FOOD FOR ALL
Inclusive Food Planning in Austin, Texas
Reuniting Planning and Public Health
Planning in the United States originated with a public health purpose. The planning and public health professions were united by a focus on urban reform and a goal to prevent outbreaks of infectious disease. As planning diverged from its common roots with public health, the profession’s attention moved to managing land use, physical development, and supporting infrastructure. In contrast, public health professionals worked to address individuals’ health. These separate missions have led to a siloed approach to influencing the social determinants that significantly impact individual and population health. Plan4Health works to break these silos and to reconnect planning and public health through a shared vision of healthy places, making the healthy choice easier.

For Austin to be a thriving, equitable, and ecologically resilient community, it must have a healthy and just local food system. Bringing together residents, community leaders, producers, and retailers to create a neighborhood plan wasn’t easy . . . but [Plan4Health] gave us the chance to connect planners and public health professionals and to pilot a new process. And it was a process designed around equity. We wanted to hear from people most negatively impacted by the food system. We want this plan to meet their needs and to be their plan.

Edwin Marty, Food Policy Manager, City of Austin

FOOD SYSTEMS AND THE CITY OF AUSTIN

Food for All
Leveraging Plan4Health funding, the City of Austin and the University of Texas, Lyndon B. Johnson School of Public Affairs completed the City’s first neighborhood food plan. Developed with community partners and residents from North Central Austin, along the Rundberg corridor, the food plan offers a unique model for replication across Austin and other municipalities.

Read Food for All: Inclusive Neighborhood Food Planning in North Austin.

State of the Food System Report
Food for All is an exciting achievement, but is only one piece of Austin’s ongoing efforts to increase access to healthy, nutritious food. Key milestones in Austin’s work were the 2014 decision to hire the City’s first Food Policy Manager and the development of the State of the Food System Report.

Completed in April 2015, the report provides metrics and data about Austin’s food system as well as descriptive overviews of city programs and initiatives related to food. This foundational research united the City in creating a common framework for future action and offered a starting point for Plan4Health.

Read State of Food System Report.

Austin Healthy Food Access Initiative
In July 2016, City of Austin staff members developed the Austin Healthy Food Access Initiative: Improving Access to Good and Affordable Food. The report outlines six recommendations for improving food access in response to City Council Resolution 20160303-020 and the work of Plan4Health. These recommendations offer a roadmap for implementing the Food for All plan, demonstrating Austin’s commitment to sustaining the momentum of Plan4Health.

For more information about policies that have guided Austin’s food system, see the Office of Sustainability’s interactive timeline.

Read Austin Healthy Food Access Initiative.
Plan4Health
Anchored by American Planning Association (APA) chapters and American Public Health Association (APHA) affiliates, with funding through the Centers for Disease Control and Prevention’s Division of Community Health, Plan4Health supports creative partnerships to build sustainable, cross-sector coalitions. The 35 coalitions participating in the Plan4Health project are working to increase access to nutritious foods or to increase opportunities for physical activity. All coalitions include planners and public health professionals as well as a range of community-based organizations, such as universities, local governments, and others committed to building healthy, vibrant communities.

The investments that APA and APHA have made in members across the country will potentially impact millions of residents through policy, systems, and environmental improvements. The same investments will potentially impact more than 60,000 planners and public health professionals who will have access to the best practices and lessons learned from their peers involved in Plan4Health. Plan4Health speaks to a larger effort to connect community members and local professionals through national associations—and to sustain this work through the institutionalization of health and planning practices in coalitions and organizations throughout the country. Plan4Health is one initiative in the movement to build healthy communities, shifting daily decisions in professional practice to view planning as a public health intervention and the built environment as an essential strategy for chronic disease prevention.

While the City of Austin’s Plan4Health project addressed both focus areas, this case study will highlight the nutrition component of the work. For more about the physical activity strategies piloted in Austin, check out the Smart Trips section of this case study.

