



# Bringing Community Voices to the Table:

Food Empowerment Project  
Food Access in San José Focus Groups  
Qualitative Data Analysis Results



## FOOD EMPOWERMENT PROJECT

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# Community Focus Groups:

Somos Mayfair, Sacred Heart Community Service, and CommUniverCity

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# Acknowledgements:

Food Empowerment Project would like to first thank our partners in this effort. We hope that this report will help ensure they will get funding to continue the wonderful work they are doing to help create healthier communities in San José:

Somos Mayfair  
Sacred Heart Community Service  
CommUniverCity

Food Empowerment Project would like to thank everyone who helped with the focus groups:

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Food Empowerment Project feels it is important to note that barriers to accessing healthy food are complex. These barriers are not just related to proximity; transportation issues, the lack of a living wage, and lack of time (people working a number of jobs to make ends meet, while juggling numerous other responsibilities) are all contributing factors that make it difficult for people to have access to and be able to afford healthy foods. We want communities to be able to access and cook with fresh foods that many are used to, rather than having to cook with less healthy ingredients.

No one is more familiar with barriers to access than the people in the communities most affected. F.E.P. feels that solutions to access issues must come from within the communities themselves and will have to be diverse, with a range of other societal issues taken into account.

This report is available in English and in Spanish on our website. For print copies, please contact us.

# Background

In 2010, Food Empowerment Project released our report, *Shining a Light on the Valley of Heart's Delight: Taking a Look at Access to Healthy Foods in Santa Clara County's Communities of Color and Low-Income Communities*.

## Covered in the report were our findings:

- Twice as many large supermarkets in higher-income areas than lower-income communities
- On a per-capita basis, higher-income areas have 2.4 times as many larger supermarkets than lower-income areas
- Lower-income areas have nearly twice as many liquor stores and 50% more "meat" markets than higher-income areas
- On average, higher-income areas have twice as many locations with fresh fruits and vegetables compared to lower-income areas
- Higher-income areas have 14 times more locations with frozen fruit and six times more locations with frozen vegetables than lower-income areas
- Access to organic fruits and vegetables is almost non-existent in lower-income areas
- In lower-income areas, much of the fresh and canned produce was not marked (no prices)
- "Meat" alternatives were only available in 2% of the locations surveyed in lower-income areas compared to 22% in higher-income areas
- Vegan dairy alternatives were only available in 1% of the lower-income locations compared to 21% in higher-income locations\*

\* According to the U.S. Department of Health and Human Services, 95 percent of Asians, 60 percent to 80 percent of African Americans and Ashkenazi Jews, 80 percent to 100 percent of American Indians, and 50 to 80 percent of Latinos are lactose intolerant.

# To get a better understanding of the situation and needs of the community, we organized focus groups.

We worked with the community organizations Somos Mayfair, Sacred Heart Community Services, and CommUniverCity, which recruited their members to participate in our focus group. Each individual was paid \$50 for participating, and we also ate vegan Mexican food that we had delivered. Many participants expressed an interest in learning how to cook vegan foods. Each focus group was videotaped.

## Purpose

The purpose of our focus groups was to hear from the community about their situation and needs with regard to healthy food access. As an organization, we acknowledge that the barriers for people to purchase fresh and healthy foods are not limited to access issues. We wanted to hear directly from impacted communities to learn how they experience these barriers.

## Methods

Three focus groups were conducted between January and February 2012, each lasting for approximately 1-2 hours. A total of 18 community members participated in the groups and were asked approximately 12 questions related to food access.

Questions were asked in Spanish and transcripts were translated into English for data analysis. A qualitative data analysis was performed using the statistical analysis software Atlas.TI version Win 6.2. The data was coded for themes and then given sub codes. Codes that had the highest frequency were identified as some of the most explanatory factors related to the issue of food access in these neighborhoods.



Focus group at Sacred Heart

# Results/Findings

## Barriers to Access: Expensive foods, location of stores (far distance)

The most frequently mentioned barrier to accessing foods in general – healthy foods, quality foods, and organic foods – was high or expensive prices. Most participants stated that expensive prices prevented them from accessing certain foods or types of foods. Participants stated that high prices were deciding factors that determined in which stores they would shop and which types of products they would or would not buy. One participant noted that while many say the prices at farmers' markets are low, they are actually much more expensive.

