in this study.

In Chapter 3, "Politics of Space", I present an analysis of data collected via the food store audits. Through a systematic process of counting and auditing food stores located within a one mile radius of the three Boys and Girls Clubs, a picture of food (in)access is created. Interview data corroborate the food store audits and therefore provide additional perspectives regarding the spatial distance between "good food" and the communities in which the Boys and Girls Clubs are located. This chapter is also

focused on the topic of intersectionality, a concept that highlights the overlapping, entangled, and oftentimes unnoticeable ways that various types of oppressions combine to heighten injustices. I explore the complex and interconnected ways in which food and food access is always already “raced” and “classed” and “gendered” and “spaced”, and examine how these intersections make many “healthy” foods socially inaccessible.

Chapter 4, “Producing Produce”, provides an in-depth and thick description of the process through which the Boys and Girls Clubs transformed from being youth-serving organizations to produce stands during the summer of 2007. This chapter examines the human and nonhuman, material, and symbolic elements of this process through a detailed description of routinized elements of the farmers’ markets: produce procurement, market set-up, selling food, and market closure. Rather than “inoculating” the communities with farmers’ markets—a passive method of change, through a materialist praxis research approach the farmers markets were dynamic and interactive, creations and performances in space. This facilitated opportunities for the community-based effort to become “owned” by the Boys and Girls Clubs, albeit in slightly different ways for each site.

In Chapter 5, “Real, Fresh, and Good”, I differentiate foods into two broad categories – “real, fresh, and good” versus “bad, rotten, and junk” – because an analysis of the ethnographic data revealed that this distinction was essential for understanding the politics of food access. In this chapter, I explore the valuation of “real”, “fresh”, and “good” food, foods considered to be healthier, superior to, and far more costly than foods described as “bad”, “rotten”, and/or “junk”. These themes combine to make real, fresh, and good foods prized or treasured possessions, foods with significant value and worth. At the same time, these foods are considered to be inaccessible because of the high price

tags of healthy foods and the limited or empty pocketbooks of many participants. In addition, the time costs associated with procuring and preparing healthy foods exacerbated the inaccessibility of real, fresh, and good foods. I introduce and elaborate on each of these themes by providing direct quotations from the qualitative data as well as corresponding commentary.

The final chapter, Chapter 6, summarizes the major contributions made in this dissertation including a review of “materialist praxis”, the research methodology introduced and then used in this research. Following this overview I explore the ways in which the introduction of farmers’ markets at three Boys and Girls Clubs in Nashville, Tennessee, served as a tool for recreating relationships between food and food practices, for changing social structures and human agents. I pay close attention to the ways that this performance in and to space also facilitated the development of an experientially and materially-based pedagogical strategy for teaching health education, illuminated the possibility of farmers’ markets to serve as alternatives to traditional health clinics, and created a community-based laboratory for exploring in greater detail the social relations of power influencing food access. Lastly, I recapitulate several of the emergent themes regarding the relations of power influencing food access by (a) emphasizing the recursive and responsive relationship between peoples and places, (b) revealing and dismantling hierarchies produced and reproduced through food and food practices, and (c) highlighting the economy of food access. Following this summary, the limitations and strengths of this dissertation are highlighted, and the chapter concludes by offering several ideas for future research.

## CHAPTER II

### METHODOLOGY

*I really want to say this...I'm excited that you all are doing this research because it's so important that it happens. I know that research is important... The reason that it's important, what's most important in our research is that in everything that we do, that we really listen to the voice of the culture...the hope of the culture...and then find ways to infuse that in what we're doing and then use the information to really benefit the people.*  
African American woman, Hopetown<sup>20</sup>

In this chapter I introduce how and why this dissertation research emerged and then provide a detailed description of the research, reflection, and action processes employed. Through these processes, my objective was to enact a research methodology that aligned with the goals of research proffered by the African American woman from Hopetown quoted at the beginning of this chapter. Although each element of the materialist praxis research approach is described separately, the various elements of this project blended together more often than not. The definitions are intended to provide common language for describing this research project; they are not intended to create definitive categories for the various elements of materialist praxis. For the sake of clarity, I first describe the “action” component of this project since this is a key feature of the corresponding “research” and “reflection” processes (see Figure 10).

---

<sup>20</sup> Hopetown, Lincoln Court, and Ridgetop are pseudonyms for the three research sites.

<i>Action</i>	<i>Research</i>	<i>Reflection</i>
<b>Farmers' Markets</b>	<b>Participant</b>	<b>Semi-structured Focus</b>
	<b>Observations</b>	<b>Groups</b>
<b>Nutrition Education</b>	<b>In-depth Interviews</b>	<b>Journaling</b>
	<b>Food Store Audits</b>	<b>Photovoice</b>
	<b>Surveys</b>	

*Figure 10. Overview of research, reflection, and action components of the materialist praxis research approach.*

#### Genesis of Research Approach

This research was conducted from March to December 2007; however, the research question and materialist praxis approach bore out of nearly three years of conversations and research experiences with community members in the urban center of Nashville, Tennessee. In 2004-2005, I engaged in formal (focus groups, interviews, photovoice) and informal discussions with parents and staff from Head Start preschools to learn more about their perspectives on childhood obesity. Throughout this process, I found that food access or rather the lack thereof was a major concern for these individuals. During a photovoice session (Wang, 2003), for instance, one parent reported that her photograph of a red ripe tomato was equivalent to “that dress you see in the window, something I always wanted but never could afford.” Interestingly, parents and staff from the preschools rarely described food-related health behaviors (e.g., diet, food

consumption patterns) and health outcomes (e.g. diabetes, coronary heart disease) as the chief community health concerns to be addressed.

In 2005-2006, I collaborated with a community development corporation in Hopetown,<sup>21</sup> an area in north Nashville, to facilitate a pilot study involving the development and implementation of a neighborhood-based farmers' market (Colley, 2006; Freedman, 2007). This community-based participatory research endeavor (Israel, Schulz, Parker, & Becker, 1998; Minkler & Wallerstein, 2003) emerged first and foremost as a community and economic development project and secondarily as a community health initiative. The pilot farmers' market project was the impetus for my dissertation research, which expands the concept of neighborhood-based farmers' markets from one site to three and from being organized by a small group of community members to operating out of Boys and Girls Clubs. This expansion was based on community feedback related to the pilot project. Community members emphasized that future efforts focused on increasing access to healthy foods via farmers' markets ought to connect with community-based institutions because community members believed these institutions would have greater capacity to sustain the farmers' markets. Moreover, participants acknowledged that moving away from having a small group of community members plan and implement the farmers' markets<sup>22</sup> to having the farmers' markets organized and operated by community institutions may enhance community ownership of the project.

---

<sup>21</sup> Hopetown is a pseudonym. Hopetown is also one of the three research sites included in this dissertation research.

<sup>22</sup> Between 8 and 14 community members attended each of the five planning meetings for the pilot farmers' market project, and a core group of seven community members attended at least half of the meetings (Freedman, 2007).

The program of research I was developing during my graduate career was primarily focused on two broad topics: community-based participatory methodologies and the social production of health. My substantive focus on food access emerged through community engagement. Accordingly, I had limited background knowledge about the topic of food and food access prior to my initial involvement with parents and staff from the Head Start preschools as most of my previous research focused on HIV/AIDS and teen pregnancy prevention (Freedman et al., 2006; Freedman, Salazar, Crosby, & DiClemente, 2005). Beginning in 2005 and henceforth, I took advantage of many opportunities to get to know a range of individuals interested in the issue of food access including farmers, gardeners, grocery store owners, anti-hunger activists, health professionals, teachers, students, and community members. I attended over 150 meetings and events related to food systems issues (e.g., community gardening, farm-to-school, nutrition education) and offered to provide assistance with various efforts by taking minutes at meetings, developing programming materials, and writing grants. These interactions facilitated a process of co-learning between me as the researcher and various participants (Ansley & Gaventa, 1997; Williams & Brydon-Miller, 2004). This resulted in the exchange of ideas and theories about the reasons why access to food is not equitable, with several of these inchoate theories focused on what many stakeholders referred to as the “root causes” of unequal access to healthy foods including racism, unfair wage systems, sexism, poverty, globalization, and industrialization.

Through these interactions and experiences, stakeholders within the local food system reported that they were disconnected; many groups working on similar food-related projects were unfamiliar with one another’s efforts. This occurred, in part,

because there were no formal linkages between the various facets of the local food system, from food production to consumption. Consequently, in 2006 I facilitated the development of a food security coalition—Food Security Partners of Middle Tennessee, which attempts to connect the dots between all parts of the local food system, from “farm to fork.” The goal of the Food Security Partners is to bring people together to create and sustain a secure and healthy food system for the middle Tennessee region so that all community residents may obtain a safe, culturally acceptable, nutritionally adequate diet through a sustainable food system that maximizes community self-reliance and social justice (Food Security Partners of Middle Tennessee, nd).

It was through the food security coalition that this dissertation research materialized. At the January 2007 coalition meeting, I reviewed the results of the pilot farmers’ market project and emphasized the importance of connecting the neighborhood-based farmers’ markets with community-based institutions. A representative from the local children’s hospital heard this announcement and approached me after the meeting to learn more about the pilot project. She informed me that the children’s hospital in collaboration with the local Boys and Girls Clubs had just received a childhood obesity prevention grant, and this collaboration was interested in integrating the farmers’ market concept into their efforts. After a series of conversations between the children’s hospital, the Boys and Girls Clubs, and the funding agency, it was decided that some of the funds from the childhood obesity grant would be redirected to support the development of onsite farmers’ markets at the Boys and Girls Clubs for both years of the grant cycle (2007-2008). The scope of this research is based on the first year of the farmers’ markets.



Thus, the genesis of this dissertation research occurred through an extended process of research and action. Each of the projects leading up to this dissertation was participatory and interactive, involving many opportunities for the topic of food (in)access to be named and framed by hundreds of community members in Nashville. Although different populations were included in each research endeavor, there was overlap across the various projects with people in one project often getting involved with another. This is in contrast to some participatory research approaches that attempt to include the same people in the research process—from problem generation to data dissemination. While I am not arguing against that type of approach, there are a number of factors that impede participation in a multi-year research endeavor, and many are related to issues of power and privilege (Maguire, 1987; Wallerstein & Duran, 2003; Williams & Brydon-Miller, 2004). Who has the time to engage in a multi-year project? Who “owns” processes of knowledge production and social transformation if the same population informs each stage of the process?

By acknowledging the influence of power and privilege in all research processes—including those designed to be participatory—some community-based participatory researchers strive to engage different people at different points and in different ways throughout the research process (Schulz et al, 2003) resulting in a “fluid” rather than a constant process of participation. This concept of fluid participation is not simply about who has the time to engage in research from one year to the next. Instead, fluid participation may enhance community ownership and exchange of power, two key aspects of participatory research, because it allows more people to get involved in the research process. My experiences with the three projects leading up to this dissertation

revealed that many community members were quite interested in being involved with one project with the explicit goal of passing it on to others in the next year. For instance, in the pilot farmers' market project, community members were strongly interested in continuing the neighborhood-based farmers' market but they had equally strong opinions that future research efforts should focus on finding ways to connect the neighborhood-based farmers' markets with preexisting community infrastructures such as the local Boys and Girls Clubs. This fluid process of participation resulted in different types of people getting involved at different phases of this dissertation research process.

### Research Question

The overarching research question for this dissertation states: *What are the politics of food access in food insecure communities?* This research question was developed through a community-engaged process of research over a period of three years. Throughout this time, the topic of food access was continually problematized and understood to be more than a dichotomous variable. Instead, the complexities, nuances, and intersectionality as well as the sociality of food access became increasingly apparent.

By focusing on the "politics" of food access, this research attempts to uncover the social relations of power related to gaining access to healthy foods within a specific time-space context. This research is specifically focused on the ways that food access is embedded in social relations of power manifested in and conveyed through the socially constructed categories of race, class, gender, and their social and spatial intersections. The politics of food access were examined through a research process that began by changing the material conditions of a community—farmers' markets were established in

three communities with limited or no access to outlets for purchasing fresh and healthy foods. Thus, by addressing the material aspects of a specific time-space context in which food was essentially inaccessible, the topic of food access was further explored.

The politics of food access is examined by analyzing qualitative and quantitative data collected via a materialist praxis research approach. The qualitative data were analyzed using grounded theory and situational analysis, and the quantitative data were analyzed using descriptive statistics and GIS mapping.

### Action Component

The development of onsite farmers' markets at three Boys and Girls Clubs in Nashville constituted the "action" element of this research. The three Boys and Girls Clubs involved in the project were Hopetown, Lincoln Court, and Ridgetop.<sup>23</sup> The farmers' markets were designed to change, for a short period of time, the volume and variety of fresh fruits and vegetables available in each community. In addition to the farmers' markets, this research also entailed the provision of weekly nutrition education classes to students at each of the research sites.

#### *Farmers' Markets*

The farmers' markets operated one day per week per site for nine weeks (June 11-August 10, 2007) from 3:30pm to 5:30pm, the time when most parents or guardians were

---

<sup>23</sup> The names of the Boys and Girls Clubs have been changed to protect the confidentiality of the research sites and participants. In several instances throughout the analysis, when location was less important than the concept being articulated, I changed the location associated with a particular respondent. This was done to protect the confidentiality of the interviewee as well as to ensure that the location he or she was referencing could not be identified.

picking up their children from the Boys and Girls Clubs.<sup>24</sup> A total of 26 farmers' markets were operated as a part of this study. A local nonprofit, Sustain Nashville,<sup>25</sup> was responsible for procuring fresh fruits and vegetables to stock the farmers' markets. A Sustain Nashville representative purchased the produce from local farmers (farms within a 90 mile radius of Nashville) at wholesale prices and brought the food to the Boys and Girls Clubs. Once the food arrived at each site, approximately five children and youth from each of the Boys and Girls Clubs took part in an hour long experientially and materially-based educational session during which (a) the types of produce available were reviewed through an interactive conversation (e.g., name each fruit and vegetable, describe where and how it is grown, review what the food tastes like, etc.), (b) the volume of produce available was measured, and (c) the fruits and vegetables were priced. After the educational session, the children and youth assisted with the operation of the farmers' market. I was present and actively involved with all aspects of the farmers' markets; two or three research assistants were also present and involved.

Several strategies were used to advertise the onsite farmers' markets to parents or guardians that had children attending the Boys and Girls Clubs. First, children and youth attending the Boys and Girls Clubs made advertisements about the farmers' markets, including posters, invitations, commercials, pictures, and stories. Advertisements served as a tool for introducing the farmers' markets to the children and youth as well as to their parents or guardians. Second, a large and colorful banner stating "Fresh and Tasty Fruits and Vegetables Sold Here" was created (see Figure 12). The banner was on display during all hours of operation of the farmers' markets and remained on display at the Boys

---

<sup>24</sup> At the Hopetown site, the farmers' market operated for eight weeks instead of nine because the site closed one week earlier than the other two sites.

<sup>25</sup> Sustain Nashville is a pseudonym.

and Girls Clubs during non-market times. Finally, a weekly newsletter was created to remind families about the farmers' markets, provide updates regarding the types of foods available at the market, and offer seasonally appropriate recipes (see Appendix A for an example of the weekly newsletter). The newsletters were sent home with children and youth from the Boys and Girls Clubs and were also available at the farmers' markets.



*Figure 11. Banner advertising the Boys and Girls Club farmers' markets.*

---

In addition to these advertising mechanisms, each of the sites developed their own strategies to recruit customers. One site, for instance, distributed flyers about the farmers' markets to individuals living within walking distance of the Boys and Girls Club, including residents at a public housing apartment complex located adjacent to the site. Another site advertised the farmers' market via an electronic listserv run by the local neighborhood association. Finally, all of the sites engaged in grassroots advertising methods that were primarily organized by the children and youth at the sites. These approaches varied by site and by week and included door-to-door advertising after

children returned home from the Boys and Girls Clubs as well as cheerleading, singing, and performances during the hours of market operation. A more detailed description of these approaches is included in Chapter 4.

### *Nutrition Education*

A total of 23 nutrition education classes were conducted as a part of this research.<sup>26</sup> The nutrition education classes were administered each week throughout the duration of the project to age-specific cohorts of about 40 children and youth. Each student at the sites had an opportunity to take up to three nutrition education classes during the summer project resulting in approximately 500 students at the Boys and Girls Clubs participating in one to three nutrition education classes. Two or three research assistants taught the nutrition education classes, which were based on preexisting health education curricula.<sup>27</sup> I helped coordinate the nutrition education classes but only attended a limited number of the sessions. The nutrition education classes were *not* focused on increasing access to fresh fruits and vegetables. Instead, they focused on individual-level factors related to fruit and vegetable consumption such as knowledge, attitudes, and skills related to the food pyramid, proper portion sizes, and increased consumption of fruits and vegetables. The nutrition education classes served as an opportunity to get to know the children and youth at the Boys and Girls Clubs and proved to be effective tools for recruiting youth to assist in the operation of the farmers' markets.

---

<sup>26</sup> On three occasions, the nutrition education classes were cancelled because the children were on a field trip or were engaged in another activity.

<sup>27</sup> Curricula guiding the nutrition education classes included "Live It! Go for the Red, White, and Blue" developed by the Monroe Carrell Jr., Children's Hospital at Vanderbilt University and "Triple Play" a program developed by the Coca Cola Company and Kraft Foods Inc. Triple Play was specifically developed for the Boys and Girls Clubs of America.

## Research Component

A mixed methods research approach guides this dissertation because, as Guba and Lincoln purport, there is not a single method or process that leads to the “royal road of ultimate knowledge” (2005, p. 205). Although this dissertation employed both quantitative and qualitative methods, the paradigms guiding this research have commensurate epistemologies and methodologies (Guba & Lincoln, 2005). This applied and exploratory study included ethnographic methods, food store audits, and surveys.

### *Ethnographic Methods*

Geertz (2001) argues that the goal of ethnography is to uncover the fine details, nuances, and complexities of social life. By identifying the intricacies of a particular group or context, ethnography adds depth to our understanding of the situation at hand. The microscopic focus of ethnographers allows them to excel in settings with distinct parameters. Rather than studying the masses to determine patterns and consistencies, the ethnographic researcher values people and context-specific interpretations of phenomena. In this process “thick descriptions” of people, settings, customs, ideas, and/or rituals are developed through systematic processes of listening, observing, recording, reflecting, and interviewing (Geertz, 2001). In this research, several ethnographic methods were used including participant observations, in-depth interviews, and semi-structured focus groups. The semi-structured focus groups served as a tool for reflection and will therefore be described in the “reflection” section.

### *Participant Observations*

Participant observations were conducted during each of the onsite farmers' markets. These served as a tool for exploring the relations of power influencing access to healthy foods. Participant observations were recorded by all research staff (me and the three research assistants) within 48 hours of each observation resulting in a total of 43 observations (see Table 1). The observation time was between two and four hours per farmers' market. Participant observations focused on the following questions (Bogdewic, 1992):

Who is present?

What is happening?

When does this activity occur?

Where is this happening?

Why is this happening?

How is this activity organized?

Observations were recorded in a covert manner, and typically included notes recorded on scraps of paper at important moments during the farmers' markets.

In addition to these open-ended field notes, we recorded detailed information about the operation of each farmers' market. This included information related to the volume and diversity of food brought to the farmers' markets, the number of customers, the volume of food sold, and the cash flow<sup>28</sup> at the market.

---

<sup>28</sup> Though the farmers' markets were not designed for their profit-bearing potential, it was important to try and maintain a "break even" financial system at the markets (e.g., the full cost of the foods was recouped from sales). All profits made at the farmers' markets were returned to the respective sites at the end of the project.



*Table 1. Participant observations recorded at farmers' markets, 2007.*

	PI	RA-1	RA-2	RA-3	Total
Site					
Hopetown	8	1	0	6	15
Lincoln Court	6	6	0	1	13
Ridgetop	8	2	5	0	15
Total	22	9	5	7	43

Caption Table 1. PI = principal investigator, Darcy Freedman; RA = Research Assistant

### *In-depth Interviews*

*Interviews with farmers' market customers.* In-depth, open-ended interviewing was used to explore the politics of food access in greater detail without the constraints associated with close-ended surveys (Schensul, Schensul, & LeCompte, 1999). The interviews were semi-structured, open-ended, one-on-one, and focused on eliciting participants' perspectives on the relationship among social contexts, social conditions, social positions, and access to healthy foods. The interview guide used in this study was a dynamic document, and new questions were added to the guide as new themes emerged (Weiss, 1994). The interview guide is available in Appendix B.

The source population for the in-depth interviews was anyone shopping at one of the three farmers' markets and included staff from the Boys and Girls Clubs, parents/guardians of children enrolled at the Clubs, and community members shopping at the farmers' markets. Purposeful and maximum variation sampling was used to select different types of interviewees (e.g., black, white, male, female, older, younger,

community members, parent, etc.) (Glaser & Strauss, 1967; Miles & Huberman, 1994; Weiss, 1994), and facilitated representativeness in the theory development process (Miles & Huberman, 1994). The interviews continued until interviewee responses related to the emergent themes became redundant; this point is often called “saturation” (Glaser & Strauss, 1967).

*Table 2. Demographic characteristics of interview participants, by site and overall.*

	Hopetown	Lincoln Court	Ridgetop	Total
	n=4	n=7	n=9	N=20
Type of Interviewee, n (%)				
Parent/Guardian	3 (75.0)	5 (71.4)	3 (33.3)	11 (55.0)
Community Member	1 (25.0)	2 (28.6)	6 (66.7)	9 (45.0)
Age, years				
Mean	38.3	43.0	35.8	39.0
Range	23.0-47.0	31.0-61.0	20.0-54.0	20.0-61.0
Race, n (%)				
Black or African American	4 (100.0)	6 (85.7)	8 (88.9)	18 (90.0)
White or Caucasian	0 (0.0)	1 (14.3)	1 (11.1)	2 (10.0)
Gender, n (%)				
Male	1 (25.0)	3 (42.9)	2 (22.2)	6 (30.0)
Female	3 (75.0)	4 (57.1)	7 (77.8)	14 (70.0)

*Table 2. Demographic characteristics of interview participants, by site and overall. (Continued)*

	Hopetown	Lincoln Court	Ridgetop	Total
	n=4	n=7	n=9	N=20
Education, n (%)				
Less than high school	0 (0.0)	0 (0.0)	3 (33.3)	3 (15.0)
High school graduate/GED	0 (0.0)	0 (0.0)	1 (11.1)	1 (5.0)
Some college	0 (0.0)	3 (42.9)	3 (33.3)	6 (30.0)
College graduate	2 (50.0)	1 (14.3)	1 (11.1)	4 (20.0)
Advanced degree	2 (50.0)	3 (42.9)	1 (11.1)	6 (30.0)
Household Size, mean (range)				
Total size	3.8 (2-7)	3.3 (2-5)	2.8 (1-8)	3.2 (1-8)
# Children <18 years	1.5 (0-3)	1.4 (0-3)	1.0 (0-6)	1.3 (0-6)
Receive Food Assistance, n (%)				
Food Stamps or WIC	0 (0.0)	1 (14.3)	2 (22.2)	3 (15.0)
Free/reduced priced lunches <sup>29</sup>	0 (0.0)	1 (14.3)	4 (80.0)	5 (25.0)
Annual Household Income, n (%)				
Less than \$19,999	0 (0.0)	0 (0.0)	6 (66.7)	6 (30.0)
\$20,000-39,999	1 (25.0)	2 (28.6)	2 (22.2)	5 (25.0)
\$40,000-59,999	2 (50.0)	1 (14.3)	0 (0.0)	3 (15.0)
\$60,000-79,999	0 (0.0)	2 (28.6)	0 (0.0)	2 (10.0)
\$80,000 or more	1 (25.0)	2 (28.6)	1 (11.1)	4 (20.0)

<sup>29</sup> Denominator only includes participants reporting that they have children (n=15) and excludes participants who reported they do not have children (n=5).

Recruitment of interview participants took place at the farmers' markets through posters and oral communication that described the purpose of the interviews, the time commitment, and the reimbursement amount (\$20.00/interview). Each participant was interviewed one time; the interview lasted between 45 minutes and two and one-half hours, including the time necessary to review and sign the consent form. The interviews were conducted at a location that was convenient for the participants including fast food restaurants, participants' homes, the Boys and Girls Clubs, and over the telephone. All interviews were conducted by me and were tape recorded for transcription.

In-depth interviews were conducted with 20 individuals (Hopetown n=4, Lincoln n=7, Ridgetop n=9). Eleven were conducted with parents or guardians of children attending the Boys and Girls Clubs and nine with community members shopping at the farmers' markets. Most interviewees were Black or African American (90.0%), female (70.0%), had some college education or more (80.0%), and had an annual income of \$39,999 or less (55%). See Table 2 for a complete description of the demographic characteristics of the interviewees.

*Interviews with food producers.* In addition to the interviews with customers frequenting the farmers' markets, two interviews were conducted with farmers involved with this research. The farmers both provided food for the farmers' markets. These interviews followed a similar pattern as the interviews with the farmers' market customers; however, additional time was spent on the farmers' perspectives regarding their involvement with the Boys and Girls Club farmers' markets. Both of these interviewees were female and white. Due to confidentiality concerns related to the small

sample size, additional information about the demographic characteristics of these farmers is not provided.

### *Food Store Audits*

Food store audits were conducted to provide another description of food access in the areas near the Boys and Girls Clubs, and thus served as a tool for triangulating our understanding of the politics of food access. The food store audits were conducted in two phases. First, student researchers enrolled in a Maymester course at Vanderbilt University were trained to conduct audits of all food stores (N=33 stores) located within a one mile radius of each of the three Boys and Girls Clubs. Each student team traversed all of the streets within the one mile radius to record the presence of supermarkets, local markets, and convenience stores in the neighborhoods.<sup>30</sup> For each store, students conducted an audit of the types of foods sold in the store (see Appendix C). The food store audit used in this research was based on an inventory developed by the University of Missouri-Kansas City Health Research Group.<sup>31</sup> In addition to conducting the food store audits, a photograph of each food store was taken to capture a visual image of the store.

The second stage of the food store audit process entailed the conversion of the audit data into attribute files that could be mapped in conjunction with other spatial data such as U.S. Census information. Census tract data related to the socio-demographic characteristics of the contexts surrounding the Boys and Girls Clubs (e.g., median

---

<sup>30</sup> “Supermarkets” were defined as chain food stores that sell a *wide* variety of items including food, medicine, toiletries, alcohol, etc; “local markets” included non-chain food store that sells a *wide* variety of items including food, medicine, toiletries, alcohol, etc.; and “convenience stores” included chain or non-chain store that sold a *limited* variety of items including food, pharmaceuticals, toiletries, alcohol, etc.

<sup>31</sup> I received a copy of this survey from Paul Speer, my dissertation advisor. The lead investigators of the UM-KC research project including Walker C. Poston, C. Keith Haddock, and Joseph Hughey.

household income, racial composition) were gathered and were used to further contextualize the environments in which this research took place. Food audit and census data were then analyzed using GIS software (ArcGIS, version 9.2).

### *Surveys*

Surveys were administered at the beginning of this project to better understand fruit and vegetable purchasing and consumption patterns as well as perceptions of food access among parents/guardians with children attending the Boys and Girls Clubs.

The survey included four categories of questions, although not all categories are analyzed in this dissertation.<sup>32</sup> The first category focused on recent purchasing patterns of fresh fruits and vegetables. These questions assessed the last time fresh fruits and vegetables were purchased, where they were purchased, and what was purchased. The second category of questions examined how easy or difficult it was for participants to purchase fresh fruits and vegetables within their communities or neighborhoods during a one month time frame. Six questions were included in this section and all were scored on a four-point Likert scale (very easy, somewhat easy, somewhat difficult, very difficult, and don't know). The first two categories of questions were modified from questions developed by the National Research Center (2006). The third category included two questions, both focused on self-reported fruit and vegetable consumption within the past seven days. One question asked about fruit consumption and the other asked about vegetable consumption. The questions are similar to questions included in the Youth Risk Behavioral Surveillance Survey (Eaton et al., 2006). The final section assessed

---

<sup>32</sup> In this dissertation, I only focus on a few data related to fruit and vegetable consumption and health status.

demographic characteristics of the participants including information about race, gender, age, level of education, family size, level of income, receipt of food assistance, and zip code. The survey is available in Appendix D.

The source population for the surveys was parents and guardians of children and youth attending the three Boys and Girls Clubs. Parents/guardians were selected as the target population because they are typically the primary purchasers of food for their families. Convenience sampling was used to recruit parents/guardians to complete the surveys (Babbie, 2001). Participants were recruited to take part in the surveys through posters and oral communication that described the purpose of the surveys and the amount of time required to complete the surveys. Eligible participants were also informed that they would be entered into a drawing to win a \$25.00 gift card to a local grocery store after completion of the survey.<sup>33</sup> All surveys were administered at the Boys and Girls Clubs. Paper copies of the surveys were available at the site and participants had a chance to complete the survey on their own or with the assistance of a research team member. It took about ten minutes or less to complete the survey, including review of the consent form prior to data collection.

A total of 133 surveys were completed (Hopetown n=36, Lincoln n=68, Ridgetop n=29) (see Table 3). As noted in Table 3, there is missing data for a small proportion of the survey questions; the percentages recorded in the table take into account missing data. Most of the survey participants were Black or African American (80.9%), female (82.2%), had some college education or more (72.3%), and had an annual income of \$39,999 or less (75.2%).

---

<sup>33</sup> A total of five gift cards were awarded per site.

*Table 3. Demographic characteristics of survey participants, by site and overall.*

	Hopetown	Lincoln Court	Ridgetop	Total
	n=36	n=68	n=29	N=133
Age, years				
Mean	36.3	35.8	35.8	36.0
Range	24-54	19-61	21-75	19-75
Race, n (%)				
Black or African American	31 (86.1)	49 <sup>34</sup> (74.2)	26 (89.7)	106 <sup>35</sup> (80.9)
White or Caucasian	2 (5.6)	10 (15.2)	2 (6.9)	14 (10.7)
Hispanic or Latino	0 (0.0)	4 (6.1)	0 (0.0)	4 (3.1)
Bi-racial/Multi-racial	2 (5.6)	2 (3.0)	0 (0.0)	4 (3.1)
Asian or Pacific Islander	0 (0.0)	0 (0.0)	1 (3.4)	1 (0.8)
American Indian, Eskimo or Aleut	0 (0.0)	1 (1.5)	0 (0.0)	1 (0.8)
Gender, n (%)				
Male	8 (22.2)	12 <sup>36</sup> (18.8)	3 (10.3)	23 <sup>37</sup> (17.8)
Female	28 (77.8)	52 (81.3)	26 (89.7)	106 (82.2)

<sup>34</sup> Denominator is 66 due to missing data for two respondents.

<sup>35</sup> Denominator is 131 due to missing data for two respondents.

<sup>36</sup> Denominator is 64 due to missing data from four respondents.

<sup>37</sup> Denominator is 129 due to missing data from four respondents.



*Table 3. Demographic characteristics of survey participants, by site and overall. (Continued)*

	Hopetown	Lincoln Court	Ridgetop	Total
	n=36	n=68	n=29	N=133
Education, n (%)				
Less than high school	1 (2.8)	1 <sup>38</sup> (1.5)	0 (0.0)	2 <sup>39</sup> (1.5)
High school graduate/GED	12 (33.3)	10 (14.9)	12 (41.4)	34 (25.8)
Some college	10 (27.8)	28 (41.8)	13 (44.8)	51 (38.6)
College graduate	10 (27.8)	22 (32.8)	4 (13.8)	36 (27.3)
Advanced degree	3 (8.3)	6 (9.0)	0 (0.0)	9 (6.8)
Household Size, mean (range)				
Total size	4.3 (2-7)	3.4 (1-6)	3.3 (1-8)	3.6 (1-8)
# Children <18 years	2.5 (1-5)	1.6 (0-3)	1.7 (0-5)	1.9 (0-5)
Receive Food Assistance, n (%)				
Food Stamps or WIC	7 (19.4)	4 <sup>40</sup> (6.0)	4 (13.8)	15 <sup>41</sup> (11.4)
Free/reduced priced lunches	20 (55.6)	28 <sup>42</sup> (41.8)	16 <sup>43</sup> (57.1)	64 <sup>44</sup> (48.9)

<sup>38</sup> Denominator is 67 due to missing data for one respondent.

<sup>39</sup> Denominator is 132 due to missing data for one respondent.

<sup>40</sup> Denominator is 67 due to missing data from one respondent.

<sup>41</sup> Denominator is 132 due to missing data from one respondent.

<sup>42</sup> Denominator is 67 due to missing data from one respondent.

<sup>43</sup> Denominator is 28 due to missing data from one respondent.

<sup>44</sup> Denominator is 131 due to missing data from two respondents.

*Table 3. Demographic characteristics of survey participants, by site and overall. (Continued)*

	Hopetown	Lincoln Court	Ridgetop	Total
	n=36	n=68	n=29	N=133
Annual Household Income, n (%)				
Less than \$19,999	8 <sup>45</sup> (25.0)	6 <sup>46</sup> (9.5)	6 <sup>47</sup> (27.3)	20 <sup>48</sup> (17.1)
\$20,000-39,999	18 (56.3)	38 (60.3)	12 (54.5)	68 (58.1)
\$40,000-59,999	5 (15.6)	11 (17.5)	1 (4.5)	17 (14.5)
\$60,000-79,999	1 (3.1)	4 (6.3)	3 (13.6)	8 (6.8)
\$80,000 or more	0 (0.0)	4 (6.3)	0 (0.0)	4 (3.4)

### *Human Subjects Research*

This research was reviewed and approved by the Vanderbilt University Institutional Review Board (IRB #070427). Informed consent was obtained from interview, focus group, and survey participants prior to data collection. The consent forms for the interviews, focus groups, and surveys are found in Appendix E and F. Informed consent was not obtained during the participant observations since all observations were collected in a public space (at the farmers' markets) and were collected anonymously. Informed consent was not obtained for the food store audits because the

<sup>45</sup> Denominator is 32 due to missing data from four respondents.

<sup>46</sup> Denominator is 63 due to missing data from five respondents.

<sup>47</sup> Denominator is 22 due to missing data from seven respondents.

<sup>48</sup> Denominator is 117 due to missing data from 16 respondents.

data collection did not involve human subjects; however, permission was sought from all store owners or managers before food audits were conducted.

### Reflection Component

The reflection portion of this project included journaling and semi-structured focus groups. Journaling was conducted by each member of the research team as a method for recording reactions, reflections, and memos regarding the research process. Journals were personal documents and thus remained private unless someone wanted to share his or her thoughts and perspectives. Information gleaned from the journals, however, was frequently shared with the research team during the semi-structured focus groups.

### *Semi-structured Focus Groups*

A total of 15 semi-structured focus groups were conducted. Semi-structured focus groups were conducted one to two times per week during all weeks in which a farmers' market was operated. Participants included research staff, farmers' market customers, and project stakeholders. The sample size for the semi-structured focus groups ranged from four to thirteen participants. Due to the informal and spontaneous nature of the focus groups, the participants' demographic information was not collected.

### *Focus Groups with Research staff*

The research staff (N=4) engaged in nine semi-structured focus groups; all of which were tape recorded for transcription. The focus groups addressed various topics related to the social relations of power influencing access to healthy foods (see Appendix G for a list of topics). For each focus group, one main topic served as the theme for the discussion, and research staff were encouraged to explore this topic (e.g., race and food access, class and food access) from the perspective of their field notes, participant observations, and personal experiences.

In addition to the topic-specific sessions, the staff focus groups were also used to analyze our field notes. In these instances, each person was assigned one or two sets of field notes to review in greater detail and was then asked to describe what he or she learned from the field notes to the rest of the research team. This provided an opportunity for the person who authored the field notes to give additional information about his or her field notes and at the same time it served as a tool for examining the ways that our own social locations and perspectives influenced our understandings of phenomena. This process of “reading in-between the lines” and “adding lines to the text” allowed for a more nuanced understanding of the politics of food access.

A final reflection technique was used during the staff focus groups. Over the course of this research, a variety of photographs were taken; therefore, we spent some time reviewing a selection of the photographs using the “SHOwED” technique developed by Caroline Wang (2003). The SHOwED technique is a systematic method for critically analyzing photographs and involves the following five questions which are asked over and over to gain a deeper understanding of phenomena:

What do you see here?

What's really happening here?

How does this relate to our lives?

Why does this problem, concern, or strength exist?

What can we do about it?

This process allowed us to uncover important themes related to the relations of power influencing food access that were not unveiled through other processes.

Throughout each of these reflection processes, we found that information gained during the sessions often informed both the research and action elements of this project. The recursive relationship between reflection and research and between reflection and action allowed us to make changes to the project as new information emerged. The reflection sessions also served as a formative data analysis process through which themes were noted and explored in recurrent sessions.

### *Focus Groups with Farmers' Market Customers*

Customers at the farmers' markets took part in five semi-structured focus groups, all of which were conducted at the farmers' markets. These provided an opportunity for customers to share their perspectives on food access, and in this sense the customers became "co-researchers" in this project by offering new ideas or challenging extant assumptions about the politics of food access (McQuiston, Parrado, Olmos-Muñiz, & Bustillo Martinez, 2005). Each focus group was tape recorded for transcription. These focus groups were designed to explore the topic of food access as well as other topics that emerged throughout the duration of the study. The focus groups entailed conversations

while people were shopping at the market and frequently began by asking one person a question about food access and then letting other shoppers respond to his/her comments or to the original question. Due to the short period of time during which shoppers were at the farmers' markets, a revolving conversation emerged wherein information gained during the first moments of the farmers' market were integrated into questions asked to the last customers of the day.

#### *Focus Group with Project Stakeholders*

One semi-structured focus group was conducted with project stakeholders including leadership from the Boys and Girls Clubs and the children's hospital as well as from other collaborators and supporters of this project. A total of 13 people attended this session which took place during the last week of the project. This focus group began by reviewing one photograph from the summer project using the SHOWED technique (Wang, 2003). Each person had an opportunity to respond to the five SHOWED questions and to offer additional feedback about their thoughts and perspectives regarding the summer project. This session lasted about one and one-half hours.