THE HEALTHY COMMUNITIES MOVEMENT
Coalition-based work to advance healthy, vibrant communities has been led by the Centers for Disease Control and Prevention, the Robert Wood Johnson Foundation, and countless community members and nonprofit organizations across the country.

Plan4Health has benefited from the investments of others and the ongoing commitment to prevent chronic disease. For more information about work at the intersection of the built environment and health, refer to the selected resources below:

Making the Case for Active Cities: The Co-Benefits of Designing for Active Living
Intersections: Health and the Built Environment
Summarizing the Landscape of Healthy Communities

Austin’s Food System
With support from Professors Erin Lentz and Raj Patel of the Lyndon B. Johnson School of Public Affairs, Austin’s Office of Sustainability created Food for All: Inclusive Neighborhood Food Planning in Austin, using an approach that pilots the development of inclusive neighborhood food system planning.

This Plan4Health project focused on engaging directly with residents, retailers, and community leaders to develop a positively framed set of policy interventions that address barriers to accessing healthy food. Framing discussions around “what is great about your community” rather than “what is wrong with it” helped to identify key assets in the community—churches, families, and community groups—and to better understand the challenges faced by the area’s residents.
The research process included these steps:

- **Conduct a comprehensive analysis**: The research team collected and compiled preliminary data and information on various resources and constraints in regard to the food system in North Central Austin. The assessment outlined the general conditions of the area’s population, needs, and food system and established a baseline from which to construct a solid and inclusive community food system.

- **Survey area food retailers**: In order to understand the assets and needs of food retail outlets, the Plan4Health team created a survey and gathered qualitative and quantitative data from food retailers in North Central Austin.

- **Lead focus groups**: The Plan4Health team conducted and facilitated focus group and tabling events to hear the voices and perspectives of community members, including those of different races, ages, backgrounds, and educational levels. Analyzing the voices of the focus groups allowed the team to understand the impact of food insecurity, affordability, quality, accessibility, and cultural acceptability on the community.

- **Interview community leaders**: The Plan4Health team conducted one-on-one interviews with key community members to deepen its understanding and gain practical perspectives of access to healthy food in North Central Austin. The team used this information to recognize food assets and obstacles and to ensure the approach satisfied the needs of the community.

- **Present policy recommendations and solicit community feedback**: The Plan4Health team analyzed data to develop policy recommendations, sharing the findings and policy recommendations with community members.
Conduct a Comprehensive Analysis

In addition to analyzing food systems plans, the Plan4Health team leveraged existing data and parallel projects to understand the food landscape in North Central Austin. While food insecurity rates are not available for the study area, analysis of the Capital Area Food Bank data indicated that younger people, the less educated, the poor, and minorities are more likely to suffer from food insecurity; 75 percent of residents in North Central Austin share these characteristics.

The USDA defines a food desert as “a low-income census tract where a substantial number or share of residents has low access to a supermarket or large grocery store.” The Plan4Health team deepened the USDA definition by incorporating qualitative data sources and conducting walk audits to understand the barriers to accessibility in a more nuanced way.

Committed to a strength-based approach, the team also highlighted food assets—or resources that provide consumers with access to local, fresh, and healthy foods. Within North Central Austin, there are seven school gardens and two community gardens.

Figure 1.2 Food Resources in the North Central Austin/Rundberg Area
Survey Area Food Retailers
Tailored to the North Central Austin food landscape, the survey delved into the general store and product characteristics, current retailer supply chains, retailer barriers to stocking healthy foods, SNAP/WIC and constraints to their acceptance by retailers, and support provided by the city to food retailers.

When developing the food retailer survey, the research team identified two main objectives. First, the team felt it was important to investigate the difficulties around food assistance programs. Second, the team drew upon previous surveys that have investigated food-related retail topics to understand retailers’ abilities and constraints to providing healthy foods. From an overall population of 64 stores, the research team drew a random sample of 54 stores and then stratified by store type, to ensure that supermarkets/grocery stores, convenience stores, and specialty stores were adequately represented in the sample.

