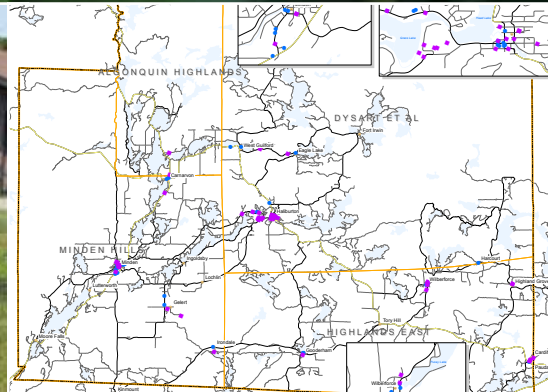


**FOOD ACCESS MAPPING
IN HALIBURTON COUNTY**

**COMMUNITY FOOD
ASSESSMENT PARTNERS**

DECEMBER 2015



Food Access Mapping in Haliburton County

A Project of the Haliburton County Community Food Assessment

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ABSTRACT

Food access represents one of three key pillars linked to food security, where access directly relates to the resources available and the ability for people within a community to utilize them. Data on the types of food access points and their individual features were collected using an online survey, and this information was further used to map visual patterns in the characteristics of access points across Haliburton County. Survey results were also interpreted in combination with Deprivation Index data from the HKPR District Health Unit.

ACKNOWLEDGEMENTS

We would like to give special thanks to many individuals who have assisted with various stages of the research process. Paul Heaven, Wildlife Biologist at Glenside Ecological Services Ltd., for attention to detail both constructing the database and creating the maps. Andrew Harris, Epidemiologist at the HKPR District Health Unit, for help accessing the Deprivation Index data and feedback on the draft report. Elsie Azevedo Perry, Public Health Nutritionist at the HKPR District Health Unit, for thoughtful input throughout the survey development process. Lastly, a sincere thank-you to the many individuals who took the time to complete the survey.

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BACKGROUND – WHAT IS A COMMUNITY FOOD ASSESSMENT?

A community food assessment is a participatory and collaborative process involving a broad range of stakeholders and is an approach used to evaluate key food issues and resources within a community, with the goal of improving community food security (Ross and Simces 2008). Through the assessment process, stakeholders work together to research local food systems, share findings, make recommendations, and implement changes based on their findings. A food system includes all links in the food chain including production, processing, distribution, retail, consumption and waste management.

The purpose of the Haliburton County Community Food Assessment (HCCFA) was to deepen the understanding of our food system, and use this information to inform and make recommendations regarding local planning, decision-making, and policy development for organizations and governments.

The HCCFA Steering Committee defined three priority areas for investigation: Agricultural Production and Consumption, Food Access, and Municipal Food Policies, and formed sub-committees to research and prepare a report on each focus.

The Food Access sub-committee included: Emma Horrigan, Lisa Tolentino, Megan Stong, Melanie Scheffee, and Rosie Kadwell.

INTRODUCTION

Food security, as defined at the World Food Summit (World Health Organization (WHO) 1996), is: “when all people at all times have access to sufficient, safe, nutritious food to maintain a healthy and active life.” Based on this definition the WHO (1996) further identifies three main pillars linked to food security:

1. Food availability
2. Food accessibility
3. Food use

This report addresses the food availability¹ and accessibility² pillars by utilizing survey data in conjunction with a visual, map-based approach. Without consistent access to nutritious food, healthy eating cannot be attained, thus increasing the risk of poor health. A diet high in fruits and vegetables is associated with many health benefits including reduced risk of heart disease, stroke, and some forms of cancer (HKPR District Health Unit 2012). A map-based approach is a

¹ “Availability” refers to the proximity of food retail stores and programs to residential areas. This term can also be used to describe the presence of healthy food options within stores. For example, whether or not a store sells fruits, vegetables, whole grains, and other healthier items (Centers for Disease Control and Prevention 2014)

² “Accessibility” is a broader concept that includes availability as well as the selection, cost (i.e. affordability due to limited income) and quality of food (Centers for Disease Control and Prevention 2014).

valuable tool for visually analyzing and interpreting data, based on the number and types of food access points (e.g. grocery stores, farmers' markets, gas stations and convenience stores) and is helpful for identifying food infrastructure strengths and limitations. The use of survey results, as displayed through points on a map depicting each respondents answers, overlaid with additional neighborhood features such as income, education, and transportation, are also essential for understanding how multiple factors influence the food choices individuals and households make (Kwan, 2013; Urban Food Link, 2013).

The main goal of the food access working-group, a sub-committee of the Haliburton County Community Food Assessment (CFA), is:

“To conduct an inventory of food access points in Haliburton County, including the creation of maps to support visual analyses and information sharing. These maps are intended to assist with representing baseline information about food access points and help inform long-term planning and actions that support community food security.”

More specifically, our research and this report will address five main objectives:

1. Identify and classify types of food access points to illustrate the various ways that people in our community access food.
2. Survey food programs and businesses to quantify the types of food products and services offered and assist with identifying opportunities and gaps.
3. Use the survey data together with GPS coordinates to create maps for Haliburton County that assist with recognizing visual patterns in the types of food access points and their services in relation to geographic locations.
4. Develop and maintain a living database for storing data about food access points in Haliburton County.
5. Make recommendations for future efforts focused on issues related to food access across Haliburton County.

HOW THIS REPORT IS ORGANIZED

This report is organized into three distinct sections:

- Part A: Outlines the food access mapping methodology, including project limitations
- Part B: Summarizes survey findings from five key questions
- Part C: A series of maps that highlight visual patterns in:
 - Types of food access points
 - Hours (i.e. open after 6pm)
 - Types of food sold (e.g. fresh fruits or vegetables)
 - Healthy food-related policies
 - Access points based on food origin
- Part D: Conclusions & Recommendations

METHODOLOGY

Survey

An electronic survey was distributed using *Fluid Surveys* between February 19 and March 18, 2015 to a total of 55 individuals and organizations. Individuals and organizations were selected based on whether or not they fit into one of 13 categories of food access points (see Appendix 1 pg. 28, for the complete survey, including a list of all access point categories). For ease of analysis and mapping, each access point was further categorized into either a “program” or a “business.” “Program” is defined as a regular schedule or event that provides prepared or unprepared food items (e.g. food bank, school nutrition program, good food box), or teaches skills related to growing or preparing food (e.g. community gardens). “Business” was defined as an occupation, profession, or trade that sells prepared or unprepared food items (e.g. grocery store, gas station).

A total of 44 surveys (80%) were completed electronically, and of these 1 was incomplete (i.e. not all survey questions were answered). A total of 88 access points were identified and in many cases a single survey response represented multiple access points for the same business or program (e.g. 1 farmers’ market in 3 separate locations). Seven (7) paper surveys were also completed, by conducting the survey over the phone.

Mapping

The Haliburton results for the Deprivation Index (Pampalon et al. 2009), obtained through the Haliburton Kawartha Pine Ridge (HKPR) District Health Unit, were used as a proxy measure of socioeconomic characteristics. GPS points were collected for each access point and a Microsoft Access database was developed based on the survey template. All maps were produced using ArcGIS by Glenside Ecological Services.

Project Limitations

We recognize that this project does not capture all food access points across Haliburton County. For example, restaurants were excluded due to complementary research being done by the Ontario Culinary Tourism Alliance (OCTA). Social and fundraising food events including church suppers, service club dinners, and special events (e.g. wild game dinners, or agricultural and cultural fairs) were not captured due to their variable nature (e.g. once a year, monthly etc.). Lastly, farm gates and roadside stalls were also not included, largely due to time constraints associated with collecting this data. We fully recognize that these additional points are an important part of local food and food accessibility in Haliburton County, and future research on this topic could explore the creation of a directory for farm gates and seasonal food events.

The MS Access database created through this project is a living document that will continue to be updated with the growth of existing and new food businesses and programs, and offers a framework for the classification and interpretation of access points.

Part B – KEY SURVEY FINDINGS

This report focuses on survey results for five key elements of food products and services that contribute to a food secure community. These elements include:

1. Types of access points (i.e. business vs. program)
2. Accessibility in the evenings (after 6 P.M.)
3. Availability of fresh fruits or vegetables
4. Healthy Food Policy³
5. Food origin (i.e. access to food grown or raised in Haliburton County, Ontario, Canada etc.)

A visual analysis of the same data, represented through maps, is shown under Part C (pg. 14-25).

SURVEY RESULTS

Part 1, QUESTION 2:

Which of the following best describes your food program or business?

Respondents were asked to classify their food program or business into one of fourteen different categories (Appendix 1). The majority of survey respondents identified themselves as either 'Convenience Store/Gas Station' or 'Other', both representing 17% of all access points (Figure 1). The businesses and programs identified as 'Other' described their activities as: Prepared frozen meals, giftware and hardware store, discount retailer, and seasonal store majoring in fresh fruits and vegetables. One of the respondents that placed themselves in the 'Other' category represented 12 of 15 access points listed under this category.

The third and fourth largest access point categories were 'Community Garden/Orchard' and 'Bulk Buying Program' (both at 13%) and 'Supermarket/Grocery Store' (9%; Figure 1). The 'School Nutrition Program' and 'Specialty/Health/Bulk' categories each represented 8% of respondents (Figure 1). None of the respondents identified their food program or business as a 'Discount/Dollar Store' (Figure 1).

³ Where 'healthy food policy' refers to the implementation or development of policies or regulations that support healthy eating. Examples include: food labeling and advertising regulations, nutrition standards in food programs, and providing customers with information about healthy eating such as nutrition basics, recipes, and grocery shopping habits (HealthLinkBC).