### Data Analysis

#### *Qualitative Analysis*

The qualitative data analysis approach used in this research was based on the notion that emergent theories regarding the politics of food access would be grounded in

the thoughts, perspectives, experiences, and observations collected during the research, reflection, and action stages of this project. The data analysis process was focused on creating a “grounded theory” of the politics of food access, and therefore my analytic categories were derived directly from the data rather than from predefined concepts or hypotheses (Charmaz, 2001). Kathy Charmaz describes this process as an “interaction between the observer and observed”, thereby highlighting the influence of the observer’s worldviews, disciplinary assumptions, theoretical propensities, and research interests on data analysis (Charmaz, 2001, p. 337). Thus, my transdisciplinary background in the fields of public health, community psychology, community development, and women’s and gender studies; my theoretical grounding in population health perspectives and praxis-oriented research; and my personal and social positionality as a white middle class woman living in Nashville all combine to inform the lens I applied to the qualitative data analysis process. I make no claims of being an “objective” or “neutral” observer. However, to keep my biases and perspectives in check, I have employed numerous data collection processes as well as a robust process of reflection that includes feedback and responses from other “co-researchers” to facilitate confirmability, dependability, credibility, transferability, and actionability—forms of validity frequently used by qualitative researchers—with respect to the resulting analysis (Miles & Huberman, 1994).<sup>49</sup>

---

<sup>49</sup> These forms of validity are different than but may be considered in complement to forms of validity underpinning positivist research (see Miles & Huberman, 1994). Thus, confirmability may be related to objectivity, dependability to reliability, credibility to internal validity, and transferability to external validity (see Miles & Huberman, 1994). Actionability is an additional form of validity that is not necessarily commensurate with measures of validity within the realm of positivism. However, one way to consider this measure of validity is to compare “actionability” with traditional measures of “goodness of fit”. This expands notions of “goodness of fit” to address the usability of research findings to promote action and change.

Data analysis was a recursive process that began immediately after data collection. For instance, after recording field notes I would make notes and comments and even form loose theories about the politics of food access and would then share these ideas with the research assistants during the reflection sessions. I would also test some of these new ideas during another data collection event. This was a back and forth process of collecting and analyzing, reviewing and discussing, asking and re-asking questions to participants as well as to my data. Once data were transcribed, I began listening to and reading the data in an effort to find regularities, patterns, and topics that may or may not have been related to regularities, patterns, and topics uncovered during the inchoate data analysis process. Words and phrases that represented topics and patterns became the coding categories. Once preliminary coding categories were devised, they were assigned to the units of data (e.g., word, sentence, or paragraph). This was an iterative process in which the data were read through again, old categories were modified and new categories were developed. This process was facilitated through the use NovaMind 4 Platinum, an electronic tool for brainstorming and organizing information as well as through Atlasti version 5.2, a qualitative data analysis software program. Emergent themes and sub-themes developed through this coding process are highlighted in Table 4, many of which are elaborated upon in the next chapters.



*Table 4. Emergent themes and sub-themes related to the politics of food access.*

Theme	Sub-theme
Economy of food access	Expensive Time consuming (de)Investment in self (de)Investment in community
Spatiality of food access	Good food far away Segregated access Perceived rurality of fresh food
Temporality of food access	Time without access/survival Generational differences Racial/ethnic heritage Short shelf life of healthy food Short “belly life” of healthy food Slow food versus fast food
Access to what	Taste of food Variety Choice/options Food stores

Quality of food and food stores  
Healthy versus unhealthy  
Sociality of food access  
Eating to convey identity  
Eating to resist social categorization  
Intersections of race, class, gender  
Differentiation of food goods

---

After themes were more or less solidified, I looked for “extreme cases”, cases that did not align with emergent themes. These cases exemplified the complexity of the emergent theory (Clarke, 2005); they were not viewed as “negative evidence”, a term Miles and Huberman (1994) use to define outlier data. I managed the coding and data interpretation process; however, throughout the process I met with the three research assistants as well as with several members of my dissertation committee to review the coding categories and emergent themes.

As the data were coded using a grounded theory approach, situational maps were also developed using a methodology developed by Adele Clarke: “A situational map should include all the analytically pertinent human and nonhuman, material, and symbolic/discursive elements of a situation *as framed by those in it and by the analyst*” (Clarke, 2005, p. 87, emphasis in original). Situational analysis is similar in many ways to grounded theory; however, it has an explicit focus on highlighting the complexity of data rather than distilling concepts into finite themes (Clarke, 2005).

The situational maps were created in several processes, and each stage of analysis became increasingly focused on the human and nonhuman, material, symbolic, and discursive elements of the research sites. The first versions of the situational maps were, in accordance with Clarke’s (2005) methodology, purposefully informal and even messy and were developed in tandem with data collection and the early stages of analysis. This map was used to document nonhuman (blue), human (red), emergent ideas and concepts (green), organizational structures (orange), key events (black), emergent discourses (brown), spatial (purple) and temporal (pink) elements of the situation (see Figure 13).



*Figure 12. Messy situational map.*

Next, I reviewed field note, interview, and focus group data to explore in greater detail the various elements of the research sites. This process began by recording codes and themes found in the data on to sticky notes. This was an iterative and fluid process. The informal maps were retained for further examination as the themes and patterns were developed (see Figure 14 for example of informal map). In Figure 14, I highlighted one aspect of the situational map to provide more detail regarding the analytic process. Here I am focusing on the element “silent actors” and indicated that some of the silent actors in this research were people preparing foods—people frequently referred to by customers at the farmers’ markets but oftentimes unseen (unless of course the preparer was also the shopper, which was also a common phenomenon). Food preparers or “feeders” were often gendered as women. Men shopping at the farmers’ markets often made a point of highlighting that they were purchasing food for wives, mothers, and/or grandmas. I also noted that people not at the farmers’ markets were silent actors. Through the situational map, these actors were named and subsequently included in the data analysis process.

Following this process, data from the informal maps were combined and ordered into twelve categories: (1) individual human actors, (2) nonhuman actants, (3) collective human actors, (4) implicated/silent actors, (5) discursive constructions of human actors, (6) discursive construction of nonhuman actants, (7) political and economic elements, (8) symbolic elements, (9) temporal elements, (10) spatial elements, (11) major issues or debates, and (12) related discourse (historical, narrative, and/or visual) (Clarke, 2005, p. 90). This ordering process, like the process used to create the “messier” versions of the situational maps, was iterative with new ideas added and deleted as the analytic method continued. An example of an ordered situational map is provided in Table 5. Throughout

the development of the “messy” and “ordered” situational maps, analytic memos were recorded (Charmaz, 2001). Memos were used to highlight new insights and to capture shifts in emphasis and/or direction of the analytic process (Clarke, 2005).

### *Quantitative Analysis*

Two types of quantitative data were collected: surveys and food store audits. The survey data were analyzed using descriptive statistics in SPSS version 15.0. This allowed for the mean, median, range, and frequency to be computed for various characteristics. The food store audits were analyzed using descriptive statistics. They were also converted into attribute files and imported into ArcGIS version 9.2 for analysis. Census data from the census tracts surrounding the Boys and Girls Clubs were also converted into attribute files and included in the mapping analysis process.

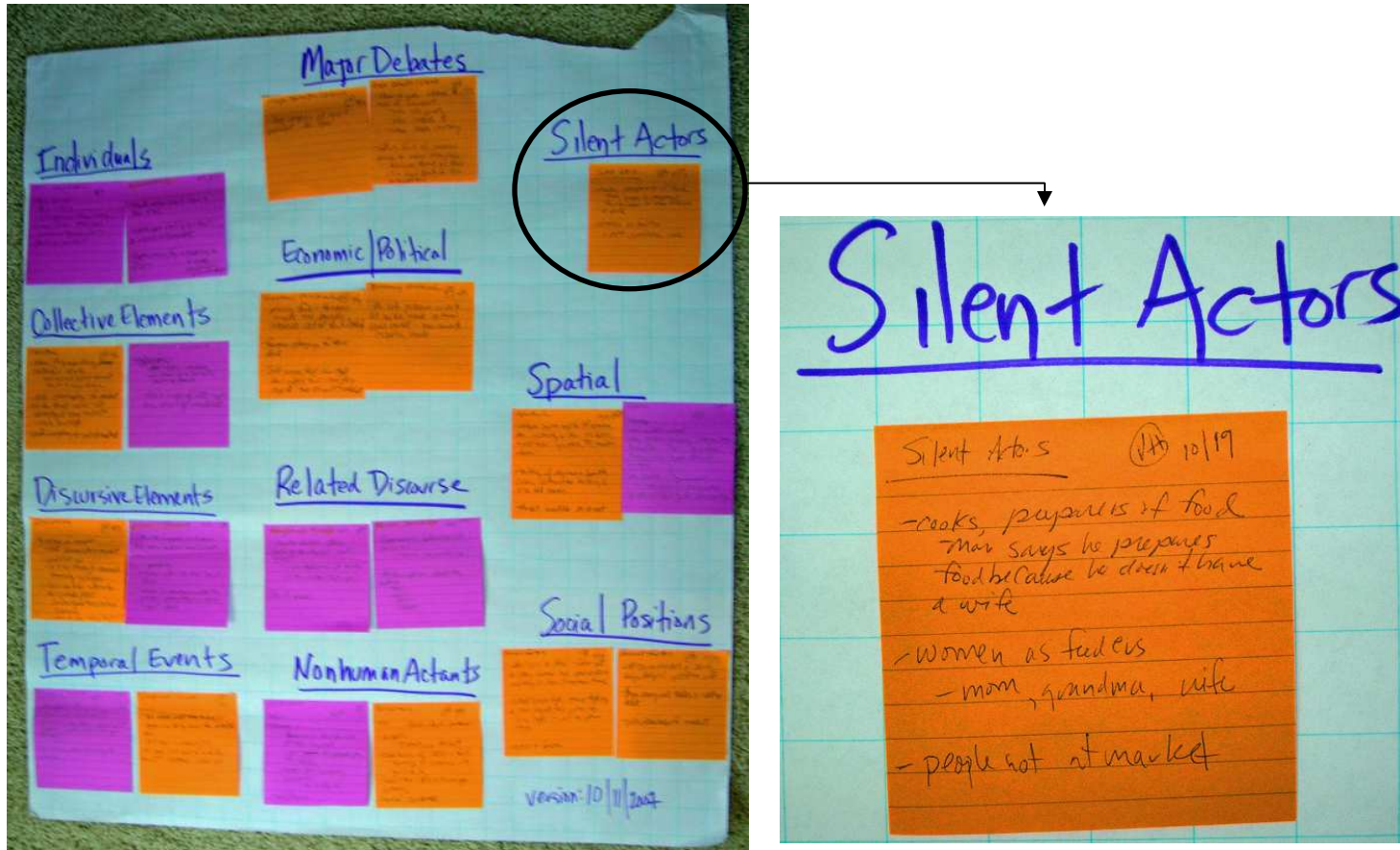


Figure 13. Ordered situational map, version October 11, 2007 (informal).

*Table 5. Ordered situational map, version November 1, 2007 (formal).*

<p>Individual Human Actors</p> <ul style="list-style-type: none"> <li>• Youth who don't come to markets</li> <li>• Students at street advertising markets</li> <li>• People driving by accepting flyers about markets (some don't accept)</li> <li>• Student S – asked to take home flyers about market to pass out in neighborhood</li> <li>• Directors of site – differing levels of engagement with project</li> <li>• Bus driver of city bus</li> <li>• Bus riders</li> <li>• Repeat students at the market</li> <li>• Colleagues from Vanderbilt shopping at markets (people I don't normally see outside of school)</li> <li>• Community members</li> <li>• Haitian customer at Hopetown</li> <li>• Sustain Nashville staff</li> <li>• Research assistants</li> <li>• Me</li> <li>• Reporters from TV, radio, newspaper</li> </ul>	<p>Nonhuman Actants</p> <ul style="list-style-type: none"> <li>• City bus</li> <li>• Signs, banners, posters advertising markets</li> <li>• Flat screen TV inside Club</li> <li>• Tent</li> <li>• TV news, Channel 5 –focused on project</li> <li>• My car (full of baskets, smells like rotten food, back seat down all summer, only could carry 2 passengers, not reimbursed for gas) – privilege</li> <li>• Local food</li> <li>• Excessive amounts of food – too much to sell at market</li> <li>• Rhubarb</li> <li>• Wilted, limp celery and carrots – why did this come to the market?</li> </ul>
<p>Collective Human Actors</p> <ul style="list-style-type: none"> <li>• Volunteers at the Clubs – church groups, other groups from VU (we don't know that we're both involved with the Club)</li> <li>• Kids cheerleading for the market – same group of young woman from Ridgetop</li> <li>• Staff shopping at the end of market after we close and food is free</li> </ul>	<p>Implicated/Silent Actors</p> <ul style="list-style-type: none"> <li>• Cooks, preparers of food – feeders – often described as woman (wife, mother, grandma)</li> <li>• People not at markets</li> <li>• Food and Drug Administration</li> <li>• Global trade policy</li> <li>• Agricultural policy</li> </ul>

<p>Discursive Constructions of Human Actors</p> <ul style="list-style-type: none"> <li>• Dare you to try certain foods at markets – common among kids</li> <li>• Conversation about how you cook with certain foods or how one’s family cooks with the foods (e.g., my granddaddy does this with green tomatoes)</li> <li>• Busyness – people say they don’t have time to stop and shop at market</li> <li>• Dieting practices (raw foods, low-fat, vegetarian)</li> <li>• Financial solvency of farmers’ market</li> <li>• Getting “monies worth” at market</li> <li>• Fair prices for food</li> <li>• “I only cook because I don’t have a wife”</li> <li>• Why am I at the market (discussions with customers)</li> <li>• Healthy foods, nutritious foods, food pyramid</li> <li>• People don’t eat healthy foods</li> <li>• How much do I get paid if I get X customers?</li> <li>• Portion sizes of food</li> <li>• Charity and dependency – feels good</li> <li>• People calling out from cars to find out prices of food, what we were selling</li> <li>• Eating for the future, not for present (moving out of “survival mode”)</li> </ul>	<p>Discursive Construction of Nonhuman Actants</p> <ul style="list-style-type: none"> <li>• Bad apple</li> <li>• Food as conveyer of value, meaning, worth</li> <li>• Cheers about the food (Fruits, veggies, farm fresh)</li> </ul>
<p>Political and Economic Elements</p> <ul style="list-style-type: none"> <li>• Vouchers for kids to shop at markets, value \$2.00</li> <li>• Money/cash to buy food</li> <li>• Counting money</li> <li>• Paying (not paying student assistants with cash)</li> <li>• Calculating profit</li> <li>• Pricing food</li> <li>• Farmers giving food to the Boys and Girls Club markets</li> </ul>	<p>Symbolic Elements</p> <ul style="list-style-type: none"> <li>• CA peaches</li> <li>• Sheets used as table cloths at markets</li> <li>• Food lures people to them (power full tool) – especially peaches</li> </ul>



<p>– is this a good thing? Will it sustain?</p> <ul style="list-style-type: none"> <li>• Real costs of food, how do you calculate this?</li> <li>• Director from Ridgetop saying that his staff cannot afford to shop at the farmers’ markets</li> <li>• Who manages monies from the markets?</li> <li>• Time to cook/prepare food</li> <li>• Negotiations between kids and research team regarding compensation for work at market</li> <li>• Getting paid in fruit</li> <li>• Haggling</li> <li>• Customers asking staff to pick out their food from the market vs. customers who insisted on getting their own food</li> </ul>	
<p>Temporal Elements</p> <ul style="list-style-type: none"> <li>• Timing of farmers’ market process (when people come and go)</li> <li>• Students S and R talked about working at RiverWest market last summer – asked about getting paid with a watermelon</li> <li>• City bus passes Hopetown about once every 40 minutes</li> <li>• Sequence of events involved with the research: day to day, within a day, research timeline, timeline of Clubs – many “clocks” involved with project</li> <li>• As soon as food arrives at Ridgetop people come to shop</li> <li>• Research assistants eating more fruits/veggies with extended time on project</li> <li>• Taking food to homeless and drug rehab centers</li> <li>• Cut prices of food during last hour of market</li> </ul>	<p>Spatial Elements</p> <ul style="list-style-type: none"> <li>• Steep stairs in front of Club – have to carry tables up and down, kids running up and down for exercise/punishment, social space</li> <li>• Sections inside Clubs – sports, arts, crafts, snacks/meals, TV/entertainment</li> <li>• Bus stop</li> <li>• Location of Clubs: near public housing projects, on streets with lots of passersby (except Lincoln Court because of hill)</li> <li>• Ridgetop Club is housed in building with daycare and public health clinic</li> <li>• Classrooms at Clubs for teaching nutrition education</li> </ul>

<p>Major Issues or Debates</p> <ul style="list-style-type: none"> <li>• Staff shopping at the end of the markets for “free”</li> <li>• Money at markets – who sets prices (in general and at market), who collects money, who keeps money, how is money shared</li> <li>• Do we sell food to local restaurant owner? -- our prices are much lower than he might have to pay if he purchased from grower or other food retailer</li> <li>• Article in Tennessee – “Poor Kids Get Peachy about Produce”</li> <li>• Hopetown kids wanting to get paid to work at market – with fruit</li> <li>• Local foods</li> <li>• You Tube video</li> </ul>	<p>Related discourse (historical, narrative, and/or visual)</p> <ul style="list-style-type: none"> <li>• Capturing attention of children (TV)</li> <li>• Assumptions about children and youth from Clubs</li> <li>• Getting and maintaining buy-in for project from director, staff, kids, community</li> <li>• Self-fulfilled prophecy- child having hard time calculating food costs and stops once another kid makes fun of him</li> <li>• “Simon Says” game – tool for getting kids to do what you say – Why?</li> <li>• Conversations with kids about their personal lives, career plans</li> </ul>
---	--

## CHAPTER III

### POLITICS OF SPACE

*Far as fruit, there ain't no fruit there [at the local convenience store]. I don't remember seeing no kind of, you know, like oranges, bananas, apples, tangerines, peaches: I don't see none of that down there.*

African American man, Ridgetop

“How much for your turnip greens?” yelled the bus driver as she stopped the city bus about twenty feet from the Hopetown farmers’ market. One of the youth responded by saying that the turnip greens sold for one dollar per pound. The bus driver shouted across the lawn and said, “Give me seven pounds. I’ll be back in about 45 minutes when my route cycles again past the market.” As promised, the bus driver returned within the hour to pick up her turnip greens. In addition, she let her passengers take advantage of the farmers’ market, including one elderly man with a hospital bracelet on his wrist. Perhaps he was on his ride home from an outpatient medical procedure or an inpatient stay. The passengers, like the bus driver, used this unexpected stop to pick up some fresh fruits and vegetables (see Figure 14). However, their time at the farmers’ market was quite brief because they needed to stay on schedule with the metro public transit system. The bus driver hurried each of the passengers to return to their seats, calling passengers by their first name indicating a level of intimacy and community amongst these individuals. The passengers returned to their seats—filled with bags of squash and tomatoes and peppers—as quickly as possible to ensure that the bus remained on schedule.



*Figure 14. Customers shopping at the Hopetown farmers' market.*

---

Why did this bus driver stop at the Hopetown farmers' market? Indeed, stopping the bus was a risky decision. The bus driver could potentially get fired or suffer other penalties for taking a break during working hours or for interrupting the time schedule of the public transportation system. Despite the risk, the bus driver stopped and shopped at the Hopetown farmers' market nearly every week of the summer. In this chapter, my aim is to explore why the bus driver decided (needed) to stop at the Hopetown farmers' market. This question is examined through an analysis of food audit and interview data.

## Food Maps

Since the material object of food—something that can be seen and touched—was of central import to this dissertation, I began the research process with the goal of developing an objective measure of the types of foods sold in the communities surrounding the Boys and Girls Clubs. I was interested in understanding the number and types of food stores located within a one mile radius<sup>50</sup> of the three Boys and Girls Clubs as well as the range of foods available for sale in the stores. I was particularly interested in examining the presence of healthy foods in the stores since the farmers' markets would be aimed at increasing access to one category of healthy foods—fresh fruits and vegetables. Thus, the food store audits focused on the presence of select fresh fruits and vegetables in the communities. The sale of various types of milk (e.g., skim, whole) was also examined to provide another marker regarding the availability of healthy foods in the communities. Finally, I explored the presence of tobacco and alcohol products for sale in the stores to gauge levels of accessibility to “unhealthy” items.

### *Availability of Food Stores near Boys and Girls Clubs*

We attempted to conduct audits<sup>51</sup> at all food stores including supermarkets, local markets, and convenience stores located within a one mile radius of the three Boys and Girls Clubs (see Figure 15). After driving up and down the streets in the vicinity of the Boys and Girls Clubs, a total of 33 food stores were identified. Almost two-thirds of the

---

<sup>50</sup> One mile radius was used as the parameter for the food store audits because it seemed plausible that a person could walk to a food store within this distance without relying on other forms of transportation.

<sup>51</sup> Data collection was organized and managed by Darcy Freedman. Undergraduate students in Dr. Sharon Shield's course at Vanderbilt University assisted with data collection.

food stores were convenience stores (n=21). Only two supermarkets were located in the three communities, both of which were Kroger food stores. Ten local markets were found within a one mile radius of the three Boys and Girls Clubs.

The distribution of food stores varied across sites (see Table 6). Two of the Boys and Girls Clubs had a supermarket available within a one mile radius indicating physical access to a wide variety of food items. Hopetown site, however, did not have a supermarket within close proximity. This was unexpected since the population density of the census tract<sup>52</sup> in which the Hopetown site is located is substantially greater than the population density of the census tracts that include the Lincoln Court and Ridgetop sites. The supermarket to resident ratio was 1:2,383 for Lincoln Court and 1:1,974 for Ridgetop. Based these trends, I would expect that the area near the Hopetown Club would have between two and three supermarkets, however, the supermarket to population ratio near Hopetown was 0:6,850.

---

<sup>52</sup> Census tract data are from the 2000 decennial census, U.S. Census Bureau, Census 2000 Summary File 3.

Type of Food Store (n)	Definition	Example
Supermarket (2)	Chain food store that sells a wide variety of items including food, medicine, toiletries, alcohol, etc.	
Local Market (10)	Non-chain food store that sells a wide variety of items including food, medicine, toiletries, alcohol, etc.	
Convenience Store (21)	Chain or non-chain store that sells limited variety of items including food, pharmaceuticals, toiletries, alcohol, etc.	

*Figure 15. Definitions, number, and examples of the food stores located within one mile of the Boys and Girls Clubs, May 2007.*

*Table 6. Distribution of food stores across the Boys and Girls Club sites, May 2007.*

	Hopetown	Lincoln Court	Ridgetop	Total
Population	6,850	2,383	7,974	17,207
Supermarket, n (%)	0 (0.0)	1 (8.3)	1 (10.0)	2 (6.1)
Local Market, n (%)	1 (9.1)	4 (33.3)	5 (50.0)	10 (30.3)
Convenience Store, n (%)	10 (90.9)	7 (58.3)	4 (40.0)	21 (63.6)
Total	11	12	10	33

Supermarkets are not the only source for purchasing a wide variety of food items. Local markets represent food stores that also sell a wide variety of foods; one difference between these stores is that supermarkets represent national chains. Interviewees reported other differences (e.g., quality, variety, cleanliness) between local markets and supermarkets; these topics are reviewed later in this chapter. The distribution of the local markets further highlights disparities in food store access between the Hopetown site and the two other sites. Ridgetop had five local markets within a one mile radius and Lincoln Court had four whereas Hopetown only had one.

Limited access to supermarkets or local markets in the area near Hopetown was alarming since almost 10% of the people living in the census tract in which Hopetown is located rely on public transportation as their primary means of transportation (see Table 7). Thus, walkable access to a food store is potentially more important for residents living near Hopetown since these individuals would otherwise need to secure transportation (e.g., bus, ride with a friend, taxi) to reach a food store.



### *Availability of Healthy and Unhealthy Products*

In addition to examining the types of food stores located in the areas surrounding the three Boys and Girls Clubs, the auditors also documented the availability of healthy and unhealthy products for purchase in the stores. There were 33 food stores surrounding the Boys and Girls Clubs, however, three store owners refused to have their stores audited. Thus, the next analyses are limited to a total of 30 food stores located within a one mile radius of the three Boys and Girls Clubs.

#### *“Healthy” Food Products*

First, we examined the types of fresh fruits and vegetables available for sale at the food stores (see Table 7). Fresh fruits were only available on a limited basis in all three of the communities with 30% of the food stores selling at least on fresh fruit. The most common fresh fruits for sale in the food stores were oranges (23.3% of stores sold oranges), bananas (20.0%), and apples (20.0%); at least one food store in each community sold these items. The least common fruits were grapes (6.0%) and grapefruit (6.0%). Fresh fruits were most abundant, though certainly not overwhelmingly available, in the area surrounding Lincoln Court with multiple stores selling fresh bananas, apples, oranges, and peaches. One food store near Ridgetop (Kroger) sold a wide variety of fresh fruits. Access to fresh fruits was limited in the Hopetown area; the only fresh fruits sold in the community were bananas, apples, and oranges.

*Table 7. Number and percentage of food stores near Boys and Girls Clubs selling select fruits and vegetables, May 2007.*

	Hopetown (n=8)	Lincoln Court (n=12)	Ridgetop (n=10)	Total (N=30)
<b>Fruit, n (%)</b>				
Banana	1 (12.5)	3 (25.0)	2 (20.0)	6 (20.0)
Apple	1 (12.5)	4 (33.3)	1 (10.0)	6 (20.0)
Orange	2 (25.0)	3 (25.0)	2 (20.0)	7 (23.3)
Grapefruit	0 (0.0)	1 (8.3)	1 (10.0)	2 (6.7)
Grapes	0 (0.0)	1 (8.3)	1 (10.0)	2 (6.7)
Peach	0 (0.0)	3 (25.0)	1 (10.0)	4 (13.3)
<b>Vegetables, n (%)</b>				
Lettuce	0 (0.0)	3 (25.0)	1 (10.0)	4 (13.3)
Potato	0 (0.0)	2 (16.7)	1 (10.0)	3 (10.0)
Carrot	0 (0.0)	1 (8.3)	1 (10.0)	2 (6.7)
Tomato	1 (12.5)	2 (16.7)	1 (10.0)	4 (13.3)
Broccoli	0 (0.0)	2 (16.7)	1 (10.0)	3 (10.0)
Spinach	0 (0.0)	1 (8.3)	1 (10.0)	2 (6.7)
Greens	0 (0.0)	1 (8.3)	1 (10.0)	2 (6.7)

Fresh vegetables were found less often than fresh fruits with only 17% of the food stores selling at least one fresh vegetable. The most prevalent vegetables sold in the communities were lettuce and tomatoes (see Table 7). Once again, food stores near Lincoln Court sold the greatest amount of fresh vegetables while the Hopetown site had

the least access to fresh vegetables for sale in the community. Tomatoes were the only fresh vegetable<sup>53</sup> available within a one mile radius of Hopetown.

Second, we examined the availability of milk products in the food stores. Across the three sites, over two-thirds of the food stores sold milk. Whole milk was most commonly found in the food stores whereas low-fat milk options (skim or 1% milk fat) were found substantially less often (see Figure 16). Skim and 1% milk were not available for purchase in the area near Hopetown.

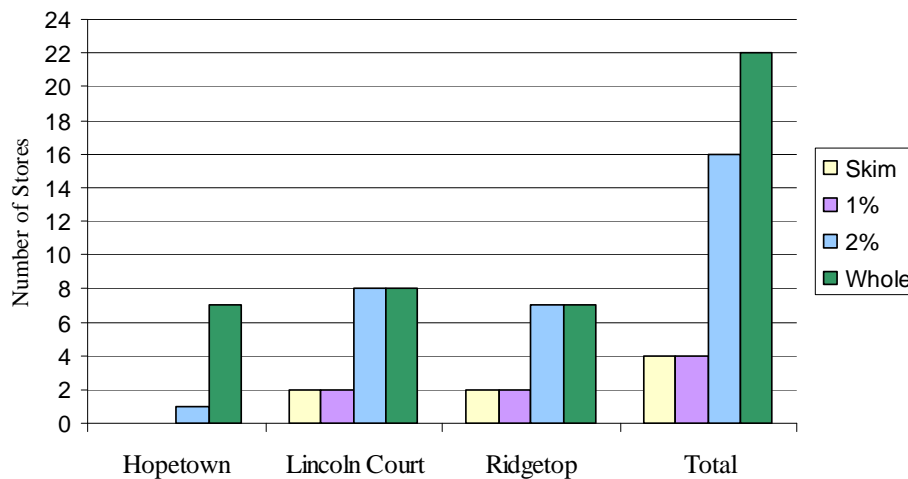


Figure 16. Number of food stores near Boys and Girls Clubs that sell milk products, May 2007.

### “Unhealthy” Products

Finally, we examined the availability of tobacco and alcohol products in the food stores. These products were by far the most common items for sale in the community. Tobacco products (e.g., cigarettes, chewing tobacco, cigars) were available in 90.0% of

<sup>53</sup> Even though tomatoes are technically fruits, they are commonly referred to as vegetables. Thus, in this research, tomatoes were categorized as “vegetables.”

the food stores while alcohol products (e.g., beer, wine, liquor) were available in 80.0% of the stores (see Table 8). In the areas surrounding the Boys and Girls Clubs, tobacco and alcohol products were more prevalent than all varieties of milk, fresh fruits, or fresh vegetables.

Tobacco and alcohol products were most prevalent in the area near the Hopetown Club with 100% of the stores selling tobacco products and 87.5% selling alcohol products. This is in contrast to the dearth of food stores near Hopetown selling healthy food items such as fresh fruits, vegetables, and low-fat milk options.

*Table 8. Number and percentage of food stores near Boys and Girls Clubs that sell tobacco and alcohol products, May 2007.*

	Hopetown (n=8)	Lincoln Court (n=12)	Ridgetop (n=10)	Total (N=30)
Tobacco, n (%)	8 (100.0)	10 (83.3)	9 (90.0)	27 (90.0)
Alcohol, n (%)	7 (87.5)	9 (75.0)	8 (80.0)	24 (80.0)

### *Segregated Stores*

The availability of healthy foods in the areas surrounding the three Boys and Girls Clubs was related to several social factors. Gradients in food access were identified with respect to the racial composition and median household income of the people residing in the census tracts in which the Boys and Girls Clubs are located. Before highlighting these patterns, it is important to note that the census tracts in which the three Boys and Girls Clubs are located have higher rates of racial minorities and people living below the

federal poverty level compared to Davidson County as a whole, the county in which the three Boys and Girls Clubs are located (see Table 9). Thus, the areas surrounding the Boys and Girls Clubs appear to be social contexts that are unique from the county overall.

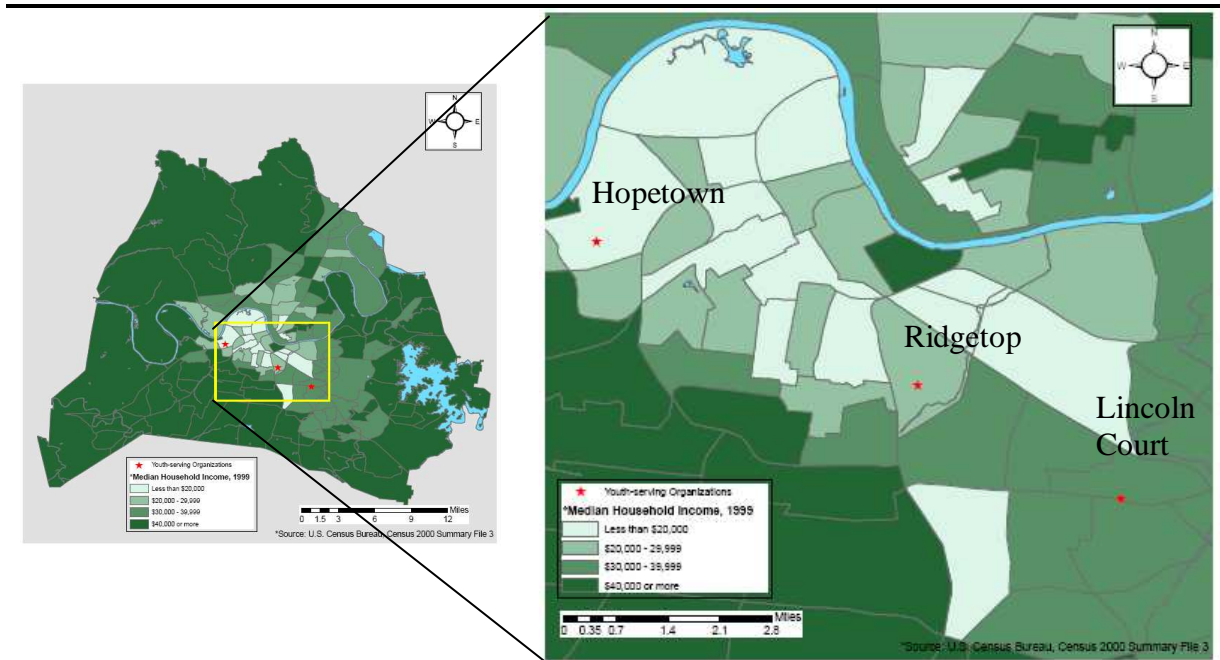
Across the three sites, however, there are also heterogeneities (U.S. Census Bureau, 2000). These differences are related to the socio-demographic characteristics of the census tracts in which the Boys and Girls Club are located. A gradient in median annual household income is evident across the three sites; the census tract in which Lincoln Court is located has the highest median income (\$30,517) (see Figure 17). The median household income in the area near Lincoln Court is about one-third greater than the median household income for the area near Ridgetop (\$21,936) and more than twice as high as the median household income for residents living near Hopetown (\$14,714).

The racial composition of the three sites also varies (see Figure 18). The majority of the population residing in the census tract in which Lincoln Court is located identified their race as white (70.6%) whereas the majority of the residents near Hopetown identified their race as black or African American (95.3%). The area near Ridgetop is the most racially diverse of the three sites with 48.4% of the residents identifying their race as white and 42.7% identifying as black or African American.

*Table 9. Demographic characteristics of census tracts in which the three Boys and Girls Clubs are located compared to Davidson County, TN.*

	Hopetown	Lincoln Court	Ridgetop	Davidson County
Population of Census Tract, n	6,850	2,383	1,974	545,524
Racial/Ethnic Composition, %				
Black/African American	95.3	10.2	42.7	26.8
White	2.9	70.6	48.4	65.9
Hispanic/Latino	1.1	12.9	7.6	4.7
Educational Level, persons $\geq$ 25 years, %				
High school graduate or higher	61.8	70.2	56.7	81.1
College graduate or higher	16.1	11.0	9.3	29.7
Employment status, persons $\geq$ 16 years, %				
Unemployed	8.0	5.2	8.8	3.6
Reliance on public transport, %	9.3	0.0	4.6	1.8
Single, female-headed families, %	24.9	7.3	13.1	8.4
Median income in 1999, \$				
Household	14,714	30,517	21,936	39,232
Male full-time, year round	23,871	26,867	27,244	33,114
Female full-time, year round	18,938	21,128	24,236	27,659
Living below poverty level in 1999, %				
All families	37.9	12.4	14.9	10.2
Single, female-headed families	52.1	45.8	20.9	27.4

Source: U.S. Census Bureau, Census 2000 Summary File 3

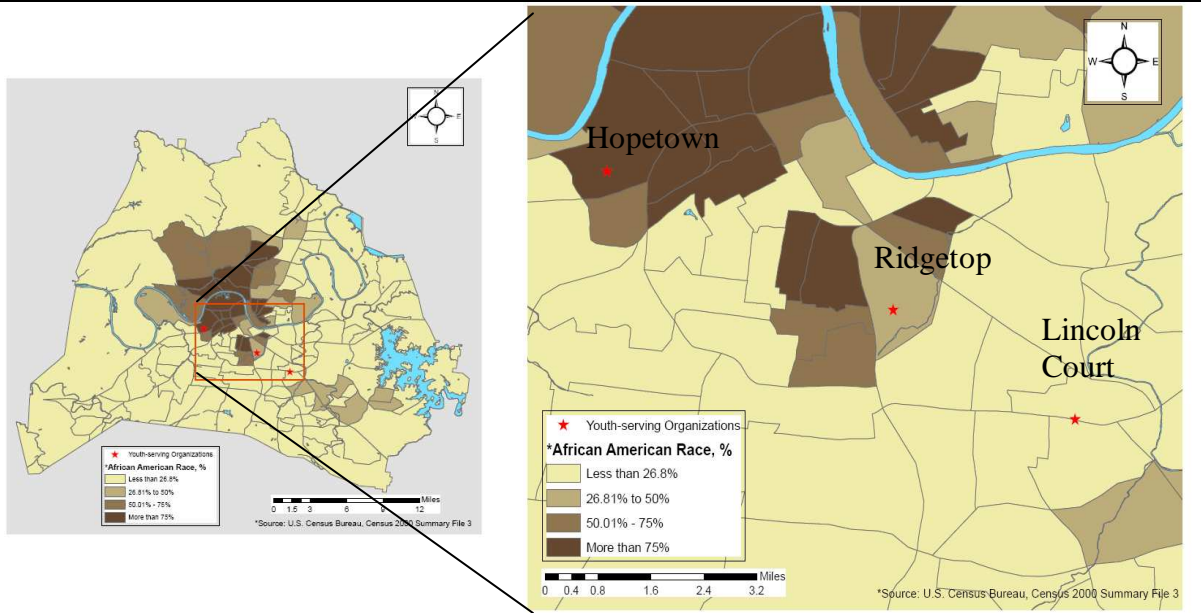


*Davidson County*

*Focus on census tracts in which the Boys and Girls Clubs are located.*

**Figure 17. Median household income by county and by site, measured in U.S. dollars in 1999, Davidson County, TN.**

Caption Figure 17. Median income categories (measured in 1999), represented from lightest to darkest shades of green, include less than \$20,000/year, \$20,000-\$29,999/year, \$30,000-\$39,999, and \$40,000 or more/year.