Interview Community Leaders
The Plan4Health team worked to identify key community contacts who could confirm, challenge, and broaden the quantity and quality of the data collected by the focus groups. The individuals were intentionally chosen because they were able to provide insight into life in the North Central Austin area for populations that the team did not directly reach, and they could help validate findings for focus group populations most negatively impacted by the food system.

Through hour-long interviews either in person or over the phone, the Plan4Health team asked each key contact about their overall thoughts regarding North Central Austin. Each contact used his or her professional and personal perspective to identify obstacles faced by the community, with an emphasis on solutions that would, and would not, be helpful in the target area.
Our focus groups were designed to create an inclusive conversation about the North Central Austin food system, to appreciate the strengths of the community, and to understand the difficulties that area residents face in accessing healthy and affordable food, including concerns about non-food issues. This lens of inclusivity was developed to ensure that people who were negatively impacted by the food system had the opportunity to share their experiences. Inclusivity was integrated in all steps of the focus group process: question design, community outreach, and focus group locations.

Working with community organizations, including the YMCA, the Multicultural Refugee Coalition Center, Gus Garcia Recreation Center, the IDEA Public School, and the Goodwill Excel Center, the team streamlined and accelerated the coordination of focus groups. We also approached the Walnut Creek Library and the area’s Austin Independent School District Family Resource Centers, as these organizations serve as community resources for information on food, employment, and other general assistance.

We held 10 focus groups with a total of 93 participants. Participants reflected on the assets and resources they often utilize in their community—and represented those in maps of their neighborhood. Our facilitators allowed the conversations to develop organically, guided by broader themes, including decision-making priorities around food purchases and how improvements can be made to the existing food infrastructure and assistance options in the community.

We learned a lot through the focus group process and wanted to highlight a few recommendations for others to consider:

- Focus group locations should be determined based on a demographic breakdown of the target community. The aim should be to reflect a diversity of experiences as well as to include voices that may have otherwise been left out of the conversation.

- Translation services are critical for engaging non-native English speakers who are often excluded from policy-making processes. Facilitators should ask administrators from the focus group location which translators will be needed.

- Respondents are busy. Providing child care and incentives for participation recognizes this.

- Target high-traffic areas for focus groups to ensure adequate participation. Arrive to focus group sites early in order to recruit participants on the day of the event.

- Bring surveys (or business cards) to give to people who are unable to participate due to size limits. This will give those people an outlet to provide the city with their input even though they cannot participate in the focus group.

- Work with community leaders to set up focus groups for hard-to-reach populations that might not be in higher traffic locations. Ask those leaders for times that are convenient for the group participants.

- Focus groups are only as good as their facilitators. Good facilitation requires practice and should be coordinated to ensure consistency across conversations.

- Asking people about their resources provides a perspective on what people value and what they wish they had. This can be a fruitful alternative to diving straight into “needs.”

- In general, questions should be open-ended and asset-based. Facilitators are primarily there to listen—not to direct the participants in a certain direction.

—Amanda Rohlich, Food Systems Planner, Austin

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**PLAN4HEALTH PROJECT PARTNERS**

- Austin Independent School District
- Family Resource Centers
- Austin Transportation Department
- Austin Office of Sustainability
- Austin/Travis County Health & Human Services Department
- Capital Metropolitan Transportation Authority
- Austin Parks and Recreation Department
- Austin Planning and Zoning Department
- Goodwill Excel Center

- Gus Garcia Recreation Center
- IDEA Public School
- Lyndon B. Johnson School of Public Affairs of the University of Texas, at Austin
- Multicultural Refugee Coalition Center
- Texas Chapter of the American Planning Association
- Texas Public Health Association
- YMCA
- Walnut Creek Library
**Recommendations**

Based on the analysis of the data collected, the Plan4Health team identified four themes: access to appropriate information, availability, accessibility, and affordability of nutritious food. Austin’s Office of Sustainability staff response to City Council Resolution 20160303-020 included final recommendations identified through a collaborative vetting process based on the following criteria: potential for community engagement and empowerment, potential to advance equity and community resilience, legal feasibility, political feasibility, financial feasibility, ability to track and evaluate return on investment, and alignment with the city’s comprehensive plan policies and actions.

