Spokane Healthy Corner Store ARRA Funded Program

October 2009-December 2011

The Healthy Corner Store (HCS) program generated enthusiasm and publicity here in the City of Spokane while it was funded but sustainability did not happen according to plan design. We utilized, expanded and personalized the Delridge, Seattle HCS model and toolkit and seemed to have all the elements of a successful program in place. We had involvement from the neighborhood community, store owners, media and several other organizations during the time that the health district was actively managing the program.

Now, 15 months after the end of this project the success of HCS is questionable at best. One store (Bong’s) has been sold and the new owners removed the signage outside the store. Although the new store owners continue to stock fresh fruit and vegetables, the variety of options and freshness have decreased considerably. Bong’s largest environmental change success featuring fresh produce instead of Hostess products at the entrance of the store has reverted back to Hostess products. The neighbors who were most involved and motivated are no longer involved in encouraging the new store owner to continue the HCS. Even prior to selling the store, the store owner stopped tracking the sale of healthy items once the MOU expired. She explained that tracking sales was too time consuming since she did not have a cash register that could total purchases by code. The HCS model was not successful in decreasing the sales unhealthy items such as sugar sweetened beverages, candy, alcohol and tobacco nor did it sustainably change the shopping patterns of target audience. (see attached observation)

The second HCS in West Central, Parkside Grocery and Meat continues to be WIC approved and has maintained its tobacco and alcohol free commitment. On the surface this would appear to be a success; however the store owners are struggling financially and may not be able to keep their doors open much longer. There are no financial incentives for being a healthy corner store. Inventory is minimal and one of the refrigeration units has been shut down to save power expenses. Despite the location of the store being within walking distance to the West Central WIC office, WIC clients never seemed to fully embrace the store. Focus group results with WIC clients and WIC employees showed that clients expected the same brand variety of a large grocery store. Some clients had negative experiences with the Parkside store owners and word spread not to go there. Not all the West Central or health district WIC employees supported or promoted the store. Part of this was due to lack of engagement in the project and part was related to biases against the store (hearing client complaints).

In conclusion although the HCS model has proven to work in other areas of the country it cannot be used as a panacea to healthy food access in all low income neighborhoods. The prevalence of convenience stores in low income neighborhoods symbolizes a broken food system. The economy of scale has replaced the corner store leaving small stores incapable of purchasing quantities of healthy foods such as fresh fruit and vegetables, whole grain breads and low fat dairy products at competitive prices. The West Central HCS owners need to do their own purchasing and delivery of healthy foods. This adds 5 or more hours to their 60 hour work week. Culturally convenience stores are not the “go to place” for healthy foods. Despite marketing, signage, refrigeration and store owner prompts, some of the healthy foods expired before they could be sold.

West Central is classified as a USDA Food Desert, yet Wal-Mart and Safeway are within 1-2 miles of the neighborhood. Surveys and focus group results indicate that low income residents in West Central carpool and find ways to shop as far as 15 miles away at Winco to get the best food “deals”. These food deals are often the least expensive, nutritious and most convenient and processed items with the longest shelf and freezer life. “Food value” is not defined the same in all socioeconomic groups.

I have listed only a few of the barriers we encountered in our HCS work here in Spokane. Fundamentally, a HCS will only be sustainable if it is financially successful to the store owner. In order for this to happen the community needs to purchase the healthy items at a price and rate that makes a profit for the store owner. A stronger regional food system can help support the HCS model but more upstream changes to pricing, food production subsidies and media promotion of processed foods along with addressing the root causes of poverty need to be addressed as well. A healthy corner store is not the panacea for healthy communities.

Natalie Tauzin, RD, MPH

ntauzin@srhd.org

Healthy Corner Store Program Manager

Spokane Regional Health District

April 5, 2013