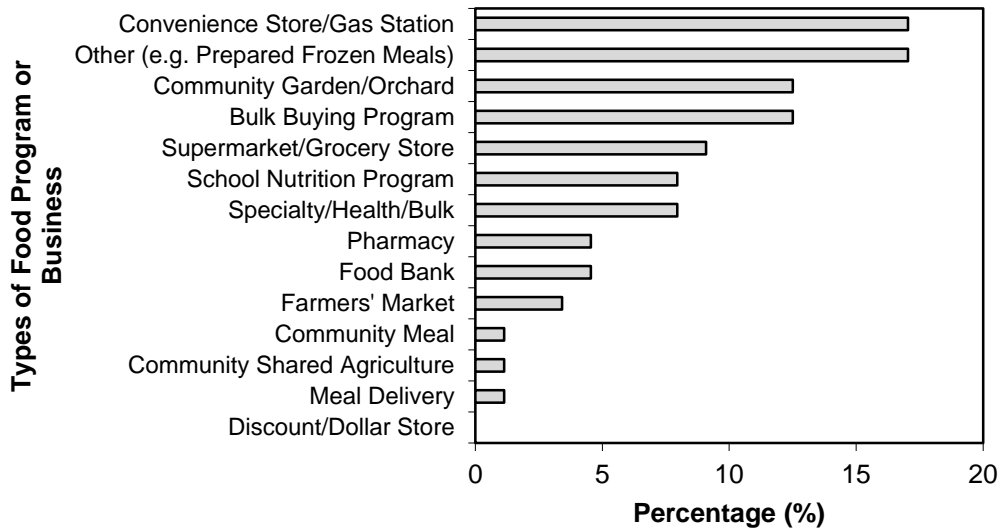


Figure 1. Percentage (%) of survey respondents distributed across the fourteen categories of food access points.

From here, the fourteen (14) categories were further grouped into “business” or “program” to help streamline the mapping process. Since no respondents identified themselves as a ‘Discount/Dollar Store’ this category was removed; reducing the number of categories to 13. Of the 88 food access points identified, programs were represented by a total of 47 points (53%) and businesses by 41 points (47%).

Food access points that were grouped as a “business” included:

- Convenience Store/Gas Station
- Discount/Dollar Store
- Supermarket/Grocery Store
- Pharmacy
- Specialty Health/Bulk
- Farmers’ Markets (not gate sales or roadside stalls)
- Community Shared Agriculture

Food access points that were grouped as a “program” included:

- Community Meal
- School Nutrition Program
- Community Garden/Orchard
- Meal Delivery
- Food Bank
- Bulk Buying Program

Part 1, QUESTION 11:

Is your food program or business open/accessible after 6:00 P.M. one or more days a week? (Y/N)

Overall, more businesses were open/accessible after 6:00 P.M. (22 total), in comparison to 11 programs (Figure 2). Of the programs that identified being open/accessible after 6:00 P.M. all of these access points were represented by 'Community Garden/Orchard' category (Figure 3). The largest categories of businesses that responded 'yes' to this question were 'Convenience Store/Gas Station' (12) and 'Supermarket/Grocery Store' (5) (Figure 3).

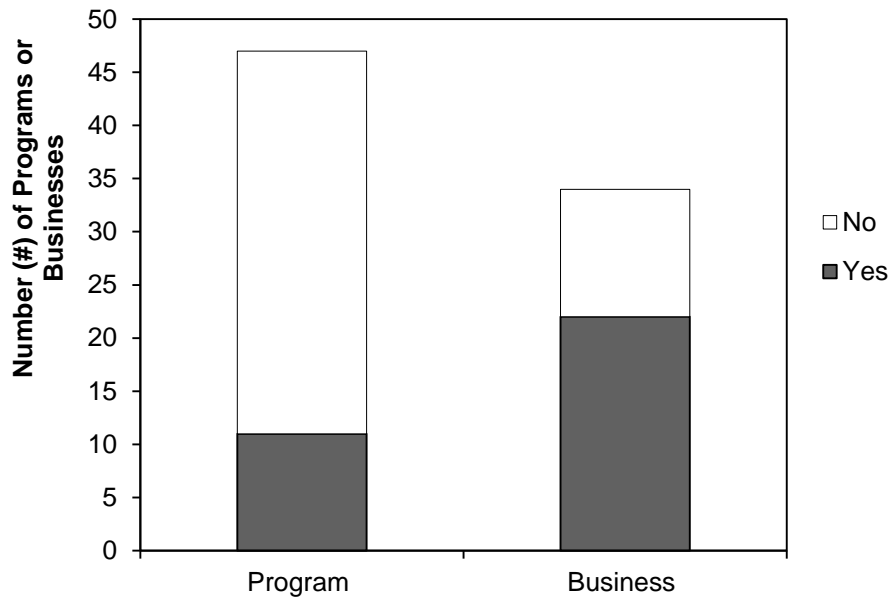


Figure 2. Number of programs and businesses that are open or accessible after 6:00 P.M. one or more days a week.

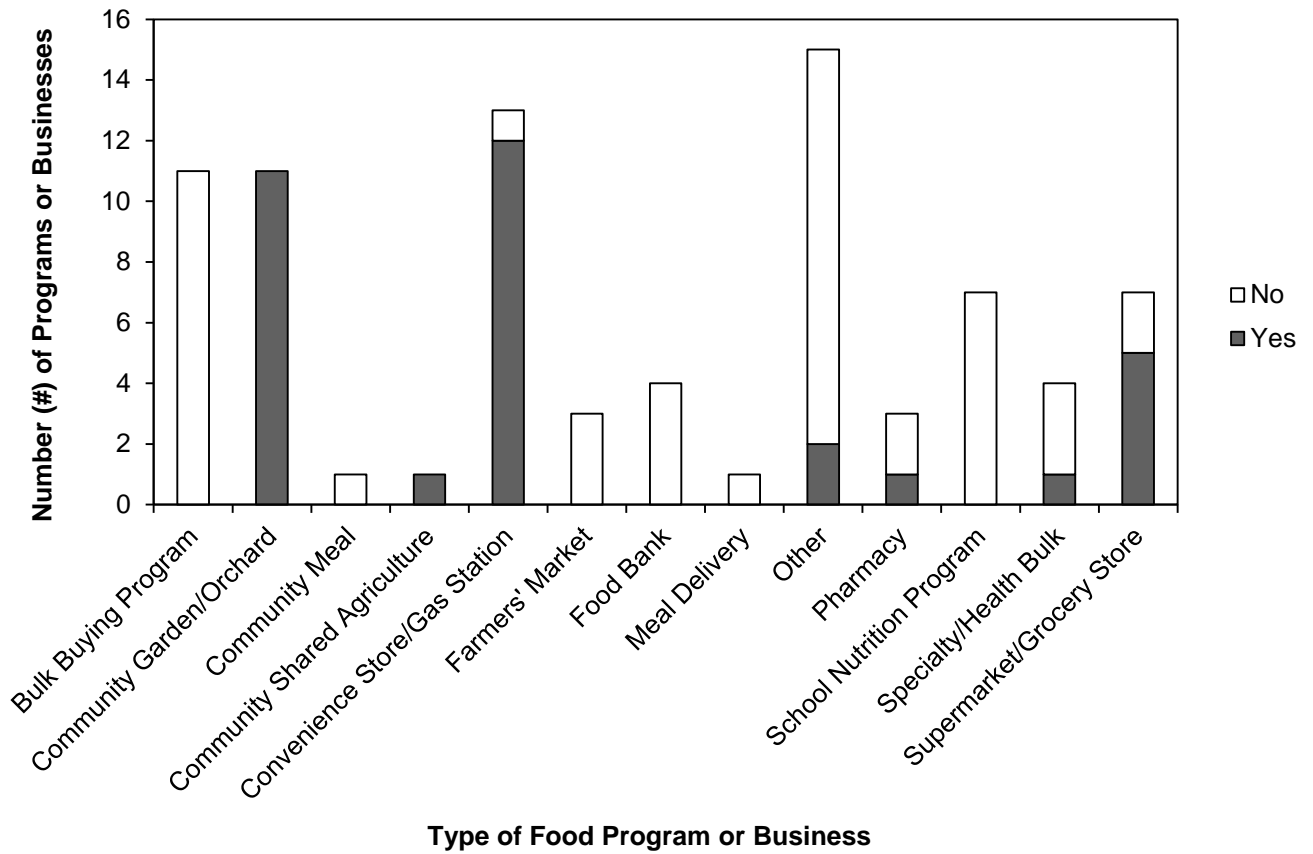


Figure 3. Number of food programs and businesses that are open or accessible after 6:00 P.M. one or more days a week, categorized by program type.

Part 2, QUESTION 1:

Does your food program or business offer/sell fresh fruits or vegetables? (Y/N)

More than half of the food programs surveyed (33 or 70%) identified that they did offer or sell fresh fruits and vegetables, with 14 or 30% who reported that they did not (Figure 4). In comparison, fewer food businesses acknowledged offering or selling fresh fruits or vegetables (33 vs. 15), with 22 or 60% answering ‘no’ (Figure 4). Separated by category, 10 of the 13 categories, including both businesses and programs, identified that fresh fruits or vegetables were offered or sold (Figure 5). The programs or businesses that did not sell fresh produce were largely represented by: ‘Convenience Store/Gas Station’ with 11 access points and ‘Other’ with 14 access points (Figure 5).

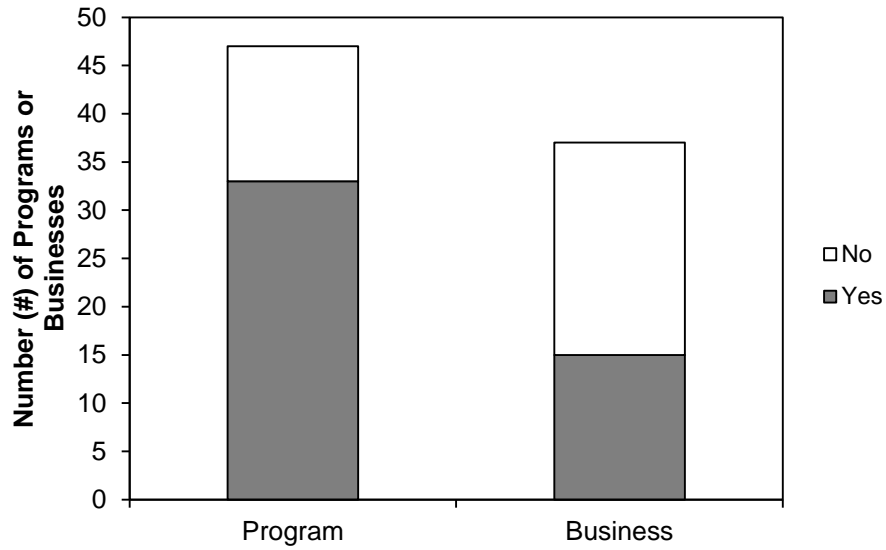


Figure 4. Number of programs and businesses that offer or sell fresh fruits and vegetables.