**RECOMMENDATION ONE:** Complete a comprehensive food environment analysis of each district in Austin and use the resulting food environment maps to inform evaluation of new projects.

The Plan4Health effort revealed that current data on food access and availability is insufficient. To support the recommendations that follow, and to best target assistance to residents in need, it is essential to complete an initial food environment analysis modeled after a similar project conducted in Baltimore. This process would provide a more accurate understanding of the geography of food insecurity and its allied public health challenges for Austin. This analysis will guide the implementation of the other recommendations, as well as set benchmarks that could be used to evaluate their success.

**RECOMMENDATION TWO:** Expand healthy food retail initiatives to provide funding for a diverse array of food-related projects based on community input and decision making.

A Healthy Food Retail Initiative would support small business and community development projects by offering flexible capital and/or technical assistance to a diverse array of food-related projects (grocery stores, food hubs, mobile food retailers, farmers markets, neighborhood food buying cooperatives) in communities with limited availability of healthy food. Additionally, continued funding for the support of Healthy Corner Stores, School Farm Stands, and the Mobile Markets would allow time for full implementation and an evaluation of efficacy.

**RECOMMENDATION THREE:** Increase local food production through community gardens and urban farms.

Expanding opportunities to grow and produce food also support the local economy and offers educational opportunities for residents to learn about gardening and preparing nutritious food. There is high demand for community gardens in Austin; currently there are 54 community gardens in Austin with 14 on city-owned land, but there are no available plots at these gardens. Participation in community gardens is limited to those who have the time, funds, and professional resources needed to start a new garden or rent a plot in an existing garden. Additional staffing support, streamlined application processes, waivers for fees, and increased technical assistance to underserved communities can help reduce barriers that disproportionately prevent low-income communities from urban food production.

**RECOMMENDATION FOUR:** Pilot a nutritious food incentives program to expand buying power for nutritious food at traditional brick-and-mortar retail.

For lower income families, a smaller percentage of income is available to buy food and often fresh produce is more expensive than less nutritious options. Austin contributes funding to the Sustainable Food Center’s Double Dollar Incentive Program, which doubles the dollar amount of SNAP, WIC, Electronic Benefits Transfer card fruit and vegetable benefits, and Farmers Market Nutrition Program vouchers. A new Nutritious Food Incentives Program would expand this purchasing power to traditional brick-and-mortar food retail locations in areas identified in the Food Environment Analysis. One or more food retail outlets would be selected to implement the pilot program in collaboration with a local nonprofit, allowing low-income customers to receive rebates for the purchase of healthy foods.
**RECOMMENDATION FIVE:** Improve awareness about nutritious food and assistance options through SNAP outreach pilot programs and a coordinated outreach campaign delivered to residents by community health workers.

Numerous organizations in Austin are working to improve access to healthy food. However, with limited coordination between these efforts, outreach and messaging can be confusing, and often resources are expended on duplicate efforts. A Coordinated Awareness Campaign across organizations would be more efficient in connecting people to the resources they need about healthy food and/or assistance programs. Additionally, it is important to have effective, culturally appropriate delivery and navigation of healthy food information. Community Health Workers are trained and certified advocates that can help with this campaign by providing information to community members in a way that honors the ethnicity, language, and life experiences of the communities they are serving.

