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**Community Food Systems: A Primer for Local Public Health Agencies 1** Iowa Department of Public Health Food System Fact Sheets

# Part 1. Community Food Systems: A P rimer for Local Public Health Agencies

Iowa Department of Public Health

June 2014

# Healthy Food, Healthy Iowa

# ns,

# Healthy Communities

Public Health Tools to Advance Healthy, Sustainable Food Syste ms

2 Community Food Systems: A Primer for Local Public Health Agencies

# Healthy Food, Healthy Io wans, Healthy Communities

# Part 1. Community Food Systems: A Primer for Local Public Health Agencies

June 2014

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# Introduction to Community Food Systems

Everyone eats! Food is a basic human need yet several of the leading causes of death in Iowa are th e result of diet-related chronic diseases. This includes heart disease, stroke, cancer and diabetes, which are the most c ostly. yet most preventable, of all health problems.1 Strengthening Iowans' knowledge and behavior on healt hy eating and active living is but one approach to alleviating the impact of diet-related chronic diseases. Effectively preventing diet-related chronic diseases requires a multifaceted range of strategies including policy, system and environmental changes, in this case, using a food systems lens. The National Prevention Strategy<sub>2</sub> focuses on healthy eating as a priority. Healthy food consumption i s a key strategy in reducing/eliminating risk of diet-related chronic diseases. The healthy eating recommendations outlined in the National Prevention Strategy include: • Increase access to healthy and affordable food in communities. • Implement organizational and programmatic nutrition standards and policies, • Improve nutrition quality of the food supply, • Help people recognize and make healthy food and beverage choices, • Support policies and programs that promote breastfeeding, and • Enhance food safety However, healthful foods are derived from production and transformation processes that produce healthful foods. The charge for public health practitioners is to broaden the scope of healthy eating indicators beyond access and consumption to healthy food systems. The purposes of the Healthy Food, Healthy Iowans. Healthy Communities Series are to demonstrate the interconnectedness of the food system to public health issues (Part 1) and to provide tools to local public health

agencies for assessing, planning, implementing and evaluating food system initiatives (Part 2).

#### What is a Food System?

A *food system* includes all processes and infrastructure involved in feeding a population: growing, har vesting,

processing, packaging, transporting, marketing, consumption, and disposal of food and food-related items.

Within each food system sector, is a myriad of activities and stakeholders (Figure 1).3

Production Farming Gardening Fishing Hunting Foraging Transformation Processing Packaging Labeling Marketing Distribution & Retail Wholesaling Warehousing Transportation Food Access & Consumption Purchasing Gleaning Growing Food Assistance Preparing Preserving Waste Management Recycling Recovering Reusing Composting Food

# System

# Sectors

Figure 1. Food System Sectors

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**Community Food Systems: A Primer for Local Public Health Agencies 5** A *foodshed* is a geographic region in which there is a flow of food from where it is grown to a pla ce where it is consumed. This also includes the land on which it is grown, the routes it travels, the markets it pass es through and ultimately the tables on which it is served. A foodshed is similar to a watershed in that foodshe

ds outline the flow of food feeding a particular population, whereas watersheds outline the flow of water drainin g to a

particular location.

A community food system is a food system in which food production, transformation, distribution, consumption

and waste management are interconnected to enhance the human, environmental, social and economic health

of a particular geographic area. A community food system can refer to a neighborhood, town, city, c ounty,

region, or bioregion. Community food systems may be used interchangeably with "local" or "regional" food

systems. However, "community" places an emphasis on strengthening existing (or developing new) rel ationships

between all components and stakeholders of the food system.4,5 Approaching food systems from a community

lens offers a framework to advance sustainability --

- the capacity of being maintained over the long term while

meeting the needs of the present without jeopardizing the ability to meet the needs of future generations. $_{6}$ 

A food system also includes the inputs needed and outputs generated at each of these steps. A food system

operates within and is influenced by social, political, economic and environmental contexts. It also req uires

human resources that provide labor, research and education (Figure 2).7

#### Figure 2. Interconnections of a Food System<sup>8</sup>

#### Impacts

Human Health Environmental Health Social Health Economic Health Inputs Natural Capital Human Capital Economic Capital Influences Social Values Culture & Religion Income Education Research Technology Policies Individual Organizational Public Local State Federal International Production Transformation Distribution & Retail Access & Consumption Waste Management Food System Sectors

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# How Does the Food System Impact Public Health?