The second most commonly mentioned barrier to accessing foods was the location of stores in relation to participants' homes or work. Many participants, who do not have easily accessible transportation, stated that many grocery stores were located far from their homes, too far to walk. One participant mentioned that it was not her lack of money that prevented her from shopping, it was the far distance in a car that she would have to travel to arrive at the store. Additionally, many stated that the drive to a store was often 20 minutes or longer and used more gas than families could afford. Another stated that she used to go by bus to do shopping, but bringing the purchases home on the bus was difficult. Several participants stated that the far distance they must travel results in them making weekly trips to the grocery stores and often making do with what they have if they do not have an item they need at home.

Several other participants said that while there are multiple convenience and corner stores within walking distances of their homes, these stores do not stock fresh produce or other staple foods needed by families. One woman said, "They don't have vegetables..." Another said, in reference to gas station food marts, "No, one doesn't get food there."

## Shopping at Multiple Stores

### Selection, affordability, location

Almost all participants in each of the focus groups stated that in order to purchase the foods they and their families need, they routinely shop at multiple stores. The most common reason for this is because most stores do not carry all of the products one needs to purchase on a regular basis. One woman, in reference to a particular store, stated, "They have almost no produce. The produce they do have is about to go rotten." Another woman cited regularly visiting three major grocery stores because they all carry specific products that the other two do not carry. Most participants who reported shopping at multiple stores explained it by saying they had to make multiple trips because it is important to get their families the products they need, despite the inconvenience and extra time it often takes.

The second most common reason that participants shop at multiple stores was to find the lowest prices on products. One woman summarized the groups' response by saying, "One makes rounds to the stores, to buy everything, if one has time." The last reason for shopping at multiple stores was due to location. One participant stated, "It depends also on where the stores are; if they're close or if they're not." Others mentioned they will often shop at stores near work out of convenience, and then get what those stores do not have at other stores closer to home.

# Adapting Meals

## Distance, lack of time, lack of fresh foods

When participants were asked if they ever had to change or alter their meals due to not having the adequate foods or ingredients for meals, most indicated this was a common experience. Several participants stated that this often occurs due to the distance they would have to travel to the stores and said, "So it depends also on where the stores are, if they're close or if they're not, one has to settle for/make do with what one can grab." This comment was echoed by two others who said they often settle for canned fruits or vegetables even though a meal calls for fresh ingredients because the store selling fresh products is too far from home. For example, one said, "Before, I used fresh tomatoes for soups... now to make soup, I buy a little can of tomato paste."

Another stated, "Usually when there are no tomatoes or something like that, I go also to Dollar, and there are bad tomatoes because they've been there a long time. Usually what I do is buy Ragu or other sauces like that premade. Usually it's a little more expensive, but, well, that's the only thing if it needs to have tomatoes, something that I'm going to make, well, that's what I use, if in case I don't find fresh tomatoes."

Several other participants mentioned lack of time as a reason for not being able to purchase what they needed for a meal, thus having to use alternative ingredients. For many, this challenge goes back to the issue of stores being located far from homes. Others simply do not have the time to walk or drive to a store for various reasons, whether close or far.

One participant discussed how it has been difficult for her to adapt to eating canned vegetables, as she grew up on a ranch in Mexico where her father grew vegetables; she listed all of the vegetables her father used to prepare: "radishes, nopales, green beans, everything, cabbage, lettuce... from the earth, we'd cut them ourselves and eat them. Carrots, spinach, everything. And that's why it's difficult for me to adapt to eating canned vegetables...there's a lot here but I can't."

## Nutrition

### Cost, time

Nutrition was identified by many focus group participants as a priority to them and their families. Most stated they are aware of the importance of a healthy diet for themselves, and especially their children. One woman, in referring to how she is hoping to prevent her child from being overweight like herself said, "So I try fruit every day. Thank goodness they like fruit, and thank goodness they don't like meat so much. And lots of vegetables." There were, however, several responses that indicate that there are factors that often interfere with the participants providing healthy, nutritious meals to their families. Many women stated that the high cost of healthy foods prevents them from always offering them to their children. One woman stated, "To keep oneself healthy involves a lot of money." Another participant said, "[Because of wages] people can't offer to their children healthier food, because we don't have access." Lack of time was also identified by participants as a barrier to preparing healthier meals. One participant stated how frequently the children come home hungry and that if she does not have adequate time to prepare, the nutrition of the meal gets compromised. Another woman said, "In the house we don't eat healthy all the time, because we're doing our jobs."