**MEASURES OF SUCCESS**

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<tr>
<th>MEASURES OF SUCCESS</th>
<th>COMPLETE A FOOD ENVIRONMENT ANALYSIS</th>
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| **Complete a Food Environment Analysis** | • Creation of District Maps that accurately identify food deserts, as well as assets to build upon.  
• Creation of District Maps that illustrate areas with negative health outcomes and high rates of food insecurity. |

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<tr>
<th>MEASURES OF SUCCESS</th>
<th>EXPAND HEALTHY FOOD RETAIL INITIATIVES</th>
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| **Expand Healthy Food Retail Initiatives** | • Increase in food security as indicated in future Food Environment Analysis.  
• Number of new healthy food retail establishments created in targeted areas.  
• Amount of food sourced locally or sustainably in healthy food retail in targeted areas. |

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<tr>
<th>MEASURES OF SUCCESS</th>
<th>INCREASE URBAN FOOD PRODUCTION</th>
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| **Increase Urban Food Production** | • Increase in food security as indicated in future Food Environment Analysis.  
• Increase in the number of community gardens per capita.  
• Percent increase in square feet of urban food production in low-income, reduced-access areas.  
• Volume of local food produced. |

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<tr>
<th>MEASURES OF SUCCESS</th>
<th>PILOT A NUTRITIOUS FOOD INCENTIVE PROGRAM</th>
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| **Pilot a Nutritious Food Incentive Program** | • Increase in food security as indicated by future Food Environment Analysis.  
• Number of program participants.  
• Total healthy food sales at participating retail locations. |

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<th>MEASURES OF SUCCESS</th>
<th>BUILD AWARENESS ABOUT NUTRITION FOOD</th>
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| **Build Awareness about Nutrition Food** | • Increase in food security as indicated by future Food Environment Analysis.  
• Improved utilization of 211 and other resources for food assistance.  
• Decreased gap between those eligible and those enrolled in food assistance programs.  
• Increase the utilization of allocated dollars from federal food and nutrition assistance programs.  
• Number of people assisted with food-related issues by Community Health Workers.  
• Number of new SNAP enrollment partnerships developed.  
• Amount of Double Dollar and Nutritious Food Incentive benefits utilized. |

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<th>MEASURES OF SUCCESS</th>
<th>CREATE SAFE ROUTES TO MARKETS</th>
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| **Create Safe Routes to Markets** | • Increase in food security as indicated by future Food Environment Analysis.  
• Number of new miles of sidewalk in food access corridors.  
• Number of miles of repaired sidewalk in food access corridors.  
• Number of new sidewalk ramps in food access corridors.  
• Number of new miles of bike lanes in food access corridors.  
• Number of food retail locations in food access corridors.  
• Safety lighting improvements in prioritized zip codes. |

**RECOMMENDATION SIX:** Incorporate food access comprehensive development, public safety, and transportation planning efforts to create Safe Routes to Markets.

Mobility challenges exist not only for people living in food deserts, but also for individuals who live near grocery stores but cannot access the store due to a disability, a threatened sense of personal safety, a lack of sidewalk connectivity, or limited public transportation options. Safe Routes to Markets would prioritize planning and development of dense, mixed use, affordable housing and multiple mobility options to make sure that low-income community members have sufficient access to good food retailers. In addition to developing new sidewalks, bike lanes, and bus routes, the city should explore additional avenues for increasing safety in areas that are both high crime and high food insecure.
The Plan4Health project in Austin was more than Food for All. A complementary Smart Trips program started in North Central Austin as well. Smart Trips Austin aims to increase trips taken by foot, bike, bus, or shared car. Austin and the Capital Metropolitan Transportation Authority are working together to encourage Austinites to consider more sustainable options for getting around town.

With health as the primary driver, the goals of the pilot program in North Central Austin were to: 1) increase awareness of active transportation choices; 2) increase physical activity; and 3) increase positive attitudes towards the use of active transportation.