*Davidson County*

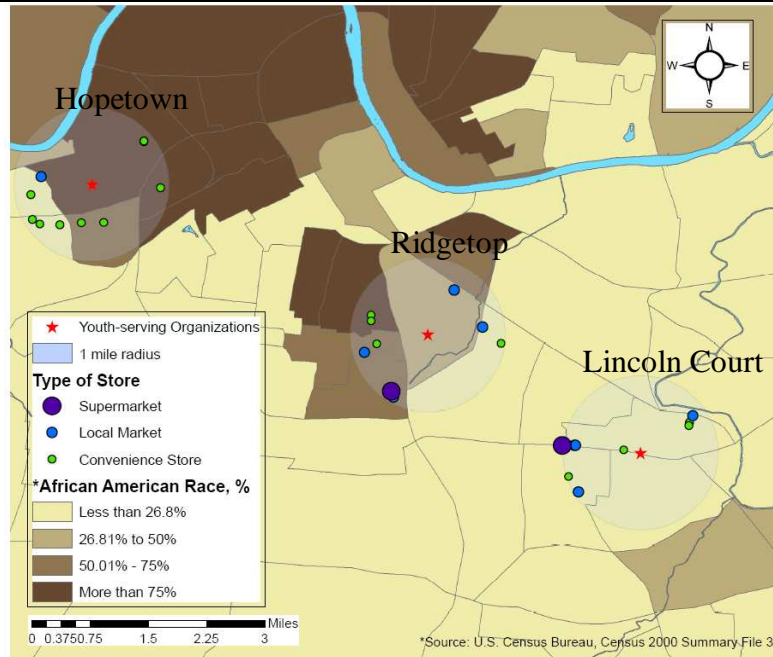
*Focus on census tracts in which the Boys and Girls Clubs are located.*

**Figure 18. Racial composition (percent African American) of population living in census tracts by county and by sites, Davidson County, TN.**

Caption Figure 18. Percentage categories, represented from lightest to darkest shades of brown, include less than 26.8%, 26.81-50.0%, 50.01-75.0%, and more than 75% African American.

Although the ensuing analysis and maps do not focus on variations in household structure, it is worth noting that a gradient in the number of households headed by single females exists across the three sites. The area near Hopetown has the highest percentage of households headed by single females (24.9%) while the area near Lincoln Court has the lowest percentage (7.3%). The number of single, female-headed households is directly related to the percentage of the population in the census tracts identifying their race as black or African American and is indirectly related to median household income.

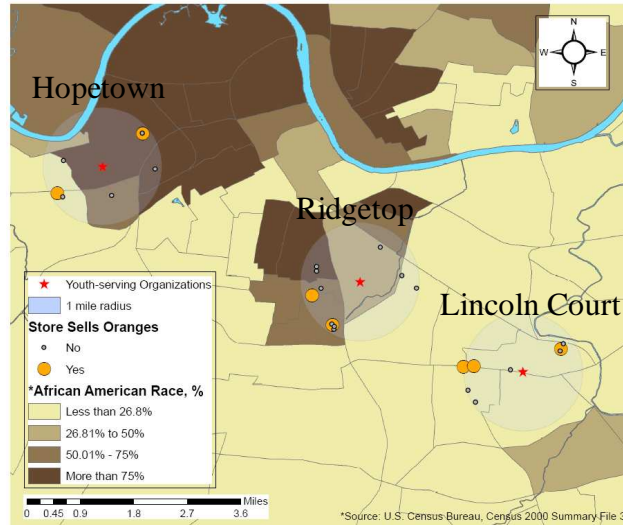




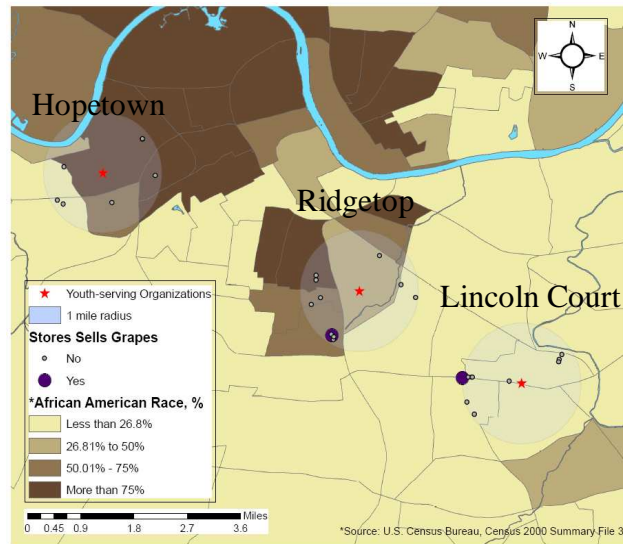
*Figure 19. Access to supermarkets, local markets, and convenience stores by site and racial composition (percent African American) of census tracts, May 2007.*

Figures 19-21 depict access to food stores and select healthy food items against the backdrop of the racial composition of the communities near the Boys and Girls Clubs. Access to two fruits and two vegetables is illustrated in the maps; these foods were selected because they represent a range in access from high to low (high: apples, low: grapes; high: tomatoes, low: carrots). Figure 19 displays the location of the three different types of food stores examined against the backdrop of the racial composition of the census tracts (supermarkets = large purple dots, local markets = medium sized blue dots, convenience stores = small green dots). Figures 20 and 21 facilitate our ability to visualize the indirect relationship between access to healthy foods and the proportion of the population in the census tracts identifying their race as black or African American.

*Food Stores  
Selling Fresh  
Oranges*



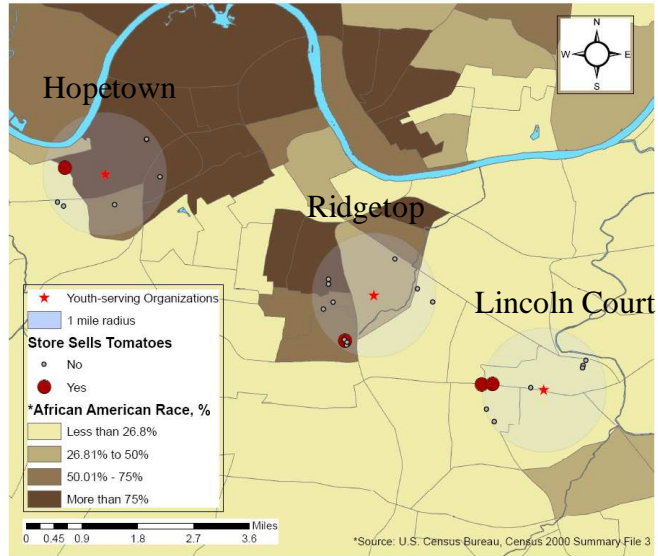
*Food Stores  
Selling Fresh  
Grapes*



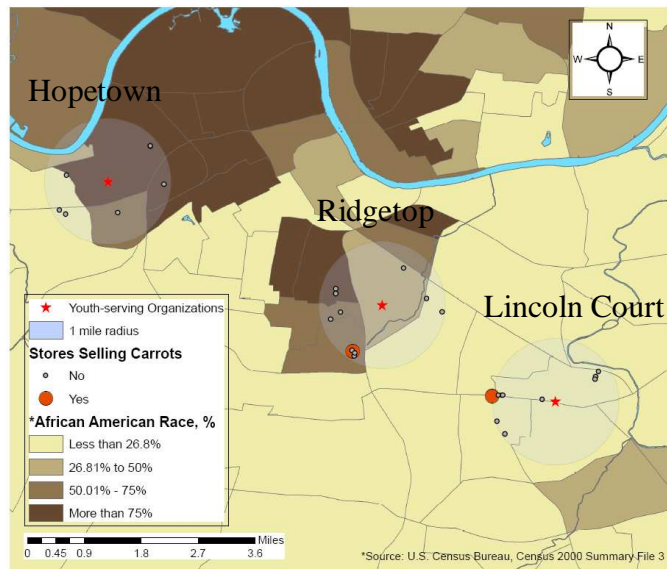
**Figure 20. Access to fresh oranges and grapes by site and racial composition (percent African American) of census tracts, May 2007.**

Therefore, areas with higher rates of black or African American residents had the least access to healthy foods. However, a direct relationship between access to tobacco products and African American race was found (see Figure 25).

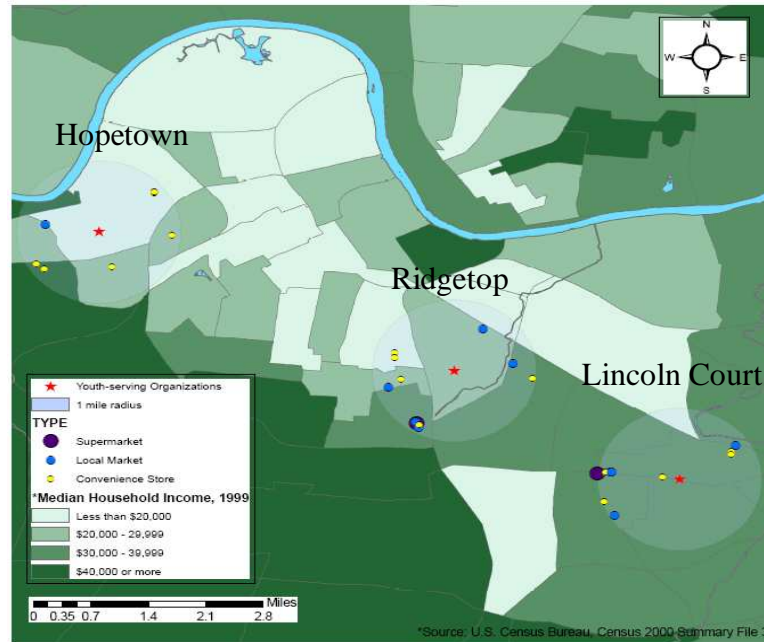
*Food Stores  
Selling Fresh  
Tomatoes*



*Food Stores  
Selling Fresh  
Carrots*



*Figure 21. Access to fresh tomatoes and carrots by site and racial composition (percent African American) of census tracts, May 2007.*

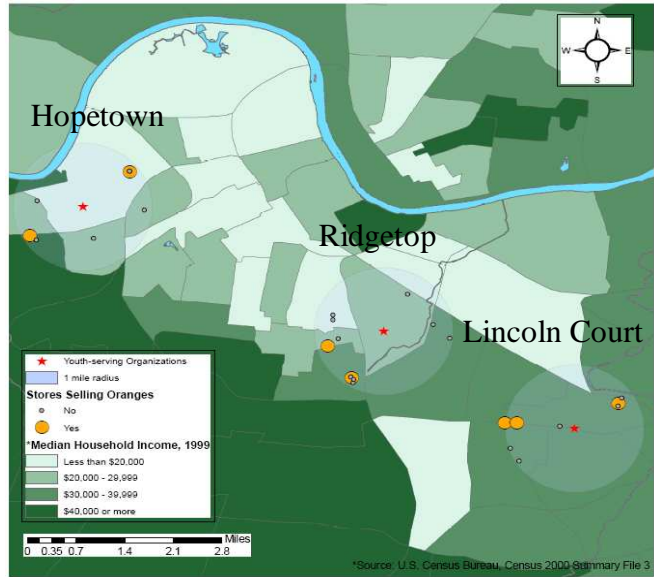


*Figure 22. Access to supermarkets, local markets, and convenience stores by site and median household income of census tracts, May 2007.*

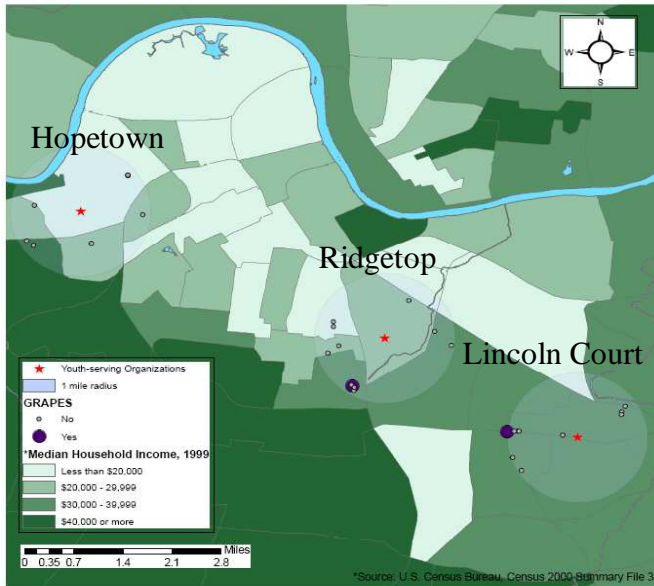
Figures 22-24 depict access to food stores and select healthy food items against the backdrop of the median income of the population residing in the census tracts in which the three Boys and Girls Clubs are located. Each Boys and Girls Club is located in a different median income range as evidenced by the varying shades of green on the maps. Median income was determined from census 2000 data which reflect income levels in 1999 (U.S. Census Bureau, 2000). Figure 22 displays the location of the three different types of food stores examined against the backdrop of the racial composition of the census tracts. There is a direct relationship between median household income levels and access to healthy foods in the communities surrounding the Boys and Girls Clubs (see Figures 23-24). Higher median household income levels are associated with increased access to fresh fruits and vegetables. Even though access to tobacco products was

generally high across the three sites, tobacco products were most accessible in the area with the lowest median income (i.e., Hopetown) (see Figure 25).

*Food Stores  
Selling Fresh  
Oranges*

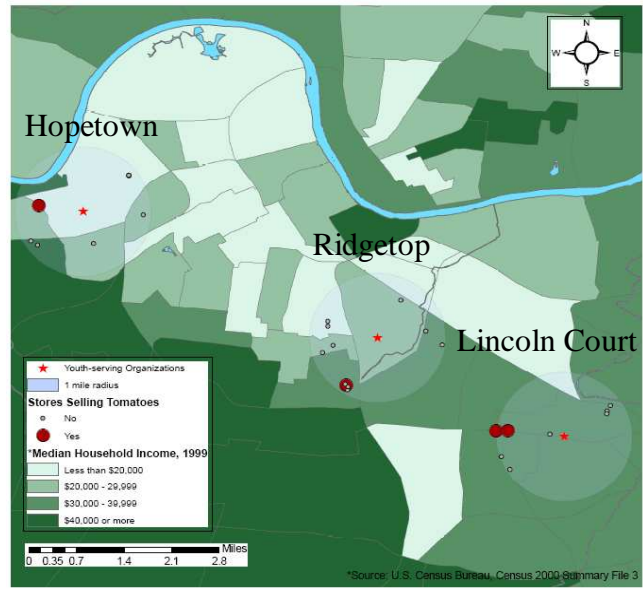


*Food Stores  
Selling Fresh  
Grapes*

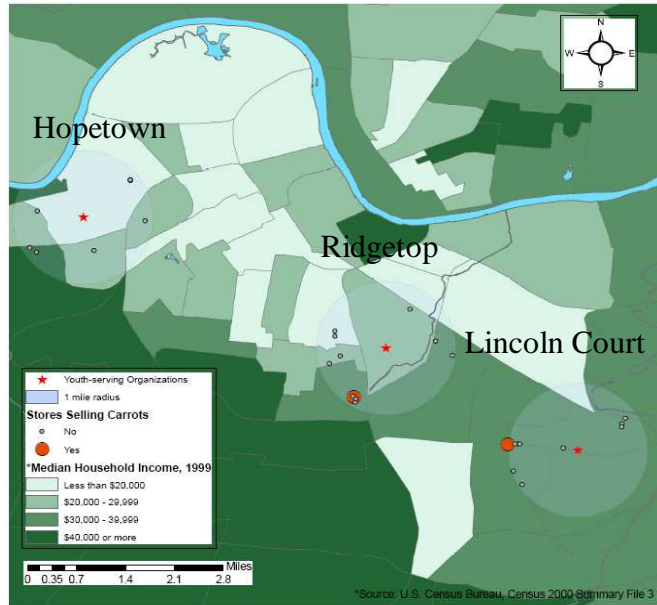


**Figure 23. Access to fresh oranges and grapes by site and median household income of census tracts, May 2007.**

*Food Stores  
Selling Fresh  
Tomatoes*

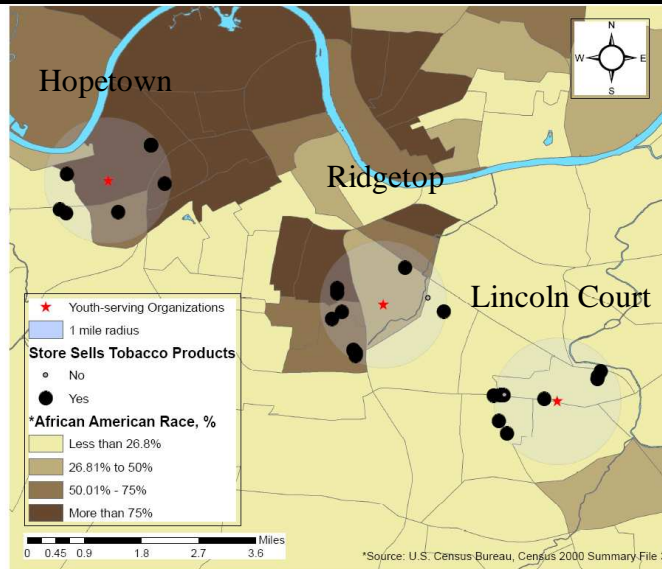


*Food Stores  
Selling Fresh  
Carrots*

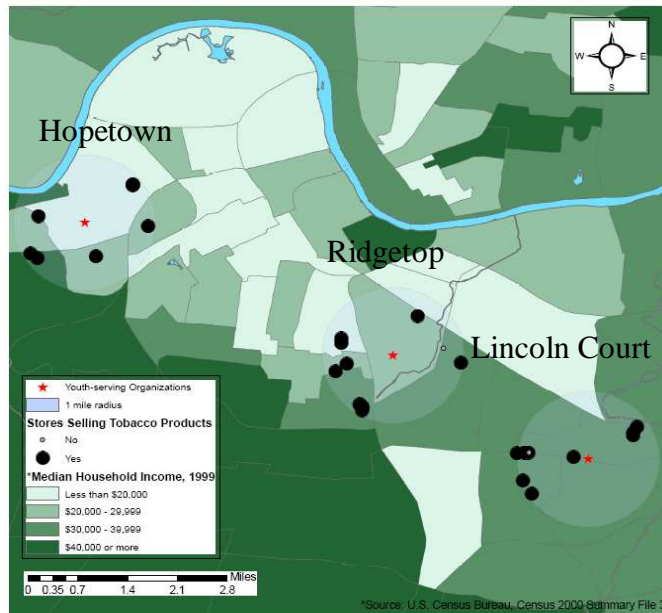


*Figure 24. Access to fresh tomatoes and carrots by site and median household income of census tracts, May 2007.*

*Food Stores  
Selling Tobacco  
Products (by race)*



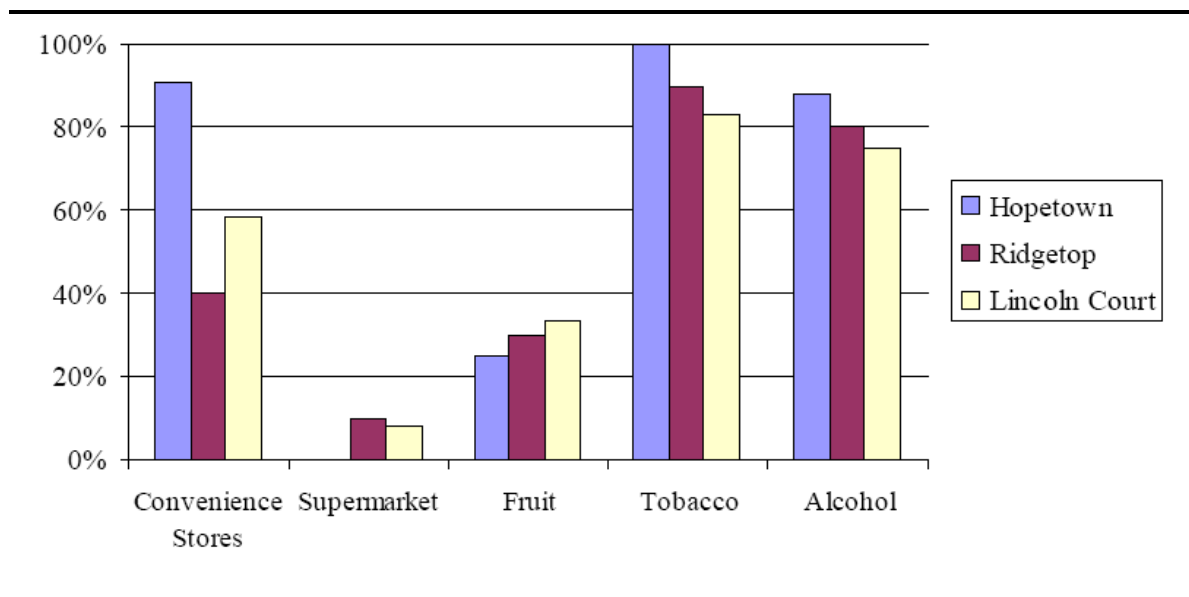
*Food Stores  
Selling Tobacco  
Products (by  
income)*



**Figure 25. Access to tobacco products by site and by racial composition (percent African American) and median household income of census tracts, May 2007.**

Although all three of the communities in which the Boys and Girls Clubs are located had relatively low levels of access to food, the area near the Hopetown Boys and Girls Clubs, the community with the lowest median income, the highest number of

people identifying their race as black or African American, and the highest number of single female-headed families – intersections of space and class and race and gender -- had the least access to healthy foods but the most access to unhealthy products (see Figure 26). The Hopetown community also had the most access to convenience stores but did not have a supermarket within a one mile radius.



*Figure 26. Gradients in food access by site.*

### Good Food is Far Away

The food store audits provided one perspective on the social relations of power manifested in the social contexts surrounding the Boys and Girls Clubs. Through a systematic process of counting and examining the food stores established in close proximity to the three Clubs, several key points emerged regarding the spatial distance between “good food” and the communities in which the Boys and Girls Clubs are



located. In this section, I incorporate qualitative data to further expound on the spatiality of food access.

### *Convenience Stores: Convenient for Whom and for What?*

More convenience stores were found in these communities than all other types of food stores. There was approximately one supermarket or local market for every two convenience stores in the areas near the Boys and Girls Clubs. This ratio is lower than that found in a national study of food store access which identified a 1:1 ratio between supermarkets/local markets<sup>54</sup> and convenience stores in low wealth<sup>55</sup> communities (Morland, Wing, Diez Roux, & Poole, 2002).

When I asked interviewees to describe the types of food stores available in the areas near the Boys and Girls Clubs, two types of responses emerged. First, several participants indicated that there were *no* food stores in their community, thus revealing that the interviewees did not consider the local markets or convenience stores to be “real” food stores. After some prodding, however, many participants did refer to the convenience stores or “corner stores” in the neighborhood. The following excerpt from an interview with an African American woman from Hopetown focuses on her views of the convenience stores in the neighborhood:

I mean, you're not fixing to find any foods or anything in there [convenience store]. It's a horrible thing, you know, for those who don't have it [transportation], because they are forced to go to one of those convenience stores

---

<sup>54</sup> In this study, the term “grocery store” was used instead of local market.

<sup>55</sup> Moreland et al. (2002) determined wealth by calculating the median value of homes in the census tracts included in the study.

[in Hopetown]. ...They [the stores] don't have real food over there. You know, I mean, most of the time, it's [the food] going to be outdated. So none of it [the food] would be good.

This participant indicated that if she had to rely on the local convenience stores to purchase foods for her and her family then her "diet would probably be dead". She went on to say, "You're probably looking at about twenty pounds more of me" if she did not have private transportation to travel to food stores located in other parts of the city.

An African American woman from Ridgetop reported that she would not shop at the local "corner store" even though it was spatially convenient. She indicated that she doesn't support the "extracurricular" activities taking place at the corner store including the sale and exchange of illegal drugs inside and outside of the store. Even though this participant indicated that shopping at a local venue was one way to "uplift the community" she was nevertheless unwilling to patronize the convenience store because of its involvement in the local drug scene. She stated emphatically, "I've never stepped foot in there [corner store]. Never."

The products available in the local stores were also described as being more expensive than the same product at a supermarket outside of the community. One participant stated that the "convenient" part of a "convenience store" simply means that "everything is a dollar more" than the same product in an "inconvenient" location. An African American man from Ridgetop summarized the economics of convenience by stating:

They [the corner store] stuff is kind of high. The bacon is \$2.99 for just a pack of bacon. You know, I could probably go to [name of chain supermarket] and get a

pack of bacon for \$1.99, and that'll save me a dollar, so, but down here [at the corner store], it's just kind of, it's a little bit high [in price].

*“You can't even go buy an onion out of there...”*

Access to “healthy” foods was quite limited in the communities near the Boys and Girls Clubs. Fewer than 20% of the food stores sold at least one fresh vegetable and less than one-third sold at least one fresh fruit. The communities were saturated, however, in “unhealthy” products such as tobacco and alcohol. Tobacco products were available almost seven times more than tomatoes across the three communities. We were four times more likely to find alcohol than apples in the areas near the Boys and Girls Clubs.

Feedback from interview participants corroborated the food mapping data. There was consensus amongst the interviewees that the local food stores sold limited or no healthy products. Several participants, as the following excerpt reveals, indicated that if you had to rely on the food stores in the community then you could not maintain a “fruit diet” or a “vegetable diet”:

Far as fruit, there ain't no fruit there [at the local convenience store]. I don't remember seeing no kind of, you know, like oranges, bananas, apples, tangerines, peaches: I don't see none of that down there. Far as, you know, someone has a fruit diet or something, they can go down there? No. They ain't got no fruits or nothing. They got to go all the way to [name of chain supermarket outside of community] to get fruit.

Instead of selling fruits or other types of healthy foods, the local food stores were described as being stocked with a wide variety of beer and liquor and an endless selection

of cigarettes and other tobacco products. The following excerpt from an interview with an African American woman from Ridgetop is focused on the types of products available in the local convenience store:

The little corner store [in the Ridgetop neighborhood], I've been in there a couple of times and it's smelly in that store. He has nothing to offer for me in the corner store. That's the nearest place and then he doesn't have a lot to offer in that store. Cigarettes and beer I think are his two biggest selling items because you see people coming out of there with beers in a sack and cigarettes. He has no fresh vegetables in there that I know anything about. And, this is it. You can't even go buy an onion out of there. You can't go there to get an onion or a head of lettuce. So really and truly, he [store owner] could improve that market.

The sentiments expressed by this participant resonated with many others. There was overwhelming consensus among the interviewees that the local food stores had a limited selection of healthy food items but a wide variety of unhealthy products.

### *Intersections*

The food audits revealed that access to healthy food products was associated with a variety of intersections. In the spatial sense, the intersections of streets and crossroads influenced food access. Some streets had food stores while others did not. The people residing on various streets, at various intersections, were, in turn, vessels comprised of a range of social intersections, intersections of race and class and gender and age and so

on.<sup>56</sup> Spatial intersections were related to socio-political intersections and both intersected to influence access to food such that the community (Hopetown) with the highest number of blacks or African Americans and the lowest median household income (intersections of social relations of power related to space, race, and class as well as to gender) had the least access to fresh fruits and vegetables but the most access to tobacco and alcohol.

The intersectionality of food access was a salient theme among responses provided by the interview participants. The following excerpt from an interview with an African American man from Lincoln Court reveals the interconnectedness of race, class, space, and food access:

Interviewer: So then, do you think that people's racial or ethnic background influences the types of foods that are available to them in their community?

Respondent: Of course.

Interviewer: And how do you think that?

Respondent: Well, because, god, this is going to sound bad. If I lived in [he names the wealthiest community in Nashville]...

Interviewer: Right....

---

<sup>56</sup> Intersectionality is a concept used by many feminist scholars to explore the ways that multiple oppressions such as racism, sexism, and heterosexism synergistically rather than additively influence marginality and oppression (Crenshaw, 1989; A. J. Schulz & Mullings, 2006).

Respondent: Okay....I'll be eating all the gourmet foods because I can afford it....the caviar, you know, the different types of cheeses....I can afford it so I'm going to eat it. These people out here [living in the Lincoln Court community] can't afford caviar. They just can't...economically...they can't. You usually, if you have a family and you have an income you try to make that income go as far as possible to take care of your family. Fresh vegetables, you know, eating at home, not eating the fancy foods all the time...those are what these people [people living in the Lincoln Court community] see as important. And I guess I said [the name of wealthiest community in Nashville] because it's straight down the street and I apologize if you live there. But that, you know, that's the difference. You know, if you look, even in the black community somebody who's been raised in a black community all their life will, once they get up to that economic standard and move out, that style of food that they ate before...they don't do it because they don't want to be associated with this type of food because it's a stigma of like a certain economic level. I'm up here [higher socioeconomic class] now...I can eat the prime rib every night. I don't have to eat pork chops or I don't have to eat, you know, turnip greens, you know, I can have the nice steamed vegetables or whatever. It's just, that's just the way it is.

For this participant, race and class and space are mutually constitutive and interconnected. In his effort to describe the relationship between race and access to food, he conflates a particular space (the wealthiest neighborhood of Nashville) with a particular race (white) with a particular class (wealthy) with a particular way of eating (gourmet). Knowing very little about me except that I am a white woman, he assumes

that I fit into the “raced” and “classed” space that he is referencing and perhaps even makes assumptions about my eating patterns. He continues to address the intersectionality of race and class by describing the “classed” eating patterns of people from the “black community”. He indicates that as an African American person climbs the socioeconomic ladder, eating practices need to mirror one’s new social location, one’s new status as middle or upper class African American. In this process, pork chops and turnip greens, foods associated with a lower socioeconomic class, are replaced with prime rib and steamed vegetables, foods associated with a higher socioeconomic class. This participant reveals that through the most mundane of social practices such as eating patterns, one engages in the performance and re-performance of one’s location in the social hierarchy.

The topics introduced by this participant corroborate with comments made by others. For instance, many participants subversively conveyed their social class by taking time during their interview to tell me that they refrained from eating pork chops or that they only ate the leanest meats rather than the pork chops that are essentially “little shreds of fat”. Another participant highlighted the racial aspects of food access by saying that many African Americans resist public health messages related to “healthy eating” because these messages are raced as being “white”. The following excerpt from an interview with an African American woman from Hopetown highlights this concern:

I think that a lot of times, as a race we [African Americans] are afraid to make changes because we don’t want to appear trying to be white or we’re trying to eat white. But when there is an understanding of what African people throughout the diaspora ate, the kinds of foods that they ate, then it frees people up to make

different choices and understand that they're really not eating white, they're eating the way they originally ate and so it ties into the history. But I think that's something that in a lot of food campaigns, as well as health campaigns, that's missing. Because for African Americans, so often, white people have come into the community to tell us what to eat and what we're supposed to do and what we're not supposed to do, so there's just a huge resistance and a large amount of mistrust so, you know, people really aren't trying to hear that.

These excerpts combine to shed light on to the relations of power circumscribing foods into the categories of "foods for us" and "foods for them" (Lewin, 1997). This is an important concept for public health researchers and practitioners to take into account as we engage in health promotion efforts focused on the consumption of specific kinds of foods. What does it mean when we as public health researchers and/or practitioners encourage people to eat foods that are "raced" or "classed" or "gendered" or "spaced" to a social category to which one is not located? How does one access this food product? What does it mean for one's identity if a particular food product is consumed? What does it mean to one's health status if the product is not consumed because it is socially inaccessible?

For another participant, an African American woman from Ridgetop, the intersections of space and race and access to food became even more evident as she was answering questions during the interview. The following excerpt highlights the thinking process of this participant as she reflects on the relationship between individual and community measures of race and ethnicity and their relationship to food access:



Interviewer: So do you think that people's race or ethnicity influences, you know, individuals or communities in terms of their access to fresh and healthy foods. So, if you're ah, African American...if you're Latino...if you're whatever...ah, does that influence your access to fresh and healthy foods? Or if you happen to live in a community that's mostly, you know, a certain kind of race or ethnicity?

Respondent: Ah, I've only been here [Nashville, TN] three years and I'm trying to picture in my mind a community...I mean, thinking about Ridgetop...I mean, they have one [corner store]...they don't have anything within walking distance here, again, grocery store wise. There's nothing in walking distance. I'm thinking of the communities around here...[she names several different communities]...you don't...there's nothing, there's no [name of three different chain supermarkets] in walking distance of those communities, and those are predominately African American and minority neighborhoods. You have to go on to the main streets which you do need a vehicle or a bus pass to get to. So, you see what I mean? If you don't have a car or you're on a bus pass, you've got to think about all the different obstacles you have to go through just to get to a store that would even sell fresh fruit and fresh vegetables. So, I guess on a minority community level, minority communities, yes, I think it does have an influence because those communities don't have access [to food]...not easy access.

As this interviewee imagined various communities in Nashville, she began to notice patterns such that "minority communities" tended to be in areas with little or no access to food stores selling healthy food products. People located in these communities would

need to transgress the boundaries of community, crossing spatial and social intersections, to locate fresh fruits and fresh vegetables.

For other participants, the connections between race and class and eating patterns were understood to be about relations of power. In these instances, differences in food access between areas with high and low rates of people of color were understood to be a function of racism rather than socio-cultural differences. An African American woman from Lincoln Court reflected on this by stating:

I'm sure that a predominantly black neighborhood might have food that's not as healthy or you know, as fresh as somebody else's. It wouldn't shock me. You know? I mean, you know, things are better but racism is not dead. That's just life.

As this participant highlights, "racism is not dead". The relations of power that facilitate and constrain opportunity are illuminated by an exploration of food access. The availability of food stores and the contents therein convey messages about one's identity and social location. The types of food stores in a community serve as a tool for evaluating quality, value, and worth. As a white woman from Lincoln Court stated, the same store may be found in three different locations "but it's not stocked the same, they're all stocked differently." What happens when the shelves and aisles of a food store vary across intersections? What messages are conveyed when stores are raced, classed, and spaced into hierarchies of quality and goodness?

## Conclusion

This analysis provides one answer for why the city busy driver stopped and shopped at the Hopetown farmers' market. It also illuminates the stage upon which the farmers' markets were established. Cultural geographers employ the metaphors of "theater," "stage," or "set" to emphasize spatial and social contexts as sites "within and upon which the spectacle of life plays out" (Mitchell, 2000, p. 124). Spaces and places are not neutral territories but rather act as "physical concretizations of power" (Mitchell, 2000, p. 125). Spaces and places as physical concretizations of power circumscribe in advance relationships, expectations, and interpretations. Just as the stage for *Romeo and Juliet* allows for a particular storyline to emerge, so too does the context of Hopetown, Lincoln Court, and Ridgetop. In the case of *Romeo and Juliet* the stage helps us understand the historical and geographic context of the production. Likewise, the food store audits and interview data provide a preliminary canvass upon which the story of this research project emerges.

Through a materialist praxis research approach, the purpose of this research was to disrupt the dominant storyline in the areas near the Boys and Girls Clubs with respect to food. The "disruption" – a performance in the theater of space – includes the establishment of farmers' markets at three Boys and Girls Clubs. As the food auditing process revealed, the areas near the three Boys and Girls Clubs had limited access to fresh fruits and vegetables prior to the formation of the farmers' markets. None of the communities had a farmers' market within a one mile radius of the Boys and Girls Clubs. This was not surprising considering trends among farmers' market development across the U.S. Farmers' markets tend to be located in communities with high concentrations of

middle to upper class whites or Caucasians, not in areas with low median household income levels or high concentrations of people of color (Brown, 2002; Eastwood, Brooker, & Gray, 1999; Govindasamy, Italia, & Adelaja, 2002).

In Chapter 4, I provide an in-depth analysis of the cast and crew, props, and timeline of the farmers' markets. Though each farmers' market operated differently, running the farmers' markets at all three sites followed similar patterns. The ensuing description is based primarily on analyses of the participant observation, field note, semi-structured focus group, and interview data.

## CHAPTER IV

### PRODUCING PRODUCE

*Fruits! Veggies! ...Farm fresh!*  
*Fruits! Veggies! ...Farm fresh!*  
Cheer developed by youth at the Hopetown Club

In this chapter, the day-to-day and step-by-step process for producing produce through the establishment of farmers' markets at three Boys and Girls Clubs in Nashville, Tennessee is reviewed. While the details may at times seem mundane, I am committed to this analytic process because “[A]ll social systems, no matter how grand or far-flung, both express and are expressed in the routines of daily life...” (Giddens, 1984, p. 36). Therefore, my purpose in providing an in-depth and thick description of this process is to explore the social practices and social relationships associated with the production of the farmers' markets. It was through the enactment and performance of this process—through interactions between human agents and social structures—that the material conditions of the communities and the social practices and discourses of people shifted.

The operation of the farmers' markets for nine weeks during the summer of 2007 included four stages: produce procurement, market set-up, selling food, and market clean-up. In this chapter, I describe each stage of the farmers' market process including a description of the key actors involved with each step. These descriptions are focused on the human and nonhuman, material, and symbolic elements of the farmers' markets as

revealed in the participant observation, field note, semi-structured focus group, and interview data.

### Produce Procurement

As the cheer developed by youth from the Hopetown Club highlights, almost all of the fruits and vegetables procured for the farmers' markets were "farm fresh". The fruits and vegetables were purchased from farmers located within a 90 mile radius of Nashville. The farmers' markets could have operated by bringing fruits and vegetables from a grocery store to the sites; however, in this project we focused on finding ways to get locally grown fruits and vegetables into the community. A focus on local foods emerged for several reasons, including an interest in developing a project that was sustainable—socially and environmentally—as well as an interest in critiquing the industrialized and globalized system through which food is produced and made available to Americans.<sup>57</sup> Sourcing with local foods decreased the geographic distance between food production and food consumption, a distance that is, on average, approximately 1,500 miles (Frumkin, Hess, & Vindigni, 2007; Pirog & Benjamin, 2005). By focusing on foods grown within 90 miles of the Boys and Girls Clubs, we would significantly reduce this travel time as well as the carbon "foodprint" created in the process. In

---

<sup>57</sup> Over the past half century, the U.S. food system has moved away from a small-scale family farm model to a globalized and industrialized "agri-business" model (Pollan, 2006). Infrastructures associated with a localized food system, including local food distribution networks, are nearly nonexistent. Instead, food is sourced globally and travels long distances on planes, trains, and automobiles to reach consumers. The "community food security movement" represents one of many challengers to the contemporary food system. This movement "includes organic and family farm groups, food banks, community gardeners, nutritionists, environmentalists, and community development organizations. Squarely within the anti-globalization community, these groups are developing concrete alternatives that promote locally grown foods instead of globally sourced ones and encourage community self-reliance rather than dependence" (Fisher, 2002, p. 5).

addition, sourcing with locally grown foods would result in the sale of the freshest and highest quality produce at the farmers' markets, with some of the fruits and vegetables arriving at the markets within hours of being picked. In return, we expected that customers would be satisfied with the quality of the fruits and vegetables and would thus frequent the markets more often.