# Organic Foods

## Interest, education

Most participants indicated they are interested in increased opportunities to purchase organic foods where they live. Two participants mentioned they would prefer to buy produce without chemicals and that they believe organic produce offers greater nutrients than non-organic produce. Several women also mentioned they would like more education and information on organic foods. One participant said she would like more education to know what is organic and what is not, and another indicated that she is not very familiar with organic products. Many expressed support for this sentiment: If I had the access, for health reasons I would prefer not to have any of those chemicals in the vegetables.

# Growing Foods

## Home, community gardens

When asked about opportunities to grow their own foods, two participants reported already growing food at home. One of these participants discussed how both of her children are involved in helping plant at their home garden, and she thinks involving them in this process at a young age will help shape healthier eating patterns later in life. Other participants expressed great interest in the opportunity to grow at or purchase from a community garden. Several women said working in a community garden would help increase access to fruits and vegetables and would help teach young children about ways to grow and eat healthy. Another added, “And because, well, we can sometimes include our children [in the gardening activity]. Because they say, ‘I want that fruit’ and they come and smell it. Then also it’s a little like a time to teach them.”

A number of participants also commented that the community gardens near them were not cooperatives and that the communities did not have access to the food because they were privately owned or individuals owned the plots.

Another stated she would like a garden but did not have space, and another said if you are renting, having a garden is hard to do or not permitted.

# Shared/Community Shopping

Many participants shared that they often will purchase small amounts of groceries for their family members, neighbors, or friends. Most who reported doing so explained it can be helpful when one needs a few items and someone who is already making a trip purchases those items for another. They referred to this as *trueque*: a type of bartering based on mutuality and social expectation. Other participants stated they do not purchase for others and expressed a lack of trust with money as the reason for not having interest in developing a community system of shopping to increase access. One woman stated, “Sometimes there are lot of problems with money. I think that people sometimes go wrong with money. Sometimes [they say,] ‘Oh, you pay me this and this.’ Sometimes this [causes]... problems.”

# Assistance

Various community members stated that they either have or currently receive some type of assistance. The most common sources of assistance were from the La Mesa Verde\* program, a program out of Sacred Heart Community Service, and from the Sacred Heart Community Food Pantry itself. Participants who reported they receive assistance from these two programs mentioned they really liked both services, and in particular they liked how the La Mesa Verde program helps teach community members how to grow their own food.

Another participant mentioned how she appreciates the services from Sacred Heart Community Service because they offer trainings, resources, and they smile. Two participants reported having used WIC (Women, Infants, and Children), and that it helped them significantly.

For others who commented on receiving government assistance, their experience was rather different. One woman described her experience of seeking help with a medical bill at a Social Service office as “humiliating.” Another participant stated, “Many years ago, I believe more than twenty, I had access to, for example Welfare, or something like that. But I felt so humiliated, that is... to go to one of those agencies where they make you feel homeless, [like] a person with nothing. And the atmosphere was so hostile.” A few other participants mentioned it was important to them to work hard and not receive assistance, to allow families who may need it more to receive it.

One woman talked about her experience at WIC when her daughter was considered underweight: “My daughter likes vegetables a lot... and she was one pound less than she was supposed to be. And the nutritionist was telling me in WIC that I should give my daughter pizza, chicken nuggets, everything with grease, so that she would gain weight. And I said to her, ‘But that’s counterproductive.’” The nutritionist asked her if she wanted her daughter to gain weight, but she explained she didn’t want her daughter to have high cholesterol like her son and she wanted her daughter to be healthy. Her concern was that many people who need WIC might believe this because the nutritionist is viewed as an expert.