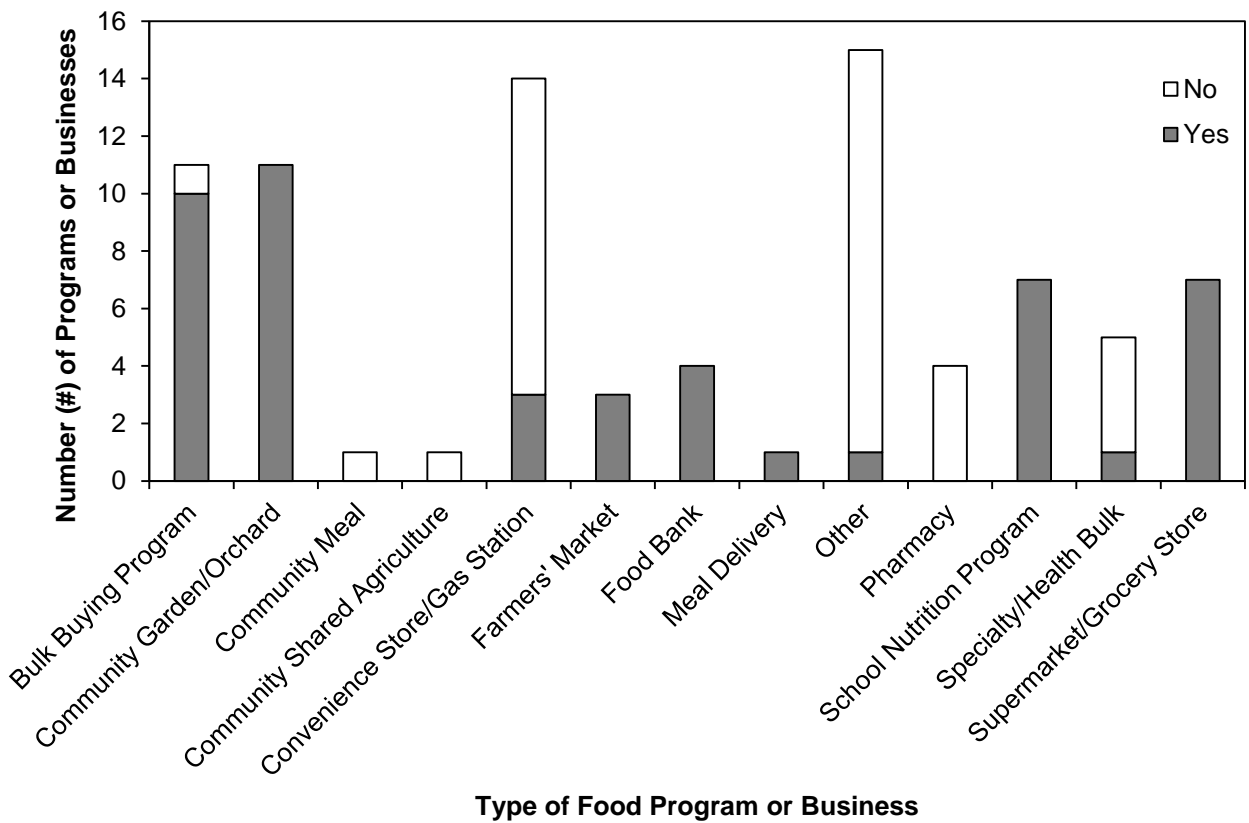


Figure 5. Number of food programs and businesses that offer or sell fresh fruits or vegetables categorized by program type.

Part 2, QUESTION 3:

Does your food program or business have a healthy food policy? (Y/N)

Of the 47 programs, 35 identified having a healthy food policy in place and 12 answered ‘no’. Fewer businesses responded to this question (27 in total) of which only 5 had a healthy food policy, compared with 22 that did not (Figure 6).

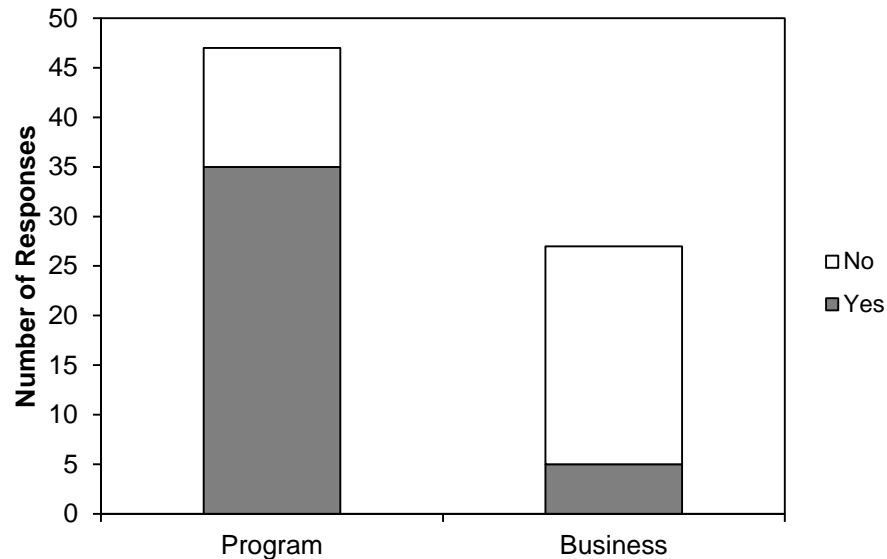


Figure 6. Number of survey respondents by program and business that answered ‘yes’ and ‘no’ to having a healthy food policy in place.

Part 2, QUESTION 4:

Does your food program or business offer/sell food grown or raised in: Haliburton County/ Ontario/ Canada/ Imported/ Don't Know (check all that apply).

Of the 47 food access points represented under “programs” all answered Question 4. By comparison, only 36 of the 41 of “business” points answered this question.

Thirty-four (34) programs or 72% identified that they did offer food grown or raised in Haliburton County, and roughly the same percentage also recognized that their food came from Ontario (72%), Canada (70%), as well as Imported (70%). A total of 11 programs (23%) selected ‘Don’t Know’ (Table 1).

As for businesses, fewer of these respondents identified that they sourced food from within Haliburton County (42% or 17 businesses) (Table 1). However, a higher percentage showed food that was sourced from within Ontario (56%), Canada (56%), and Imported (49%). Only 5 businesses (12%) answered ‘Don’t Know’ (Table 1).

Table 1. Percentage (%) of programs and businesses that offer/sell food grown or raised in Haliburton County, Ontario, Canada, and Imported.

	Program		Business	
	Percentage of responses (%)	Count	Percentage of responses (%)	Count
Haliburton County	72 %	34	42 %	17
Ontario	72 %	34	56 %	23
Canada	70 %	33	56 %	23
Imported	70 %	33	49 %	20
Don't Know	23 %	11	12 %	5

Part C – MAPPING RESULTS & VISUAL ANALYSIS

This section of the report focuses on displaying the survey results using a map-based or visual approach. A total of two maps are shown for each survey question, one filtered by access points classified as a “business” and a second for points classified as “program”.

Data obtained by the Haliburton, Kawartha, Pine Ridge District (HKPRD) Health Unit from the *Institut National de Santé Publique du Québec (INSPQ)* was used to illustrate the base layer of Figures 7-17. The INSPQ Deprivation Index is comprised of social and material components.

The material component is dependent on:

1. The percent of people with no high school degree;
2. The ratio of employment to the population; and
3. Average personal income.

And the social component is dependent on:

1. The percent of people living alone;
2. The percent of people separated, divorced, or widowed; and
3. The percent of single-parent families (Pampalon et al. 2012).

Material deprivation addresses one’s ability to purchase things associated with good health (e.g. house, food, vehicle), whereas social deprivation is a measure of connectedness or social networks. The Deprivation Index takes both material and social components into consideration and is used extensively in the field of health and social sciences as a marker of social inequalities in health and can be a useful tool for monitoring inequalities over time and space, as well as public health planning, intervention, and service delivery.

In an effort to remove the extreme ranges of scores that exist throughout the province, the material and social deprivation scores were provided to HKPRD Health Unit based on the Dissemination Areas (DA) within the Health Unit’s boundaries. Thus, the quintiles created for the material and social deprivation scores, and the interpretation of the Deprivation Index for the most deprived, least deprived, and neutral areas, is relative to only the DA within the HKPR District boundaries.