Sourcing with local foods, however, represented a conflict in value systems between several actors in this project. Conflict is a common theme in any endeavor involving human interaction; however, the topic of food may exacerbate conflict because food is a vehicle through which value and meaning are conveyed. It is personal and political (e.g., Counihan, 1999; Kilbourne, 1994; Roof, 2001; Sokolov, 1991). Sustain Nashville had a strong commitment to sourcing the farmers' markets entirely with foods grown by local farmers, a value that aligned with their overall mission to build local food system infrastructure. Shoppers, however, had a strong interest in procuring their favorite fruits and vegetables from the farmers' markets, many of which were not grown in the middle Tennessee region. Popular items such as apples and bananas were not for sale at the farmers' markets resulting in many disgruntled shoppers. For instance, several shoppers came to the farmers' markets excited to purchase what appeared to be apples and bananas and were quite disappointed as they neared the market and realized that these "apples" and "bananas" were in fact tomatoes and squash. One shopper even commented under her breath that "this market was *not* worth coming to" after she realized that we were not selling apples, bananas, and oranges.

This conflict served as an important pedagogical tool throughout the duration of the summer. By sourcing with local product, the distance between food production and

consumption diminished, and as a result we were able to put a face and history onto the products sold at the markets. This, in turn, shifted the educational aspects of the project because we were continually reminded of the process through which food is produced. When teaching the youth at the Boys and Girls Clubs about the difference between a local and global food system—an abstract concept for many children *and* adults—the research assistants developed a telephone game wherein a message about food was passed from one end of a line of students to the other. As expected, the original message was jumbled as it passed from one person to the next, making it only tangentially related to the original message. We then used this experience as a tool for discussing what happens when the means of food production are elongated and invisible, which facilitated conversations about decreasing the distance between producers and consumers in an effort to transfer “clearer” and “cleaner” food. The students articulated that the most secure pathway of transfer would be from one person directly to the next. This would allow consumers and producers to interact with one another, a relational rather than disconnected or commoditized method of exchange.

Nevertheless, the topic of locality and seasonality remained salient throughout the duration of the project and came to a head about midway through, on a date when the peaches for the market had stickers on them indicating that they were from California, a state that is certainly not “local” to Tennessee. These stickers were more than markers of locality. The bright yellow “Grown in California” stickers were symbolic of growing tensions related to conflicting values regarding locality and seasonality and to broader tensions regarding processes of social change. This tension incited a series of conversations and reflections during which we discussed how and by whom food



distribution networks are controlled as well as the ways that these networks (intentionally or unintentionally) serve to transfer and transmit values from one person to the next. What does it mean when someone from the outside makes a decision that a certain kind of food or way of eating is better for you, for the environment, and so on? How do statements such as “local foods are better” or “steamed food is better” inadvertently produce and reproduce differences? How do these seemingly innocuous messages become points of resistance?

While sourcing with local foods does indeed have many positive environmental and social benefits, unfortunately, in this research the decision to source with local foods was not made in conversation with the community. Instead, the decision was made primarily by the research team and Sustain Nashville. This decision was based on my experiences with the pilot farmers’ market project (conducted in the Hopetown community the year before) wherein local foods were procured to stock the farmers’ markets and feedback from that project revealed that customers were strongly interested in purchasing Tennessee grown fruits and vegetables. Accordingly, I assumed that the three communities involved in this research would have equally strong interests in locally grown foods. Rather than reflecting on my assumptions about the food preferences among people frequenting the Boys and Girls Club farmers’ markets, I simply translated this prior finding to the new community setting. Moreover, I did not challenge the commensurability of the value system of Sustain Nashville for this research endeavor, in part because the staff from Sustain Nashville became involved with this project a few days before the first market. This occurred because the organization originally contracted to source the fruits and vegetables withdrew one week before the start of the project. In

the haste of the final days of farmers' market preparation – for better or for worse – I was more interested in ensuring that each Boys and Girls Club would have food at their first farmers' market than in discussing the value orientations of all parties involved in the research effort. In retrospect, this project would have benefited by engaging potential customers in conversations and discussions about their food preferences and interests in the farmers' markets *prior to* the first farmers' market. It would have also benefited by fostering dialogue with Sustain Nashville about their value system and its commensurability with this process of change.

Despite these missed opportunities, the topic of “local foods” was ever-present in the research process because customers as well as the youth operating the farmers' markets regularly asked, “Why don't you have oranges or grapes or apples?” – foods that are not locally grown. These questions inspired a series of dialogues about systems of food production, which resulted in many shoppers indicating that they were quite interested in locally grown foods because these products were considered to be “fresher”, “tastier”, and “better” than foods procured through the American food system. I expound on this topic in the next chapter.

In the end, 11 local farmers participated in this project and became involved through several recruitment strategies. In the beginning of the summer, Sustain Nashville sent emails to farmers for whom email was an effective tool for communication. This introductory email served to review the concept of the Boys and Girls Club farmers' markets and to invite farmers to become involved with the project. An announcement about the project was also posted on a food security listserv in the Middle Tennessee region, which resulted in a small number of farmers gaining entrée to the project. For

instance, after seeing the announcement on the food security listserv, a local farmer who happened to have a surplus of tomatoes became aware of the project and eventually found a way to connect his food with the Boys and Girls Club farmers' markets. The project was also advertised through informal social networks since the local farming community is relatively small but very well connected.

Although many efforts were made to increase the number of farmers engaged in this project, two farmers—one organic and one conventional—served as the primary sources for the Boys and Girls Club farmers' markets. Both of these farmers grow a wide variety of fruits and vegetables in a large enough quantity to continually stock the farmers' markets. These farmers were also willing to sell their food at wholesale prices, an important factor for maintaining financial sustainability for the project. Overall, the local farmers reported that they were very interested in being involved with the project even though their involvement did not translate into significant financial gains. When I asked one local organic farmer why she participated in this project she stated:

I want to share my bounty. Being part of the process that gets fresh organic veggies to underserved communities is one of the reasons I grow. It's not all about the money. I am still trying to be sustainable with my income...like make enough to live on... Really, it's my core belief. Everyone deserves good wholesome fresh food. I was glad to be in a position to help out last year. I truly believe the more one gives, the more one receives...in all ways.

This comment reveals a broader commitment to social justice, a sentiment shared by many of the farmers involved with the farmers' markets at the Boys and Girls Clubs.

## Market Set-up

The farmers' markets were established on the lawn or sidewalk near the entrance of the three Boys and Girls Clubs. Prior to our arrival on the date of each market, these spaces were simply grassy areas or concrete blocks. These plots of land had little identity beyond that of green space or sidewalk and were certainly not conceived of as sites for purchasing fresh fruits and vegetables. Moreover, the Boys and Girls Clubs did not operate as farmers' markets at any other time point except during the short period of time allotted for them throughout the summer. Thus, the establishment of the farmers' markets represented a significant transformation to these spatial locations.

### *Entrée into the Boys and Girls Clubs*

Farmers' market set-up began once a research staff member arrived at one of the Boys and Girls Clubs. Donned in light blue t-shirts with the sponsoring agency's logo on the front, our presence signified the impending transformation of the Boys and Girls Clubs from youth center to produce stand. Our first moments at the Boys and Girls Clubs served as a weathervane for the energy and morale of the site. There were days when we arrived to a mass of children engaged in a cross training exercise workout. On these days, under the leadership of the site director, the youth (mostly men) were outside in the ninety-plus degree heat engaged in a running exercise with few moments of intermission between each fitness cycle. I was never sure if this was sport or punishment. On other days we walked into a gymnasium filled with youth dancing, singing, jumping rope, or playing basketball all to the sound of music blasting over the speaker system. In contrast, there were days when we entered to the greeting of stillness; children and youth glued to

a large television screen captivated by the action and drama of a movie. On these days the sites were abnormally quiet and the typical frenetic energy expounding from them was at a momentary stand still.

The hospitality displayed by the staff and youth at the sites toward me and the three other research team members evolved over the summer. As research team members, we were indeed outsiders entering into the confines and cultures of the Boys and Girls Clubs. Our outsider status, however, varied for the different research staff members. I was the only non-black member of the research team, a noticeable marker of difference at the Boys and Girls Clubs, which were predominantly composed of African American and Latino staff and youth. Table 10 highlights the demographic characteristics of the children and youth attending the Boys and Girls Clubs during the summer of 2007.<sup>58</sup> The three research assistants identified their race as black/African American and thus entered the sites differently than me. Despite these differences and similarities, each of us needed to independently establish trust and rapport with the staff, students, and parents at the Boys and Girls Clubs. This occurred through a range of social interactions including casual conversations and greetings, the manner in which we conducted the nutrition education sessions, and interactions at the farmers' markets.

---

<sup>58</sup> Demographic information provided by the Vice President of Operations for the Boys and Girls Clubs of Middle Tennessee in August 2007.

*Table 10. Demographic characteristics of children and youth enrolled in the three Boys and Girls Clubs, summer 2007.*

	Hopetown	Lincoln Court	Ridgetop	Total
Number of Children	312	711	229	1252
Racial Composition of Children, n (%)				
Black/African American	297 (95.2)	383 (53.9)	211 (92.1)	891 (71.2)
White/Caucasian	3 (1.0)	59 (8.3)	7 (3.1)	69 (5.5)
Hispanic/Latino	6 (1.9)	164 (23.1)	6 (2.6)	176 (14.1)
Other race	6 (1.9)	105 (14.8)	5 (2.2)	116 (9.3)
Age of children, n (%)				
6-7 years	72 (23.1)	197 (27.7)	41 (17.9)	310 (24.8)
8-9 years	66 (21.2)	205 (28.8)	54 (23.6)	325 (26.0)
10-12 years	99 (2.9)	200 (28.1)	65 (28.4)	364 (29.1)
13+ years	75 (24.0)	109 (15.3)	69 (30.1)	253 (20.2)
Gender, n (%)				
Female	127 (40.7)	294 (41.4)	107 (46.7)	528 (42.3)
Male	185 (59.3)	417 (58.6)	122 (53.3)	724 (57.8)

In the beginning of the summer, we were unfamiliar to the sites; however, because the Boys and Girls Clubs had a steady flow of outsiders (e.g., volunteers) we were not “foreign” to the culture of the Boys and Girls Clubs. The Ridgetop site, for instance, had volunteers present each week of the summer, many of whom were with church-related service groups. In addition, other groups such as college, medical, and nursing students were frequently present at the sites.

In the early stages of the project, interactions between research staff and staff from the Boys and Girls Clubs were more formal and often included a review of our names and a reminder regarding why we were at the sites. As time progressed, relationships developed with both the staff and the students. Less explanation about the project and process was needed, as evidenced by this excerpt from my field notes (June 18, 2007):

After unloading my car I walked up the stairs and said hello to the director of the Club, a middle-aged African American man. He stuck out his hand to shake mine and pulled me in for a friendly hug, his greeting for welcoming friends and acquaintances to the Club. I asked him how the nutrition class went earlier this afternoon and he seemed pretty positive. He then said, in reference to the farmers’ market set-up, “You need three tables, right?” and I said “yes.” “How many chairs do you need?” I responded by saying “three.” When I went inside the main entrance area of the Club, a few of the students recognized me and then asked if they should bring down the tables for the farmers’ market.

As this excerpt highlights, my presence and that of the other research assistants served as a marker of the impending change to the Boys and Girls Clubs from youth organization to produce stand.

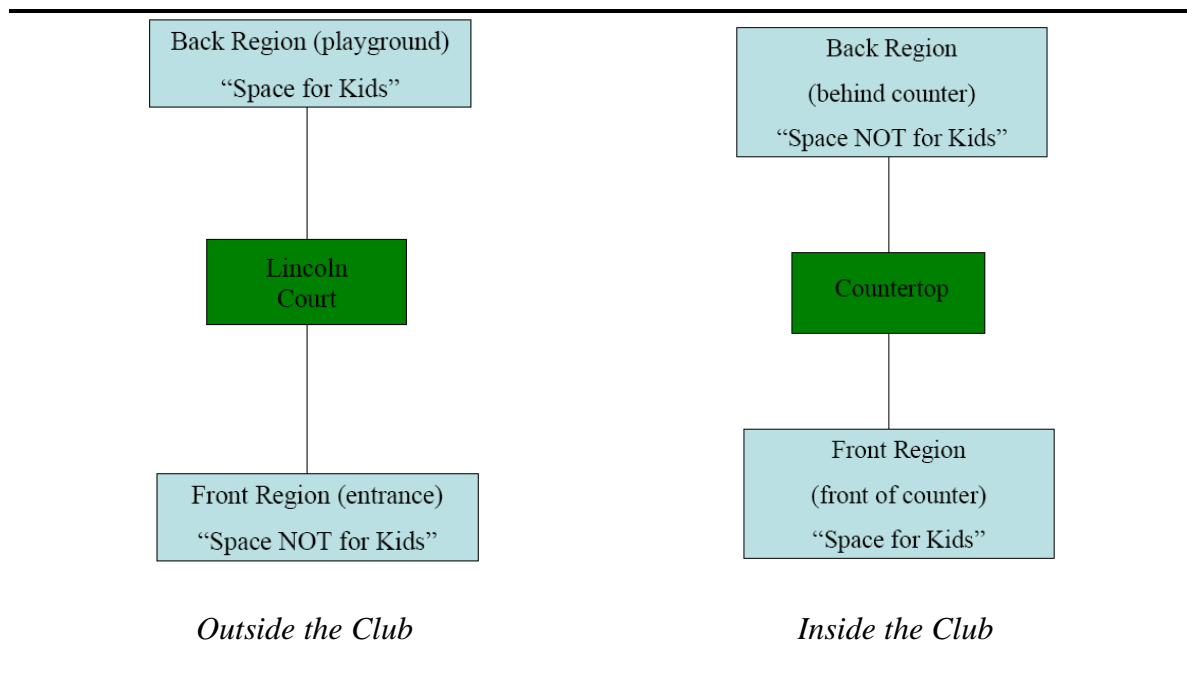
### *Children and Youth Assistants*

I began the project with the assumption that a revolving group of children and youth would be involved with the operation of the farmers' markets and planned to offer classes focused on the operation of the farmers' markets during each week of the project just as nutrition education classes were offered. As is true with most participatory research efforts, the theory-to-practice transfer resulted in the farmers' market classes operating somewhat differently than how they were originally conceived. Accordingly, the farmers' market classes were more flexible and unstructured than the nutrition education classes, which followed a predefined curriculum. The farmers' market classes were, however, quite routinized involving similar processes each week of the summer. These processes are described throughout the remainder of this chapter. Other differences were related to the location of the farmers' market classes as well as to the group of children and youth involved in the educational sessions. The farmers' market classes operated outside at the farmers' markets compared to an indoor classroom and involved a self-selected and sustained group of children and youth versus a rotating age-specific cohort of students.

The latter factor, self-selection, resulted in a cohort of about seven youth at the Hopetown Club and 12 at the Ridgetop Club who regularly engaged in the operation of the farmers' markets. About three youth at the Lincoln Court site provided assistance



with the initial set-up of the farmers' markets; however, none of the youth at the Lincoln Court site participated in the full process. This may be related to the fact that the Lincoln Court site operated more like a school than a summer camp and was therefore more structured and regimented than the Hopetown and Ridgetop sites. Moreover, the space at the Lincoln Court site was regionalized (Giddens, 1984) such that the area in front of the Club, the site where the Lincoln Court farmers' market was established, represented a territory that was "off limits" for the children and youth (see Figure 27). Interestingly, on the few occasions when we moved the Lincoln Court farmers' market inside the Club to a countertop located in the entry way, this new location was also regionalized but in a different manner. The "front" of the countertop was considered to be a space for kids and for customers while the "back" of the countertop (the area where people selling the food were located) was considered to be off limits to the public. The regionalization of the back of the countertop, an area defined as a space for staff to store their personal items, was exacerbated by a belief among staff at the Lincoln Court Boys and Girls Club that children and youth from the Club were stealing money and personal items (e.g., food, soda) from the staff. Thus, rules were established and reestablished at the site to keep children and youth attending the Lincoln Court Club from going behind the countertop. These factors resulted in few and sometimes no children and youth from the Lincoln Court Boys and Girls Club assisting with the operation of their farmers' markets.



*Figure 27. Regionalization of Lincoln Court site.*

In contrast, the Hopetown and Ridgetop sites, which operated more like summer camps than schools, facilitated the involvement of children and youth in the operation of the farmers' markets. This was due in part to the flexible structure of these sites which permitted children and youth to roam outside to the farmers' markets if they were inclined to do so. Thus, the cohort of students assisting with the Hopetown and Ridgetop farmers' markets were involved on their own volition rather than because they were forced or required to assist with the market. Consequently, these individuals had an expressed interest in participating in the operation of the farmers' markets.

I mention these phenomena because they represent factors that may influence public health efforts more broadly. The use of structured health education curricula with predefined and precise goals, objectives, learning activities and processes may in fact deter educational efforts. In contrast, having a set of principles to guide health education

processes such as a commitment to being flexible, experiential, and action-oriented may facilitate learning, as was found in this research. This does not mean that one enters an educational setting or process without a plan or agenda but rather shifts the definition of what constitutes an “effective” health education curriculum. Secondarily, I noted the regionalization of space at the Lincoln Court site because it is imperative that one examines the dynamics of space in a change process focused on space. Although each Boys and Girls Club designated the location of their respective farmers’ markets, this research may have benefited by spending more time in the beginning as well as at later stages of the project exploring why these locales were or were not good fits for the goals of the project. Based on experiences and events related to this research, I generated the following questions for groups to consider as they examine the “goodness of fit” of a spatially-based intervention:

- What spaces are available for the endeavor? For what and for whom are these spaces a good or bad fit?
- Is the space visible? To whom?
- Is the space easy to access by car, by bus, and by foot?
- Is the space “owned” by a certain group and/or person? How will this influence access?
- What “turf” issues are related to this space? How does this influence the use of this space?

### *Arranging the Market*

The first stage of market set-up entailed the removal of all market materials from the trunk of my car or from the cars of the research assistants. This included two large plastic boxes containing the scale, markers, pens, calculators, newsletters, recipes, plastic shopping bags, and table clothes; about 10 wicker baskets for showcasing the produce; a 10 foot by 10 foot portable tent; and one lawn chair. It is important to note that most of the supplies used to decorate the markets were purchased at the local Goodwill Store. The tablecloths used at the farmers' markets, for instance, were used bed sheets. These items were important symbols for the change process, conveying messages of simplicity and "anti-elitism". These messages facilitated a belief that the farmers' markets were "homegrown" and "owned" by the children and youth from the Boys and Girls Clubs.

After all of the supplies were unloaded from our cars, the children and youth were asked to bring down the tables and chairs for the market from inside the Boys and Girls Clubs and assisted with the set-up of the tent. An example of this process is detailed in the following excerpt from my field notes (June 14, 2007):

Two adolescent African American men carried the tables outside to the area near the street. I asked them where they thought we should set-up the tables—right next to the exit of the parking area or under a shade tree located about 20 feet away. They decided that the shady area was better and they also highlighted that it was important to find level ground for the tables. We then unloaded my car, taking out the baskets, tent, and other supplies, and put them on the ground. We talked through the instructions related to opening the tent but were some how confused in this process because the tent was opened upside down, the legs in the

air and the canvass top touching the ground. After some chuckling we rearranged the tent, moving it around a bit to figure out the best location to set-up the farmers' market.

This excerpt reveals the importance of taking time to explain and enact each step of the farmer's market process with the children and youth from the Boys and Girls Clubs. As revealed in this scenario, this process often resulted in mishaps—such as opening the tent upside down—but this was part of the process of shifting ownership and responsibility for the farmers' markets. One of the lessons learned in this process was that ownership of the farmers' markets would have been furthered if each site had their own set of supplies needed to run the markets instead of having the supplies brought in, used, and then taken away from the Clubs in accordance with the weekly markets.

In addition, this excerpt reveals the gendered patterns of involvement and participation at the farmers' markets. Only a few young women assisted with the labor intensive process of market set-up. Instead, as I will describe later in this chapter, the young women typically served as the "cheerleaders" and advertisers for the farmers' markets, shouting and chanting near the street with the goal of recruiting potential customers. With increasing age of the youth, the gendered demarcation of roles at the farmers' markets was enhanced. Thus, some of the younger boys served as "cheerleaders" of the market and the younger girls assisted with set-up but few of the adolescent males or females exchanged roles. Staff from the Boys and Girls Clubs never assisted with the set-up of the farmers' markets.

### *Fruit and Vegetable Orientation*

After setting up the infrastructure for the farmers' markets, we patiently waited for the Sustain Nashville representative to arrive onsite with the produce. This period of time was often filled with anticipation for the foods about to be delivered. It was also a time for casual conversation and interaction between the research team and youth. During this time I learned a lot about the personalities of the youth as they used it to share stories and talk about their immediate and long-term plans such as their desire to ask someone out to the movie that night or their career goals and ambitions.

Since the farmers' markets sold locally grown produce, the types of foods available during each week of the project varied tremendously. In the beginning of the summer the markets were filled with cool weather crops such as kale, collard greens, and turnip greens and as the summer passed the array of foods changed to include warm weather crops such as tomatoes, corn, peaches, and watermelon. The transition in hue from deep green to bright red, yellow, and orange was just one marker of change taking place in and through the farmers' markets (see Figure 28).

Once the food arrived, the children and youth unloaded the produce and placed it under the tent so we could engage in a conversation about the types of fruits and vegetables available for the week. This period of time provided an opportunity for the students to learn more about the products they would be selling later that afternoon. It was a rich educational opportunity, and significant gains in awareness of and comfort with the fruits and vegetables were noticeable throughout the duration of the project. The next three excerpts provide a glimpse of the types of conversations that took place during this process.

---

*Mid-June*



*Late-July*



---

*Figure 28. Seasonality of food at the farmers' markets, summer 2007.*

*Beginning of the project.* I took some time to tell one of the students from Lincoln Court, an African American adolescent man, about the project and about the steps involved in setting up the farmers' market. He was selected by the site director to assist with the farmers' market because of his strong leadership skills.

Therefore, I assumed that if anyone would know about the fruits and vegetables available at the market, this student would most certainly be the one. I asked the student to name the various types of vegetables as we filled out the check-in form. The first were green bell peppers and he did not know their name. The next were green beans and he said they were peas. The next were zucchini and he said they were cucumbers. It was clear that some of these vegetables were new to him. (Field notes, June 15, 2007)

*Middle of the project.* We spent quite a bit of time reviewing the produce with three African American young men from Hopetown who looked to be about 10 years old. They were engrossed in the process. I had witnessed few other activities taking place at the Boys and Girls Clubs that captivated the attention of the students as much as this process. Actually, the only other activity that captivated their attention to the same degree was the television. We first asked the youth what types of fruits and vegetables were in each bushel basket. The first basket had cantaloupes, red tomatoes, and green tomatoes. The youth pointed out the cantaloupes and tomatoes. We then asked them to tell us what kinds of tomatoes were in the basket. "Cherry tomatoes" called out one boy. The tomatoes were not small. "Orange tomatoes" called out another. "I don't know" said another. We then asked, "What color are the tomatoes?" as a hint. Once the green tomatoes were differentiated from the red ones, we asked the boys why they were green. After asking the boys to feel the red and green tomatoes, the Sustain Nashville representative asked, "What is the difference between the green ones and the red ones?" "One is harder" said one of the boys. We then chatted with the



boys about the ripening process for foods. Touching and talking about the green tomatoes caused one of the boys to spontaneously blurt out that his granddaddy likes to make fried green tomatoes. (Field notes, June 26, 2007)

*End of the project.* Four adolescent women from Ridgetop, all of whom were African American, helped set-up the market. This was the first time the young women stayed with us while we were setting up. They were very interested in talking with the Sustain Nashville representative about the foods at the market and did a lot of taste testing this week. They tasted raw corn, carrots, tomato, cucumber, and okra. It was pretty impressive to see how willing they were to taste the foods. In general they thought the foods tasted really good and were excited to get other people to buy it. In fact, after tasting the tomato the girls came up with the slogan “Got tomato?” as a way to advertise the food. They thought this was a funny twist on the “Got milk?” campaign pervasive in the media. (Field notes, July 26, 2007)

These excerpts highlight that the more time the children and youth spent at the farmers’ markets the more comfortable they became with the fruits and vegetables. While in the beginning of the project the children and youth often dared one another to touch or taste the foods at the farmers’ market by the end of the project, as evidenced by the third excerpt, many of the students were more than willing to taste the foods and became even more creative and compelling in their efforts to advertise the products. These excerpts also highlight the influence of having an experientially and materially-based pedagogical process. It was through interactions with the food—not through abstract conversations about food—that resulted in changes among the children and youth.

## Selling Food

---



*Figure 29. Measuring produce at the farmers' market.*

---

### *Volume and Cost of Produce Procured for the Farmers' Markets*

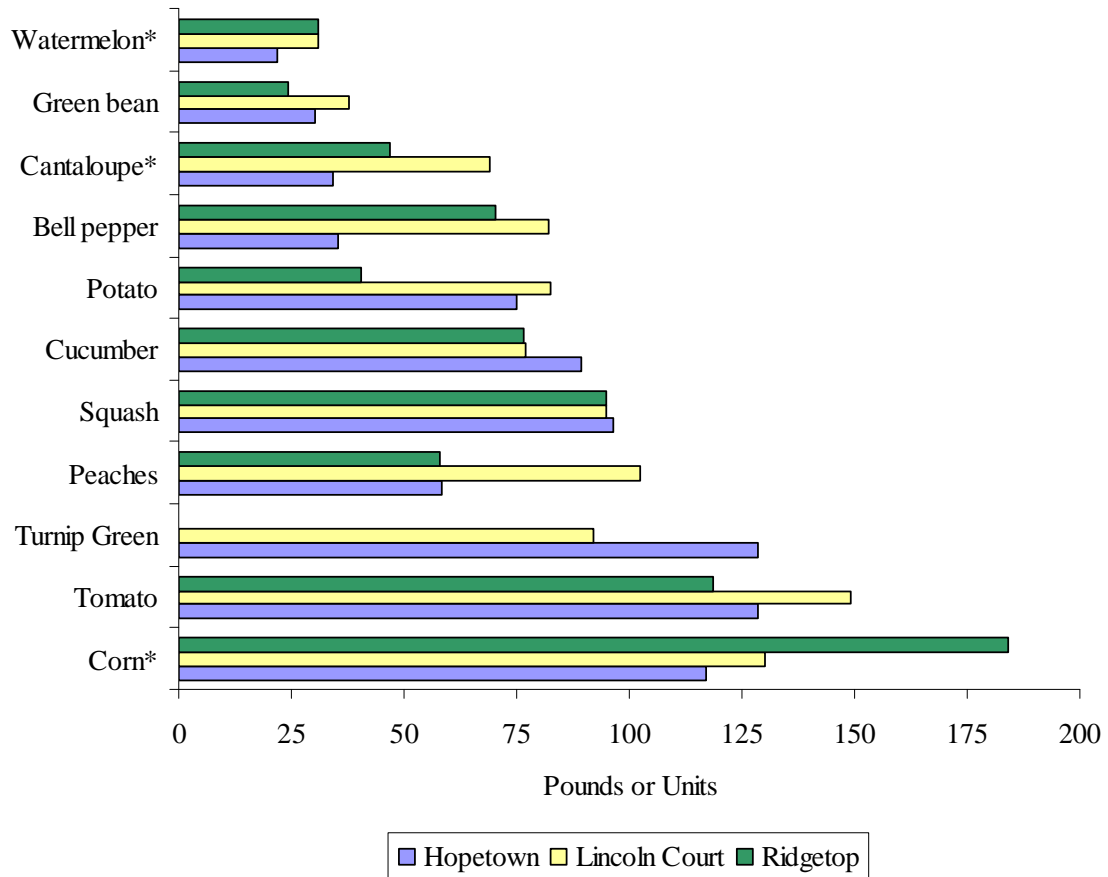
After reviewing the types of fruits and vegetables available for purchase at the farmers' market, we then took time to ascertain the volume of produce available and calculated the price of each food item. The children and youth assisted with this process, which was essentially a hands-on math project involving skills in measurement, addition, multiplication, and division (see Figure 29). For many of the youth, this was their first time using a dial scale, which required an understanding of the metrics of the scale, as well as the first time they were asked to calculate the price of a good. Most of the youth were unfamiliar with the concept of price inflation and profit generation, and thus the pricing process became an opportunity for exploring other economic issues. While the

farmers' markets were not designed primarily to be profit making ventures, it was our goal to at least break even financially during each week of the project. This goal was derived because of a broader commitment to developing a project that had sustainability beyond the terms of the grant-funded research project.

A wide variety of fresh fruits and vegetables were procured for the farmers' markets including beets, bell peppers, broccoli, cabbage, cantaloupe, collard greens, corn, cucumbers, green beans, green tomatoes, hot peppers, kale, okra, onions, peaches, potatoes, squash, Swiss chard, turnip greens, watermelon, and zucchini. The fruits and vegetables were measured in two formats: in pounds and in units.<sup>59</sup> Foods measured in units included beets, cabbage, cantaloupe, collard greens, corn, green onions, kale, and watermelon; all other items were measured in pounds. A total of 1,921.2 pounds and 763 units of produce were procured for the 26 farmers' markets. The greatest volume of food was purchased for the Lincoln Court site (741.5 lbs, 248 units) followed by Ridgetop (531.3 lbs, 336 units) and Hopetown (648.4 lbs, 179 units). The most common fruits and vegetables procured for the farmers' market were corn, tomatoes, turnip greens, peaches, squash, cucumbers, potatoes, bell peppers, cantaloupe, green beans, and watermelon (see Figure 30).

---

<sup>59</sup> Some foods were measured in units because the weight-to-item ratio was quite high and would therefore lead to an exaggerated estimate of the volume of food procured and sold at the farmers' markets.



**Figure 30. Most common fruits and vegetables purchased for the three farmers' markets, summer 2007.**

Caption for Figure 29. \* = Foods measured in units; all other items measured in pounds.

It cost \$1,589.00 to purchase all of the food for the 26 farmers' markets with the most money spent on the Lincoln Court site (\$592.75) and the least on the Hopetown site (\$468.50). To stock the farmers' markets each week, it cost an average of \$58.56 for Hopetown, \$65.86 for Lincoln Court, and \$58.64 for Ridgetop which translated into a weekly average of 81.1 pounds and 22.4 units of produce for Hopetown, 82.4 pounds and 27.6 units for Lincoln Court, and 59.0 pounds and 37 units for Ridgetop (see Table 11).

*Table 11. Average weekly cost and volume of food purchased for the three farmers' markets, summer 2007.*

	Cost	Pounds	Units
Hopetown	\$58.56	81.1	22.4
Lincoln Court	\$65.86	82.4	27.6
Ridgetop	\$58.64	59.0	37.0

### *Selling Fresh Fruits and Vegetables*

Food was sold at the farmers' markets from about 3:30-5:30pm. The markets operated on Tuesdays at Hopetown, on Thursdays at Ridgetop, and on Fridays at Lincoln Court.

### *Advertising*

This research was premised on a recursive and responsive relationship between social structures and human agents. Thus, getting people to shop at the farmers' market was central to the materialist praxis approach. Although marketing the farmers' market was understood to be an important ingredient to the success of this project, the ways in which the farmers' markets were advertised was based on feedback and perspectives from the three Boys and Girls Clubs.

*Hopetown.* The children and youth at the Hopetown site were the primary marketers of their farmers' market. On the first day of the Hopetown farmers' market,

one of the youth from the site, a slender African American woman who was about eight years old, offered to pass out flyers about the farmers' market to her neighbors. She lived in a public housing project that was within walking distance of the Hopetown Boys and Girls Club. I had a prior relationship with this young woman as she was involved with the farmers' market pilot project that was conducted the summer before. She and her sister remembered me from last summer and within moments of reconnecting they reminded me that the last time they assisted with the farmers' market (the summer before) they were compensated for their time with a watermelon. I could tell from the moment we began talking about the Hopetown farmers' market that this young woman was keen to find out what it would take for her to get "paid" with another watermelon. I gave her a stack of about 30 flyers and thanked her for her willingness to assist with the advertising campaign for the Hopetown farmers' market. Her ear-to-ear smile demonstrated her willingness to assist.

In addition to passing out flyers, the students at Hopetown were actively involved in recruiting passersby to stop at the farmers' market. The Hopetown farmers' market was located at an intersection that had a relatively steady flow of traffic. There was also a city bus stop located within 40 feet of the farmers' market. Cheers and chants about the foods at the farmers' markets were the primary advertising tools employed by the youth. An example of the advertising campaign developed by the students at Hopetown is highlighted in this excerpt:

Around 5:00pm, the students returned to the street, literally, to publicize the market. One of the older students, an African American adolescent female, tried to pass out flyers about the farmers' market to cars as they passed the intersection

near the market. Most cars actually stopped at the curved intersection, rolled down their windows, and accepted a flyer. A few purposefully rolled up their windows as they passed by, indicating that they did not want to be solicited by the youth. As she passed out the flyers, the other students recited a chant about foods available at the market with one student yelling “fruits” one yelling “veggies” and the third yelling “farm fresh.” “Fruits! Veggies! ...Farm fresh!, Fruits! Veggies! ...Farm fresh!” One of the students came up with this cheer and the kids seemed excited to recite it. (Field notes, June 19, 2007)

It was clear that most customers were impressed by the active involvement and enthusiasm of the children and youth at the Hopetown site. Customers frequently said, “Y’all made me pull over so you better have something good” in response to the kids marketing schemes. If not for the children and youth, I do not believe as many people would have shopped at the Hopetown farmers’ market.

The ownership of the Hopetown farmers’ market by the children and youth was derived in part by their high level of involvement in the advertising process. When asked to describe the “best” part about the farmers’ markets, a young man stated, “The [best] part is when you get to go out into the street and hold up signs to help people come and get some get fresh fruits and veggies.” Another youth indicated that the “worst” part about the project was when youth were not selected to assist with the advertising process because there were too many youth volunteering for the day. This young man said that “Everyone [all children and youth] should have a chance to advertise [the farmers’ markets].” While advertising, the youth often made bets with one another to see who could get the next customer or the most customers within a certain time frame. As the

following excerpt highlights, getting a person to stop at the farmers' market was only one part of the market experience for the youth; assisting their respective customers at the farmers' market was an equally important aspect:

Three African American men who are about ten years in age were near the street, actively recruiting people to come to the market. All three of them had signs in their hands about the farmers' market and yelled "fresh vegetables", "fresh cantaloupes", "fresh fruit" as a means for attracting customers. They were on the sidewalk near the street for at least ten minutes before they attracted the first customer but once someone decided to shop at the farmers' market the boys were elated and proud of their efforts. As the first customer approached the market, the boys ran from the street to help this person shop all the while thanking the customer for supporting the Hopetown Boys and Girls Club since all of the funds raised through the farmers' market would be donated to the site. As more and more customers were secured, the boys argued with one another about who would get to help a customer if they all believed they were equally responsible for recruiting the person to the market.

After having some success with the recruitment of customers, the boys started negotiating with us to find out what they would get in return for their efforts at the market. "What would happen if we each got five customers?" asked one of the boys. Since the boys really wanted a cantaloupe, we offered to buy one for each of them as a reward if they achieved their goal. After each one recruited five customers, they received their melons. They were so excited about their



reward. In response to receiving his melon, one of the boys said, “I can’t wait to give this to my mom.” (Field notes, July 3, 2007)

This excerpt highlights several key themes related to the farmers’ markets. First, the children and youth were invested in the markets. They were proud to be involved with the project as evidenced by their desire to recruit customers and then interact with the customers at the market. The youth demonstrated a level of customer service, a skill they brought to but also enhanced through the project. Second, many of the children and youth, especially those at the Hopetown site, conceptualized their involvement at the farmers’ markets as work more than play. While the farmers’ markets remained places of fun and excitement, the children and youth at Hopetown became increasingly interested in being compensated for their labor at the farmers’ market. Even though money was exchanged at the farmers’ market on a regular basis, the youth never asked to be paid for their time in cash. Instead, their currency of choice was fresh fruits and vegetables with watermelon, cantaloupe, and peaches identified as the ideal form of pay.

*Lincoln Court.* The advertising tactics employed by the Lincoln Court site were quite different than those employed by either Hopetown or Ridgetop. Given that the children and youth were relatively uninvolved with the Lincoln Court farmers’ market, we could not rely on them to recruit customers to frequent the market. Moreover, the location of the farmers’ market at Lincoln Court was a barrier to the advertising strategy since it was established near the entrance of the Boys and Girls Club, which was at the end of a long driveway and thus invisible to cars passing by on the busy street in front of the Lincoln Court site. As a result, the only people who would see the farmers’ market were those already planning to come to the Lincoln Court Boys and Girls Club.

The marketing plan developed for Lincoln Court was serendipitous. In the early days of the project I sent an email to many of my friends and colleagues to encourage them to shop at one of the farmers' markets operating at the Boys and Girls Clubs. In response to this email, one of my colleagues passed this information on to a community-based organization located near the Lincoln Court site. This message was then forwarded to the city council representative for the district in which Lincoln Court is located and this person forwarded the message to a district-wide listserv. As a result of these social networks, the Lincoln Court site was frequented by a wide array of community members responding to the city council representative's post. This social networking approach to advertising turned out to be an effective method for recruiting customers to the farmers' market.

*Ridgetop.* The children, youth, staff, and parents from the Ridgetop site were involved with the advertising process for their farmers' market. Prior to our first day at the site, the director assigned a group of youth from Ridgetop to canvass the surrounding neighborhood with flyers about the upcoming farmers' markets. This included two public housing complexes, one composed of single family housing units and the other a high rise apartment building. The director of the Ridgetop site was the only director across the three sites who regularly engaged in the promotion and operation of the farmers' markets.

During almost every week of the summer, a group of adolescent women stood on the corner near the Ridgetop farmers' market, shouting cheers to encourage people to purchase fresh fruits and vegetables at the market. The young women came up with their own cheers and made colorful posters highlighting the variety and cost of foods available at the market. Although the young women regularly engaged in cheerleading and

chanting activities, they rarely came inside the tent to assist with the sale of food at the Ridgetop farmers' market. About halfway through the summer, a group of adolescent men decided to make a commercial about the Ridgetop farmers' market. In the commercial, the young men marketed the fruits and vegetables by calling the peaches "fergalicious"<sup>60</sup> and by describing cantaloupes as "so good they make you want to slap your mama". This commercial was posted to You Tube, an online open access database that contains video and audio clips, which made the commercial available for use by the students and by the director of the Ridgetop Boys and Girls Club. This video became one of the most useful outputs of the summer project as it captured the spirit of the farmers' markets in a format that was easy to access. As of April 11, 2008, this video has had 163 viewers.<sup>61</sup>

On one of the liveliest days at the Ridgetop farmers' market, a grandparent from the Boys and Girls Club recruited the children and youth to assist her with an innovative marketing campaign. Her involvement is described in the following excerpt from my field notes:

The farmers' market was relatively slow until an African American woman whom people referred to as "Ms. Penny"<sup>62</sup> came to shop after picking up several of her grandchildren from the Boys and Girls Club. She said that she had just decided to become a vegetarian and was visiting the farmers' market to buy some fruit. She purchased several peaches as an afternoon snack for each of her

---

<sup>60</sup> "Fergalicious" is the title of a song on the album "The Dutchess" by American pop singer Fergie, which debuted in September 2006 achieving a number three ranking in Billboard 200 during its first week.