\*Sacred Heart Community Service’s program was founded in 2009 to provide low-income families with culturally appropriate organic fruits and vegetables in their own homes. They have planted more than 350 family gardens throughout the city of San José.

# Dairy and Meat Alternatives

Several participants stated that they currently purchase and consume dairy alternative products such as soy and almond milk. One woman stated her husband is lactose intolerant and another said that she only finds dairy alternatives at the larger grocery stores. Another talked about how you can buy a non-dairy milk and it does not go bad.

Several women reported consuming meat alternative products, such as those primarily made of soy. One participant mentioned that eating soy has nutritional benefits. Another said that it can actually be more economical: “For example, one of the things, like meat alternatives like soy, there are so many things you can make with soy. One that I love is ceviche. Ceviche remains the same whether you use fish or not. It’s the same ingredients, but it’s not fish...it’s really good. But there are so many things one can make; you can make the same things.”



Focus group at CommUniverCity

# Recommendations for Increased Access

The most common response when asked how access to foods may be increased within these communities was to provide more information. More specifically, one participant stated, “Perhaps if I had more access to information about when those markets [farmers’ markets] are open, it would be a great resource to know.”

Other participants expressed interest in learning more about nutrition and how to prepare healthy meals. Several others said that more grocery stores, such as Mi Pueblo or Whole Foods Market, need to be placed in their neighborhoods. Finally, one participant said providing community members with more information and opportunities to volunteer with community gardens would allow people to have increased access to healthy foods.

## Discussion

One thing is for certain: these community members were very aware of what was taking place in their neighborhoods and how the importance of what they eat affects their health.

### Understanding the impacts:

“Because if we don’t eat well, we’re going to have problems of high cholesterol, diabetes, because we’re eating (... not healthfully), so at the end, we’re setting an example for our children, and our children are going to continue what they’re going to see. So it’s sad, thinking of poverty, it’s a challenge right?”

“I believe diabetes, like every other illness, is not only individual. It’s collective.”

“And I think that those fast foods like those ‘McDonald’s,’ all those foods, are damaging. But we don’t realize it. That a hamburger, how many calories, and the french fries. And they’re good because one gets used to it.”

“Well, also, we don’t have stores with fresh fruits and vegetables close by. There will always be little stores that sell chocolates and potato chips, and also McDonald’s and Burger King. These are everywhere.”

“So now, well, it’s a little ... like fighting against, well, what one sees mostly on television. A lot of bombardment of food, hamburgers and all that. So it’s like, but it can be done, it can, little by little. I, in my case like others, we are making eating healthier our usual food.”

“The other thing I noticed, because I go to Kaiser, right? And they tell me, ‘You have high blood pressure.’ In place of telling me what are my options, in place of telling me that, they tell me, ‘Here is the pill.’ No! What I want is to know what are other alternatives that I have to know how to fight this illness, right? That is, okay, I know that I have to go to the Internet, to get informed. But before we didn’t have that access. To learn that I shouldn’t eat salt, that I shouldn’t eat cheese, the things that I shouldn’t add to my food.”



Members of Somos Mayfair keep fit at their 2014 Zumbathon

## Adjusting to Healthier Eating

Many members in our focus groups said they ate healthier and actually grew much of their own food in their native countries. Unfortunately, coming to the US, they had to adjust to eating more processed foods.

“As in my case, it’s the same. It’s, well, everything is a process. So now I prefer a healthy meal. And now I’m learning that a healthy meal doesn’t have to taste bad if we know how to cook, and we can make changes. We can implement, for example, pozole. Make it with vegetables, and it tastes good. What we have to learn is how to prepare things. Because they have such a good flavor when one learns to cook, or simply make a salad, it tastes so good when one knows how to prepare it well so that the kids don’t have any problem eating it.”

### For their children

“So what to do if I go home and have kids and don’t know how to feed myself? I’m transmitting, I’m modeling for my kids, my kids and for my community, and at the end everyone together. So I think it’s all a combination. It’s a lack of information, that the public health places should focus on how to nourish better, how to balance our meals, that is. Yes, they put the chart in front of us, that here is the [food] pyramid, that is what I need to eat, yes. But for example, our community, my kids, we don’t eat salad, we don’t eat vegetables, we don’t eat fruit. And if we eat fruit, we put on it a mountain of sugar...”