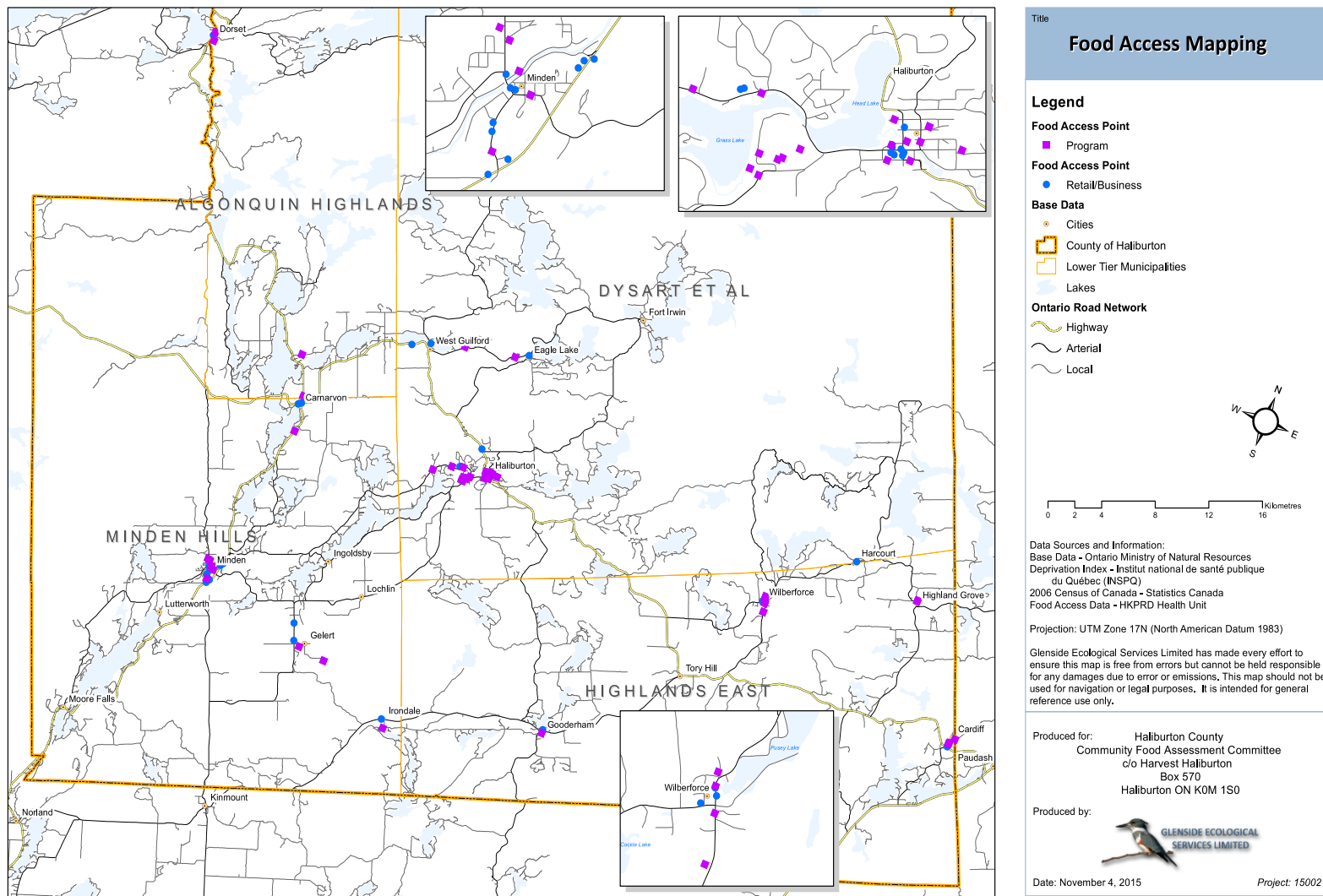


Figure 7. Depicts the location of food access programs and businesses within Haliburton County. Either a food program or business was found in most communities with the majority of access points located in Minden, Haliburton, and Wilberforce. Food access points were not identified in the following five communities: Fort Irwin, Moore Falls, Lutterworth, Lochlin, Ingoldsby, and Tory Hill.

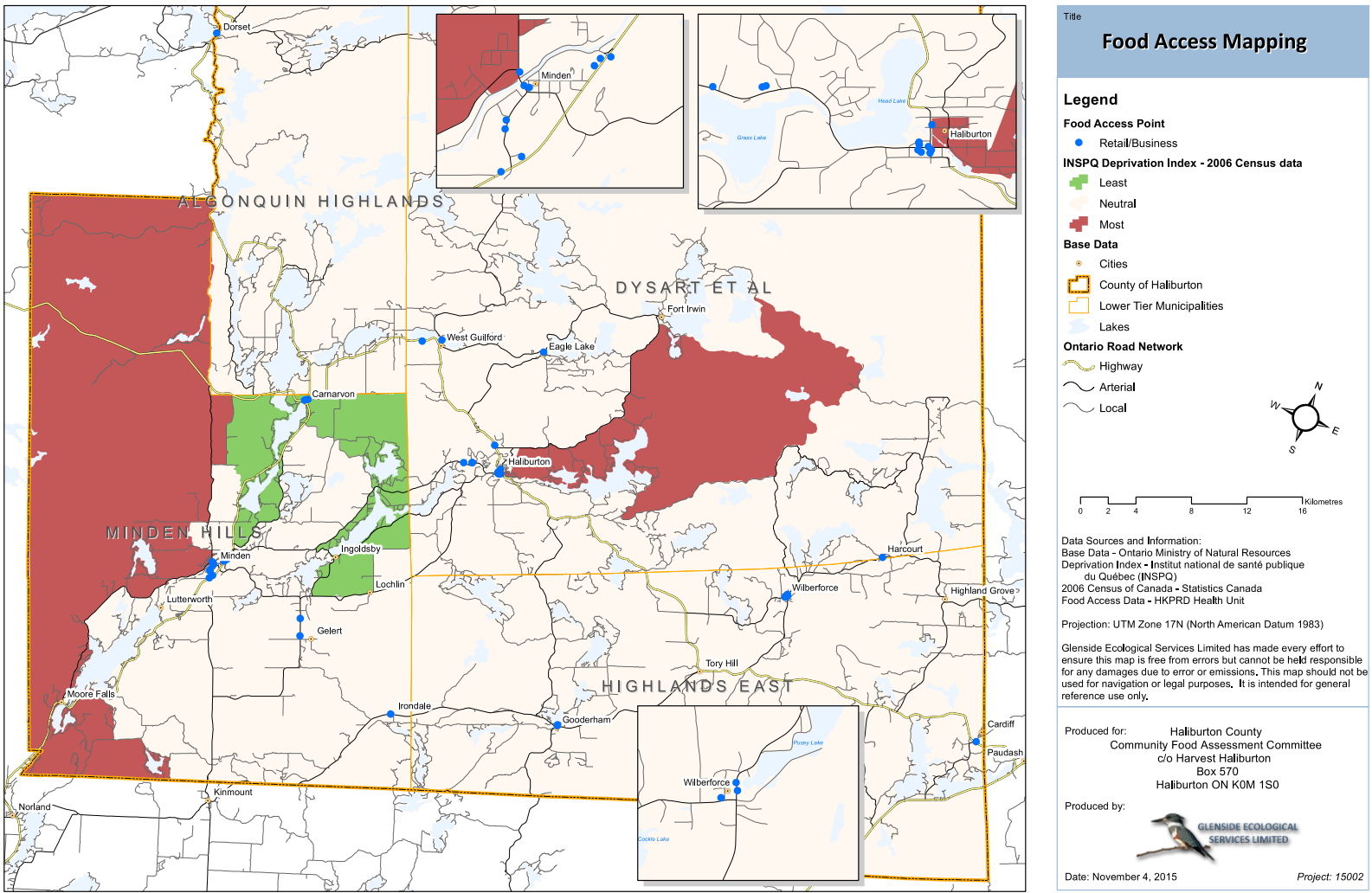


Figure 8. Illustrates the geographies, within Haliburton County, based on Deprivation Index ('neutral', 'most' and 'least' deprived). Plotted on top of the Deprivation Index results are food-access businesses. No clear relationship between the number of food-access businesses and the least deprived geographies was identified. Compared to the neutral and most deprived areas, the least deprived geographies were not observed to have a larger proportion of food-access businesses.

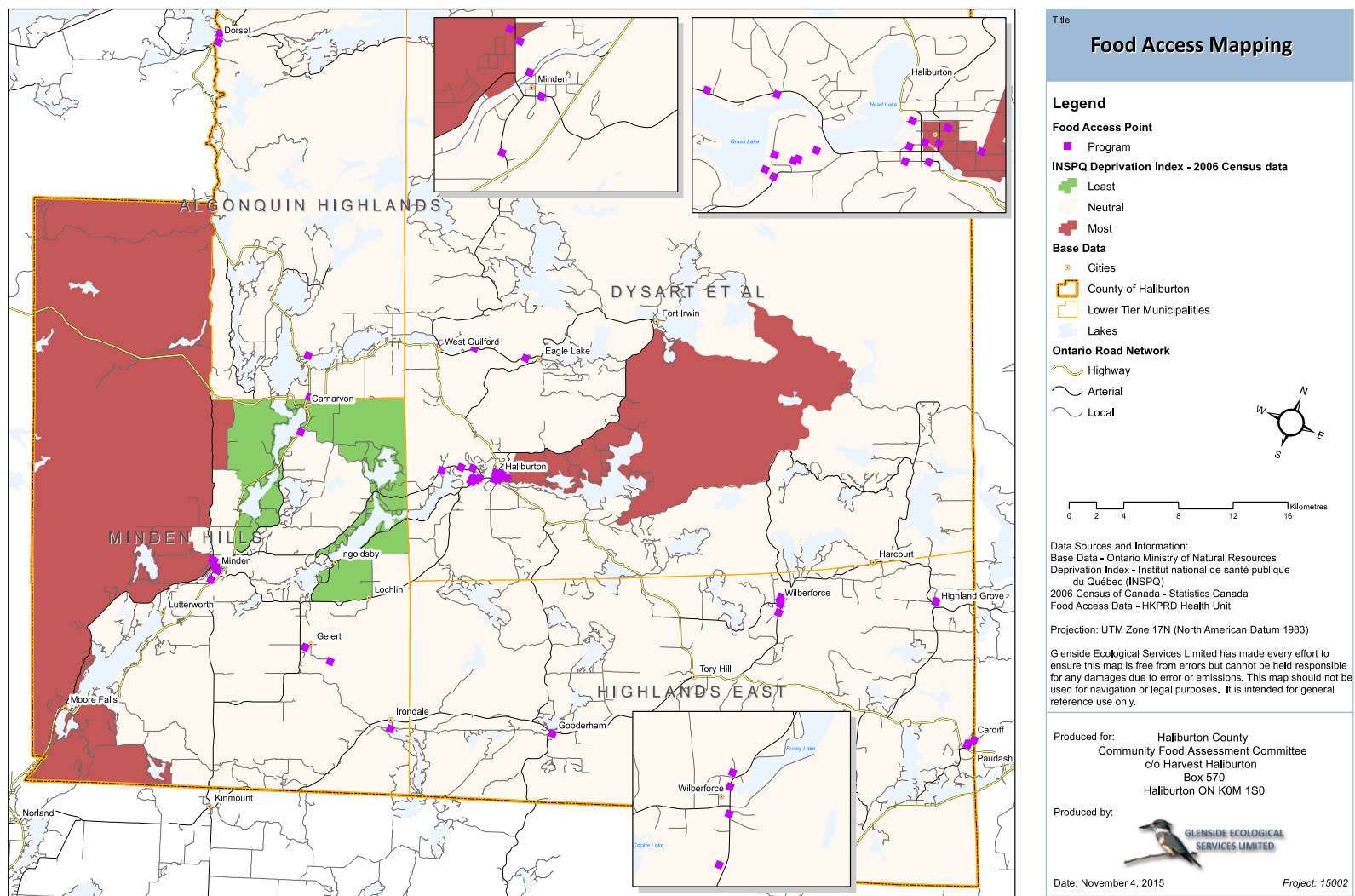


Figure 9. Illustrates the geographies, within Haliburton County, based on Deprivation Index ('neutral', 'most' and 'least' deprived). Plotted on top of the Deprivation Index results are food-access programs. No clear relationship between the number of food-access programs and the least deprived geographies was identified. Compared to the neutral and most deprived areas, the least deprived geographies were not observed to have a larger proportion of food-access programs.