<sup>61</sup> The commercial is available online at <http://www.youtube.com/profile?user=raspberryseltzer>.

<sup>62</sup> Ms. Penny is a pseudonym.

grandchildren as well as a tomato for herself. She said that she did not want a bag for her tomato because she was going to eat it right away.

I conducted an on-the-spot interview with Ms. Penny to find out why she was at the market and why others weren't, and perhaps this last question inspired her next actions. She went to the street and started singing about why people should stop and shop at the market, why they should buy a tomato or corn or cabbage. Her voice was beautiful and her energy radiant. The kids gravitated to Ms. Penny and began to mimic her energy and enthusiasm for the fruits and vegetables at the farmers' market.

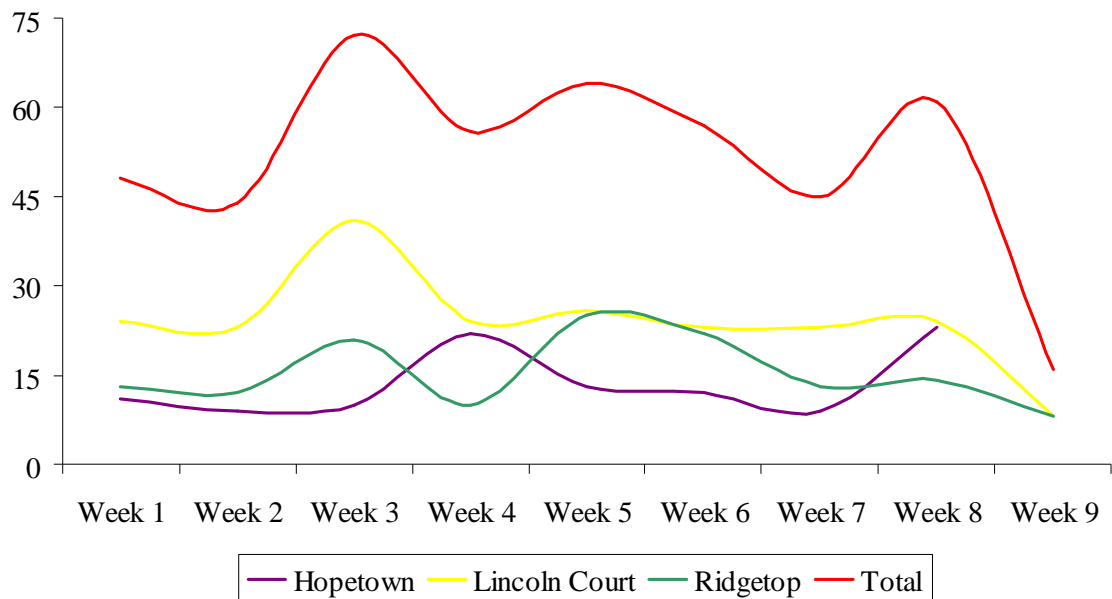
Soon thereafter two of the young men decided to join in the recruiting game. They established a competition to see who could get the next customer to shop at the market. The kids were really into this and before you knew it we had cars stopping for "drive thru" orders from the market. The students were running up the street, to the parking area, moving in all directions to recruit customers. Shoppers did not even have to get out of their cars to look at the food and pick out their favorite items; instead the students took orders and prepared bags of fresh fruits and vegetables for them. (Field notes, June 28, 2007)

This excerpt does not convey the energy and enthusiasm transmitted from Ms. Penny to all of us at the Ridgetop farmers' market. Her spirit was like a lightening bolt to the project and invigorated the children and youth to become even more engaged with the project. In return, passersby were eager to support the farmers' market by purchasing fruits and vegetables.

This excerpt also highlights the dynamism of this project. While each farmers' market included similar steps and processes, the dynamics of each market were directly related to the children and youth assisting with the operation of the market as well as to the customers. The markets invited people to join in and become an active part of this process of community change. They facilitated all types of involvement from all types of people. For Ms. Penny, this meant that she would develop lyrics and harmonies to invite customers to purchase fresh produce from the market. For other customers, their involvement was less theatrical but no less important. They shopped at the farmers' markets but also left generous tips and donations to show their support for this community-based endeavor.

### *Customers*

A total of 463 customers shopped at the 26 farmers' markets, 109 at Hopetown, 216 at Lincoln Court, and 138 at Ridgetop. This does not include the handful of individuals who came to the farmers' markets but did not purchase food because the produce was too expensive or because we did not have the types of fruits and vegetables the individual was looking for. Although I only briefly address the economy of food access in this chapter, I devote considerably more attention to this phenomenon in the next chapter. Customers included parents, guardians, students, and staff from the Boys and Girls Clubs and community members. At all of the sites, approximately one-half of the customers were from the Boys and Girls Clubs and the other half came from the community. The flow of customers per week varied for each site (see Figure 31).



*Figure 31. Number of customers frequenting the three farmers' markets, summer 2007.*

*Hopetown.* The Hopetown site had an average of 14 customers per week (range: 9-23). The most popular shopping days for the Hopetown site were July 3<sup>rd</sup> (week 4), the day before the Fourth of July holiday, and July 31<sup>st</sup> (week 8), the last day of the Hopetown farmers' market. On July 3<sup>rd</sup>, many of the 22 shoppers informed us that they were purchasing fresh fruits and vegetables for picnics and family reunions scheduled for Independence Day, an American holiday known for including meals that feature the jewels of the summertime harvest. The last day of the Hopetown farmers' market corresponded with the greatest volume of customers for the site (23 customers), including many first-time customers:

We had several new shoppers today. In fact, I think at least half of our shoppers were new. Many people wanted to know if we'll be at the site everyday of the week. We were sorry to inform them that this was the last day of the Hopetown

farmers' market for this season. One of the new customers was an African American woman in her mid-twenties. She drove by the market one time to ask what we were selling and someone responded by naming the variety of fruits and vegetables present. She seemed interested but hesitant to shop at the farmers' market. However, curiosity must have gotten to her because after about fifteen minutes or so, the woman came back to buy some peaches and watermelon. We assured her that the food was very good and that she would not be disappointed with her choices. As she was pulling away she said she might be back before we close—a sign that she was indeed quite pleased with the foods available at the market. Within the hour this woman returned to the market. She grinned with a look of guilt and said that she ate one of her peaches in the car on her way home from the market. She said that it was so good that she decided to come back. This time she brought an elderly woman, perhaps her grandma or her neighbor. She said that she wanted to give this woman an opportunity to purchase fresh foods from the Hopetown market. (Field notes, July 31, 2007)

This excerpt highlights that the farmers' markets were anomalous and perhaps even considered to be foreign territories within the confines of the communities surrounding the Boys and Girls Clubs. Many shoppers reported that curiosity was one of the primary reasons why they eventually decided to frequent the farmers' markets. Once people decided to visit the markets, as revealed in the previous excerpt, they found them to be quite appealing resulting in many repeat shoppers at the markets.

In addition to the adults frequenting the Hopetown farmers' market, several of the youth from Hopetown Boys and Girls Club shopped at the last market. The children and

youth shopped using their own money or by using one of the vouchers (worth \$2.00)<sup>63</sup> awarded to a few students during the nutrition education classes. The following excerpt describes this experience:

One of the youth from Hopetown, an African American who was about 7 years old, asked what he could buy with 50 cents. We told him that his money would allow him to buy a peach, the fruit he was eyeing. He then pulled out two quarters from his pocket, bought the peach, and ate it within minutes. This is the first time that children from the Hopetown site purchased food from the market. A few of the children and youth received “free” food for assisting with the farmers’ market and many accessed the fruits and vegetables because their parents shopped at the market but, up until this point, I don’t recall any of them using their own money to buy food. Later that afternoon, another student asked what he could purchase with \$2.00, the value of the voucher earned in the nutrition education class. This young man was very interested in getting a watermelon. We said that the watermelons were \$3.50 so he would need extra money to buy one. After some searching around, the young man decided to use his voucher to purchase one cantaloupe for \$1.50 and one peach for 50 cents. (Field notes, July 31, 2007)

As this excerpt highlights, by the end of the summer the children and youth from Hopetown were quite interested in the foods available at the farmers’ market. Their willingness to use their own money to purchase fruits and vegetables was just one sign of the changes that were occurring amongst the kids at the site.

---

<sup>63</sup> As a reward for students involved with the nutrition education sessions, approximately two \$2.00 vouchers were awarded during each session. Most students used the vouchers to purchase fruit for themselves while a few used their voucher to purchase cucumbers, potatoes, squash, and other vegetables for their families.



*Lincoln Court.* The Lincoln Court site had an average of 24 customers per week (range: 23-41). On June 29<sup>th</sup> (week 3), there was a surge in customers at the Lincoln Court site (41 customers). This corresponded to the first day that the farmers' market was set-up inside the Lincoln Court Boys and Girls Club instead of outside near the entrance to the site. The market was set-up inside the Boys and Girls Club because there was a 90% chance of rain that afternoon and being inside protected us from the weather. The Lincoln Court site has a long countertop located just inside the entrance which proved to be an excellent infrastructure for setting up the farmers' market. Although we were concerned that the indoor farmers' market would result in a decline in customers, since many of the Lincoln Court farmers' market customers were from the community and would therefore have no reason for actually entering the Boys and Girls Clubs, we found that being inside the Club made the market more accessible to children and youth at the site. At least one-third of the customers on June 29<sup>th</sup> were students enrolled in the Lincoln Court Boys and Girls Club. Most purchased peaches (this was the first week we had fresh peaches) using their own money while five used the voucher they received during one of the nutrition education sessions to buy fruits and vegetables. As the following excerpt reveals, a few of the students had to wait until their parents arrived later that afternoon to purchase foods from the market because they did not have money on them:

An African American child, she is probably six years old, spent a lot of time today learning about the fruits and vegetables sold at the market. She had braids in her hair and she was wearing the green "I'm in the Club" t-shirt that many of the students enrolled in the summer camp wear. She hovered around the peaches for a long time lured by their sweet aroma. She asked if she could have a peach

and I told her that they cost 75 cents each.<sup>64</sup> She said longingly that she didn't have any money and then asked if she could have one peach for free. I told her that it wouldn't be fair to the other students if she received a peach at no charge. She said we could lie and say that she paid for the peach. I told her that it wasn't a good idea to lie. She said she'll just trick people to believe that she paid. In her mind, there was a difference between a lie and a trick. The girl stayed around the peaches for at least ten minutes but maybe even for 15 or 20. She was persistent about wanting a peach and I was persistent that she would have to pay. Since many children and youth were paying for the food, it just didn't seem fair to give food away to one student but not another. When her father picked her up later that afternoon, this young girl convinced him to buy her several peaches.

It is important to note the tensions related to food costs revealed in this excerpt. The economy of food access was a salient theme questioned and re-questioned throughout this project (see Chapter 5). This tension was central to understanding and addressing the politics of food access. At certain moments, however, the centrality of the economy of food access was overwhelming. For instance, while we were inside the Lincoln Court Boys and Girls Club selling fresh fruits and vegetables, the farmers' market was located right next to the "snack station", a cooler that contained powdered donuts and snack cakes, foods donated to the Boys and Girls Clubs by a local charitable organization. These snacks were available at no charge to all of the children and youth at the Club whereas the fresh fruits and vegetables had a price tag. Just like the young girl portrayed in the previous excerpt, many students asked and even begged for foods from

---

<sup>64</sup> The cost of peaches was high this year because of the late April freeze in the southeastern region of the U.S.

the farmers' markets while they waited in line at the snack station. Needless to say, they did not access the fruits and vegetables because of the price tags and their lack of a pocketbook. While this tension was not nor could it have been resolved through this research endeavor, it nevertheless served as an important heuristic for exploring the broader relations and systems of power influencing the economy of food access. One small and not necessarily effective (and perhaps even ineffective) response to this issue was to sponsor a "Watermelon Week" as a part of this project. During this week, we provided free watermelons to each Boys and Girls Club, and the fruit was served as a part of the Clubs' snack time.

In addition to having many children and youth shop at the indoor farmers' market, much to our surprise, the indoor market also experienced a steady flow of shoppers from the community. This was an important moment for the project since the indoor market allowed community members to transgress the walls of the Boys and Girls Club, a first time experience for most of them. The director at the Lincoln Court site frequently noted that this transgression was an unintended benefit of the farmers' markets as it allowed a broader array of people to connect with the Club, a space that is often uninhabited by people without children and youth enrolled in the program.

*Ridgetop.* The Ridgetop site had an average of 15 customers per week (range: 10-25). The most popular shopping day for Ridgetop was July 12<sup>th</sup> (week 5) with 25 customers present. This was due to the efforts of a staff member from the Ridgetop Boys and Girls Club. He was a gregarious middle-aged African American man who was running for city council. With the city council election just weeks away, his involvement with the farmers' market was at least in part a strategic political move to get his face in

front of community members. As he took to the street to encourage people to shop at the farmers' markets, he conveniently arranged to have youth from the Ridgetop site lined up along the street with "vote for me" signs so passersby would be reminded that he was running for city council. Several people shopped at the market as a result of his efforts.

The slowest day at the Ridgetop farmers' market was August 9th, the last day of the market; we only had eight customers. This happened to be one of the hottest days on record for the summer with temperatures over 100 degrees. On this day, many people waved at the children assisting with the farmers' market but few stopped. The thought of getting out of one's car or going home to prepare foods in a hot kitchen seemed to deter most customers.

### *Volume of Food Sold*

Though the farmers' markets were stocked with more food than we expected to sell at the market, an important practice to maintain the sense of bounty and variety at the market, 50% or more of the following fruits and vegetables were sold at the 26 farmers' markets: beets, bell peppers, cabbage, cantaloupe, corn, green beans, green onions, squash, watermelon, and zucchini (see Table 12). Twenty-five percent or less of the broccoli, green tomatoes, and hot peppers were sold at the farmers' markets. In all, 49% of the fruits and vegetables measured in pounds and 76% of those measured in units were sold at the farmers' markets operating out of the three Boys and Girls Clubs.

The Lincoln Court site sold the greatest percentage of foods purchased for the market (60% of foods measured in lbs, 93% of foods measured in units) followed by Ridgetop (48% lbs, 72% units), and Hopetown (37% lbs, 61% units).

The most and least popular foods purchased by customers varied across the three sites. At the Lincoln Court site, 50% or more of the bell peppers, cabbage, cantaloupe, collard greens, corn, cucumber, green beans, green tomato, kale, peaches, squash, tomatoes, and watermelon were sold at the farmers' market while 25% or less of the peppers and Swiss chard were sold. The most popular foods sold at Ridgetop were beets, cabbage, cantaloupe, corn, green beans, green onions, peaches, tomatoes, watermelon, and zucchini and the least popular were broccoli, green tomatoes, and hot peppers. Cantaloupe, corn, okra, peaches, and watermelon were the most popular items sold at the Hopetown site while cabbage, green beans, green tomato, potatoes were the least popular.

The revenue associated with the sale of these fruits and vegetables throughout the duration of the summer project was \$1,590.12 (Lincoln Court, \$678.67; Ridgetop, \$519.10; Hopetown, \$392.35). On average customers spent \$3.43 at the farmers' markets to purchase an average of 2.0 pounds and 1.3 units of fresh fruits and vegetables. The average purchase at the Ridgetop site cost \$3.76 compared to \$3.60 for Hopetown and \$3.14 for Lincoln Court. Even though the Ridgetop and Hopetown sites had fewer customers compared to Lincoln Court, the average customer at these sites spent more money at the farmers' markets than customers at the Lincoln Court site (see Figure 32).

The only site to make a profit through sales at the farmers' market was the Lincoln Court site, which made \$85.92 from the sale of fresh fruits and vegetables. The Ridgetop site almost broke even; it only lost \$8.65 at the market. The Hopetown site was less profitable losing \$76.15 due to decreased sales. Collectively, the three farmers' markets were successful in achieving the goal of breaking even financially, producing a slight profit of \$1.12. All of the sites, even those that were not profitable through their sales, received

some funds as a result of the farmers' markets. Each site began the project with \$250 to cover the cost of food purchases throughout the summer. I assumed that this money belonged to each site. Therefore, the final profits for each site were calculated by adding \$250 to the profits made at the markets resulting in an adjusted profit of \$335.92 for Lincoln Court, \$241.35 for Ridgetop, and \$173.85 for Hopetown. These funds were donated to the three Boys and Girls Clubs and their use was determined by staff at the sites. The Hopetown site decided to use the funds to pay for school supplies for one of the graduates of the Club who was beginning his first year of college and the Ridgetop site used the funds to support the teen club at the site. The Lincoln Court site did not direct the funds to a specific project per se but intended to use the funds to support the children and youth at the site.

*Table 12. Volume of produce purchased for and sold at the three farmers' markets, summer 2007.*

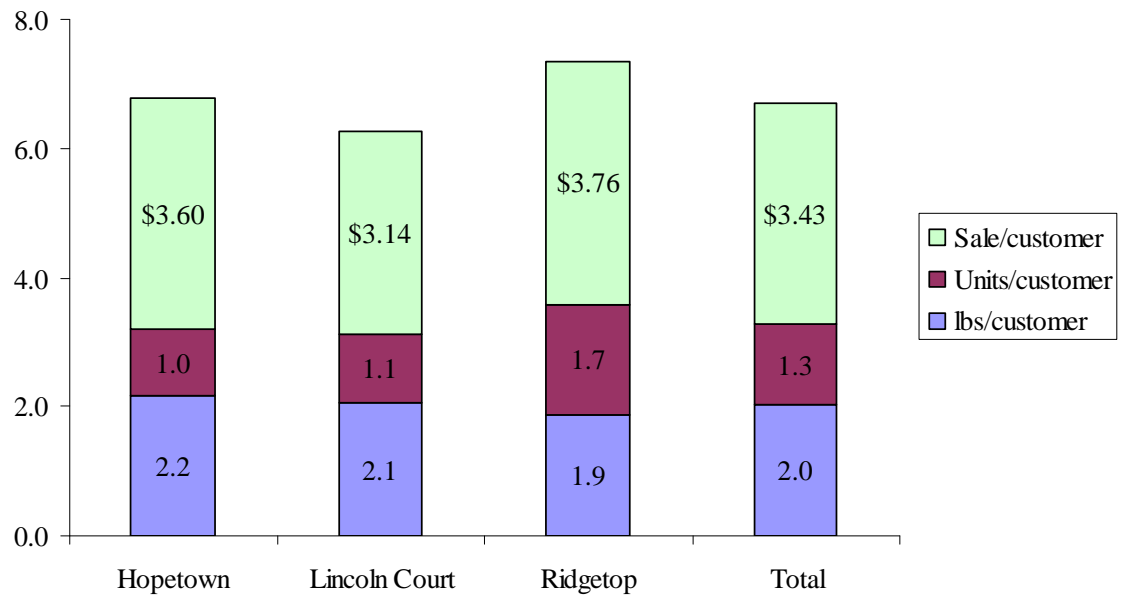
	Volume Purchased				Volume Sold				Percentage Sold (%)			
	Total	HT	LC	RT	Total	HT	LC	RT	Total	HT	LC	RT
Total pounds	1,921.2	648.4	741.5	531.3	938.9	237.8	445.0	256.2	49	37	60	48
Total units	763.0	179.0	248.0	336.0	580.0	110.0	231.0	239.0	76	61	93	71
Beets*	4.0	0.0	0.0	4.0	3.0	0.0	0.0	3.0	75	--	--	75
Bell peppers	187.6	35.5	82.0	70.1	96.8	15.0	47.1	34.7	52	42	57	49
Broccoli	8.0	0.0	0.0	8.0	2.0	0.0	0.0	2.0	25	--	--	25
Cabbage*	16.0	6.0	5.0	8.0	14.0	1.0	5.0	8.0	88	17	100	100
Cantaloupe*	150.0	34.0	69.0	47.0	137.0	28.0	68.0	41.0	91	82	99	87
Collard greens*	28.0	0.0	2.0	26.0	13.0	0.0	1.0	12.0	46	--	50	46
Corn*	431.0	117.0	130.0	184.0	320.0	62.0	126.0	132.0	74	53	97	72
Cucumber	242.3	89.1	76.8	76.4	107.3	30.8	51.4	25.2	44	35	67	33
Green beans	91.9	30.0	37.5	24.4	52.4	5.0	31.0	16.4	57	17	83	67
Green tomato	29.0	5.0	9.5	14.5	6.5	0.0	6.5	0.0	22	0	68	0
Hot peppers	13.5	0.0	4.8	8.7	1.8	0.0	0.9	0.9	13	--	19	10

*Table 12. Volume of produce purchased for and sold at the three farmers' markets, summer 2007. (Continued)*

Kale*	36.0	0.0	4.0	32.0	15.0	0.0	4.0	11.0	42	--	100	34
Okra	20.5	1.8	9.8	8.9	9.3	1.8	4.8	2.7	45	100	49	30
Onions (green)	4.0	0.0	0.0	4.0	3.0	0.0	0.0	3.0	75	--	--	75
Peaches	218.7	58.5	102.3	57.9	166.7	55.0	69.8	41.9	76	94	68	72
Potatoes	198.0	75.0	82.5	40.5	63.1	16.0	30.6	16.5	32	21	37	41
Squash	286.3	96.5	95.0	94.8	142.0	28.8	74.2	39.0	50	30	78	41
Swiss chard*	7.0	0.0	7.0	0.0	2.0	0.0	0.0	2.0	29	--	0	--
Tomato	396.4	128.5	149.3	118.6	209.9	37.0	101.7	71.3	53	29	68	60
Turnip greens	220.5	128.5	92.0	0.0	75.5	48.5	27.0	0.0	34	38	29	--
Watermelon*	84.0	22.0	31.0	31.0	73.0	19.0	27.0	27.0	87	86	87	87
Zucchini	8.5	0.0	0.0	8.5	5.8	0.0	0.0	5.8	68	--	--	68

Caption Table 10. \* = Produce measured in units; all others measured in pounds  
HT = Hopetown, LC = Lincoln Court, RT = Ridgetop





*Figure 32. Average purchase per customer at the three farmers' markets, summer 2007.*

### Closing the Farmers' Markets

The farmers' markets ebbed and flowed in a similar pattern. They started at 3:30pm and a surge in customers occurred around 5:00pm, corresponding with heightened numbers of parents/guardians picking up their children from the Boys and Girls Clubs, and then there was a steady decline from that point forward. This pattern was reinforced by the penalties associated with "late pick-up" of children from the Clubs. The penalty fee for late pick-up was \$1.00 for each minute past closing time, which meant that most children and their families had vacated the Boys and Girls Clubs by 5:30pm.

During the last half hour of the farmers' markets (5:00-5:30), we typically lowered the prices of the remaining food items to facilitate the sale of as much food as possible before close. We also made deals with customers such as "buy one get two free"

to try and diminish the amount of leftover product. Despite these efforts, at the end of each farmers' market we had a decent supply of "leftover" fruits and vegetables. Thus, as soon as the farmers' markets closed their "normal" business hours, the fruits and vegetables transformed once again. Instead of having a monetary cost the products were now free of charge to anyone interested in taking the leftover food. Many of the staff from the Boys and Girls Clubs took advantage of the free products as this was the only time that many of them could get away from inside the Boys and Girls Clubs to frequent the outdoor markets.

Even after staff from the Boys and Girls Clubs had a chance to shop (at no charge) at the markets, a surplus of fresh fruits and vegetables remained. Thus, the final volume of "leftover" produce was taken to two drug rehabilitation centers and a publicly funded apartment complex located near the Boys and Girls Clubs. The process of food donation became routinized over the course of the summer, and with each passing week I became more familiar to and with the residents at the various sites resulting in many residents affectionately referring to me as the "veggie lady". People often assumed that I grew the fruits and vegetables in my garden but I always reminded them that the foods were grown by farmers from the region. Much to my surprise, the redistribution of the fruits and vegetables was often the highlight of my day since the people at the respective community-based organizations made extra efforts to express their gratitude for the foods, often to a greater extent than customers at the farmers' markets. The following excerpt details the redistribution process after the close of the Ridgetop farmers' market.

I took the leftover food to the public housing high rise next to the Ridgetop Club. As I pulled into the driveway I was greeted by a white man in a

wheel chair sitting outside of the entrance to the apartment complex. He appeared to be a resident at the site, and I told him that I had some vegetables that I wanted to give away. I was asking for his permission to leave the vegetables at this site. He responded in a slur since he did not have any teeth and informed me that I needed to go inside the front entry doors and the guard would let me in. I walked in with the first basket of food and several residents followed me in. I told them that I had lots of good, fresh vegetables that I was leaving and they seemed excited. They followed me back to the recreation room, the place where I was told to leave the leftover food. I unloaded the basket and just as soon as the food reached the table the items were being picked up. One woman picked up at least five hot peppers and squash and zucchini. These are items that are hard to sell at the Boys and Girls Club farmers' markets but are picked up immediately when made available for free. I then went back to my car to get the boxes with the collard greens. The man in the wheelchair then asks me if I have tomatoes. I said "yes" and point out that I have red and green tomatoes. He says that he would like both kinds—he is going to fry the green ones tonight. I then asked him if he wants peppers or squash or collards and he said that he can't eat those because he doesn't have teeth.

In the trunk of my car, there were two more boxes of food and an African American man said he would help me carry the remaining food inside. This was a relief because I was tired and ready to be done for the night. We carried the food to the back area and three people followed us in. They asked where the food came from and how often I would be bringing it to the site. Once again, as soon as the

food was put on the table things were being picked up. The tomatoes were an especially big hit, perhaps because tomatoes require very little preparation and/or because they are soft and easy eat if one has dental problems. After I unloaded my arms, the people introduced themselves to me and shook my hand. I told them that I hoped to be back next week. (Field notes, June 28, 2007)

The process of taking the leftover foods to the various community-based organizations served as a capstone for each day, but instead of providing closure this process typically invoked a practice of reflection about the politics of food access, social justice, social transformation, and the social production of health.

### Conclusion

As evidenced by this analysis, the process by which produce was produced at the three Boys and Girls Clubs was active and interactive. The farmers' markets were performances in and to space; however, they were not passive processes of change. We did not "inoculate" the communities with farmers' markets. Instead, through a detailed and routinized process, sidewalks and lawns were re-appropriated into food oases. The farmers' markets became classrooms for experientially and materially-based health education sessions, and in this process, shifted the focus of nutrition education away from individuals and individual change to systems and social change. The farmers' markets also served as "health clinics", making fruits and vegetables available to hundreds of children, parents, and community members. While the markets were never defined as "health clinics", participants in this research often reported that they were interested in the farmers' markets because of the health benefits associated with the consumption of

fresh fruits and vegetables, a topic I explore in more detail in the next chapter. Finally, the farmers' markets served as field research laboratories for uncovering the social relations of power and privilege influencing one's ability to access healthy foods. The farmers' markets enlivened more questions than answers by creating a space for exploring and revealing the subtleties and nuances, challenges and tensions related to the politics of food access, several of which are examined in greater detail in the next chapter.

## CHAPTER V

### REAL, FRESH, AND GOOD

*Man, this apple is so bad not even a bird would eat it.*  
African American woman, Hopetown

As a participatory research project, it was critical that the people and groups intended to be the beneficiaries of the farmers' markets (children, youth, parents, and staff from the Boys and Clubs and community members) also had the chance to inform the research process, from the develop of the initial research questions and design to data collection, analysis, and dissemination (Israel, Schulz, Parker, & Becker, 1998; Minkler & Wallerstein, 2003). Various strategies and techniques were used to increase participant involvement in the research process. For instance, in the beginning stages of the project, children and youth from the Boys and Girls Clubs were invited to create advertising campaigns to recruit shoppers to the farmers' markets and in this process developed innovative cheers, commercials, plays, posters, and invitations. One commercial developed by high school students at the Hopetown Club began with several youth sitting on a park bench taking a break from the day's work. They were using the time to grab a snack before heading back to the grind. In the commercial, a young woman pretended to take a bite out of what was meant to be an apple (in reality it was a piece of white notebook paper colored with red crayon and then crunched up into a ball). Just as quickly

as she took a bite out of the apple, she spit it out and remarked under her breath, “Man, this apple is so bad not even a bird would eat it.”

The words of this adolescent African American woman capture much of what I introduce in this chapter. Indeed, her words remind us that food is not a neutral topic. Instead, the inanimate is value-laden. It conveys worth and meaning, it creates, it animates. With each meal and in each bite we are reminded both consciously and unconsciously of exactly who we are and where we fit in the world. Who, as this student so brilliantly highlights, is worth more than the birds? What does it mean to be a bad apple?

In contrast to the mealy bad apple introduced in the students’ commercial, the terms “real”, “fresh”, and “good” were used to describe another kind of food, food that was different than or even the opposite of the mealy apple. As was revealed in Chapter 3, the bad apple represented foods that were readily accessible in the community, the “other” to foods available at the Boys and Girls Club farmers’ markets. “Real”, “fresh”, and “good” were phrases invoked by research participants, farmers’ market customers, and children and youth at the Boys and Clubs to differentiate and evaluate foods into categories of good and bad, healthy and unhealthy, accessible and inaccessible, foods for us and foods for them. The content of an interview often shifted when participants narrowed their conversation to real, fresh, and good food. An African American woman from Lincoln Court, for instance, indicated that “now we’re going to have some problems” as she changed the direction of our conversation away from food in general to fresh foods in particular.

In Chapter 5, I unpack the definition of real, fresh, and good food based on an analysis of the qualitative data. Using grounded theory and situational analysis, two main themes related to real, fresh, and good emerged. First, real, fresh, and good foods were described as healthier and superior forms of food. Second, real, fresh, and good foods were described as costly in terms of finances and time. These themes combine to make real, fresh, and good foods prized or treasured possessions, foods with significant value and worth. I introduce and elaborate on each of these themes by providing direct quotations from the qualitative data as well as corresponding commentary. In addition, survey data are included to contextualize the analysis.

### Healthier

Participants were quick to categorize foods as being good or bad for your health. Foods such as fruits, vegetables (especially green leafy vegetables), yogurt, smoothies and juices, granola, oatmeal, high fiber cereals, “dark” bread, and honey were described as “healthy” food items whereas fast foods, fried foods, red meat, snack cakes, potato chips, and candy were considered to be “unhealthy”. The former were typically described as being “real”, “fresh”, and/or “good” foods while the latter were considered “horrible”, “bad”, “rotten”, or “junk”. There were several conditions under which foods were defined as “healthy”. First, quite simply, healthy foods were believed to make people feel good. Foods in general and healthy foods in particular were described as antidotes to a variety of health conditions ranging from diabetes to attention deficit hyperactivity disorder (ADHD). Second, healthy foods were considered to be superior to and substantively different than unhealthy alternatives. Participants reported that healthy foods taste better



and are more natural than unhealthy options. Moreover, healthy foods were considered to be produced locally or even homegrown rather than through national and international food production systems.

### *Food as Antidote*

On one extraordinarily hot afternoon in late July, an ambulance went racing past the Ridgetop farmers' market. Several youth from the Boys and Girls Club were at the market as this happened. In response to the ambulance, an African American adolescent shouted, "This is exactly why you need these fruits and vegetables!" Intrigued by his response, I asked the young man what he meant by his comments and he responded by saying that the ambulance would not have been needed if the person had been eating their fruits and vegetables. This adolescent, in his own way, was articulating one of the mantras of public health: an ounce of prevention is worth a pound of cure. Along the same vein but on another day, a group of female adolescents from Ridgetop developed a chant to convince customers to shop at the farmers' market. Standing along side the road, these young African American women shouted, "People are dying everyday because they don't have fruits and vegetables in their lives!" Over and over they chanted this message raising their voices and volume to lure potential customers to the farmers' market.

In both of these instances, the message is clear: fruits and vegetables are good for your health. They prolong life. They prevent disease. Fruits and vegetables as well as other real, fresh, and good foods were described as antidotes to a plethora of health conditions including diabetes, high blood pressure, various forms of cancer, heart disease, obesity, ADHD, indigestion, multiple sclerosis, and allergies. Many participants indicated

that they preferred to prevent and even treat health problems through food rather than through medication. An African American man from Lincoln Court stated: “With the right foods, you don’t have to worry about heart disease, colon cancer and other types of cancer.” The connection between the consumption of real, fresh, and good foods and health was a “no brainer” for many participants. Despite these beliefs, self-reported consumption of fruits and vegetables was quite low. Less than 10% of the survey participants (i.e., parents/guardians with children attending the Boys and Girls Clubs) reported that they consumed the recommended five servings of fruits and vegetables per day (see Table 13 and 14). This is in contrast to national and state estimates which indicate that almost 25% of these populations consume five or more servings of fruits and vegetables per day (see Table 5.2) (Centers for Disease Control and Prevention, 2005).

Even though food was associated with health, a number of participants indicated that not all foods make you feel good. In fact, much of the food accessible to participants was considered to worsen rather than improve health status, which may be one reason why most of the interview and survey respondents reported that their health status was “good”, “fair”, or “poor” rather than “excellent” or “very good” (see Table 15). The following excerpt from an interview with an African American woman from Ridgetop is focused on this concern. She stated:

It’s [food] causing obesity which we can watch the news all day long and hear about the brand new studies that come up day after day after day...we’re on the path of more harm than we are good. You know, when food can be linked to different types of cancers, you know and tumors and obesity and you know, all this kind of stuff, it’s not good.

As this participant highlights, food represented a complicated and complicating topic for many participants, both decreasing and increasing risk for morbidity and mortality. The nuances of healthy foods became more discernible as characteristics related to taste, composition, and food production practices were articulated. In this process, gradations of freshness, goodness, and healthiness were constructed.

*Table 13. Self-reported consumption of fruits and vegetables over the past week, survey participants.*

	<1 serving/day	1 serving/day	2 servings/day	≥3 servings/day
<b>Fruit, %</b>				
Total	72.9	12.0	7.5	7.5
Hopetown	28.9	6.3	40.0	30.0
Lincoln Court	48.5	75.0	50.0	40.0
Ridgetop	22.7	18.8	10.0	30.0
<b>Vegetable, %</b>				
Total	62.3	12.3	19.2	6.2
Hopetown	65.7	20.0	8.6	5.7
Lincoln Court	60.6	9.1	25.8	4.5
Ridgetop	62.1	10.3	17.2	10.3

**Table 14. Combined fruit and vegetable consumption over the past week among survey participants compared to national and state averages reported in 2005.**

	<5 servings /day	≥5 servings/day
Survey Participants, %		
Total	93.9	6.1
Hopetown	94.3	5.7
Lincoln Court	94.0	6.0
Ridgetop	93.1	6.9
Nationwide (States, DC, Territories), %	76.8	23.2
Tennessee, %	73.5	26.5

Source for national and state data: Centers for Disease Control and Prevention (2005).

*Table 15. Self-reported health status among interview and survey participants compared to national and state averages reported in 2006.*

	Excellent	Very Good	Good	Fair	Poor
<hr/>					
Interview Participants, %					
Total	10.0	20.0	60.0	10.0	0.0
Hopetown	25.0	25.0	50.0	0.0	0.0
Lincoln Court	14.3	28.6	57.1	0.0	0.0
Ridgetop	0.0	11.1	66.7	22.2	0.0
Survey Participants, %					
Total	15.2	35.6	43.9	4.5	0.8
Hopetown	19.4	33.3	38.9	8.3	0.0
Lincoln Court	14.9	35.8	46.3	3.0	0.0
Ridgetop	10.3	37.9	44.8	3.4	3.4
Nationwide (States, DC, Territories), %	20.7	34.4	30.4	10.9	3.7
Tennessee, %	20.3	29.8	31.1	11.8	7.0

Source for national and state data: Centers for Disease Control and Prevention (2006).

Superior

*Taste of Food*

Taste was an important and accessible tool for distinguishing superiority among food items because anyone could apply their senses to determine quality. One does not need to be a nutritionist or a health scientist to utilize the rubric of taste. Real, fresh, and

good foods were deemed “sweeter”, “juicier”, “meatier”, and/or “better”. An African American woman from Ridgetop described the taste of a farm fresh cantaloupe that she recently purchased at the farmers’ market by stating: “Oh, it was delicious. That’s what I’m telling you. It was so good and so juicy. You know how when you bite something, the juice drips from your lip, that let’s you know that it’s ripe and good.” This woman’s use of hyperbole serves as a tool for conveying value and worth, the superiority of her cantaloupe. This cantaloupe was so special to the interviewee that she insisted on stopping our interview, going into her kitchen, and showing off her prized possession. She then spent some time telling me when, where, and how this cantaloupe would be consumed.

Another participant, an African American woman from Hopetown, used similar levels of exaggeration to describe the foods she purchased at the Hopetown farmers’ market. She said, “I guess the first time I bought them [fruits and vegetables from the farmers’ market] and I cooked them, they were so good....to eat fresh food, you know. And it tasted so good. It tasted so different.” These comments were made in a tone and manner that mirrored the way one would talk about a loved one; there was passion and desire and longing as she spoke slowly and profoundly about the fruits and vegetables she purchased at the Hopetown farmers’ market.

The peaches for sale at the Boys and Girls Club farmers’ markets were perhaps the most recurrent reminder of the power of taste as a tool for ascribing value and worth. The sweet aroma of the peaches floated in the area near the farmers’ markets, tempting children and adults to find the means for accessing them. The children and youth at the Hopetown farmers’ market were particularly clever in this process. In the early part of the

summer they realized that bruised or damaged peaches were not sold at the farmers' market and were thus available to the student volunteers. As the summer progressed we had fewer and fewer "damaged" peaches and thus a smaller supply of "free" peaches to give away. This coincided with the peak season of the peaches, a time when their sweet aroma was even more intense. Despite this lack of supply, the students' desire for the peaches continued to rise. They needed to find an alternative pathway for accessing the peaches and thus began to "damage" a few peaches with a thumb-shaped imprint. Needless to say, the staff at the farmers' markets caught onto this scheme and found other ways to ensure that the students could access the peaches. At about this same time, one student began to use his own money to purchase peaches, which he described as being "to die for". This young man said that he "loved" the peaches so much that he wanted to turn into a peach, to materialize as a peach. He said: "I will turn into a peach and eat myself. After I die, I will put myself in the ground and grow."