Participants enrolled in the Smart Trips program by mailing back a completed paper toolkit order form, completing a survey and receiving a toolkit at an outreach event, or ordering their toolkit online. More than 27,000 households in the area received a postcard with an invitation to order transportation resources via an online toolkit order form. Another 5,000 households were mailed a survey and order form to fill out and return. Toolkits were delivered directly to participants’ doors and distributed at tabling events. A total 315 Transportation Options Toolkits were delivered between November 2015 and April 2016.

Smart Trips Austin educated target community members about the transportation options in their neighborhood while also increasing awareness of neighborhood destinations like medical facilities, schools, employment centers, and recreational areas. Local maps were created as tools to encourage community members to use an active transportation mode to travel to a destination near their home. Smart Trips materials highlighted rapid bus services, local bus services, rail services, bicycling routes, walking routes, vanpools, and ridesharing mobile apps. Brochures about bicycling and walking safety were also available to participants.

The results of the program are here: Smart Trips North Austin Pilot Program Final Report Summary. For the full report, click here.

“The quality of community-based programming coming out of the Smart Trips: North Austin program is phenomenal. We are reaching individuals and families like never before with completely unique transit, walking, and bicycling programs that are customized for the priority community we’re serving. This level of quality would not be possible without the partnerships we’ve formed with other organizations over the course of this pilot program.”

–Laura Dierenfield, Active Transportation Program Manager, Austin Transportation Department
**Community Feedback**

Aware that researchers often do not follow up with the community after their research is over, the Plan4Health team engaged in a community report back and feedback process. This process had two objectives. First, the team aimed to be accountable to the community by sharing with them lessons learned during our research. Second, the team hoped to validate those findings and to identify whether key findings were missing from the earlier work.

The community feedback methodology included four target audiences: randomly selected residents, people that participated in the key contact interviews, people on community listservs, and focus group participants. The Plan4Health team gathered feedback through in-person surveys, surveys via email and text message, and by sending surveys home with students from the Austin Independent School District.

Surveys were distributed in English and Spanish—and asked participants to rank research findings for challenges to accessing food and how important they found possible solutions.

The most significant challenges that emerged from the research include:

- It's hard to find reliable information about healthy food or cooking on a budget.
- It's hard to get food or bus to a store, especially at night or in the summer heat.
- It's a struggle to eat healthily given my budget.
- It's a struggle to eat healthily given my schedule.
- It's difficult to get government food assistance, for example SNAP or WIC.
- It's difficult to eat healthily because (other reason):
On April 29, 2017, seven tornadoes ripped through Van Zandt County in Northeast Texas, causing over nine million dollars in property damage, and four fatalities. Two of the seven tornadoes were found to have caused the most damage and were rated an EF-3 and EF-4. The areas that were affected the most were immediately to the East and immediately to the West of Canton, Texas.

In response to the devastating tornadoes, the Texas Chapter of the American Planning Association in partnership with the Texas Public Health Association and the University of North Texas Health Science Center School of Public Health, assembled a Planners4Health team to focus on disaster recovery, in Van Zandt County, from a Social Determinants of Health perspective.

The Planners4Health team aims to create a disaster preparedness and recovery tool kit for small and rural communities through the lens of public health and planning.

The Planners4Health team hopes this project sheds light on the necessity to create an emergency preparedness and recovery plan so small and rural communities can better prepare for disasters in their own areas.

Solutions, presented as things that people would like to see change, were:

- More information about nutrition, emergency food, and government programs through schools, community centers, mobile phone apps, and radio stations
- More smaller markets and restaurants with healthy food (ethnic markets, fruterías, mobile markets, farm stands, etc.)
- Better sidewalks, lighting, and buses
- More affordable housing

The recommendations from Plan4Health resulted in one-time funding of $300,000 from Austin City Council for a SNAP coordinated messaging campaign and ongoing funding of $400,000 for Healthy Food Retail Initiatives. A new full-time position for a Food Access Coordinator with dedicated time to work on these initiatives was also established.

The long-term impact, however, is a roadmap for inclusive food systems planning—planning that elevates the experiences of community members to ensure healthy food for all.