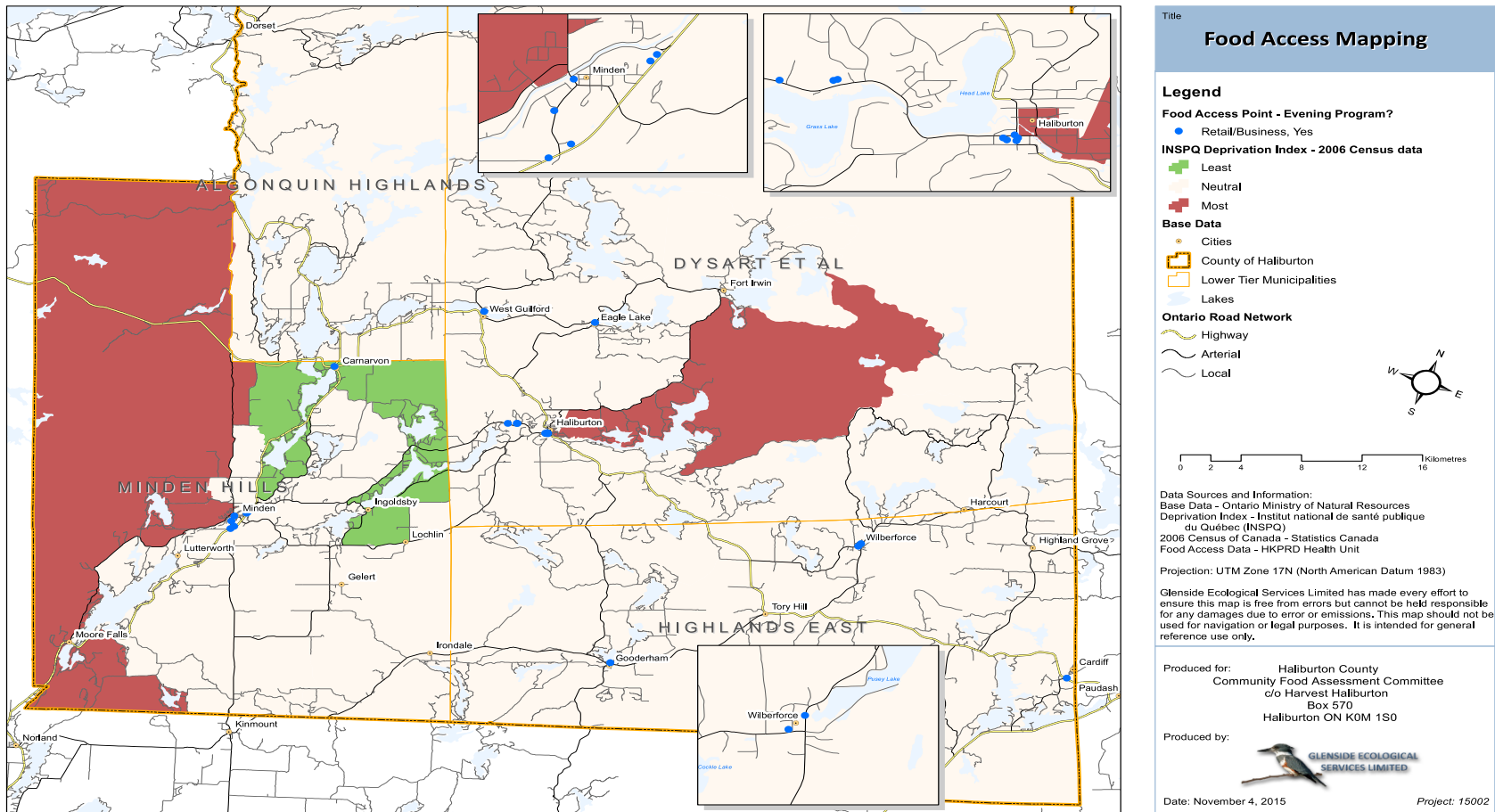


Figure 10. Illustrates the geographies, within Haliburton County, based on Deprivation Index ('neutral', 'most' and 'least' deprived). Plotted on top of the Deprivation Index results are food-access businesses with evening hours (e.g. open/accessible after 6:00 P.M. one or more days a week). More than half of food-access businesses (65% or 22 out of 34) reported providing evening hours. No clear relationship between the number of food-access businesses with evening hours and the least or most deprived geographies was identified. Compared to the neutral and most deprived areas, the least deprived geographies were not observed to have a larger proportion of food-access businesses with evening hours.

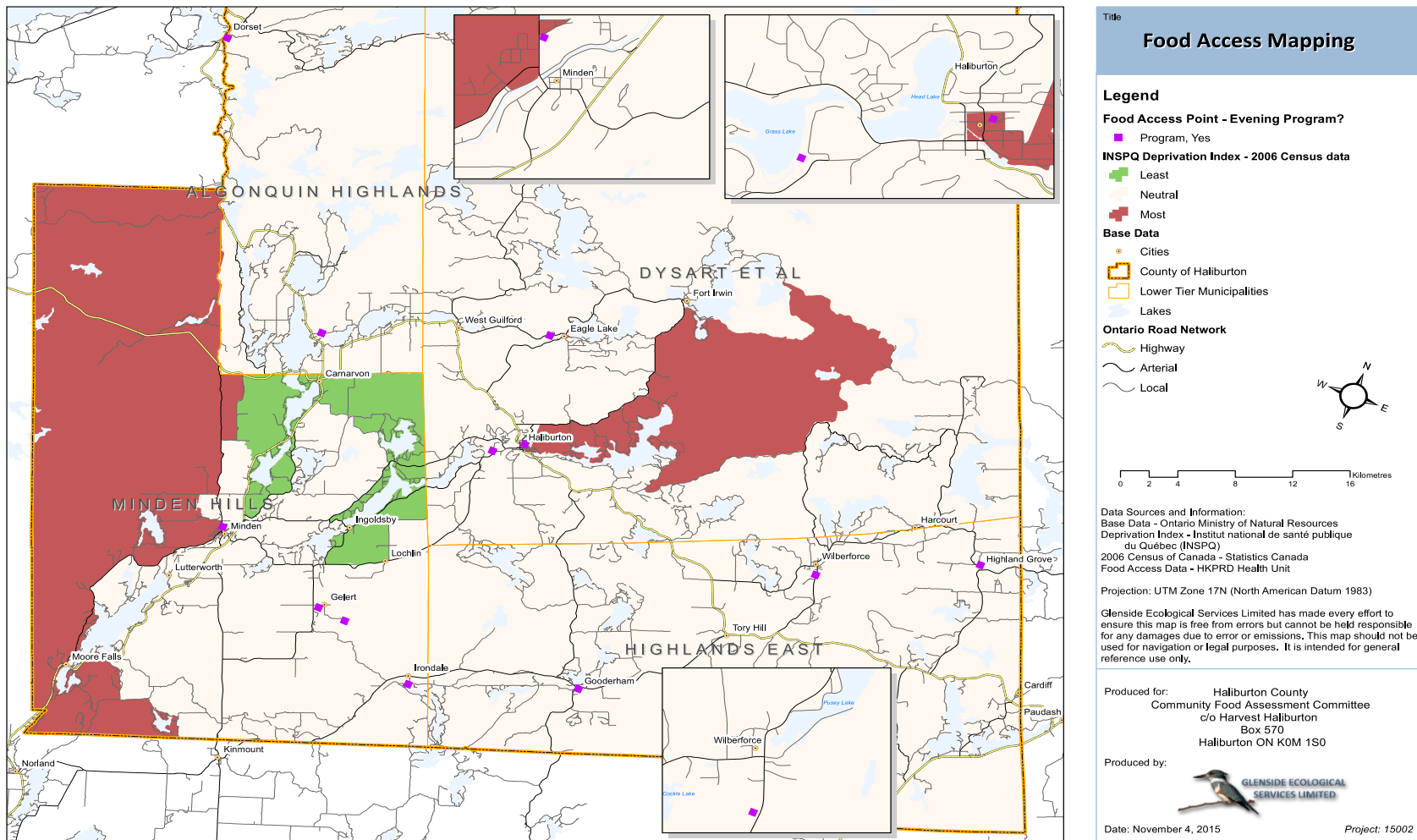


Figure 11. Illustrates the geographies, within Haliburton County, based on Deprivation Index ('neutral', 'most' and 'least' deprived). Plotted on top of the Deprivation Index results are food-access programs with evening hours (e.g. open/accessible after 6:00 P.M. one or more days a week). Very few food-access programs (23%, or 11 out of 47) provide evening hours. No clear relationship between the number of food-access programs with evening hours and the least or most deprived geographies was identified. Compared to the neutral and most deprived areas, the least deprived geographies were not observed to have a larger proportion of the food-access programs with evening hours.