### *Composition of Food*

Although participants reported that they did not have the language or terms to accurately describe the composition of food items, many indicated that foods were nevertheless healthier if they did not have "all that extra junk in it". When asked to describe the foods available through the "American food system" many participants used terms such as "unnatural", "processed", "filled with chemicals", "flavorless", and "dirty". Most participants indicated that they were "scared" or "afraid" of foods produced through the American food system. The following excerpt from an interview with an African American man from Ridgetop captures this concern. He stated:

I prefer the all natural food. I mean, if you got food that's been sprayed and tampered with, and shot all up with stuff, I think that makes you sick. I mean, it makes you, far as, you know, you don't know what kind of effect it's going to have on you when you eat it, or it gets inside your body, but I think the food that's sprayed with all that stuff, it ain't good for you. It can't be. I think that's the leading cause of us having high blood pressure, diabetes, and all that stuff. The food that we eat. The food that we eat is a cause of something that I think, I don't know for sure, now, but it causes something.

Although this man expressed a positive valuation of "all natural" products, when I asked him if he buys these types of foods he said: "Ain't no sense in me sitting here telling you no fib. I don't." His response highlights the complexity and interconnectedness of food access, a concept that not only includes complex and convoluted food production systems but also includes complex and convoluted socio-economic systems.

### *Food Production*

Participants indicated that the unknown and ambiguous nature of food could become known or realized through food production processes that were local in scale. Many participants, however, reported that the American food system is anything but local. Instead, a globalized food system was described and participants were quite concerned about the health effects of this system. This concern was particularly salient because of recent food scares wherein various products such as spinach and meat were found to be contaminated with life threatening bacteria (Preston & Davey, 2006; Wald, 2006). In addition, many participants were aware of and concerned about the recent



execution of the head of China's Food and Drug Administration.<sup>65</sup> Reflecting on these issues, a white woman from Lincoln Court said: "We [Americans] are at the mercy of other parts of the world. One always assumes that one's food is regulated by the government, you know, inspection wise, and I don't think that's true, so our food is not a safe thing."

Through relationships, however, food became more understandable, safer and better. Interactions with food producers such as farmers at a farmers' market or neighborhood gardeners inspired a sense of security and comfort among many participants. In contrast to "being at the mercy of other parts of the world", the white female participant from Lincoln Court took great comfort in her neighbor's produce. She stated, "Unless I get it [my tomatoes] from [name of her neighbor] down the street, I really don't know what this food has done and where it's been and what country it's seen."

Although the use of local foods at the Boys and Girls Club farmer' markets represented a tension in this project (see Chapter 4), locally grown or homegrown food were nevertheless described as the pinnacle of real, fresh, and good food. When asked if he preferred food grown in Tennessee versus foods grown in another part of the world, an African American man from Ridgetop stated:

I would choose the Tennessee food, because it's grown here, you know, and I would feel comfortable. I would feel comfortable about eating it, because I know where it was grown at. I would prefer the vegetables that's grown here. I would prefer that than the grown vegetables way over in Chile or Australia.

---

<sup>65</sup> The head of the Food and Drug Administration in China was executed because he accepted bribes to approve damaged and untested food and drug products (Cyranski, 2007)

Locally grown foods were considered to be safer, fresher, and healthier. In addition, many participants indicated that the practice of purchasing locally or homegrown foods served as a way for expressing pride for one's region or community. An African American man from Lincoln Court equated buying locally grown foods to supporting the local football team by stating:

You know, it's just like me supporting the home football team. You want to support the local growers because they're here. They are a part of this area and this community so you want them to be able to survive and thrive and actually excel. Because if they're able to do good, then guess what....maybe more things come, you know, prices come down, whatever but, yeah, it's important because you want...I want to see the people around us doing as good as they can.

In short, real, fresh, and good foods were relational. They were more than a commodity.<sup>66</sup>

### Costly

Almost every participant indicated that real, fresh, and good foods have considerable monetary worth. In fact, one African American man wanted "to go on record" in this research as saying that the cost of real, fresh, and good food is the biggest barrier to consuming these items. The expense of real, fresh, and good food was associated with three factors. First, these items were perceived to cost more than unhealthy alternatives. Real, fresh, and good foods were often described as the *most* expensive food items at the grocery store or restaurant. Second, families living on a fixed income or low-income indicated that the addition of real, fresh, and good food to their

---

<sup>66</sup> In capitalist societies such as the United States, food is a commodity, "an object whose exchange creates distance and differentiation" (Counihan, 1999, p. 113).

grocery carts and dinner tables was constrained by their pocketbooks. Providing real, fresh, and good food seemed incommensurate with the goal of providing one's family with a steady supply of food throughout the duration of the month. Third, participants indicated that the time costs associated with procuring and preparing real, fresh, and good food were high. In contrast to "convenient" or "fast" foods, real, fresh, and good foods were often seen as requiring more time to locate, purchase, and prepare.

### *Price Tags*

Parents and community members reported that the cost of real, fresh, and good food was "off the chain", "outside the ballpark", "expensive". According to national-level data, calories from healthy food options such as fresh fruits and vegetables come with a hefty price tag. For every dollar spent on fresh carrots, for instance, consumers get about 250 kilocalories while that same dollar on potato chips would provide a whopping 1,200 kilocalories, almost five times as many calories per dollar (Drewnowski & Spector, 2004). Although parents and community members did not have the technical skills (or at least they did not reveal them during the interview) to conduct the type of analysis that Drewnowski and Spector (2004) conducted, respondents were nevertheless able to articulate a similar understanding regarding the direct relationship between the costs and healthfulness of food. As eaters and feeders, parents and community members were quite familiar with the prohibitively high price tag on real, fresh, and good food. An African American woman from Lincoln Court reported that cost was a major barrier to purchasing healthy foods by stating: "We try to get as many fresh fruits and vegetables as we can. Sometimes when you go to [name of grocery store], it's just, you know,

sometimes it's just totally priced out of the ballpark for me. Then, if that happens, I resort to canned vegetables, but I prefer the fresh." This sentiment was mirrored by many participants including an African American woman from Hopetown. She stated: "I have to try and feed a lot of people with a little money and that's difficult doing all fresh fruits and vegetables because it costs more than canned stuff; even though it's [fresh fruits and vegetables] healthier, it costs more."

Price tags were often the central concern of customers at the farmers' markets. People frequently drove by the markets, rolled down their windows, and shouted across the lawn or sidewalk to find out about the food prices: "How much for the watermelon?" "What are your greens going for?" "Do you have any specials or deals?" These questions were so frequent that the children and youth at the Boys and Girls Clubs decided to make a poster at the beginning of each market to list the prices of the fruits and vegetables available for the day. In general, shoppers were satisfied with the price tags at the farmers' markets describing them as "reasonable" and even "cheap" and were often surprised by the amount of food they could purchase with limited funds. In reference to the costs of foods at the farmers' markets, an African American customer at Hopetown described how she used her spare change to shop for fruits and vegetables after picking up her daughter from the Boys and Girls Club. She said:

I ain't have a lot of money but I told my daughter I thought I'd go out here [to the farmers' market], to see whatever I can get for \$2.00, that's what I'm going to get. I told her, "You know, I'll probably get one thing, though." So when y'all said "two for a dollar," I'm like, "Yeah!"

This parent was amazed by the purchasing power of her money at the Hopetown farmers' market. She anticipated that her \$2.00 could be used to buy just one item, however, her money allowed her to purchase four items: two squash and two zucchini.

Even though foods at the farmers' markets were priced at a rate that was intended to be a "fair price" for the community,<sup>67</sup> a handful of customers were nevertheless unable or unwilling to purchase foods from the farmers' markets because of the price. The following excerpt from my field notes highlights the role cost played in the shopping patterns of one customer at the Ridgetop farmers' market:

Within seconds of displaying the fresh fruits and vegetables on the tables at the market we had our first customer, an elderly white man who lives across the street from the Ridgetop Boys and Girls Club. He is a repeat shopper at the Ridgetop farmers' market and he follows a similar pattern with each visit: he wears the same clothes (jeans and a white undershirt), engages in the same conversation (he talks about his garden), and focuses on the same products (his begins his shopping excursion with the hot peppers). As he mingled around the market he quietly asked "How much for the peaches?" and I responded "two for \$1.50." He said, "That's too high, I can't afford that." I knew the price was high; however, the cost of peaches went up this year because of the late freeze in the southeastern region of the U.S. that resulted in the loss of many farmers' crops of peaches. Plus, this week's peaches were the first fruits of the season so they were a bit more expensive than they will be within the next few weeks. I relayed this information to the man and he seemed to understand, after all he was a gardener and knew the

---

<sup>67</sup> On average, foods sold at the Boys and Girls Club Farmers' Markets were priced at a rate that was less than or equal to food prices at surrounding grocery stores as well as the municipal farmers' market.

costs associated with growing food. He said, “I know the peaches are worth the price but I just don’t have the money to buy them.” (Field notes, June 28, 2007)

“I know the peaches are worth the price but I just don’t have the money to buy them.” Comments like this were emotive to the staff at the farmers’ markets, causing many of us to become aware of and upset by our involvement in a system of injustice. Interactions such as the one described in the previous excerpt from my field notes illuminated the fact that while the farmers’ markets were intended to increase access to fresh fruits and vegetables they nevertheless denied access to some customers. One research assistant reflected on this phenomenon by asking the following question in his field notes: “Are our prices fair?” He then followed up by writing, “I believe there is really no such thing as a ‘fair price’ because everyone has different incomes.” The single mother with six children, the director of the Boys and Girls Club, community members dressed in suits and driving high end cars, a pregnant woman waiting for the bus after her visit to the free health clinic—these were the customers at the farmers’ markets. They were different in many ways, not the least of which was their income.

### *Pocketbooks*

Price tags were problematic, at least in part, because of the contents (or lack thereof) of one’s pocketbook. Many respondents reported that household income constrained their ability and the ability of others to purchase real, fresh, and good foods. The average household income among interview and survey participants varied with the majority reporting that they earned less than \$40,000 per year (see Tables 2 and 3). An African American man from Hopetown described this relationship by stating:

I think that there's a direct correlation with the smaller the amount [of money] that you have, or the smaller budget you have, the smaller access [to food], or the lack thereof. And you have a parent with five kids, one monthly income, she's going to go and get all the things that will fill the cupboard, and they may not be the healthiest things, but they will eat every day for a month, until the next income comes in. So I think the lack of income [relates to] the lack of fresh and healthy and nutritional food that you're going to see in a particular home.

Rather than seeing lack of consumption of “fresh and healthy and nutritional food” as solely the function of individual choice, this participant was trying to argue that one's income constrained choice and thus consumption. He assumed that parents were logical actors trying to find a way to “fill the cupboard” and ensure that food would be on the table three times a day, seven days a week, each day of the month. This interviewee goes on to say that people are “doing the best with what they have” even if this means that cupboards are filled with “unhealthy” but “cheap” food items such as bologna, hotdogs, canned foods, and frozen dinners.

For low-income or fixed income individuals, the act of pushing a cart or buggy down the aisles of the grocery store served as a regular reminder of what was and was not available to individuals and their families. Foods were quickly organized into categories of affordability resulting in entire sections of the grocery store as being “out of bounds” or “off limits” to shoppers because of budgetary constraints. Grocery shopping was described as a thoughtful and difficult process for many families trying to balance desires for purchasing real, fresh, and good food with the reality of their pocketbook. An African American woman from Ridgetop stated:

I'm on a limited income and ah, it [my income] determines whether I'm gonna buy apples. [Even though] we love apples, we like apples in this house, I may buy one bag of apples for a month and I won't go back to the store because I don't have money to pay five and six dollars to, you know, get a five pound bag of apples or a three pound bag of apples.

Similarly, an African American woman from Lincoln Court indicated, "You know, when you're trying to make it, you just get what works", even if "what works" is potentially harmful to your health, increasing risk for a number of health conditions.

Food shopping for low-income or fixed income peoples represented a recursive process of sacrifice, the most notable of which was the sacrifice of health. An African American man from Lincoln Court described this type of sacrifice by stating:

Economics plays a great factor in it [shopping patterns] because if you don't have the money you have to get what you can in order to survive. So, you have to sacrifice healthiness in regards to foods. So, I mean, economics plays a great influence, because you have to be able to get enough to survive or to feed your family.

Sacrifice is what you do to stay alive, to survive. An African American woman from Hopetown indicated that she made sacrifices that went against her better judgment when she and her family were in "survival mode". She said:

Like, I know all this [information about nutrition] but it still doesn't change the fact that, because I was in a survival mode, that I ate a lot of canned goods, even though I knew they were high in sodium. I ate a lot of pork, even though I knew



that it leads to high blood pressure and you know, I mean, I was eating a lot of things that I knew were not good for me.

Survival mode and the sacrifices associated with it was a common theme among the interview participants, it was understood as a time of transition. To use the words of an African American woman from Hopetown, survival mode represented a period of “crawling before you walk”. In many cases, however, food practices taken up during times of sacrifice and survival included activities associated with lack of life, lethargy, deadness. It was therefore difficult to understand how one transitions from survival to security when this transition is based on a diet that is “horrible”, “bad”, “rotten”, “damaged”, “unnatural”, “unhealthy”, “junk.” What exactly would you become through the consumption of these food items? Would you transition from unnatural to real, rotten to fresh, damaged to good?

### Time Consuming

In addition to the financial costs associated with real, fresh, and good food, participants also discussed the time costs related to the procurement and preparation of these food items. In almost every interview, time was mentioned as a barrier to accessing real, fresh, and good food, foods described as the opposite of “fast foods”. Time costs were intricately related to the spatiality of real, fresh, and good food; access to private transportation; and work schedules.

### *Spatiality of Real, Fresh, and Good Food*

Data from the food mapping project (presented in Chapter 3) as well as feedback from interviewees combine to highlight that real, fresh, and good food was hard to find within the confines of the communities surrounding the Boys and Girls Clubs. As a result, taking a trip to the grocery store required time to get out of the community as well as time to shop. To save time, about half of the interview respondents reported that they go to the grocery store just one time per month, however, they reported more frequent trips to local convenience or corner stores. An African American woman from Ridgetop, for example, reported that she only goes to the grocery store one time per month but walks to the local corner store one time per day.

In addition to geographic distance, participants indicated that time costs are exacerbated by the slow service and longer checkout lines typical in many of the food stores located near the Boys and Girls Clubs (and in low-income communities in general). The following excerpt from an interview with an African American man from Lincoln Court highlights this pattern. He said:

I've had a couple of times that I've gone in to [name of chain grocery store] and they would never seem to have enough employees there. So you've got long lines and you're sitting with maybe three items and you have to wait 30 minutes before you can get through the lines.

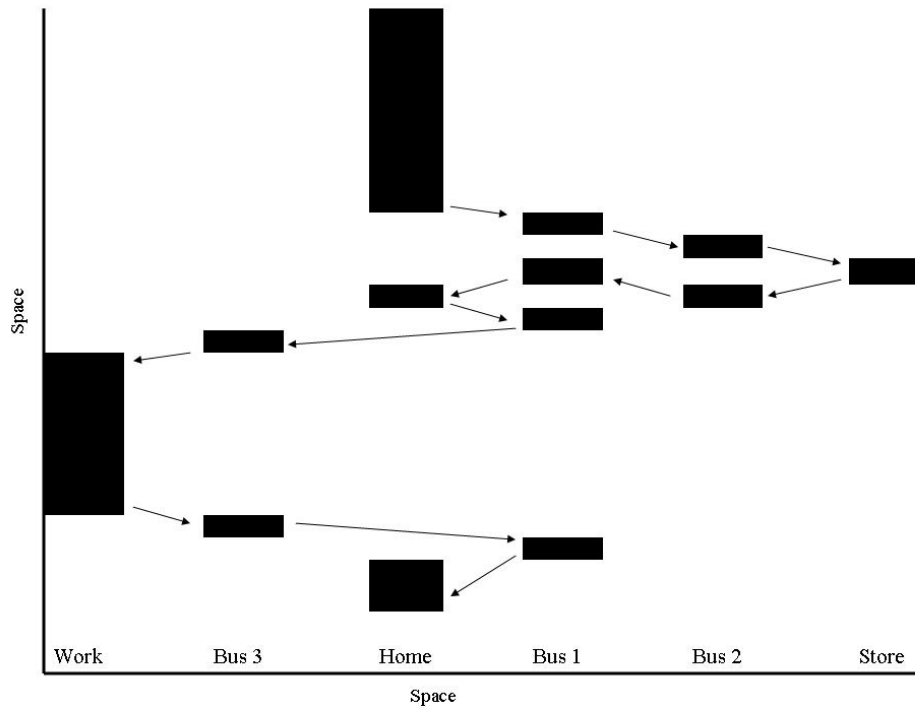
### *Public versus Private Transportation*

Food shopping was anything but convenient for people without their own form of private transportation. An African American woman from Ridgetop indicated that, in the best case scenario, traveling to the grocery store via city bus takes about one hour. The trek would most certainly take longer if she inadvertently loses track of time while shopping or if she ended up in a slow checkout lane, two plausible deterrents that would cause her to miss the bus and would therefore add time to her shopping excursion. Sticking to a tight timeframe was a little easier, however, because she could only purchase a small quantity of food. Her shopping patterns were constrained by her carrying capacity as she would need to cart her grocery bags on the bus and on her walk home. This, in turn, increased the amount of time persons without private transportation needed to expend on grocery shopping.

Figures 33 and 34 provide a visual representation of the time-space aspects of food shopping for someone like the African American interviewee from Ridgetop, a person without private transportation. Using an approach developed by Giddens (1984), these time-space maps provide a heuristic for examining time costs related to food access. In both figures, viewers are looking down onto the maps. The boxes represent various “stations” in which food practices are embedded including the home, three different buses (bus 1, 2, 3), grocery store, and work. Box size is related to the amount of time spent in a specific station. In Figure 33, all of the boxes are black representing an ‘obstacle free’ time-space pathway for one individual. In Figure 34, the boxes are shaded in three different hues with black representing the original ‘obstacle free’ path, grey representing the new schedule due to missing the bus after frequenting the grocery store,

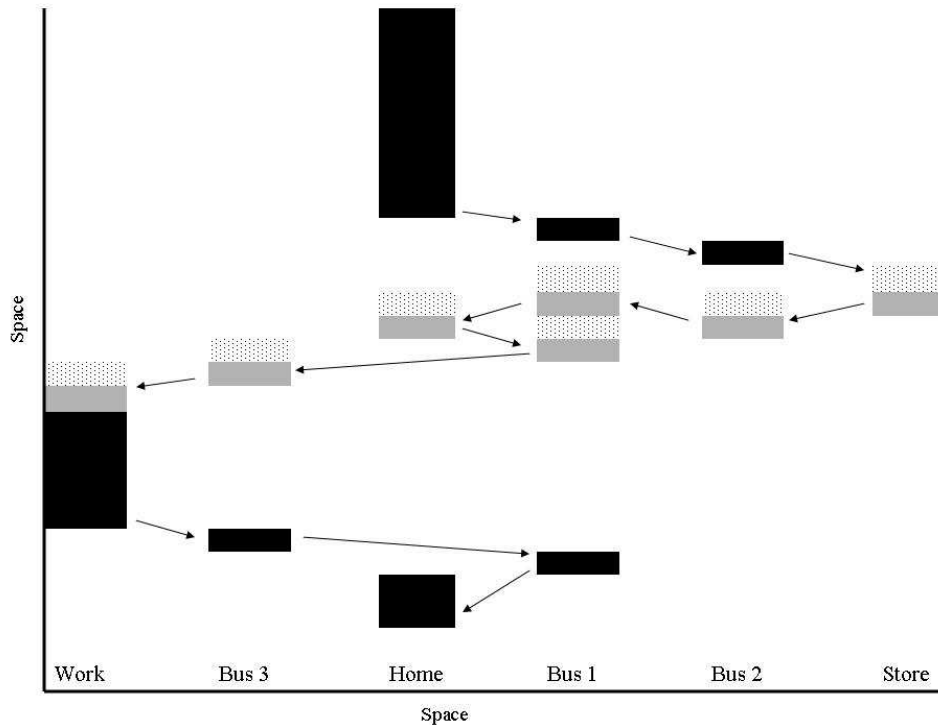
and polka dots representing the time-space differences between the original and new path. The arrows represent paths of time-space movement and arrow length is related to the amount of time required to move from one station to the next.

Both maps begin and end at the same station, the home, and depict travel to the same locations. Three unique periods of time are spent at home: in the sleeping and morning hours, returning from the grocery store (Store), and after work. And eight discrete periods of time are spent on the bus. This individual must take two different buses (Bus 1 and Bus 2) to travel to and from the grocery store. As the African American participant from Ridgetop noted, this time-space sequence takes, in the best case scenario, about one hour (home, bus 1, bus 2, grocery store, bus 2, bus 1, home). However, the probability of being delayed or deterred at the grocery store is, for a number of reasons, quite high. If, for instance, this individual ends up in a long check out line or if his or her food stamp reimbursement is questioned, then the accrual of time may result in missing Bus 2 which in turn causes this individual to miss Bus 1, arriving at home too late to catch Bus 1 again on the commute to work. The spiraling effect of the long line at the grocery store puts the individual at risk for being late to work which means he or she will be compensated one hour less pay. Moreover, this event is filed in the individual's employment record exasperating the chance that he or she will be fired in the upcoming job cut. After work, the time-space cycle continues as the individual catches Bus 3, transfers to bus 1, and walks back home.



*Figure 33. Spatiality and temporality of food shopping patterns for person without private transportation.*

Caption Figure 33. Box size = amount of time spent in specific location; Arrows = paths of time-space movement; Line length = amount of time required to move from place to place.



**Figure 34. Spatiality and temporality of food shopping patterns for person without private transportation, missed the bus.**

Caption Figure 34. Box size = amount of time spent in specific location; Box shading: grey = new schedule due to missing the bus, black = original schedule, polka dots = time-space differences between the original and new path; Arrows = paths of time-space movement; Line length = amount of time required to move from place to place.

These maps illuminate the complexity of food access by revealing the myriad social systems associated with mundane processes such as trip to the grocery store. Future explorations of the social relations and systems of power influencing food access may benefit by including the ways that each of these systems individually, additively, and/or synergistically combine to make food items accessible and inaccessible to people. Moreover, by situating food access within many spheres of influence, food-related health conditions such as obesity and food insecurity, may be understood and addressed through social rather than individual change processes. Accordingly, obesity prevention

interventions would, for example, move away from teaching people to choose sensible portions of nutritious meals that are lower in fat, one of several recommendations made by the NIH (National Institutes of Health, 2006), to developing better and more efficient public transportation systems because systems of transport are part of the social production of food-related health conditions.

### *Work Schedules*

Participants overwhelmingly indicated that their work schedules negatively influenced their ability to access real, fresh, and good foods. In an effort to find “anything quick” to feed themselves and their families, participants reported that they regularly consumed meals that could be heated in the microwave or purchased at a fast food restaurant. Although most participants avowed that these foods were “horrible” or “bad” they were nevertheless ideal because they were fast and portable, easy to access in between the busyness of work and family life. An African American woman from Ridgetop described this phenomenon by stating:

People don't have no time to sit down and smell the roses. In other words, enjoy a good meal with your family or friends or whatever. Everything is so on the go. For breakfast, you'll stop at [name of fast food restaurant] and pick up a biscuit, a sausage biscuit and maybe a cup of coffee and then you go. Lunch, you're back there for maybe a hamburger and some fries. Now, what kind of meal is that? It's not a meal. It's just some food to sustain you for the day. When evening time comes, you may come home and put a TV dinner in your microwave and you're gone again. You don't take time to smell the roses, like I said. That's just what's

happening with the way the food is today and they package everything for you.

Everything is so convenient and everything that's packaged is not good for you.

The paradox of convenience is highlighted by this participant as she articulates the ways in which conveniences in time translate into *in*conveniences related to one's health and/or financial status.

The only interviewee that did not mention time as a barrier to accessing real, fresh, and good food was a retired African American woman from Ridgetop. Interestingly, the food shopping patterns of this grandmother were complex and immensely time consuming yet her process of coupon clipping, sale watching, and bargain shopping was perhaps the thriftiest in terms of financial costs. She knew about every food sale in town—when they started and ended and any special rules or restrictions—and planned her weekly trips to the grocery store based on the sales, which often included stops at three or four different food stores.

The relationship between work schedules and food access was particularly salient for many of the female interviewees who reported that despite working long hours and/or more than one job, they still did not achieve pay equity compared to their male counterparts. When asked how gender influences access to food, an African American woman from Hopetown provided the following response:

I think that gender does affect our food choices... And in terms of access to food, now [if you are] a single female...if you have children, your finances are different. For just a male that is single and often for a male who has children...it just seems like there is an economic disparity based on gender. So often, men



make more money than women anyway, which means that they have greater resources for food.

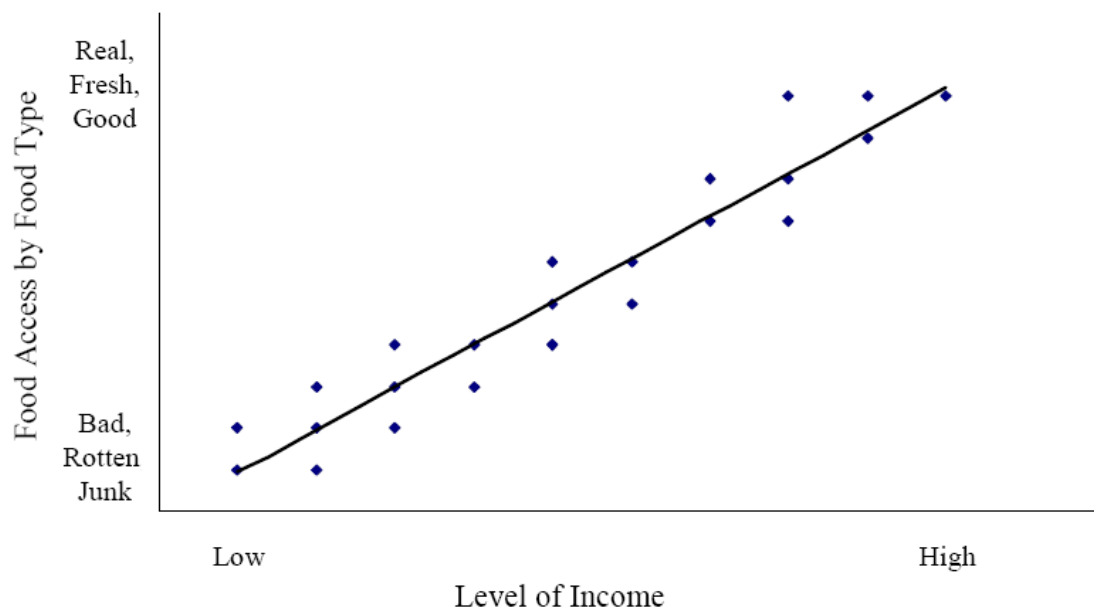
The economy of food access, according to this participant, is entwined in relations of power created and recreated through the socially constructed categories of gender and class as well as through their intersections with other social categories such as race, nationality, disability, and so on. This perspective corroborates with national-level data revealing that about one in three single, female-headed families in the U.S. are unable to provide for their food needs on a regular basis (Nord, Andrews, & Carlson, 2007).

### Conclusion

Returning once again to the primary research question guiding this dissertation—What are the politics of food access in food insecure communities?—the findings from this analysis reveal a nuanced and complex depiction of the economy of food access. And, in turn, these findings also contribute to the expanding body of research that purports health is largely produced through socio-economic factors (e.g., Evans, Barer, & Marmor, 1994; Eyer, 1984; Feinstein, 1993; Haan, Kaplan, & Camacho, 1987). This analysis provides an in-depth examination regarding one of the ways—through food and food practices—gradients in health across varying socio-economic levels are perpetuated. Through day-to-day practices related to food production, distribution, procurement, and preparation, relations of power are created and recreated and in this process the health of populations are produced and reproduced.

In this analysis I highlighted how real, fresh, and good foods—foods that were understood to promote health and prolong life—were also described as foods with high

price tags thus making these products relatively inaccessible for people trying to make ends meet with limited funds inside their pocketbooks. Moreover, the time costs associated with accessing foods, particularly for those living in communities characterized as having high rates of financial poverty as well as for those without private transportation, exacerbated the financial aspects of food access. These data combine to illuminate a direct relationship between economic status and food access such that those with low-income have more access to foods that are considered to be “damaged”, “rotten”, and “junk” whereas those with higher income have more access to “real”, “fresh”, and “good” foods (see Figure 35).



*Figure 35. Visual representation of gradations in food access by level of income.*

---

This analysis also sheds light onto the valuation of human agents and human bodies through food access. It allows us to deconstruct the physical, the concrete, and the

material as being more than inanimate objects. Rather, food (and shelter and clothing and so on) is always already a conveyer of the social. The material is as much alive and animated as the human agents for whom these objects are designed to serve. The “bad apple” referenced by the young African American woman from Hopetown must therefore be understood as at once being human and nonhuman, physical and social, personal and political. If, as the aphorism claims, “You are what you eat”, then if you eat the “bad apple” then you also risk becoming a “bad apple”. This analysis highlights that for persons living on a low-income, the economy of food access increases the chances that one will consume (and perhaps become) the “bad”, the “rotten”, or the “junk”. In contrast, persons earning higher incomes experience greater access to “real”, “fresh”, and “good” *foods* and therefore through food practices have increased opportunities to materialize as real, fresh, and good *people*. Thus, the mechanisms that constrain, limit, or deny access to food including the social, political, economic aspects of food access are also mechanisms for maintaining social hierarchies, hierarchies related but not limited to class, caste, race, and gender (Counihan, 1999). The manifestation of these relations of power perpetuated through food and food practices are revealed in disparities in food-related health conditions such as obesity and food insecurity that tend to affect peoples representing marginalized social locations based on race, class, gender, and their social and spatial intersections.

## CHAPTER VI

### DISCUSSION

*A major obstacle to achieving equality in health status is a belief in its impossibility, based on a deeper belief that progressive social change is impossible.*

*It is not.*

Hofrichter, 2003, p. 38

Turn on the radio, open the newspaper, peruse the internet and you will quickly surmise that the public's health is in despair. Despite spending more money than any other nation in the world on healthcare, according to the World Health Organization (2000), the performance of the U.S. healthcare system ranks 37 out of 190 nations. This ranking influences interpretations of the U.S. healthcare system, which is frequently described as being "high on cost, unequal in access, and average in outcome" (Shi & Singh, 2005, p. 10). Of particular interest to my dissertation is the "unequal in access" aspect of this attribution, a concept that was institutionally recognized and publicized by the U.S. government in *Healthy People 2010* (U.S. Department of Health and Human Services, 2000). Even though multiple billions of dollars<sup>68</sup> and inordinate amounts of time have been appropriated to address the health of Americans, meaningful changes in health outcomes for marginalized populations have yet to be achieved (Schroeder, 2007). Accordingly, changing the status quo of health inequity in the U.S. may appear to be an "impossibility", as Hofrichter (2003, p. 38) points out.

---

<sup>68</sup> The National Institutes of Health invests over \$28 billion annually to address the health of the American public (Health, 2007).

The purpose of this dissertation, however, was to explicitly challenge this notion of impossibility through a research process that was grounded in the material realities of a specific time-space context. And in this process, my goal was to create a “discourse of resistance and possibility” (Hofrichter, 2003, p. 39), one that is not only grounded in the material but that is also informed by and through collective action. Through a research process that was at times messy and convoluted—like all processes of social change<sup>69</sup>—this research strives to tell a new story regarding the social production of health. Just as the research process was messy and convoluted, so too are the findings. The results from this study do not fit into discrete categories or dichotomies. There is not a “yes” or “no” answer to the question: What are the politics of food access in food insecure communities?

In this concluding chapter I briefly review three of the major contributions made in this dissertation. I begin by reviewing materialist praxis, the research methodology introduced and then used in this research. Following this overview, I explore the ways in which the introduction of farmers’ markets at three Boys and Girls Clubs in Nashville, Tennessee, served as a tool for recreating relationships between food and food practices. Lastly, I recapitulate several of the emergent themes regarding the relations of power influencing food access. Following this summary, I highlight the limitations and strengths of this dissertation and conclude the chapter by offering several ideas for future research.

---

<sup>69</sup> Social changes resulting from the relentless efforts of collective action groups (e.g., Civil Rights, Suffrage Movement, Women’s Rights) did not occur because people followed “the protocol for change” but rather happened because people responded quickly and creatively to current issues and events. In fact, following “the protocol” may have interrupted or aborted rather than facilitated processes of transformation.

## Introduction and Application of Materialist Praxis

In this dissertation I introduced a new theory-methods package, “materialist praxis”, a research process that *begins* by addressing the material conditions of specific time-space contexts through ongoing cycles of research, reflection, and action. Although I did not explicitly seek to develop a new methodology as a part of this dissertation, I began to realize that the two theoretical and methodological perspectives informing my research approach—population health perspectives and praxis-oriented research—both had shortcomings. Population health was limited because of its inattention to action while praxis-oriented research was limited because of its inattention to material realities. Materialist praxis addresses these concerns by *activating* population health perspectives and by *materializing* praxis-oriented research. In this dissertation, I applied materialist praxis to address the topic of food and food access. However, I envision materialist praxis as a generalized methodology that may be applied to examine and address a range of topics that are influenced by the physicality and sociality of the material. A few examples of future research using a materialist praxis approach will be introduced at the end of the chapter.

In Chapter 1, I articulated three propositions for using a materialist praxis approach for studying the social production of health. The three propositions stated:

Proposition 1 An exploration of material dimensions facilitates opportunities for exploring the social relations of power influencing population health.

Proposition 2 The material conditions of communities (e.g., presence of sidewalks, supermarkets, broken windows, vacant lots) are vectors through which health is transmitted.

Proposition 3 The material is implicated in the creation and recreation of social structures and social practices related to health.

Taken together, these propositions provide support for the use of a research approach that focuses on the materiality of phenomena. However, these propositions are necessary but insufficient for materialist praxis. They must be integrated into recursive cycles of research, reflection, and action that are participatory and interactive, situated and localized, reflective and attentive to power, and that take into account the role of human agents as well as social structures in the production and reproduction of health. This materialized and activated approach to research will not only provide opportunities for learning about the social relations of power influencing the health of the public but will also facilitate actions to redress injustices and inequities.

Materialist praxis facilitates opportunities for both understanding and addressing social determinants of health because this research process is embedded within ongoing cycles of reflection and action. This allows researchers and research participants—both of whom are working as collaborators and “co-learners” in the process—to respond to issues and challenges as they arise and reformulate research processes to take into account the dynamism of any context (research or otherwise). Furthermore, the iterative and interactive process of research employed through materialist praxis facilitates opportunities for sustainability and transferability from research-to-practice. This is in

contrast to many evidenced-based models for health promotion and disease prevention that have a tumultuous relationship between theory and practice since many of the methods employed to develop these models (through randomized controlled or quasi-experimental trials) are not replicable in community settings (Dzewaltowski, Estabrooks, Klesge, Bull, & Glasgow, 2004; Glasgow, Lichtenstein, & Marcus, 2003; Green, 2003).

In this research, however, the materialist praxis research approach facilitated opportunities for bridging the hyphen between theory and practice and thus facilitated opportunities for ensuring that the life expectancy of this project extends beyond the research phase. It also promoted opportunities for a range of stakeholders—from the directors of the Boys and Girls Clubs to the children and youth operating the farmers’ markets to the parents and community members shopping at the farmers’ markets—to take ownership of the research process and outcomes. To be sure, one of the most important albeit unplanned outcomes of this research was the creation of a commercial by the children and youth at the Ridgetop Boys and Girls Club (see Chapter 4). In this commercial the children and youth “market” their farmers’ market to the broader community. This video was subsequently uploaded onto You Tube, an online and free source for sharing video and other digital media. The video has proved to be an accessible and effective method for sharing information about this research with the public<sup>70</sup> and is currently being taken around the U.S. as a part of a training program organized by the director of the Ridgetop Boys and Girls Club.<sup>71</sup> This video will perhaps have a greater impact on understanding and addressing the politics of food access in food

---

<sup>70</sup> Upon watching this video, one individual made a donation of \$10,000 to the Ridgetop Boys and Girls Club because he was impressed with the candor of the young men in the video (Darnell, J., May 7, 2008).

<sup>71</sup> As of May 2007, the You Tube commercial has been used in Boys and Girls Club training programs in Georgia, Mississippi, New Mexico, South Dakota, and Texas (Darnell, J., personal communication, May 27, 2008).



insecure communities than any report or publication that will come out of my dissertation; not necessarily because of the content of the video but rather because of the exchange of power and ownership it exemplifies.

### Farmers' Markets as Theaters for Change

In this research, my goal was to not only examine the politics of food access but to also find ways to change the material conditions of communities as a part of this broader process of understanding. Thus, it was through the performance of farmers' markets at the three Boys and Girls Clubs that the topic of food access in food insecure communities was further explored. Space was central to this process of knowledge production and social transformation. Through the development of farmers' markets, changes were first and foremost made to specific time-space contexts (three Boys and Girls Clubs) rather than to people within those spaces—fresh fruits and vegetables were made available in settings that had limited or no access to these items (see Chapter 3). This is in contrast to many public health intervention strategies that tend to intervene on individuals through activities aimed at changing knowledge, attitudes, skills, beliefs, and behaviors among specific groups of people (Wallack & Lawrence, 2005). Under this (biomedical) paradigm, food-related health conditions such as obesity are addressed through interventions that aim to increase knowledge about the food pyramid and serving sizes, change attitudes and beliefs about the taste and/or value of fruits and vegetables, and enhance cooking skills among individuals. In so doing, the promotion of health is divorced from the socio-political context in which individuals are located and health is produced.

This dissertation, however, is premised on the growing body of research that suggests health is socially produced (e.g., Cassel & Tyroler, 1961; Haan, Kaplan, & Camacho, 1987; Kawachi & Berkman, 2003b; LaVeist, 2002; MG Marmot & Syme, 1976; A. J. Schulz & Mullings, 2006). While I concur that health is produced as much or more so through social rather than individual factors, I believe it is important to steer clear of inadvertently dichotomizing social from individual determinants of health. To address this concern, this dissertation was informed by the theory of structuration (Giddens, 1984), a theory that purports a recursive and responsive relationship between human agents and social structures. Human agents and social structures are considered to be malleable rather than fixed, each influencing the other in an iterative process of change. Hence, one of the assumptions guiding this research was that changes to space are always already implicated in the creation and recreation of human agents because changes to social structures influence the social practices and discourses of human agents and these changes, in turn, influence social structures.