## Ethics

Food Empowerment Project continues to maintain that people deserve food choices that do not betray their ethics. A couple of the participants discussed that their children were either vegetarian or vegan. Another said her daughter did not like “meat.”

During lunch, one participant shared that her daughter was a vegan and she had to learn to cook for her. She added that her daughter liked meat, but did not eat it because of the way the animals are treated. She said she and her husband have learned a lot from their daughter. At first they discouraged her, saying one person couldn’t change the world. Their daughter said it doesn’t matter – it only matters what you do. Change yourself.

“...My daughter doesn’t want to eat meat...therefore, I have had to become a little accustomed to not give meat, and yes I still eat it, but not her. Therefore, for me it feels a bit more difficult, and I make food for her and other food for those left. Therefore, yes, at times I put serious thought to how it’s better for us to adapt to eat alternative food, soy food, because apart from that it is more economic, it is alternative. And now I consume it; the alternative I always eat is soyriso, soy chorizo. And I also make it or get it at the store. And the soy meat, I am trying to cook and to know how to prepare it better to have a good flavor, because it is an alternative and it’s more economic. It’s economic because I don’t have to go to the store much, you are only going to have to adapt. You have to adapt. But, the soy milk is also good and I also use it.”

# Recommendations

Based on these focus groups, our recommendations (some of which were suggested by the participants) include:

- The City should work to create more community gardens that are open to the public and serve those communities most impacted by lack of access to fresh fruits and vegetables.
- The concept of trueque, which showed that communities are grounded in social expectations of reciprocity and mutuality, should be highlighted as a community value and could be promoted as one of the solutions.
- Cooking classes to teach participants how to cook with fruits and vegetables and vegan foods, where they can also share healthy recipes.
- La Mesa Verde's program seemed to be a true success with those who were involved. Not only did the program allow participants to grow their own food, it offered nutrition classes that people enjoyed and learned from.
- Information on the term organic that is bilingual and culturally sensitive. It should include information on the chemicals as well as impacts on farm workers.
- Information on the farmers' markets in the areas should give the times and be bilingual. We would also suggest that those wanting to bring a farmers' market to impacted communities should survey the community to ensure they are finding the best location, days, and times.
- Schools should be encouraged to talk with students' parents about health issues and healthy eating.
- Educate WIC employees and others providing such services on healthy eating and, if children are vegan, how to respect their diet. Given that milk is promoted so heavily in government-funded programs, employees of those programs should receive education regarding lactose intolerance.
- One of the recommendations we made proved to be unacceptable by the participants in our focusgroups. We had discussed a new program in Baltimore where participants could order their groceries online and pick them up at a local library. However, when asked if they would use this type of program, many respondents shared the sentiment that, "I want to see the food, touch it, smell it."

# Other Recommendations:

These recommendations are made based on our report and the work of other organizations:

- Offer bilingual information on lactose intolerance, which includes symptoms and information on what the stores offer that is vegan (i.e., with zero cholesterol).
- Bilingual information on the benefits of eating fruits and vegetables.
- Bilingual information on alternative sources of protein, such as lentils, beans, etc. Make nutritional information and suggestions culturally relevant to the areas being served.
- “Double bucks” program that will make EBT go further when used for healthy food.
- When connecting with neighbors, try a collective cooking/eating program like potlucks, so they only have to prepare one dish and can still eat healthy.
- Farm stands that resell from farms in other neighborhoods so that it can be in different places on different days.
- Integrating healthy food and education into already used social service programs and organizations, including schools.
- City, State, and Federal agencies should pass laws that guarantee living wages for all workers, whether they’re employed by public or private entities.
- Those who organize farmers’ markets need to work to lower prices to ensure that nearby residents can afford fresh produce (a couple of farmers’ markets have not worked in one of these areas).
- Farmers’ markets should be organized keeping public transportation in mind. Ideally, if farmers’ markets are being organized to help with access to healthy foods, the community needs a way to help residents with transportation to do their shopping.
- Farmers’ markets should have food that is culturally appropriate for those in the community.
- Have bike racks at farmers’ markets and all stores to allow those on bikes to leave them securely while they shop.



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