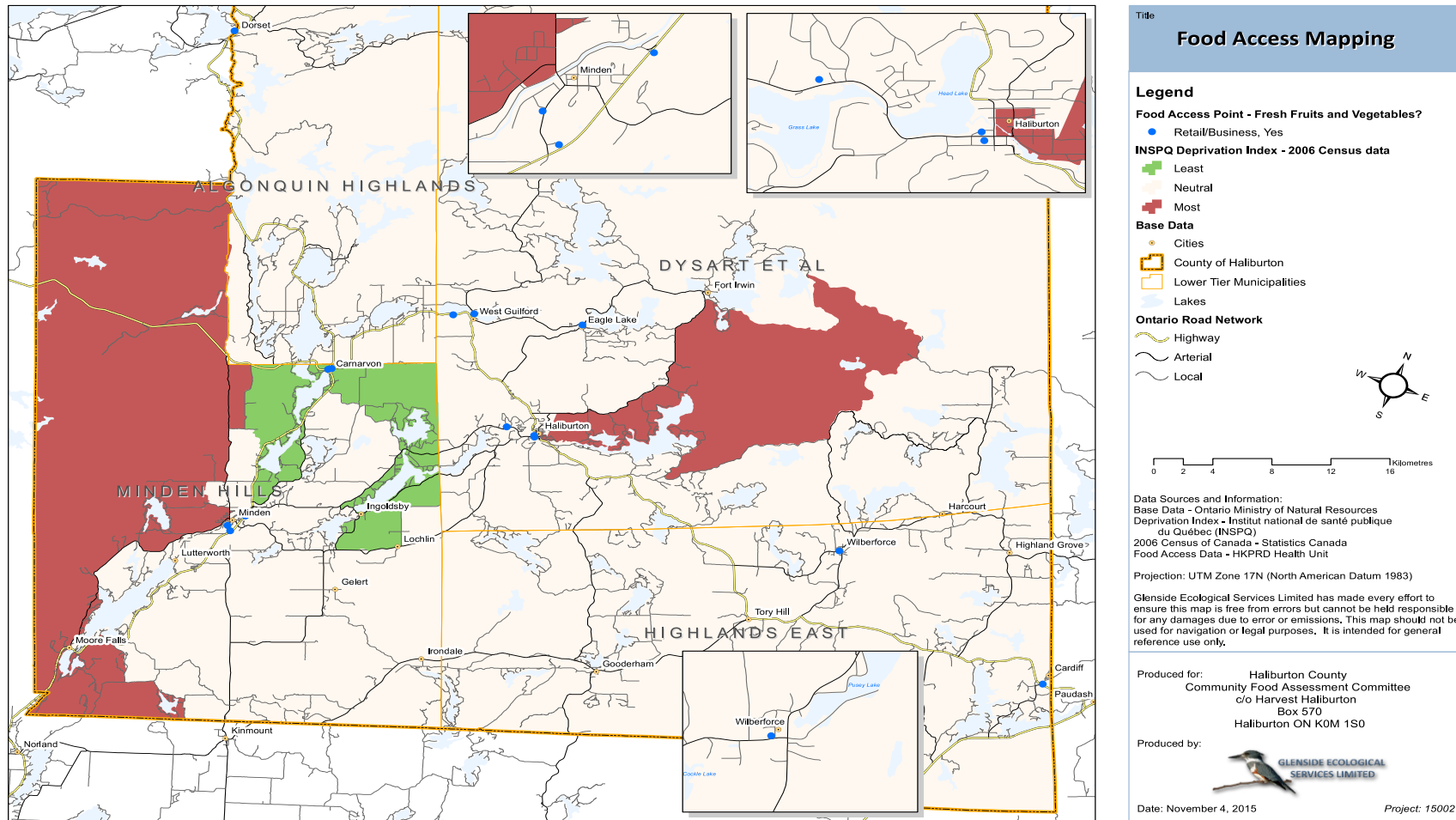


Figure 12. Illustrates the geographies, within Haliburton County, based on Deprivation Index ('neutral', 'most' and 'least' deprived). Plotted on top of the Deprivation Index results are food-access businesses that provide fresh fruits and vegetables. Businesses were not asked to quantify the amount of fresh fruits and vegetables being sold (e.g. 1 vs. many items). Less than half of food-access businesses (41% or 15 of 37) provide fresh fruits and vegetables, however no clear relationship between the number of food-access businesses that provide fresh fruits and vegetables and the least or most deprived geographies was identified. Compared to the neutral and most deprived areas, the least deprived geographies were not observed to have a larger proportion of the food-access businesses that provide fresh fruits and vegetables.

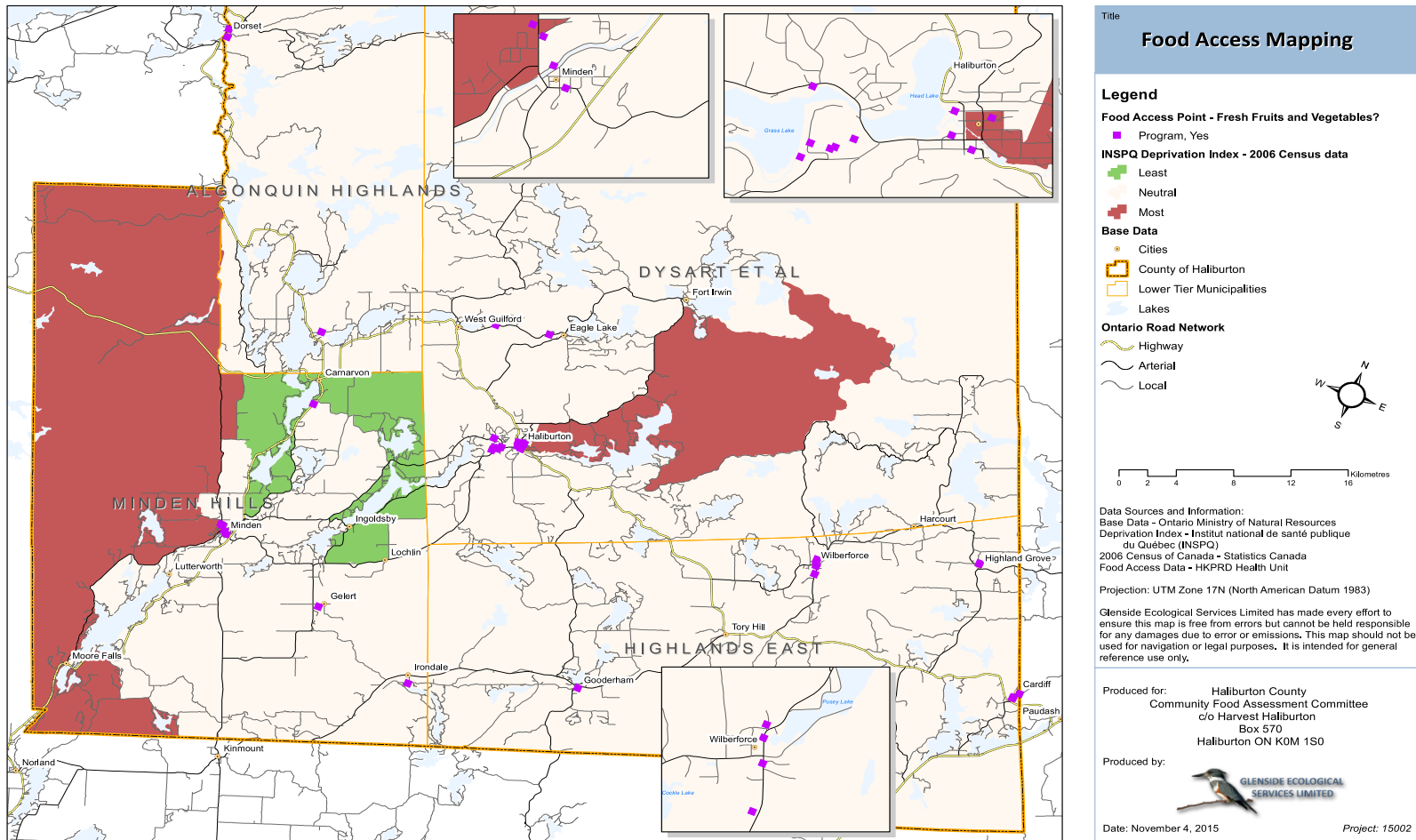


Figure 13. Illustrates the geographies, within Haliburton County, based on Deprivation Index ('neutral', 'most' and 'least' deprived). Plotted on top of the Deprivation Index results are food-access programs that provide fresh fruits and vegetables. Programs were not asked to quantify the amount of fresh fruits and vegetables being sold (e.g. 1 vs. many items). A large proportion of food-access programs (70% or 33 of 47) provide fresh fruits and vegetables, however no clear relationship between the number of food-access programs that provide fresh fruits and vegetables and the least or most deprived geographies was identified. Compared to the neutral and most deprived areas, the least deprived geographies were not observed to have a larger proportion of the food-access programs that provide fresh fruits and vegetables.

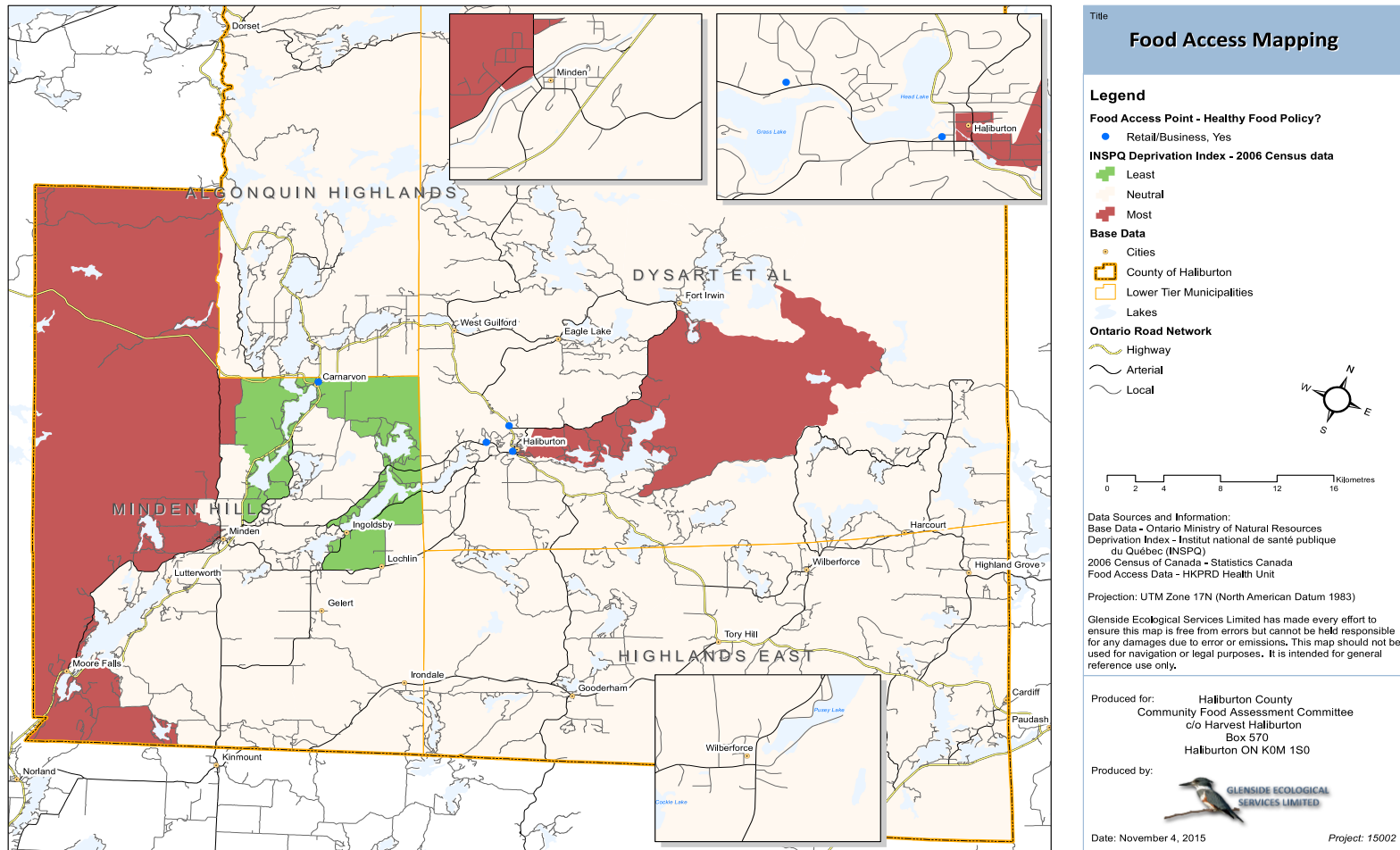


Figure 14. Illustrates the geographies, within Haliburton County, based on Deprivation Index ('neutral', 'most' and 'least' deprived). Plotted on top of the Deprivation Index results are food-access businesses that have a healthy food policy. Few of the food-access businesses (19% or 5 out of 27) have a healthy food policy, however no clear relationship between the number of food-access businesses that have a healthy food policy and the least or most deprived geographies were identified. Compared to the neutral and most deprived areas, the least deprived geographies were not observed to have a larger proportion of the food-access businesses that have a healthy food policy.