The establishment of farmers' markets at the Hopetown, Lincoln Court, and Ridgetop Boys and Girls Clubs re-appropriated space, creating a new theater "within and upon which the spectacle of life plays out" (Mitchell, 2000, p. 124). In this process, several lessons were learned regarding the use of space as a tool for addressing the social production of health.

### *Farmers' Markets as Classrooms*

By transforming the Boys and Girls Clubs from youth-serving organizations to produce stands, we also transformed health education processes. Even though traditional nutrition education classes were offered as a part of this research project, these classes were not considered to be the primary pathways through which changes would occur. Rather, the nutrition education classes facilitated opportunities for developing trust and rapport with the students and staff at the Boys and Girls Clubs so that more and more children and youth could become involved with the farmers' markets. This was an important part of the research process because the primary mode of education occurred *at* the farmers' markets rather than through the traditional nutrition education classes. Through an experiential learning opportunity, the students were able to interact with the fruits and vegetables. By seeing and touching and even tasting the foods, information exchange shifted from focusing on the food pyramid to the food system, from serving sizes to food costs, from cooking demonstrations to taste testing, and from attitudes and beliefs to advertising and marketing. Through an experientially and materially grounded pedagogy, the students' knowledge and awareness of as well as their desires for the fruits and vegetables available at the farmers' markets transformed.

### *Farmers' Markets as Health Clinics*

The farmers' markets as performances in and to space may also be conceived of as public health interventions, as many participants involved in this research reported that fresh fruits and vegetables are antidotes to a variety of health conditions. Over 40 years

ago, Jack Geiger and other physician activists involved with the Civil Rights Movement provided medical prescriptions for food to children and families suffering from hunger and malnutrition (e.g., RX, so much milk, so much meat, so many vegetables, so many eggs) (2005). As the following excerpt highlights, this unconventional method of treatment was, to say the very least, not well-received by the powers that be:

The state of Mississippi found out about this and concluded that, clearly, Soviet communism had arrived in the Delta. They complained to our funders in the federal government, the Office of Economic Opportunity (OEO)... And OEO officials came down to see us—so upset they were practically babbling, steam coming out of their ears, saying, “What in God’s name did we think we were doing?” We said, “What’s the matter?” They said, “Well, you can’t give away food and charge it to the pharmacy budget at the health center.” We said, “Why not?” They said, “Because the pharmacy at the health center is for drugs for the treatment of disease.” And we said, “Well, the last time we looked in the book, the specific therapy for malnutrition was food.” (Geiger, 2005, p. 7)

Just as prescriptions for food attended to the public health problem of malnutrition many years ago, findings from this research suggest that the establishment of farmers’ markets as health clinics may be an innovative strategy for addressing public health problems such as food insecurity, obesity, and related health conditions (e.g., infant mortality, diabetes, heart disease). The prescribed therapy for nearly every health condition is quite simple: eat more fruits and vegetables per day. In fact, the latest public health campaign focused on fruit and vegetable consumption has the slogan “more matters” and thus shifts the focus from encouraging the public to “eat five a day” to now

eat as many fruits and vegetables per day as possible (see Figure 35). Accordingly, the expansion of preexisting health clinics to include farmers' markets or the demarcation of freestanding farmers' markets as "health clinics" may increase the public's access to fruits and vegetables and their many health benefits. Future research focused on the impacts of farmers' markets on health outcomes is also warranted.



*Former Logo*



*Current Logo*

---

***Figure 36. Former and current logos for public health campaigns focused on increasing fruit and vegetable consumption.***

Source: Produce for Better Health Foundation (2007)

### *Farmers' Markets as Laboratories*

The farmers' markets also served as laboratories for exploring the nuances and complexities of food access. Data collected via participant observations at the farmers' markets allowed for an analysis of information that could not be gathered through the structure of close-ended surveys or through open-ended interviews. This resulted, in part, because I did not always have the questions and/or respondents did not always have the words to describe the complexities of food access. However, through interactions at the farmers' markets, people were more likely to reveal the socially, politically,

economically, and historically bounded relations of power influencing one's ability to obtain "real, fresh, and good" food. For instance, through participant observations at the farmers' markets we noticed that a proportion of the population was unable to access the farmers' markets even though they were spatially accessible. For some, the farmers' markets remained inaccessible because of the contents of their pocketbooks or rather the lack thereof. For others, the farmers' markets represented a foreign territory, a space that sold foods ascribed as being "not for me".

One of the most profound theoretical moments in this research was a reflection session focused on a photograph taken at the Ridgetop farmers' market (see Figure 36). In this photo it is easy to focus on the mother and child taking advantage of the produce at the farmers' market. While important, this would be a myopic view of the situation at hand. Indeed, the woman in the background of this photograph represented the sizable portion of people unable to take advantage of the farmers' markets. If we relied on surveys and interviews to develop an understanding of food access, the analysis would have fallen short because the perspectives of the people *not* at the farmers' markets would have been ignored. In this example, participant observations and the corresponding processes of reflection added complexity to emergent understandings of food access by challenging the notion: if you build it, they will come.



*Figure 37. People shopping and not shopping at the Ridgetop farmers' market.*

---

### New Insights Regarding the Social Production of Health

American culinary artist James Beard (1903-1985) once stated: “Food is our common ground, a universal experience.” The findings from this study support the notion that food is indeed a universal experience; however, it is not “our common ground”. In fact, food as a universal experience may be one of the most powerful tools for creating *uncommon* grounds, for establishing hierarchies in society, for producing and reproducing valued and devalued bodies, and for perpetuating health disparities among socially marginalized populations. Thus, an examination of the politics of food access may shed light on to myriad relations of power influencing the health of the public.

## *Power and Space*

I began Chapter 3 by introducing one of the main characters of this research, a city bus driver who regularly stopped her bus (and risked her job) to take advantage of the fresh fruits and vegetables for sale at the Hopetown farmers' market. She stopped the bus because ten out of the eleven food stores located in the Hopetown community are convenience stores, food stores that were eight times more likely to sell tobacco than tomatoes and four times more likely to sell alcohol than apples. Food mapping and interview data from this research corroborate findings from other studies<sup>72</sup> revealing that *where* one lives is strongly associated with one's ability to access and consume healthy foods. The notion that one's environment influences behaviors and choices is not novel. The reciprocal relationship between environments and human behaviors is central to scholarship informed by an ecological perspective (Bronfenbrenner, 1977; Kelly, 1966; Lewin, 1935) and has led some scholars to argue: "It is not the *nature* of health behaviours, but the *contexts* in which they take place (where, when, and with whom), that need to be analysed" (Morrow, 1999, p. 758, emphasis in original).

Ecological perspectives shift the burden of social problems onto places rather than people in an effort to move beyond individually-oriented understandings of social phenomena, and thus purport that *where* you are in society has equal or greater influence on behaviors, choices, and outcomes than *who* you are. Data from this research, however, reveal that this view of places and peoples is far too neat and narrow. The politics of food access are related to the intersectional relationship between *where* and *who* you are. The

---

<sup>72</sup> See for instance: Alwitt & Donley, 1997; Baker, Schootman, Barnidge, & Kelly, 2006; Chung & Myers, 1999; Jetter & Cassady, 2006; Moore & Diez Roux, 2006; Morland, Wing, Diez Roux, & Poole, 2002; Zenk et al., 2005.



spatial, racial, class, and gender aspects of food access are interconnected and interrelated, oftentimes in a manner that is difficult to see and/or untangle. One cannot understand the spatial politics of food access without also taking into account the politics of racial segregation, unfair and inadequate wage systems, feminization of poverty and so on. Likewise, a program of research focused on addressing health disparities, particularly disparities related to obesity and food insecurity, ought to then be attentive to the systems and relations of power and privilege related to these broader social phenomena. Thus, results from this research suggest that obesity prevention and food security promotion interventions as well as the methods used to evaluate them should pay as much or perhaps even more attention to social policies than to individual behaviors. In so doing, it is important to focus on social policies that will not only decrease the distance between good food and food insecure communities but that will also increase the social, political, and economic requisites for accessing food.

### *Revealing and Dismantling Hierarchies*

I began this dissertation by stating that my aim was to scrutinize what Counihan calls the “unscrutinized” (1999, p. 114). By this I meant that this dissertation was focused on food and food practices because they “reflect and re-create the gender, race, and class hierarchies so prevalent in American society” and because “deconstructing food rules is part of the process of dismantling the hierarchies that limit the potential and life chances of subordinate groups” (Counihan, 1999, pp. 114-115). In this process of scrutinizing the unscrutinized, I found that participants distinguished foods hierarchically, with “real”, “fresh”, and “good” foods referred to as foods that are healthier, superior to, and far more

costly than foods described as “bad”, “rotten”, and/or “junk”. Nevertheless, participants reported that “real”, “fresh”, and “good” foods were socially, spatially, temporally, and economically inaccessible for many people residing in food insecure locales.

These findings suggest that eaters and feeders organize foods hierarchically in a manner that has more to do with the social valuation of foods than with their levels of vitamins and nutrients. Based on this distinction, research and action focused on the politics of food access and the social production of health ought to pay more attention to the socially ascribed stratification of food items. This type of research would focus on the social relations and systems of power associated with food items and would thus be different than but could perhaps complement the extensive body of research focused on gradations in micro- and macro-nutrients found in specific food products (e.g., Hakim, McClureb, & Lieblerb, 2000; Thomson et al., 2007). A shift in the way we as researchers examine and address food and food-related issues is one step in the process of revealing and dismantling hierarchies, since processes of knowledge production are instrumental to the perpetuation of power relations (Foucault, 1978, 1980).

Moreover, as one works to detect and deconstruct hierarchies, I believe an in-depth analysis of the animating aspects of food is warranted. This would include an exploration into the complicated and complicating ways that lead many of us to become what we eat by examining the materialization of valued bodies through food practices. This type of analysis would investigate what the young man from Hopetown meant when he stated that he wanted to “turn into a peach and eat himself”. It would also explore how changes in practices related to food production, distribution, preparation, and

consumption facilitate opportunities for transgression, allowing one to transform from bad to good, rotten to fresh, damaged to real.

### *Economy of Food Access*

This research also provided new insights regarding the economy of food access. While it is widely accepted that healthy foods are costlier than unhealthy products (Alaimo, Briefel, Frongillo, & Olson, 1998; Drewnowski & Specter, 2004; Jetter & Cassady, 2006), results from this research provide a nuanced description of the economic aspects of food access. On the one hand, the price tags of healthy foods were considered to be “off the chain” and “outside the ballpark” for many participants. On the other hand, the size of one’s pocket or lack thereof influenced food access. The combination of high costs and low wages resulted in the labeling of entire sections of the grocery store (e.g., produce section) and entire varieties of foods (e.g., organic products) as being outside the realm of possibility for many participants. Accordingly, fresh fruits and vegetables, lean meats, and low-fat milk were just a few of the food products that were described as special treats, food items purchased irregularly. In addition to price tags and pocketbooks, the time costs associated with “real, fresh, and good” food also inhibited food access. The combination of cost, wages, and time were most profound for persons reliant on public transportation, another indicator of one’s low-income status. Not only did time increase because one needed to travel on several buses to reach a food store but it also increased because of the risk of being delayed while at the store since many food stores in low-income communities were described as being understaffed and under-resourced.

In addition to these costs, the economy of food was also related to processes of food production. Participants were uncomfortable with and confused by the globalized, industrialized, and centralized system through which food is made available to Americans and stated that the unknown and ambiguous composition of food could become known or realized through food production processes that were local in scale. Many participants argued for the re-creation of the American food system, and in so doing highlighted the historical and thus changeable aspects of any system of influence. Real, fresh, and good foods were considered to be temporally distant, foods of yesteryear, something for grandparents and people who have time to “smell the roses”. However, participants were quite interested in recreating the American food system in a manner that was relational rather than commoditized. Putting a face, name, and locale on food and food production was considered to be one strategy for not only increasing the quality of food but for also increasing local economies. This conceptualization of change is “upstream”<sup>73</sup> in focus, revealing a level of wisdom regarding the social production of health that many seasoned and distinguished health scientists have been unable to see.

To paraphrase Henry David Thoreau (1817-1862), rather than being one of many “hacking at the branches of evil”, results from this study reveal that we ought to begin “striking at the root”. As we work to address disparities related to food insecurity and obesity, we also need to examine the virulence and malignancy of capitalism, globalization, sexism, and racism, the social relations and systems of power they produce

---

<sup>73</sup> Moving upstream is a metaphor used to highlight the added benefit of assessing why people are falling into a stream rather than pulling them out halfway down the river. Upstream efforts (also known as primary prevention) aim to take action prior to the formation of problems or diseases rather than providing antidotes after the fact (Cohen & Chehimi, 2007).

and reproduce, and the manifestations of these systems in different and differently valued human bodies.

### Limitations and Strengths

*Limitations.* There are several limitations related to this research. First, like all research that does not use random sampling, results from this study are not generalizable to all populations (Babbie, 2001). In particular, since data were collected at Boys and Girls Clubs located in an urban setting in the southeastern region of the U.S., findings may not be generalizable to populations that are not involved with these types of youth-serving organizations and/or that are located in other geographic settings. Second, there is the chance that researcher and/or participant bias may have influenced the collection and analysis of the qualitative data. The use of multiple methods for collecting data was one strategy for addressing this concern. In addition, biases were examined on a regular basis through the reflective component of this research. The third limitation is related to the survey data. Survey data were self-reported, thus, there is a chance that participants did not provide accurate responses to the questions as a result of social desirability or because participants did not understand the questions (Babbie, 2001). The fourth limitation is related to the measurement of change as a result of this research. While there is qualitative evidence that changes occurred throughout the project (e.g., changes to space, changes among the children and youth, sale of food, etc.), the methodology employed in this research was not designed to measure causality. A final limitation is related to the participatory nature of this research. A fluid model of participation was employed allowing different types of people to become involved with this research at different

times and in different ways. Participants from the Boys and Girls Clubs were less involved with defining the research question and methods since these were developed through several processes of research and action occurring during the three years preceding this dissertation research. Participants from the Boys and Girls Clubs were, however, involved with the project implementation, data collection, and analysis.

*Strengths.* Despite these limitations, there are several strengths to this study. Ethnographic research allowed me to look closely at specific time-space contexts with the goal of uncovering ideographic (i.e., unique, separate, peculiar, and distinct) explanations related to the politics of food access in food insecure communities (Babbie, 2001). These detailed descriptions, often called “thick descriptions” in ethnography, facilitated understandings of the phenomena under study and provided a framework for the development of a complex and interconnected conceptualization of the social relations and systems of power influencing food access (Geertz, 2001). Findings from this research may then be used to inform hypotheses for future research. Additionally, the openness of the data collection process provided opportunities for participants to inform many aspects of this research (McQuiston, Parrado, Olmos-Muñiz, & Bustillo Martinez, 2005). Finally, in-depth, open-ended interviewing allowed for the exploration of the research topic in greater detail without the constraints associated with close-ended interviews wherein predetermined categories of knowledge limit the breadth and depth of information gathered (Schensul, Schensul, & LeCompte, 1999).

## Future Research

Rather than containing or constraining thoughts and perspectives about the politics of food access and the social production of health, this research opens up many new questions and pathways for future research. While I will not explicate each and every one of these possibilities, I will highlight five pathways that are most appealing to me as I expound upon this program of research.

First, there is a need to explore in more detail the changes occurring among the children and youth involved in this research. Although the perspectives of children and youth were captured through participant observations and through informal conversations, children and youth were not interviewed nor were they invited to complete survey data as a part of this project. This was due in part to logistical and pragmatic reasons related to consent of minors. In truth, however, I must also admit that I underestimated the role of the youth as key actors in the process of social transformation enacted through this project. Accordingly, future research is needed to explore how the youth understand the relations of power influencing food access. Based on this realization, during the summer of 2008, this project will be expanded to include a much more intensive youth component focused on food (in)justice, food access, and food systems change. As part of this project, the children and youth will maintain written, oral, and visual journals (some of which will be published onto a blog) focused on the farmers' markets as well as on their emergent thoughts and perspectives regarding the politics of food access. The journals will then be analyzed inductively to explore how food (in)access is conceived by the children and youth.

A second line of research—also informed by the research process and outcomes described in this dissertation—may focus on addressing the economy of food access. For instance, what would happen if vouchers for the farmers’ markets were provided to potential customers to reduce the financial barriers to accessing fresh fruits and vegetables? In the second phase of this research (summer 2008), we are going to establish a “Super Shopper Program” for parent/guardians, children and youth, and community members frequenting the Boys and Girls Club farmers’ markets. The “Super Shopper Program” addresses some of the emergent factors related to the economy of food access by providing up to \$20.00 in vouchers for purchasing fresh fruits and vegetables from one of the Boys and Girls Club farmers’ markets. Another way to address the economy of food access may be through the examination of wage systems in a region to determine how far the local minimum wage will take a family in terms of meeting their food needs. This type of effort may also include a collective action component wherein community members are co-researchers in the examination of wages and local wage systems, the calculation of a “living wage” for a particular time-space context, and the mobilization of communities and other stakeholders in an effort to increase wages in sectors paying below the living wage.

Another line of future research relates to the replication of this methodology in other locales. One strategy for future replication and comparison studies is to continue to develop farmers’ markets through a materialist praxis approach in conjunction with Boys and Girls Clubs and children’s hospitals located in different geographic regions and representing different levels of urbanicity and rurality. This may contribute to the development of generalized theories related to both understanding and addressing the



politics of food access. In this process, additional research approaches may be employed to begin to assess the impact of this type of research process on outcomes related to community ownership of change as well as to public health outcomes.

A fourth line of research may explore the politics of food access from a variety of standpoints. My dissertation research focused on the politics of food access among people living in food insecure communities whereas future research may explore the politics of food access among people living in “food secure” settings. This research may also focus on gaining the perspectives of a more socially diverse audience including people representing all levels of income, different races and ethnicities, different genders, people from different parts of the country or from other countries, and people from rural and urban settings. In addition, this line of research may examine the politics of food access from people representing more parts of the food system, from food production to food consumption.

Finally, there is a need for research and action that applies materialist praxis to other topics. On the one hand, this may include the expansion of praxis-oriented research to address the material. For instance, research focused on the needs, interests, and concerns of battered women (e.g., Maguire, 1987) may begin by providing living wages, housing, shelter or other basic needs prior to or in conjunction with a dialogical process of conscientization. On the other hand, research focused on the material may be expanded by integrating these efforts into ongoing cycles of research, reflection, and action. For example, research and action that begins by providing housing to homeless individuals (e.g., Tsemberis, Gulcur, & Nakaie, 2004) may be enhanced if these effort were integrated into a process of research that is participatory, situated, reflective, and attentive to power

and privilege influencing access to housing. In addition, future research may focus on the application of materialist praxis with research participants representing different backgrounds and experiences. These research opportunities may combine to create a repertoire of research and action informed by a materialist praxis approach, and in so doing, will fine tune and enhance the this new theory-methods package.

### Conclusion

In summary, this research tells a new story regarding the social production of health by focusing on the relations of power influencing food access and related health conditions. This new story began by challenging existing tools used to understand the public's health and then offered a new theory-methods package, "materialist praxis", as a means for activating population health perspectives and for materializing praxis-oriented research. I then applied a materialist praxis research approach to transform three Boys and Girls Clubs in Nashville, Tennessee, from youth-serving organizations to farmers' markets. This participatory, situated, reflective, and materialized research process provided an opportunity for children, youth, and adults living in food insecure communities to author a discourse of resistance and possibility with respect to pressing health inequities such as obesity and food insecurity. Through performances in and to space, this research also provided opportunities for uncovering the spatially, temporally, and socially constructed boundaries influencing food access. These boundaries combined to make "real, fresh, and good" foods – foods considered to be healthier than and superior to foods described as "bad, rotten, and junk" – inaccessible to many people residing in socially marginalized locations. Data analysis also depicted a nuanced understanding of

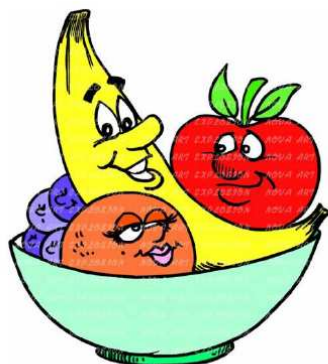
food access by focusing on the financial and time costs influencing access. The results of this study reveal that the politics of food access are complex and intersectional but nevertheless discernable and most importantly changeable.

## APPENDIX A

### SAMPLE NEWSLETTER

Volume 1:  
June 11-June 15, 2007

# The Veggie Times



Breaking news...the Veggie Project is taking place at your Boys and Girls Club this summer. This exciting project brings a **farmers' market** to the Boys and Girls Club one day per week from June 11 to August 10. Nutrition education will also be provided to the children and youth at the Clubs. Throughout the summer, the farmers' markets will set-up in the parking lot of the Club and fresh, locally grown fruits and vegetables will be for sale. Fresh tomatoes, bell peppers, corn, collard greens and more will be available all summer long! For more information about the Veggie Project, please contact Darcy at 579-0783.

### Recipe of the Week

#### **Spicy Cucumber Salad**

*Refreshing and delicious!*

2 cucumbers, peeled  
2 cups cider vinegar  
1/4 teaspoon dried red chili flakes  
1 cup sweet onion, sliced thin  
1/3 cup sugar  
1/4 teaspoon salt  
1/8 teaspoon black pepper

Peel and slice the cucumbers. Then toast the chilies in a fry pan just enough to bring out the smell, don't let them burn. Add all ingredients into a large bowl and mix well.

Let mixture sit 2 hours or over night in refrigerator before serving. Makes 4 servings.

The Veggie Project is a collaboration between Monroe Carell Jr. Children's Hospital at Vanderbilt, the Boys and Girls Club of Middle Tennessee, Food Security Partners of Middle Tennessee, Vanderbilt Center for Health Services, and Nashville Urban Harvest. The Veggie Project is supported by a grant from the Baptist Healing Trust.

### Meet the Veggie Project Staff

Hi! I am **Shavaun** and I'm from Louisville, KY. I am a student at Vanderbilt University. I am a part of the Veggie Project because I love eating healthy, and I want to make healthy foods available for every person, no matter where they live. I love all types of food, and I have even eaten fried grasshoppers and kangaroo stew!

Hello! I'm **Shacora**, a 2007 graduate of Tougaloo College. I enjoy working with the Veggie Project because I have a passion for teaching children about the importance of healthy eating habits. My favorite dish is shrimp pasta.

Hola, I'm **Darcy**! I grew up in the cornfields of Illinois but have lived in Nashville for 3 years. My favorite foods are blackberries and pizza! I can't wait to meet you at the farmers' markets.

Greetings, my name is **Courtney**! I'm from Memphis, TN and I'm a student at Vanderbilt University. I am thrilled to work with the Veggie Project because I enjoy trying new foods and learning more about them!

## APPENDIX B

### INTERVIEW GUIDE

*The purpose of this interview is to learn more about your thoughts and perspectives related to food and food access. This information will be used to help us better understand peoples' experiences with food. It will also help us develop food-related programs in Nashville.*

**1. What have you eaten over the past 24 hours: for breakfast, lunch, dinner, snacks?**

- a. Why did you eat these foods?

**2. Tell me about your most recent trip to the grocery store.**

- a. Where did you go?
- b. What did you buy?
- c. What was the quality of the food?
- d. Was the food affordable?

*Was this a typical trip to the grocery store? If not, how did it differ from your usual trip?*

**3. Tell me about food outlets in your neighborhood/community.**

- a. Where are they?
- b. What types of food are sold at these outlets?
- c. What is the quality of the food sold at these outlets?
- d. Is the food affordable?
- e. How do the food stores available in your neighborhood/community compared to food stores in other parts of Nashville?
  - i. If there are differences, why do you think these differences exist?
- f. What could be done to enhance the food outlets in your neighborhood/community?

**4. Are you satisfied with the types of foods you have regular access to? Why or why not?**

**5. Peoples' access to fresh, healthy foods is related to a lot of different things. Do you think that your level of access to fresh, healthy foods has anything do with:**

- a. your race and/or the race of your community/neighborhood? How so?
- b. your social class and/or the social class of your community/neighborhood? How so?
- c. your gender and/or the gender make-up of your community/neighborhood? How so?
- d. your age and/or the age make-up of your community/neighborhood? How so?

- 6. When I say the “American food system” what does that mean to you? What are the strengths and weaknesses of the American food system?**
- 7. What other thoughts do you have about food and/or food access?**

**Veggie Project**  
**Brief Survey for Interviewees**

**Date:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ **ID:** \_\_\_\_\_

**These questions are about you and your family. This information will be used to help us better understand the types of people involved with this study.**

- 1. What is your age? \_\_\_\_\_ years**
  
- 2. What is the highest level of formal education you have completed?**
  - 1-Less than high school
  - 2-High school graduate/ GED
  - 3-Some college
  - 4-College graduate
  - 5-Advanced degree
  
- 3. What best describes your race/ ethnicity? (Please check all that apply.)**
  - 1-American Indian, Eskimo or Aleut
  - 2-Black or African American
  - 3-Hispanic or Latino
  - 4-Asian or Pacific Islander
  - 5-White or Caucasian
  - 6-Bi-racial/Multi-racial
  - 999-Other \_\_\_\_\_
  
- 4. What is your gender?**
  - 1-Male
  - 2-Female
  
- 5. How many total people live in your household (please include yourself)**  
\_\_\_\_\_ people
  
- 6. How many persons under the age of 18 live in your household?**  
\_\_\_\_\_ children under 18
  
- 7. Do you receive food stamps or WIC?**
  - 1-Yes
  - 2-No
  - 998-Refused

**8. Do your children receive free or reduced priced lunches?**

- 1-Yes
- 2-No
- 3-I do not have children
- 998-Refused

**9. Which category represents your TOTAL combined household income from all household members during the past 12 months?**

- 1-Less than \$10,000
- 2-\$10,000-19,999
- 3-\$20,000-29,999
- 4-\$30,000-39,999
- 5-\$40,000-49,999
- 6-\$50,000-59,999
- 7-\$60,000-69,999
- 8-\$70,000-79,999
- 9-\$80,000 or more
- 998-Refused

**10. What is your home zip code?** \_\_\_\_\_

**11. How far do you live from the XX Boys and Girls Club?**

\_\_\_\_\_ blocks      OR      \_\_\_\_\_ miles

The last question are about you and your health.

**12. In general, would you say that your health is...**

- 1-Excellent
- 2-Very Good
- 3-Good
- 4-Fair
- 5-Poor

**13. How satisfied are you with your life?**

- 1- Very Satisfied
- 2-Somewhat Satisfied
- 3-Somewhat Dissatisfied
- 4-Very Dissatisfied

**Thanks!**



APPENDIX C

FOOD STORE SURVEY

Name of Store: \_\_\_\_\_

Address: \_\_\_\_\_

Researchers: \_\_\_\_\_

**Codes:**

X = Entrance to Store

→, ←, ↑ = General Flow

(Mark all that apply)

1 = Produce (Fruit Section and Vegetable Section)

2 = Dairy Section (milk, cheese, & butter)

3 = Meat Section

4 = Bread Section

5 = Tobacco Section

6 = Alcohol/Liquor Section

**\*Be sure to mark store entrance location and flow direction**

<b>D</b>					
<b>C</b>					
<b>B</b>					
<b>A</b>					
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

Researchers: \_\_\_\_\_ Date of Survey: \_\_\_\_/\_\_\_\_/\_\_\_\_  
month, day, year

Time in: \_\_\_\_: \_\_\_\_ am pm (circle one) Time out: \_\_\_\_: \_\_\_\_ am pm (circle one)

**I. INITIAL OBSERVATIONS**

Store Name: \_\_\_\_\_

Store Address (Intersection): \_\_\_\_\_

Type of Store: \_\_\_\_ Convenience Store (food only-no gas pumps)

\_\_\_\_ Convenience Store/Gas Station Number of gas pumps \_\_\_\_

\_\_\_\_ Local Market

\_\_\_\_ Supermarket

\_\_\_\_ Other (describe) \_\_\_\_\_

**(Mark ENTRANCE and TRAFFIC FLOW on GRID)**

1. How many cash registers or checkout stands are in the store? \_\_\_\_\_

**II. NUTRITION PRODUCT OBSERVATIONS**

**A. Fruit Section:**

2. Does the store offer **FRUITS (fresh, frozen, or canned)**?

\_\_\_\_Yes ....complete the following table \_\_\_\_No ....go to question 5

3. Where is the fresh fruit section of the store? **(RECORD ON GRID)**

\* Check all that apply

NOTE: **DO NOT** include **baby food, fruit cocktail, or pie fillings**

FRUITS	Fresh	Frozen	Canned/In a Jar
Bananas	___ Yes	Not Applicable	Not Applicable
Apples	___ Yes	___ Yes	___ Yes
Oranges	___ Yes	Not Applicable	___ Yes
Grapefruit	___ Yes	Not Applicable	___ Yes
Grapes	___ Yes	Not Applicable	Not Applicable
Peaches/Nectarines	___ Yes	___ Yes	___ Yes

4. Does the store offer **100% natural** Applesauce? \_\_\_ Yes \_\_\_ No

5. Does the store offer Red Delicious Apples? \_\_\_ Yes \_\_\_ No

A. Price of one Red Delicious Apple, if offered only as single units \$\_\_\_ N/A

B. Price of one pound of Red Delicious Apples, if offered by the pound \$\_\_\_ N/A

Does the store offer organic fruit? \_\_\_ Yes \_\_\_ No

List all organic fruits sold at the store.

---

**B. Vegetable Section:**

6. Does the store offer **VEGETABLES**? \_\_\_ Yes ....complete the following table

\_\_\_ No ....go to question 9

7. Where is the vegetable (produce) section? **(RECORD ON GRID)**

• Check all that apply

NOTE: **DO NOT** include **baby food, soup, or mixed vegetables or sweet potatoes**

VEGETABLES	Fresh	Frozen	Canned/Boxed
Lettuce	___ Yes	Not Applicable	Not Applicable
Potatoes	___ Yes	___ Yes	___ Yes
Carrots	___ Yes	___ Yes	___ Yes
Tomatoes	___ Yes	Not Applicable	___ Yes
Broccoli	___ Yes	___ Yes	Not Applicable
Spinach	___ Yes	___ Yes	___ Yes
Greens	___ Yes	___ Yes	___ Yes

NOTE: If the answer to #6 is Yes and no items are checked in the vegetable table, describe the vegetables.

---



**\* Check all that apply**

Regular Butter  <input type="checkbox"/> Yes <input type="checkbox"/> No	Light Butter (at least 1/3 less calories)  <input type="checkbox"/> Yes <input type="checkbox"/> No	Regular Margarine  <input type="checkbox"/> Yes <input type="checkbox"/> No	Light Margarine (at least 1/3 less calories)  <input type="checkbox"/> Yes <input type="checkbox"/> No
---	---	--	---

16. A. What is the lowest price of a **one pound** package of margarine? \$ \_\_\_\_\_ N/A

B. If a one pound container is not available, what is the price of the next smaller container?

Price: \$ \_\_\_\_\_ Size: \_\_\_\_\_ ounces \_\_\_\_\_ N/A

**D. Juice Section:**

17. Does the store offer any **FRUIT JUICES**?  
 Yes ....complete the following table  No

**\* Check all that apply**

Type	100%	<100%	None
Fresh Squeezed			
Fresh From Concentrate			
Frozen			
Canned			
Boxed/Bottled			

**E. Meat Section:**

18. Does the store offer **MEAT**?  Yes  No ....go to question 25

19. If there is a meat section, where is the meat section of the store? **(RECORD ON GRID)**

20. Does the store offer **prepackaged** and/or **fresh deli reduced-fat** luncheon meats?  
**(The package must be clearly marked)**

Yes  
 No

21. Does the store offer **lean** ground meats?  
**(The package must be clearly marked)**

Yes  
 No ....go to question 24

22. Does the package label state **86% or greater** leanness? \_\_\_ Yes \_\_\_ No
23. What is the cost of one pound of **reduced fat** ground hamburger (**86% or greater**)?  
**(Record the least expensive)**  
 \_\_\_\_\_% reduced fat \$ \_\_\_\_\_ /lb. \_\_\_ N/A
24. Does the store offer **skinless** poultry? \_\_\_ Yes \_\_\_ No
25. Does the store offer **fresh** fish?  
**(Do Not include Catfish)** \_\_\_ Yes \_\_\_ No

**F. Bread Section:**

26. Does the store offer **BREAD**? \_\_\_ Yes \_\_\_ No ...go to question 29
27. Where is the **commercial bread section** of the store? **(RECORD ON GRID)**
28. Does the store have a **fresh baked bread section**? \_\_\_ Yes \_\_\_ No
29. Does the store offer **100%** whole grain bread (**commercial or fresh baked**)?  
**(The package must be clearly marked)**  
 \_\_\_ Yes  
 \_\_\_ No

**III. OTHER PRODUCT OBSERVATIONS**

**G. Tobacco Section:**

30. Does the store offer **TOBACCO** Products? \_\_\_ Yes \_\_\_ No .... go to question 31
31. If there is a tobacco section, where is the **tobacco section** of the store? (loose, cartons, and paraphernalia) **(RECORD ON GRID)**

**H. Alcohol/Liquor Section:**

32. Does the store offer **ALCOHOL/LIQUOR**? \_\_\_ Yes \_\_\_ No
33. If there is an alcohol/liquor section, where is the **alcohol/liquor section** of the store?  
 (beer, wine, liquors) **(RECORD ON GRID)**

**DID I REVIEW EVERY ITEM ON THE SURVEY?**

Signature: \_\_\_\_\_ \_\_\_ Yes \_\_\_ No  
 Signature: \_\_\_\_\_ \_\_\_ Yes \_\_\_ No

## APPENDIX D

### SURVEY

Interviewer: \_\_\_\_\_ Participant ID: \_\_\_\_\_  
Date: \_\_\_\_\_

Thank you for agreeing to complete this survey. The questions are all focused on your experiences related to purchasing and eating fresh fruits and vegetables. It should take about 10 minutes to complete this survey. A follow-up survey will be completed in about 2 months, during the first week of August.

#### **Recent Purchasing Patterns of Fresh Fruit and Vegetables**

The first questions are about the last time you purchased fresh fruits and vegetables.

**1. When was the last time you purchased fresh fruits and/or vegetables?**

- 1-During the past week
- 2-Within the past 2 weeks
- 3-Within the past month
- 4-More than a month ago
- 5-Never

**2. The last time you purchased fresh fruits and/or vegetables, where did you buy them?**

(Record name) \_\_\_\_\_

**2a. Coding Categories for Data Entry**

- 1-Boys and Girls Club Farmers' Market
- 2-Convenience store
- 3-Dollar General
- 4-Harris Teeter
- 5-Kroger
- 6-Murphy's Produce
- 7-Nashville Farmers' Market
- 8-Publix
- 9-Target
- 10-Turnip Truck

- 11-Walmart
- 12-Wild Oats
- 999-Other: \_\_\_\_\_

**2b. About how far do you live from that store?**

\_\_\_\_\_blocks      OR      \_\_\_\_\_miles

**2c. How did you travel to that store?**

- 1-Car
- 2-Bus
- 3-Walking → about \_\_\_\_\_ blocks
- 4-Bicycle
- 999-Other: \_\_\_\_\_

**3. The last time you purchased fresh fruits and/or vegetables, what did you buy?**

**Berries**

- 1-Yes
- 2-No



**Bell Peppers (Red, Green, Orange, or Yellow)**

- 1-Yes
- 2-No



**Broccoli**

- 1-Yes
- 2-No





**Cabbage**

- 1-Yes
- 2-No



**Carrot**

- 1-Yes
- 2-No



**Celery**

- 1-Yes
- 2-No



**Collard Greens**

- 1-Yes
- 2-No



**Corn**

- 1-Yes
- 2-No



**Cucumber**

- 1-Yes
- 2-No



**Melon (cantaloupe, honeydew)**

- 1-Yes
- 2-No



**Green Beans**

- 1-Yes
- 2-No



**Potatoes (white)**

- 1-Yes
- 2-No



**Onion (white, green, yellow, red)**

- 1-Yes
- 2-No

**Peaches or nectarines**

- 1-Yes
- 2-No

**Squash (Green and Yellow)**

**Spinach**

- 2-No
- 1-Yes
- 2-No



**Sweet Potato or Yam**

- 1-Yes
- 2-No



**Tomato**

- 1-Yes
- 2-No

**Turnip Greens**

- 1-Yes
- 2-No

**Watermelon**

- 1-Yes
- 2-No



**3a. Did you purchase any other fruits and vegetables?**

- 1-Yes
- 2-No

**3a.1. If yes, what other types of fruits and vegetables did you purchase?**

---

---

**Ease of Purchasing Fresh Fruits and Vegetables**

The next questions are about purchasing fresh fruits and vegetables in your neighborhood or community.

**4. What is the name of your neighborhood or community?**

---

5. Over the past month, that would be since XX/XX/2007, how easy was it for you to buy the following in your neighborhood/community?

5a. High quality fruits and vegetables (i.e., not wilted or bruised, fresh)?	Very Easy (1)	Somewhat Easy (2)	Somewhat Difficult (3)	Very Difficult (4)	Don't Know (997)
5b. A wide variety of fresh fruits and vegetables?	Very Easy (1)	Somewhat Easy (2)	Somewhat Difficult (3)	Very Difficult (4)	Don't Know (997)
5c. Fresh fruits and vegetables that are affordable?	Very Easy (1)	Somewhat Easy (2)	Somewhat Difficult (3)	Very Difficult (4)	Don't Know (997)
5d. Fresh fruits and vegetables that are important to your culture or traditions?	Very Easy (1)	Somewhat Easy (2)	Somewhat Difficult (3)	Very Difficult (4)	Don't Know (997)
5e. Fresh fruits and vegetables that you like to eat?	Very Easy (1)	Somewhat Easy (2)	Somewhat Difficult (3)	Very Difficult (4)	Don't Know (997)
5f. Fresh fruits and vegetables that are new to you?	Very Easy (1)	Somewhat Easy (2)	Somewhat Difficult (3)	Very Difficult (4)	Don't Know (997)

### Fruit and Vegetable Consumption, past 7 days

The next questions are about the servings of fruits and vegetables that you ate over the past week.