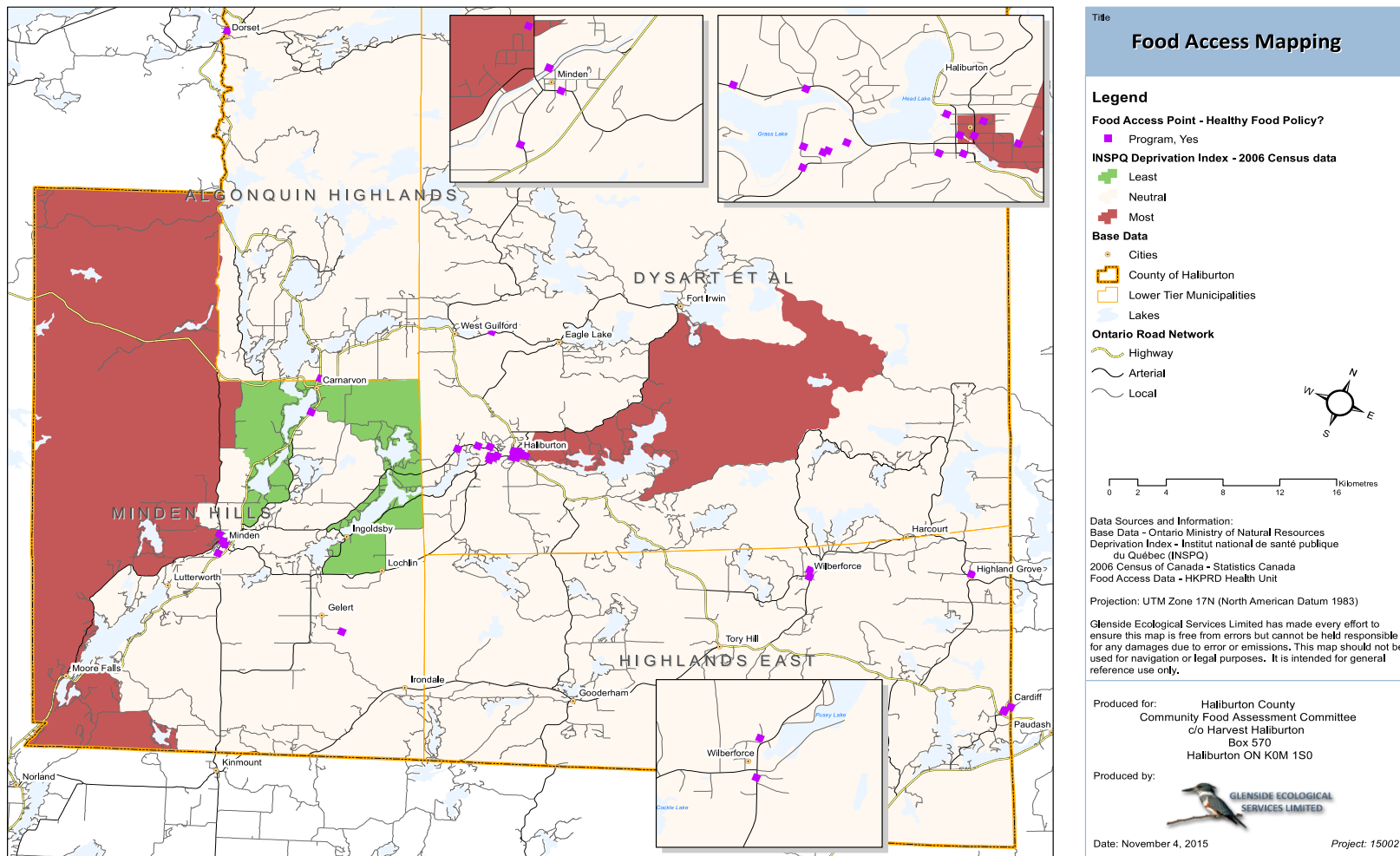


Figure 15. Illustrates the geographies, within Haliburton County, based on Deprivation Index ('neutral', 'most' and 'least' deprived). Plotted on top of the Deprivation Index results are food-access programs that have a healthy food policy. The majority of food-access programs (75% or 35 of 47) have a healthy food policy however no clear relationship between the number of food-access programs with a healthy food policy and the least or most deprived geographies was identified. Compared to the neutral and most deprived areas, the least deprived geographies were not observed to have a larger proportion of the food-access programs that have a healthy food policy.

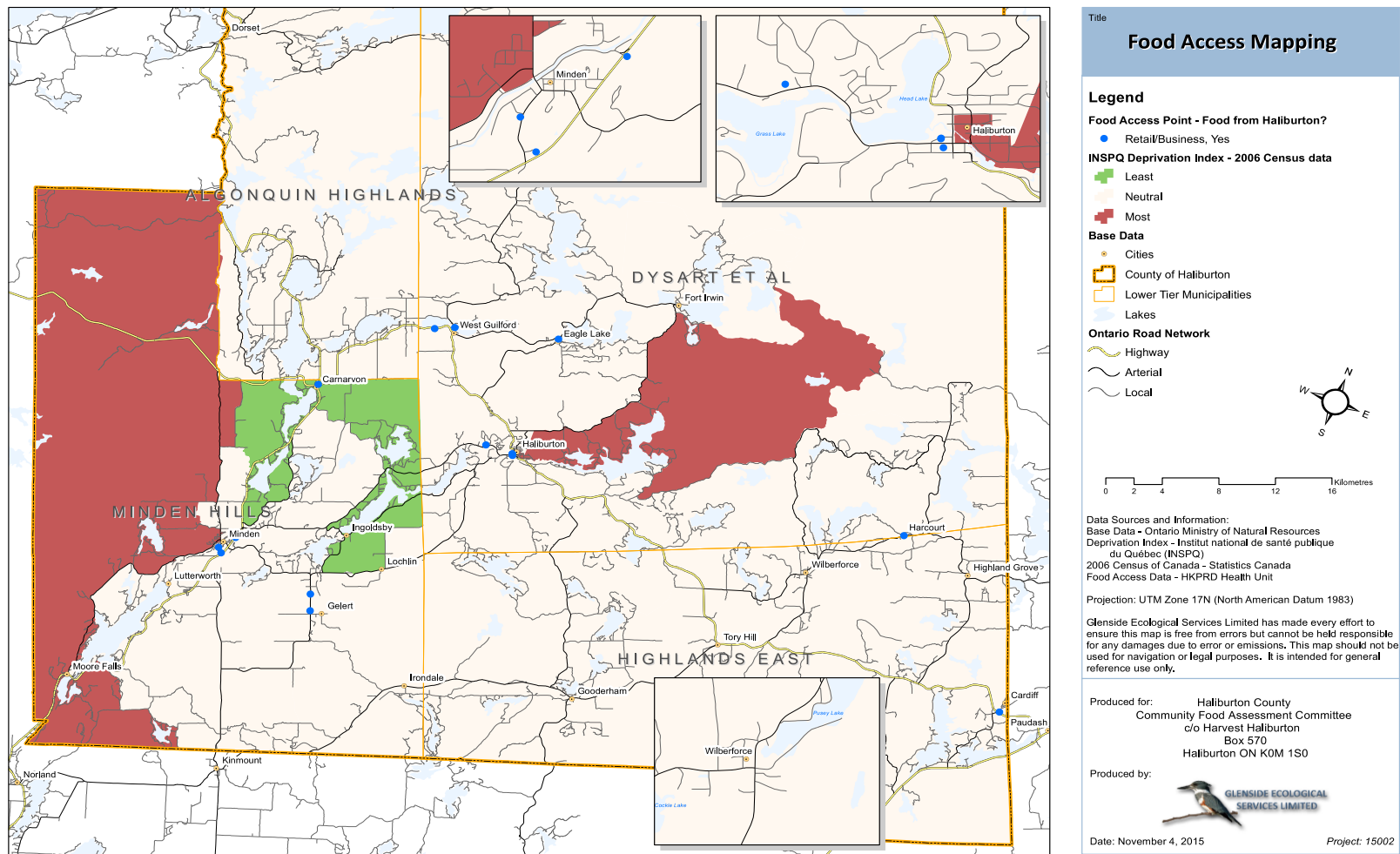


Figure 16. Illustrates the geographies, within Haliburton County, based on Deprivation Index ('neutral', 'most' and 'least' deprived). Plotted on top of the Deprivation Index results are food-access businesses that sell foods that have been produced (e.g. grown) or made in Haliburton County. Less than half of food-access businesses (42%) offer or sell foods that have been produced or made in Haliburton County, however no clear relationship between the number of food-access businesses that sell foods that have been produced or made in Haliburton County and the least or most deprived geographies was identified. Compared to the neutral and most deprived areas, the least deprived geographies were not observed to have a larger proportion of the food-access businesses that sell food items produced or made in Haliburton County.

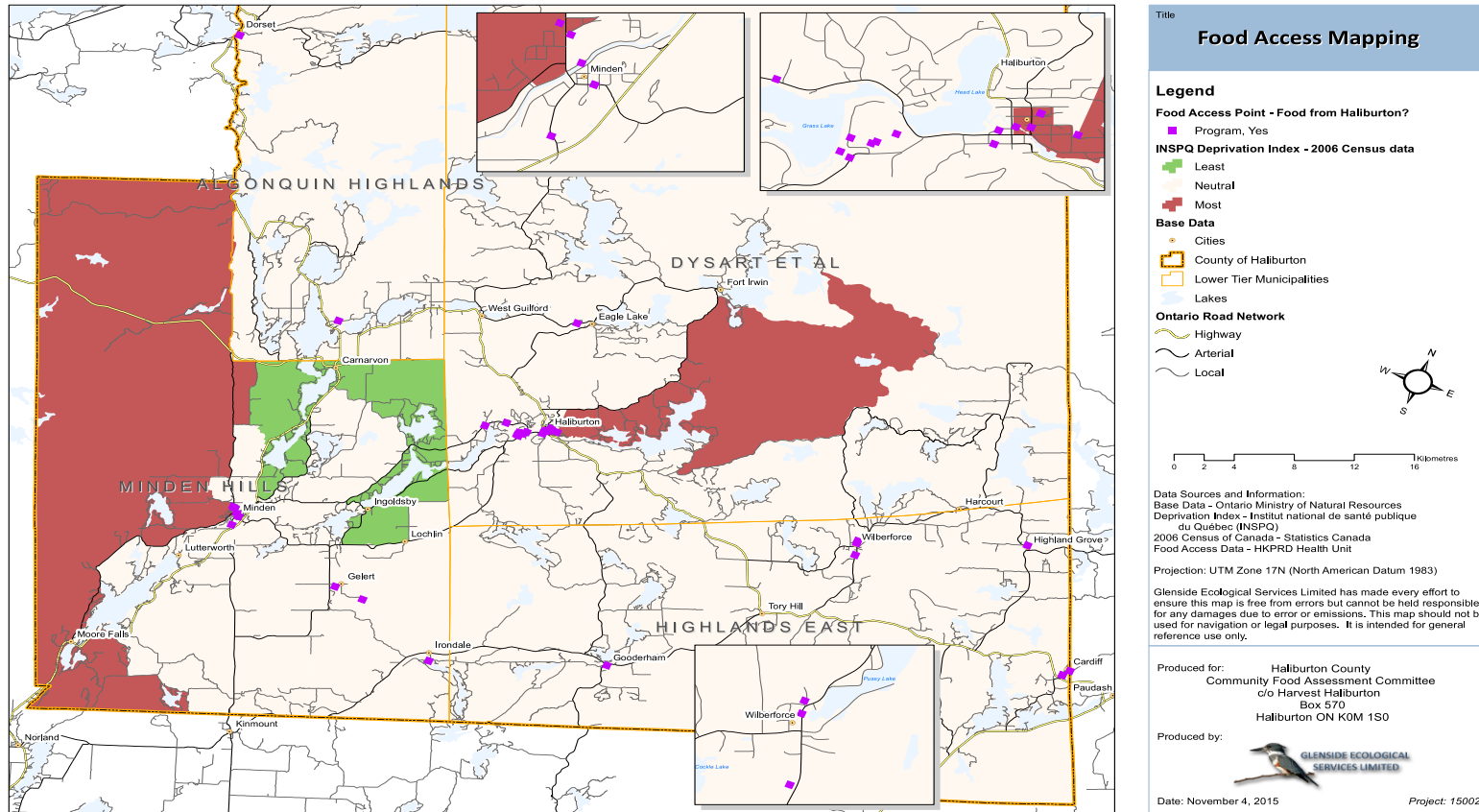


Figure 17. Illustrates the geographies, within Haliburton County, based on Deprivation Index ('neutral', 'most' and 'least' deprived). Plotted on top of the Deprivation Index results are food-access programs that use foods that have been produced (e.g. grown) or made in Haliburton County. More than half of food-access programs (72%) offer or sell foods that have been produced or made in Haliburton County, however no clear relationship between the number of food-access programs that sell foods that have been produced or made in Haliburton County and the least or most deprived geographies was identified. Compared to the neutral and most deprived areas, the least deprived geographies were not observed to have a larger proportion of the food-access programs that sell food items produced or made in Haliburton County.

CONCLUSIONS

This research uses survey data collected about food businesses and programs, together with a visual map-based approach, to address food access and availability in Haliburton County. This report is the first of its kind and is a step towards helping to classify and map the food landscape.

By overlaying food programs and businesses with the INSPQ Deprivation Index results for Haliburton County, we were also able to explore whether or not the characteristics associated with food programs and businesses (e.g. hours of operation, supply of fresh fruits and vegetables, food origin, healthy food policy) are influenced by social and material factors. Conversely, we were also able to visually assess the distribution of access points across the County and whether areas classified as “most” or “least” deprived were being over or under serviced (i.e. more or fewer access points were located in those areas).

Key findings that have emerged from the survey and map analysis are as follows:

1. Parts of the County with the highest number of food access points corresponded with densely populated areas. Haliburton village had the most access points, followed by Minden, and then Wilberforce; together these three areas represent the highest population densities. Some access points were also identified in smaller hamlets, such as Gelert, Irondale, and Gooderham, with between 1-2 points found at each site.
2. The majority of food access points were found in areas with a “neutral” Deprivation Index score; therefore the presence or absence of access points did not seem to reflect differences in material or social components.
3. A large number of food programs offer/sell fresh fruits and vegetables but are not open or accessible after 6:00 P.M., one or more days a week; making it difficult for people that work during the day (e.g. 9:00 A.M. to 5:00 P.M.) to access these programs. Community gardens or orchards were good examples of programs that do offer fresh fruits or vegetables and are open or accessible after 6:00 P.M.
4. Few food business offer/sell fresh fruits and vegetables, but in contrast to the programs are open and accessible after 6:00 P.M., one or more days a week. These businesses were typically categorized as convenience stores or gas stations.
5. In conjunction with the latter two findings, most food businesses did not identify that they had a healthy food policy in place, while nearly all food programs did.
6. Food programs and business were both active in offering/selling food grown or raised in Haliburton County.

These results serve as a starting point for directing ongoing efforts related to documenting and improving food access and availability in Haliburton County.

Overall, food access points were well-distributed across the County; a conclusion reached based on the occurrence of points in both major villages as well as smaller hamlets. That being said, of the food businesses only 9% were classified as a ‘Supermarket/Grocery Store’, with 17% identified as a ‘Convenience Store/Gas Station.’ Larger supermarkets or grocery stores provide fresh fruits and vegetables at affordable prices, whereas convenience stores offer a more limited or no selection of fresh fruits and vegetables, and food prices overall have been reported to be 30-100 times higher than at grocery stores (Unger and Wooton 2006). Initiatives such as the *Healthy Corner Store Network*, whose

goal is to “support efforts to increase the availability and sales of healthy, affordable food through small-scale stores in underserved communities” (Change Lab Solutions 2013), is one model that could be explored in more detail as a way to bring healthier, more affordable food options to corner stores and gas stations throughout Haliburton County.

The majority of access points were identified along major roads or highways, and in populated areas. This result is not surprising and ongoing analyses and interpretation of the data would benefit from being reviewed with population density data. Population estimates for each DA would also be useful for estimating the average distance people need to travel to access food; a key metric for identifying regions of the County that might be more isolated, as well as opportunities for food business and program expansion.

There are other additional factors that affect one’s ability to access food that are not addressed in this report, such as transportation and income, and are also important to take into account when reviewing this data.

RECOMMENDATIONS

Building on the six (6) key findings outlined in the latter section, there are several next steps in terms of future research and community engagement:

1. Conduct secondary research that explores the ‘Healthy Corner Store’ model and its applicability in rural communities. Research on specific case studies could include key informant interviews highlighting engagement and support strategies for businesses interested in developing healthier food policies.
2. An in-depth evaluation of community gardens and orchards as a model for increasing food access in rural communities would assist with documenting the impact of these programs. Building community gardens in underserved neighborhoods has been recognized as an effective approach towards increasing community food security (Unger and Wooton 2006). Community gardens not only increase access to fresh, healthy foods, but they allow members to access food according to their own schedule and needs (e.g. mornings, afternoons, and evenings, during the weekday or weekends).
3. Review and summarize the survey results not included in this report.
4. Work with the GIS program at Fleming College to incorporate population density data into current maps to determine the influence of population and distance on food availability and access.
5. Maintain the database of food access points and update data on an annual basis. Ongoing data collection could coincide with the annual Nutritious Food Basket Costing data collection.
6. Present findings to the County Planning Department and develop working relationships to ensure that maps and data are being shared with the appropriate staff; to help inform planning and policy work.

FOOD ACCESS SURVEY QUESTIONS

PART 1:

Q1. What is the name of your food program or business?

Q2. Which of the following best describes your food program or business?

- Convenience Store/Gas Station
- Discount Dollar Store
- Supermarket/Grocery Store (e.g. Foodland, Your Independent Grocer, Valu-mart)
- Pharmacy
- Specialty/Health/Bulk
- Farmers' Market
- Community Shared Agriculture
- Community Meal
- School Nutrition Program
- Community Garden/Orchard
- Meal Delivery
- Food Bank
- Bulk Buying Program (e.g. bulk food purchases as a group for a discounted price)
- Other, please specify.

Q3. Are you collaborating with any other food programs or businesses? (Y/N)

Q4. Does your food program or business offer meal or food delivery? (Y/N)

If yes, which Haliburton County residents can access these services? (check all that apply)

- Minden Hills
- Dysart et al.
- Algonquin Highlands
- Highlands East

Q6. Is your food program or business run by:

- Paid staff
- Volunteers
- Combination of paid staff and volunteers

Contact Information:

This information will not be shared publically and is only to help verify or clarify survey data.

Q6. Name (first and last)

Q7. Position

Q8. Address of your food program or business. Please include your 911 number. If there are multiple sites or locations (e.g. community gardens, churches) please list all addresses.

Q9. Email

Q10. Does your food program or business have a website? (Y/N)

If yes (and you would like to) please provide the website address.

Q11. Is your food program or business open/accessible after 6 pm one or more days a week? (Y/N)

PART 2:

Q1. Does your food program or business offer/sell fresh fruits or vegetables? (Y/N)

Q2. Does your food program or business offer/sell milk products (e.g. milk, hard cheese, or yoghurt)? (Y/N)

Q3. Does your food program or business have a healthy food policy? (Y/N)

Q4. Does your food program or business offer/sell food grown or raised in (check all that apply):

- Haliburton County
- Ontario
- Canada
- Imported
- Don't Know

Q5. Is your food program or business accessible to everyone in Haliburton County regardless of income level, age, or other identifying factors? (Y/N)

Q6. Does your food program or business offer food skill building opportunities (e.g. how to grow, prepare, and cook food)?

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