6. During the past 7 days, how many servings of fruit did you eat? DO NOT count fruit juices.

- I did not eat fruit during the past 7 days (1) (Skip to Question 7)
- 1 to 3 servings during the past 7 days (2)
- 4 to 6 servings during the past 7 days (3)
- 1 serving per day (4)
- 2 servings per day (5)
- 3 or more servings per day (6)

6a. How much of the fruit that you ate was fresh (not canned or frozen)?

- None (it was all canned or frozen) (1)
- Some fresh (mostly canned or frozen) (2)
- Mostly fresh (some canned or frozen) (3)
- All (it was all fresh) (4)

**7. During the past 7 days, how many servings of vegetables did you eat? DO NOT count French fries.**

- I did not eat vegetables during the past 7 days (1) **(Skip to Question 8)**
- 1 to 3 servings during the past 7 days (2)
- 4 to 6 servings during the past 7 days (3)
- 1 serving per day (4)
- 2 servings per day (5)
- 3 or more servings per day (6)

**7a. How much of the vegetables that you ate were fresh (not canned or frozen)?**

- None (it was all canned or frozen) (1)
- Some fresh (mostly canned or frozen) (2)
- Mostly fresh (some canned or frozen) (3)
- All (it was all fresh) (4)

### **Demographics**

The last questions are about you and your family. This information will be used to help us better understand the types of people involved with this study.

**8. In general, would you say that your health is...**

- 1-Excellent
- 2-Very Good
- 3-Good
- 4-Fair
- 5-Poor

**9. How satisfied are you with your life?**

- 1- Very Satisfied
- 2-Somewhat Satisfied
- 3-Somewhat Dissatisfied
- 4-Very Dissatisfied

**10. What is your age? \_\_\_\_\_ years**

**11. What is the highest level of formal education you have completed?**

- 1-Less than high school
- 2-High school graduate/ GED
- 3-Some college
- 4-College graduate
- 5-Advanced degree

**12. What best describes your race/ ethnicity? (Please check all that apply.)**

- 1-American Indian, Eskimo or Aleut

- 2-Black or African American
- 3-Hispanic or Latino
- 4-Asian or Pacific Islander
- 5-White or Caucasian
- 6-Bi-racial/Multi-racial
- 999-Other, please specify: \_\_\_\_\_

**13. What is your gender?**

- 1-Male
- 2-Female

**14. How many total people live in your household (please include yourself)**  
\_\_\_\_\_ people

**15. How many persons under the age of 18 live in your household?**  
\_\_\_\_\_ children under 18

**16. What is your relationship to the child that is attending the XX Boys and Girls Club?**

- 1-Mother/father
- 2-Grandparent
- 3-Aunt/Uncle
- 4-Sibling
- 5-Cousin
- 999-Other \_\_\_\_\_

**17. Do you receive food stamps or WIC?**

- 1-Yes
- 2-No
- 998-Refused

**18. Do your children receive free or reduced priced lunches?**

- 1-Yes
- 2-No
- 998-Refused

**19. Which category represents your TOTAL combined household income from all household members during the past 12 months?**

- 1-Less than \$10,000
- 2-\$10,000-19,999
- 3-\$20,000-29,999
- 4-\$30,000-39,999
- 5-\$40,000-49,999
- 6-\$50,000-59,999
- 7-\$60,000-69,999
- 8-\$70,000-79,999
- 9-\$80,000 or more
- 998-Refused

**20. What is your home zip code?** \_\_\_\_\_

**21. How far do you live from the XX Boys and Girls Club?**

\_\_\_\_\_ blocks      OR      \_\_\_\_\_ miles

## APPENDIX E

### CONSENT FOR INTERVIEWS AND FOCUS GROUPS

You are being asked to take part in a research study. This research is a part of the degree requirement for Darcy Freedman, the Principal Investigator of the study.

#### Purpose

The purpose of this research is to better understand the how personal, community, and social factors influence the types of food that you like and that are available to you. You are being asked to take part because you have been involved with a Boys and Girls Club Farmers' Market.

#### Procedures

You are being asked to take part in a one-time interview or a focus group. The interview will last 1 hour or less. During the interview you will be asked questions about personal, community, and social factors that influence the types of food that you like and that are available to you. You do not have to answer any questions that you do not want to answer. You may leave the interview at any time. The interview will be tape-recorded and transcribed into a written document. Without the tape-recording of the conversation, we would not be able to remember some of the important things said during the interview.

The focus group is a group discussion with 6-8 people about the same topics: how do your personal, community, and social factors influence the types of food that you like and that are available to you. The focus groups will be about 1 hour, you may attend more than one focus group if you would like. During the focus group, you do not have to answer any questions that you do not want to answer. You may leave the focus group at any time. The focus group will be tape-recorded and transcribed into a written document. Without the tape-recording of the conversation, we would not be able to remember some of the important things said during the focus group.

#### Risks

There are no foreseeable risks or discomforts related to this research other than the time it takes for you to be at the interview.

#### Confidentiality

Your confidentiality will be protected during this research. After the interviews and focus groups are transcribed into a written document, your real name will be deleted and a code name will be used in its place. The tape will be destroyed after it has been transcribed.

All efforts, within reason, will be made to keep the personal information in your research record private but total privacy cannot be promised. Your information may be shared



with Vanderbilt or the government, such as the Vanderbilt University Institutional Review Board, Federal Government Office for Human Research Protections, if you or someone else is in danger or if we are required to do so by law.

Compensation

Interviews: To compensate you for your time during the interview you will receive a \$20.00 gift card to a local grocery store.

Focus Groups: To compensate you for your time during the focus group you will receive \$10.00 gift card to the Boys and Girls Club Farmers' Market.

Questions

**If you have any questions about this research study or if you would like to withdraw from the study, please contact Darcy Freedman at 615-579-0783 or my Faculty Advisory, Paul Speer, at 615-322-6881. For additional information about giving consent or your rights as a participant in this study, contact the Vanderbilt University Institutional Review Board Office at (615) 322-2918 or toll free at (866) 224-8273.**

- Your participation in this research is voluntary, and you will not be penalized if you refuse to take part or decide to stop.
- **If you agree to participate, you will be given a signed copy of this document and, if requested, a written summary of the research.**
- *Signing this document means that the research study has been described to you and that you voluntarily agree to participate.*

*I agree to participate in an interview.* \_\_\_\_\_ *Yes* \_\_\_\_\_ *No*

*I agree to participate in one or more focus groups.* \_\_\_\_\_ *Yes* \_\_\_\_\_ *No*

I give you permission to contact me in the future about additional research studies related to this topic. \_\_\_\_\_ Yes \_\_\_\_\_ No

\_\_\_\_\_  
Signature of Participant \_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Witness

## APPENDIX F

### CONSENT FOR SURVEYS

You are being asked to take part in a research study. This research is a part of the degree requirement for Darcy Freedman, the Principal Investigator of the study.

#### Purpose

The purpose of this research is to better understand the types of fruits and vegetables that are available to you and that you eat. You are being asked to take part because you have a child attending a Boys and Girls Club in Nashville, TN.

#### Procedures

You are being asked to take part in two surveys: the 1<sup>st</sup> is in the beginning of June and the 2<sup>nd</sup> is in the beginning of August 2007. The surveys will take about 10 minutes or less to complete. They can be completed at the Boys and Girls Club or over the telephone. The surveys will ask you questions about the types of fruits and vegetables that are available to you and that you eat. There will also be a few questions about your personal characteristics such as your gender and race. You do not need to answer any question that you do not want to.

#### Risks

There are no foreseeable risks or discomforts related to this research. There is an inconvenience of time related to completing the survey.

#### Confidentiality

Your confidentiality will be protected during this research. Your name will not be used in the research. An ID number will be used instead. All efforts, within reason, will be made to keep the personal information in your research record private but total privacy cannot be promised. Your information may be shared with Vanderbilt or the government, such as the Vanderbilt University Institutional Review Board, Federal Government Office for Human Research Protections, if you or someone else is in danger or if we are required to do so by law.

#### Compensation

All survey participants will be entered into a drawing for a gift card to a local grocery. After the 1<sup>st</sup> survey, there will be 25 drawings for a \$25.00 gift card. After the 2<sup>nd</sup> survey, there will be 25 drawings for a \$50.00 gift card. Drawings will take place over the course of a week. If you complete the survey on a Monday then you will have five chances to win a gift card: Monday, Tuesday, Wednesday, Thursday, and Friday. If you complete the survey on a Tuesday then you will have four chances to win: Tuesday, Wednesday, Thursday, and Friday, and so on. You do not need to be at the Boys and Girls Club to win.

Questions

**If you have any questions about this research study or if you would like to withdraw from the project, please contact Darcy Freedman at 615-579-0783 or my Faculty Advisory, Paul Speer, at 615-322-6881. For additional information about giving consent or your rights as a participant in this study, contact the Vanderbilt University Institutional Review Board Office at (615) 322-2918 or toll free at (866) 224-8273.**

- Your participation in this research is voluntary. You will not be penalized if you refuse to take part or decide to stop.
- **If you agree to participate, you will be given a signed copy of this document and, if requested, a written summary of the research.**
- *Signing this document means that the research study has been described to you and that you voluntarily agree to participate.*

I give you permission to contact me in the future about additional research studies related to this topic. \_\_\_\_ Yes \_\_\_\_ No

---

Signature of Participant

---

Date

---

Signature of Witness

---

Date

## APPENDIX G

### FOCUS GROUP TOPICS: RESEARCH STAFF

#### **Week 1**

Record a 24 hour food diary. Why did you eat and drink these foods? What influenced your choices?

#### **Week 2**

Social Change

What is your theory for social change? What facilitates social change? What hinders it?

How is the Veggie Project a social change effort?

#### **Week 3**

Focus on gender in your participant observations and field notes. The following questions should guide your recording and reflections:

Who shops at the market? What are their genders? (record specific numbers in your field notes)

How do different genders interact with the food at the market, with you as an intern, with other customers?

What types of dialogue is going on by people from different genders?

How does your gender influence your experiences around food including the foods that you eat and the foods that you prepare?

#### **Week 4**

Focus on race/ethnicity in your participant observations and field notes. The following questions should guide your recording and reflections:

Who shops at the market? What are their races/ethnicities? (record specific numbers in your field notes)

How do different races/ethnicities interact with the food at the market, with you

as an intern, with other customers?

What types of dialogue is going on by people from different genders?

How does your race/ethnicity influence your experiences around food including the foods that you eat and the foods that you prepare?

### **Week 5**

Focus on social/economic class in your participant observations and field notes. The following questions should guide your recording and reflections:

Who shops at the market? What are their social/economic classes? (record specific numbers in your field notes)

How do different social/economic classes interact with the food at the market, with you as an intern, with other customers?

What types of dialogue is going on by people from different social/economic classes?

How does your social/economic class influence your experiences around food including the foods that you eat and the foods that you prepare?

### **Week 6**

Review of field notes.

- a. Pick one set of field notes from the people you are assigned.
- b. Read designated field notes
- c. Pick out 5 sections in each set of field notes that were of interest to you
- d. Why did you find this part interesting? What did this part of the field notes tell you?

Assignments:

SM: read field notes from CW and DF

CW: read field notes from DF and SE

DF: read field notes from SE and SM

SE: read field notes from SM and CW

### **Week 7**

Review of field notes.

- a. Pick two sets of field notes that you wrote.
- b. Read designated field notes
- c. Pick out 5 sections in each set of field notes that were of interest to you
- d. Why did you find this part interesting? What did this part of the field notes tell you?

### **Week 8**

Photovoice Activity. We each pick two pictures to discuss using the SHOWeD technique.

What do you see here?

What is really going on here?

What does this tell us about selves or our community?

What strengths or weaknesses are revealed in this picture?

What are we going to do about this?

### **Week 9**

Photovoice Activity. We each pick two pictures to discuss using the SHOWeD technique.

What do you see here?

What is really going on here?

What does this tell us about selves or our community?

What strengths or weaknesses are revealed in this picture?

What are we going to do about this?

## REFERENCES

- Adams, E. J., Grummer-Strawn, L., & Chavez, G. (2003). Food insecurity is associated with increased risk of obesity in California women. *Journal of Nutrition, 133*, 1070-1074.
- Alaimo, K., Briefel, R. R., Frongillo, E. A., & Olson, C. M. (1998). Food insufficiency exists in the United States: Results from the third National Health and Nutrition Examination Survey (NHANES III). *American Journal of Public Health, 88*, 419-426.
- Alwitt, L. F., & Donley, T. D. (1997). Retail stores in poor urban neighborhoods. *Journal of Consumer Affairs, 31*(1), 139-164.
- America's Second Harvest. (2008). How we work [Electronic Version]. Retrieved March 15, 2008 from [http://www.secondharvest.org/how\\_we\\_work/index.html](http://www.secondharvest.org/how_we_work/index.html).
- Andrews, M., Nord, M., Bickel, G., & Carlson, S. (2000). *Household food security in the United States, 1999*. Washington: U.S. Department of Agriculture.
- Ansley, F., & Gaventa, J. (1997). Researching for democracy and democratizing research. *Change, January/February*, 46-53.
- Arnold, D. (1988). *Famine: social crisis and historical change*. New York: Basil Blackwell.
- Babbie, S. (2001). *The practice of social research* (9 ed.). Belmont, CA: Wadsworth.
- Baca Zinn, M., & Thornton Dill, B. (1996). Theorizing difference from multiracial feminism. *Feminist Studies, 22*(2), 321-331.
- Baker, E., Schootman, M., Barnidge, E., & Kelly, C. (2006). The role of race and poverty in access to foods that enable individuals to adhere to dietary guidelines. *Preventing Chronic Disease, 3*(3), 1-11.
- Beauchamp, D. E. (1976). Public health as social justice. *Inquiry, XIII*(March), 3-14.
- Bellows, A. C. (2003). Exposing violences: using women's human rights theory to reconceptualize food rights. *Journal of Agricultural and Environmental Ethics, 16*(3), 249-279.
- Bogdewic, S. P. (1992). Participant observation. In B. F. Crabtree & W. L. Miller (Eds.), *Doing qualitative research* (pp. 45-69). Newbury Park: Sage.

- Bourdieu, P., & Passeron, J. C. (2000). *Reproduction in education, society and culture* (R. Nice, Trans. 2 ed.). Thousand Oaks: Sage Publications.
- Brown, A. (2002). Farmers' market research 1940-2000: An inventory and review. *American Journal of Alternative Agriculture*, 17(4), 167-176.
- Casey, P. H., Simpson, P. M., Gossett, J. M., Bogle, M. L., Champagne, C. M., Connell, C., et al. (2006). The association of child and household food insecurity with childhood overweight status. *Pediatrics*, 118(5), e1406-e1413.
- Cassel, J., & Tyroler, H. A. (1961). Health status and recency of industrialization. *Archives of Environmental Health*, 3, 25-33.
- Centers for Disease Control and Prevention. (2005). *Behavioral risk factor surveillance system survey data*. Atlanta: U.S. Department of Health and Human Services.
- Centers for Disease Control and Prevention. (2006). *Behavioral risk factor surveillance system survey data*. Atlanta: U.S. Department of Health and Human Services.
- Centre for Enabling Health Improvement. (2007). Health improvement and health inequalities in Gateshead: an introduction [Electronic Version]. Retrieved March 14, 2008 from [http://www.cehi.org.uk/02\\_professional\\_groups/health\\_promotion\\_team/](http://www.cehi.org.uk/02_professional_groups/health_promotion_team/).
- Charmaz, K. (2001). Grounded theory. In R. M. Emerson (Ed.), *Contemporary field research* (pp. 335-352). Long Grove, IL: Waveland Press Inc.
- Chavez, V., Duran, B., Baker, Q. E., Avila, M. M., & Wallerstein, N. (2003). The dance of race and privilege in community based participatory research. In M. Minkler & N. Wallerstein (Eds.), *Community based participatory research for health* (pp. 81-97). San Francisco: Jossey-Bass.
- Chung, C., & Myers, S. L. (1999). Do the poor pay more for food? An analysis of grocery store availability and food price disparities. *Journal of Consumer Affairs*, 33(2), 276-296.
- Ciliska, D., Miles, E., O'Brien, M. A., Turl, C., Tomasik, H. H., Donovan, U., et al. (2000). Effectiveness of community-based interventions to increase fruit and vegetable consumption. *Journal of Nutrition Education*, 32(6), 341-352.
- Clarke, A. E. (2005). *Situational analysis: grounded theory after the postmodern turn*. Thousand Oaks, CA: Sage.
- Coates R. J., Serdula M. K., Byers T., Mokdad A., Jewell S., Leonard S. B., et al. (1995). A brief, telephone-administered food frequency questionnaire can be useful for surveillance of dietary fat intake. *Journal of Nutrition*, 125, 1473-1483.



- Coburn, D., Denny, K., Myhkalovskiy, E., McDonough, P., Robertson, A., & Love, R. (2003). Population health in Canada: A brief critique. *American Journal of Public Health, 93*(3), 392-396.
- Cohen, B., Nord, M., Lerner, R., Parry, J., & Yang, K. (2002). *Household food security in the United States, 1998 and 1999: technical report*. Washington: U.S. Department of Agriculture.
- Cohen, B. E. (2006). Population health as a framework for public health practice: a Canadian perspective. *American Journal of Public Health, 96*(9), 1574-1576.
- Colley, C. S. (2006, July 31-August 13). Initiative brings healthy foods to North Nashville neighborhoods. *Vanderbilt Register*, pp. 1, 7.
- Collins, P. H. (2000). *Black feminist thought: knowledge, consciousness, and the politics of empowerment*. (2nd ed.). New York: Routledge.
- Cornwall, A., & Jewkes, R. (1995). What is participatory research? *Social Science and Medicine, 41*(12), 1667-1676.
- Counihan, C. M. (1999). *The anthropology of food and body: gender, meaning, and power*. New York: Routledge.
- Crenshaw, K. (1989). Demarginalizing the intersection of race and sex: A black feminist critique of antidiscrimination doctrine, feminist theory and antiracist policies. *The University of Chicago Legal Forum, 139*-167.
- Cyranoski, D. (2007). Executed Chinese drug czar corrupted by system, observers say. *Nature Medicine, 13*, 889.
- Dahlgren, G., & Whitehead, M. (1991). *Policies and strategies to promote social equity in health*. Stockholm: Institute of Futures Studies.
- Davidson, H., Evans, S., Ganote, C., Henrickson, J., Jacobs-Priebe, L., Jones, D. L., et al. (2006). Power and action in critical theory across disciplines: implications for critical community psychology. *American Journal of Community Psychology, 28*, 35-49.
- Dietz, M. G. (2003). Current controversies in feminist theory. *Annual Review of Political Science, 6*, 399-431.
- Diez-Roux, A. V., Nieto, J., Muntaner, C., Tyroler, H. A., Comstock, G. W., Shahar, E., et al. (1997). Neighborhood environments and coronary heart disease: a multilevel analysis. *American Journal of Epidemiology, 146*(1), 48-63.

- Drewnowski, A., & Specter, S. (2004). Poverty and obesity: the role of energy density and energy costs. *American Journal of Clinical Nutrition*, 79, 6-16.
- Dzewaltowski, D. A., Estabrooks, P. A., Klesge, L. M., Bull, S., & Glasgow, R. E. (2004). Behavior change intervention research in community settings: how generalizable are the results? *Health Promotion International*, 19(2), 235-245.
- Eastwood, D. B., Brooker, J. R., & Gray, M. D. (1999). Location and other market attributes affecting farmers' market patronage: the case of Tennessee. *Journal of Food Distribution Research*, 30(1), 63-72.
- Eaton, D. K., Kann, L., Kinchen, S., Ross, J., Hawkins, J., Harris, W. A., et al. (2006). Youth risk behavior surveillance-United States, 2005. *Morbidity and Mortality Weekly Report*, 55(SS-5), 1-108.
- Evans, R. G., Barer, M. L., & Marmor, T. R. (Eds.). (1994). *Why are some people health and others not? The determinants of health of populations*. New York: Aldine de Gruyter.
- Eyer, J. (1984). Capitalism, health, and illness. In J. B. McKinlay (Ed.), *Issues in the political economy of health care* (pp. 23-59). New York: Tavistock Publications.
- Fals-Borda, O. (1991). Some basic ingredients. In O. Fals-Borda & M. A. Rahman (Eds.), *Action and knowledge: breaking the monopoly with participatory action research* (pp. 3-12). New York: Apex Press.
- Feinstein, J. S. (1993). The relationship between socioeconomic status and health: a review of the literature. *Milbank Quarterly*, 71(2), 279-322.
- Fisher, A. (2002, Spring). Community food security: a promising alternative to the global food system. *Community Food Security News*, 5.
- Foege, W. H. (1987). Public health: moving from debt to legacy, 1986 presidential address. *American Journal of Public Health*, 77(10), 1276-1278.
- Food Security Partners of Middle Tennessee. (nd). Food Security Partners of Middle Tennessee. Retrieved May 20, 2008, from <http://www.foodsecuritypartners.org/>.
- Foucault, M. (1978). *The history of sexuality: an introduction* (Vol. I). New York: Random House, Inc.
- Foucault, M. (1980). *Power/knowledge: selected interviews and other writings (1972-1977)*. New York: Pantheon Books.
- Freedman, D., Koenig, L. J., Wiener, J., Abrams, E. J., Carter, R. J., Tepper, V., et al. (2006). Challenges to re-enrolling perinatally HIV-infected and HIV-exposed but uninfected children into a prospective cohort study: strategies for locating and

- recruiting hard-to-reach families. *Paediatric and Perinatal Epidemiology*, 20, 338–347.
- Freedman, D., Salazar, L. F., Crosby, R. A., & DiClemente, R. J. (2005). Environmental barriers to HIV prevention among incarcerated adolescents: a qualitative assessment. *Adolescence*, 40(158), 333-343.
- Freedman, D. A. (2007). A community health case study: creating a food oasis in a food desert. *The Community Psychologist*, 40(2), 67-70.
- Freire, P. (2005). *Pedagogy of the oppressed* (30th Anniversary ed.). New York: Continuum International Publishing Group Inc.
- Frumkin, H., Hess, J., & Vindigni, S. (2007). Peak petroleum and public health. *Journal of the American Medical Association*, 298(14), 1688-1690.
- Galtung, J. (1969). Violence, peace, and peace research. *Journal of Peace Research*, 6(3), 167-191.
- Geertz, C. (2001). Thick description: toward an interpretive theory of culture. In R. M. Emerson (Ed.), *Contemporary field research: perspectives and formulations* (2nd ed., pp. 55-77). Long Grove, IL: Waveland Press Inc.
- Geiger, H. J. (2005). The unsteady march. *Perspectives in Biology and Medicine*, 48(1), 1-9.
- Giddens, A. (1984). *The constitution of society*. Berkeley: University of California Press.
- Glaser, B. G., & Strauss, A. L. (1967). *The discovery of grounded theory: strategies for qualitative research*. Chicago: Aldine.
- Glasgow, R. E., Lichtenstein, E., & Marcus, A. C. (2003). Why don't we see more translation of health promotion research to practice? Rethinking the efficacy-to-effectiveness transition. *American Journal of Public Health*, 93(8), 1261-1267.
- Govindasamy, R., Italia, J., & Adelaja, A. (2002). Farmers' market: consumer trends, preferences, and characteristics. *Journal of Extension*, 40(1).
- Green, L. W. (2003). From research to "best practices" in other settings and populations. *American Journal of Health Behavior*, 25(3), 165-178.
- Guba, E. G., & Lincoln, Y. S. (2005). Paradigmatic controversies, contradictions, and emerging confluences. In N. K. Denzin & Y. S. Lincoln (Eds.), *The Sage handbook of qualitative research* (3 ed., pp. 191-215). Thousand Oaks, CA: Sage.

- Haan, M., Kaplan, G. A., & Camacho, T. (1987). Poverty and health: Prospective evidence from the Alameda Study. *American Journal of Epidemiology*, *125*(6), 989-998.
- Hakim, I. A., McClureb, T., & Lieblerb, D. (2000). Assessing dietary d-limonene intake for epidemiological studies. *Journal of Food Composition and Analysis* *13*(4), 329-336.
- Haraway, D. (1988). Situated knowledges: The science question in feminism and the privilege of partial perspective. *Feminist Studies*, *14*(3), 575-599.
- Hayes, M. (1994). Evidence, determinants of health and population epidemiology: Humming the tune, learning the lyrics. In M. Hayes, L. Foster & H. Foster (Eds.), *The determinants of population health: A critical assessment*. Victoria, BC: Western Geographical Series.
- Heron, J. (1996). *Co-operative inquiry: research into the human condition*. London: Sage Publications, Inc.
- Hertzman, C., Frank, J., & Evans, R. G. (1994). Heterogeneities in health status and the determinants of population health. In R. G. Evans, M. L. Barer & T. R. Marmor (Eds.), *Why are some people healthy and others not? The determinants of health of populations* (pp. 67-92). Hawthorne, NY: Aldine de Gruyter.
- Hofrichter, R. (2003). The politics of health inequities: contested terrain. In R. Hofrichter (Ed.), *Health and social justice: politics, ideology, and inequity in the distribution of disease* (pp. 1-56). Jossey-Bass: San Francisco.
- Holben, D. H. (2006). Position of the American Dietetic Association: food insecurity and hunger in the United States. *Journal of the American Dietetic Association*, *106*, 446-458.
- hooks, b. (2000). *Feminist theory: from margins to center* (2 ed.). London: Pluto Press.
- Institute of Medicine. (2003). *The future of the public's health in the 21st century*. Washington: National Academies Press.
- Israel, B. A., Schulz, A., Parker, E., & Becker, A. B. (1998). Review of community-based research: assessing partnership approaches to improve public health. *Annual Review of Public Health*, *19*, 173-202.
- Jetter, K. M., & Cassady, D. L. (2006). The availability and cost of healthier food alternatives. *American Journal of Preventive Medicine*, *30*(1), 38-44.

- Kawachi, I., & Berkman, L. F. (2003a). Introduction. In I. Kawachi & L. F. Berkman (Eds.), *Neighborhoods and health* (pp. 1-19). New York: Oxford University Press.
- Kawachi, I., & Berkman, L. F. (Eds.). (2003b). *Neighborhoods and health*. New York: Oxford University Press.
- Kemmis, S., & McTaggart, R. (2000). Participatory action research. In N. K. Denzin & Y. S. Lincoln (Eds.), *The handbook of qualitative research* (pp. 567-605). Thousand Oaks, CA: Sage Publications, Inc.
- Kilbourne, J. (1994). Still killing us softly: advertising and the obsession with thinness. In P. Fallon, M. Katzman & S. Wooley (Eds.), *Feminist perspectives on eating disorders* (pp. 395-418). New York: Guilford Press.
- Kindig, D., & Stoddart, G. (2003). What is population health? *American Journal of Public Health, 93*(3), 380-383.
- Krieger, N. (1994). Epidemiology and the web of causation: Has anyone seen the spider? *Social Science & Medicine, 39*(7), 887-903.
- Labonte, R., Polanyi, M., Muhajarine, N., McIntosh, T., & Williams, A. (2005). Beyond the divides: Towards critical population health research. *Critical Public Health, 15*(1), 5-17.
- Lappé, F. M., & Lappé, A. (2003). *Hope's edge: the next diet for a small planet*. New York: Penguin Group Inc.
- Lather, P. (1991). *Getting smart: feminist research and pedagogy with/in the postmodern*. New York: Routledge.
- LaVeist, T. A. (Ed.). (2002). *Race, ethnicity, and health: a public health reader*. San Francisco: Jossey-Bass.
- Levy, B. S., & Sidel, V. W. (Eds.). (2006). *Social injustice and public health*. New York: Oxford University Press.
- Lewin, K. (1997). Psychological ecology (1943). In *Resolving social conflicts: field theory in social science* (pp. 289-300). Washington: American Psychological Association.
- Maguire, P. (1987). *Doing participatory research: a feminist approach*. Amherst: The Center for International Education, University of Massachusetts.
- Marmot, M. (2005). Historical perspective: the social determinants of disease--some blossoms. *Epidemiologic Perspectives & Innovations, 2*(4).

- Marmot, M., & Syme, S. (1976). Acculturation and coronary heart disease in Japanese-Americans. *American Journal of Epidemiology*, 104(3), 225-247.
- McFague, S. (2001). *Life abundant: Rethinking theology and economy for a planet in peril*. Minneapolis: Augsburg Fortress.
- McIntosh, P. (1989). White privilege: Unpacking the invisible knapsack. *Peace and Freedom*, July/August, 10-12.
- McQuiston, C., Parrado, E. A., Olmos-Muñiz, J. C., & Bustillo Martinez, A. M. (2005). Community-based participatory research and ethnography: the perfect union. . In B.A. Israel, E. Eng, A.J. Schulz & E.A. Parker (Eds.), *Methods in community-based participatory research for health* (pp. 210-229). San Francisco: Jossey-Bass.
- Miles, M. B., & Huberman, A. M. (1994). Making good sense: drawing and verifying conclusions. In M. B. Miles & A. M. Huberman (Eds.), *Qualitative data analysis* (pp. 245-280). Thousand Oaks, CA: Sage.
- Minkler, M., & Wallerstein, N. (Eds.). (2003). *Community-based participatory research for health*. San Francisco: Jossey-Bass.
- Mitchell, D. (2000). *Cultural geography: a critical introduction*. Malden, MA: Blackwell Publishers.
- Moore, L. V., & Diez Roux, A. V. (2006). Associations of neighborhood characteristics with the location and type of food stores. *American Journal of Public Health*, 96(2), 325-331.
- Morgen, S. (2002). *Into our own hands: the women's health movement in the United States, 1969-1990*. New Brunswick: Rutgers University Press.
- Morland, K., Wing, S., Diez Roux, A., & Poole, C. (2002). Neighborhood characteristics associated with the location of food stores and food service places. *American Journal of Preventive Medicine*, 22(1), 23-29.
- Morrow, V. (1999). Conceptualising social capital in relation to the well-being of children and young people: a critical review. *Sociological Review*, 47(4), 744-765.
- Narayan, U. (2003). The project of feminist epistemology: Perspectives from a nonwestern feminist. In C. R. McCann & S. K. Kim (Eds.), *Feminist theory reader: Local and global perspectives* (pp. 308-317). New York: Routledge.
- National Institutes of Health. (2006). *Understanding adult obesity* (No. NIH Publication 01-3680). Bethesda: U.S. Department of Health and Human Services.

- National Institutes of Health. (2007, May 16, 2007). NIH budget. Retrieved April 3, 2008, from <http://www.nih.gov/about/budget.htm>.
- National Research Center. (2006). *Community food project evaluation toolkit* (3 ed.). Boulder: National Research Center, Inc.
- Nelson, G., & Prilleltensky, I. (Eds.). (2005). *Community psychology: in pursuit of liberation and well-being*. New York: Palgrave.
- Nord, M., Andrews, M., & Carlson, S. (2005). *Household food security in the United States, 2004* (No. ERR-49). Washington: Economic Research Service.
- Nord, M., Andrews, M., & Carlson, S. (2006). *Household food security in the United States, 2005* (No. ERR-29). Washington: U.S. Department of Agriculture.
- Nord, M., Andrews, M., & Carlson, S. (2007). *Household food security in the United States, 2006* (No. ERR-49). Washington: U.S. Department of Agriculture.
- Nussbaum, M. C. (2000). *Women and human development: the capabilities approach*. New York: Cambridge University Press.
- Ohls, J., Radbill, L., & Schirm, A. (2001). *Household food security in the United States, 1995 -1997: technical issues and statistical report*. Washington: U.S. Department of Agriculture.
- Olesen, V. (2005). Early millennial feminist qualitative research: challenges and contours. In N. Denzin & Y. S. Lincoln (Eds.), *The Sage handbook of qualitative research* (3 ed., pp. 235-278). Thousand Oaks, CA: Sage Publications, Inc.
- World Health Organization. (2000). *The world health report 2000, health systems: improving performance*. Geneva: World Health Organization.
- Parpart, J. (2002). Lessons from the field: Rethinking empowerment, gender, and development from a post-(Post-?) development perspective? In K. Saunders (Ed.), *Feminist post-development thought: rethinking modernity, post-colonialism and representation* (Vol. 41-56 ). London: Zed Books.
- Pirog, R., & Benjamin, A. (2005). *Calculating food miles for a multiple ingredient food product*. Ames, IA: Leopold Center for Sustainable Agriculture.
- Pollan, M. (2006). *Omnivore's dilemma: a natural history of four meals*. New York: Penguin Press.
- Powles, J. (1974). On the limitations of modern medicine. In R. L. Kane (Ed.), *The Challenges of Community Medicine* (pp. 89-122). New York: Springer Publishing Company.

- Preston, J., & Davey, M. (2006, September 16). Possible source of bad spinach is named as outbreak widens. *New York Times*.
- President's Task Force on Food Assistance. (1984). *Report of the President's Task Force on Food Assistance*. Washington: U.S. Government Printing Office.
- Produce for Better Health Foundation. (2007). Fruits and veggies: more matters. Retrieved April 3, 2008, from [www.fruitsandveggiesmorematters.org](http://www.fruitsandveggiesmorematters.org).
- Raudenbush, S. W., & Bryk, A. S. (2002). *Hierarchical linear models: applications and data analysis methods* (2nd ed.). Thousand Oaks: Sage Publications.
- Rochon, T. R. (1998). *Culture moves: ideas, activism, and changing values*. Princeton: Princeton University Press.
- Roof, W. C. (2001). Blood in the barbeque: food and faith in the American south. In E. M. Mazur & K. McCarthy (Eds.), *God in the details: American religion in popular culture* (pp. 109-122). New York: Routledge.
- Sack, D. (2001). *Whitebread Protestants: food and religion in American culture*. New York: Palgrave.
- Schensul, S. L., Schensul, J. J., & LeCompte, M. D. (1999). *Essential ethnographic methods: observations, interviews, and questionnaires*. Walnut Creek: Rowman & Littlefield.
- Schroeder, S. A. (2007). We can do better: improving the health of the American people. *New England Journal of Medicine*, 357(12), 1221-1228.
- Schulz, A., Israel, B. A., Parker, E., Lockett, M., Hill, Y. R., & Wills, R. (2003). Engaging women in community based participatory research for health: the east side village health worker partnership. In M. Minkler & N. Wallerstein (Eds.), *Community-base participatory research for health* (pp. 293-315). San Francisco: Jossey-Bass.
- Schulz, A. J., & Mullings, L. (2006). *Gender, race, class, and health: intersectional approaches*. San Francisco: Jossey-Bass.
- Sen, A. (1999). *Development as freedom*. New York: Anchor Books.
- Shi, L., & Singh, D. (2005). *Essentials of the U.S. health care system*. Sudbury, MA: Jones and Bartlett Publishers.
- Smith, L. T. (1999). *Decolonizing methodologies: research and indigenous peoples*. New York: Zed Books Ltd.



- Snow, D. A., & Benford, R. D. (1992). Master frames and cycles of protest. . In A. D. Morris & C. M. Mueller (Eds.), *Frontiers in social movement theory* (pp. 132-155). New Haven: Yale University Press.
- Sokolov, R. (1991). *Why we eat what we eat*. New York: Touchstone.
- Spivak, G. C. (1988). Can the subaltern speak? In C. Nelson & L. Grossbert (Eds.), *Marxism and the interpretation of culture* (pp. 271-313). Urbana, IL: University of Illinois Press.
- Sprague, J. (2005). *Feminist methodologies for critical researchers: bridging differences*. Lanham, MD: Rowman & Littlefield Publishers, Inc.
- Star, S. L. (1989). *Regions of the mind: brain research and the quest for scientific certainty*. Stanford, CA: Stanford University Press.
- Syme, S. (2005). Historical perspective: The social determinants of disease-some roots of the movement. *Epidemiologic Perspectives and Innovations*, 2(2), 1-7.
- Thomson, C. A., Newton, T. R., Graver, E. J., Jackson, K. A., Reid, P. M., Hartz, V. L., et al. (2007). Cruciferous vegetable intake questionnaire improves cruciferous vegetable intake estimates. *Journal of the American Dietetic Association*, 107(4), 631-643.
- Tsemberis, S., Gulcur, L., & Nakae, M. (2004). Housing first, consumer choice, and harm reduction for homeless individuals with dual diagnosis. *American Journal of Public Health*, 94(4), 651-656.
- U.S. Census Bureau. (2000). *Decennial Census*. Washington, DC: U.S. Census Bureau.
- U.S. Department of Health and Human Services. (2000). *Healthy people 2010: understanding and improving health* (2 ed.). Washington: Government Printing Office.
- Wald, M. L. (2006, September 28). Second company is implicated in outbreak linked to spinach. *New York Times*.
- Wallack, L., & Lawrence, R. (2005). Talking about public health: developing America's "second language". *American Journal of Public Health*, 95(4), 567-570.
- Wallerstein, N., & Duran, B. (2003). The conceptual, historical, and practice roots of community based participatory research and related participatory traditions. In M. Minkler & N. Wallerstein (Eds.), *Community-based participatory research for health* (pp. 27-52). San Francisco: John Wiley & Sons, Inc.

- Wang, C. (2003). Using photovoice as a participatory assessment and issue selection tool: a case study with the homeless in Ann Arbor. In M. Minkler & N. Wallerstein (Eds.), *Community-based participatory research for health* (pp. 179-196). San Francisco: Jossey-Bass.
- Weber, L. (2006). Reconstructing the landscape of health disparities research: promoting dialogue and collaboration between feminist intersectional and biomedical paradigms. In A. J. Schulz & L. Mullings (Eds.), *Gender, race, class, and health: intersectional approaches* (pp. 21-59). San Francisco: Jossey-Bass.
- Weiss, R. S. (1994). *Learning from strangers: the art and method of qualitative interviews*. New York: The Free Press.
- White, E. C. (Ed.). (1990). *The black women's health book: speaking for ourselves*. Seattle: Seal Press.
- Williams, B. T., & Brydon-Miller, M. (2004). Changing directions: participatory-action research, agency, and representation. In S. G. Brown & S. I. Dobrin (Eds.), *Ethnography unbound: from theory shock to critical praxis* (pp. 241-258). Albany: State University of New York Press.
- Witt, D. (1999). *Black hunger: food and the politics of U.S. identity*. New York: Oxford University Press.
- Zenk, S. N., Schulz, A. J., Israel, B. A., James, S. A., Bao, S., & Wilson, M. L. (2005). Neighborhood racial composition, neighborhood poverty, and the spatial accessibility of supermarkets in metropolitan Detroit. *American Journal of Public Health, 95*(4), 660-667.