In Iowa, the challenges are numerous. Obesity and diet--

related chronic disease rates continue to rise, while the

health of Iowans is further exposed to antibiotic resistance; harmful chemicals and pathogens in food, air, soil

and water; degradation of natural resources such as soil, water, energy and biodiversity; and erratic w eather

patterns. Contemporary food systems have evolved to increase efficiencies, lower production costs, ma ximize

yields, increase profits, and reduce food costs. The challenge to public health practitioners is determini ng how

the food system impacts human, social, environmental and economic health.

In the report, Cultivating Resilience: A Food System Blueprint that Advances the Health of Iowans, F arms and

Communities, the trends of 14 indicators were analyzed and it was determined the resilience and healt h of

Iowa's food system from an overall, composite rating of the sum of all indicators is 'Poor.'9 Althoug h most Iowa

food consumption occurs within this system, healthier and more sustainable alternatives are available.10

## What is a Healthy, Sustainable Food System?

A healthy, sustainable food system ensures all Iowans have equal and adequate access to nutritious food and clean water, now and in the future. The four domains of a healthy sustainable food system (Figure 3) include:

• Human Health & Wellbeing: Fulfills the food and nutrition needs of all Iowans through regular access to a safe, nutritious and diverse food supply and clean water that supports self-reliance and a healthy lifestyle.

• Environmental Health: Conserves, renews and protects Iowa's farmland and natural resources (soil, water, air, energy, biodiversity) and supports thriving ecosystems.

• Social & Cultural Health: Empowers social responsibility, community engagement and ensures Iowa's food and farming systems are fair, just and culturally appropriate.

• Economic Health: Builds community wealth,

economic viability, resilient agricultural

diversity and regionalized infrastructure for

food and farming systems in Iowa.

The American Public Health Association defines a *sustainable food system* as "one that provides heal thy food to

meet current food needs while maintaining healthy ecosystems that can also provide food for generati ons to

come with minimal negative impact to the environment. A sustainable food system also encourages lo cal

production and distribution infrastructures and makes nutritious food available, accessible, and affordab le to all.

Further, it is humane and just, protecting farmers and other workers, consumers, and communities."11

The American Public Health Association, American Nursing Association, Academy of Nutrition and D ietetics and

the American Planning Association developed principles for a healthy, sustainable food system. This u nique

collaborative established a framework to support socially, economically and ecologically sustainable fo od

systems that promote health -

the current and future health of individuals, communities and the natural

environment.12 The Principles of a Healthy, Sustainable Food System are located in Appendix A.

Human Health & Wellbeing Social & Cultural Health Environmental Health Economic Health Figure 3. Domains of a Healthy, Sustainable Food System

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How Can Local Public Health Agencies Advance a Healthy, Sustainable Food System? Local public health practitioners are well prepared to lead community food system initiatives by serving in the

following functions:

• Convening. Provide leadership in assembling food system stakeholders from the community in food system discussions. Become a guiding force in the establishment of healthy and sustainable communit y

food systems. Establish a food policy council in the community.

• Assessment. Integrate food system elements into the Community Health Needs Assessment and Healt h

Improvement Planning process. The findings may lead to encouraging municipalities to include food system and sustainability goals in their comprehensive plan (e.g., agricultural land preservation and smart growth strategies).

• Educating and Assisting. Host networking and educational opportunities where stakeholders have access to one another as well as local, state or national experts on healthy, sustainable food systems. Inform partners of funding opportunities that support food system initiatives. Provide technical assistance or letters of support to stakeholders applying for loans or grants.

### How Does Assessing Community Food Systems Support Core Functions and Essential Public Hea Ith Services?

Science proves that the health of the food system directly impacts the health of populations. Commun ity food

system assessment and planning aligns with the core public health functions (assessment, policy devel opment

and assurance) and the essential public health services. Specifically:

- Monitor health status to identify and solve community health problems,
- Diagnose and investigate health problems and health hazards in the community,
- Inform, educate and empower people about health issues,
- Mobilize community partnerships and action to identify and solve problems,
- Develop policies and plans that support individual and community health efforts,
- Enforce laws and regulations that protect health and ensure safety,
- Assure a competent public and personal health--care workforce,

• Evaluate effectiveness, accessibility and quality of personal and population-based health services, and

• Research new insights and innovative solutions to health problems.

Tools for conducting community food system assessments can be found in Healthy Food, Healthy Iowans, Healthy Communities-- Part 2. A Community Food Systems Assessment & Planning Toolkit for Local Public Health Agencies

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# Food System Challenges & Public Health Impacts

#### **Overview**

Public health often leads efforts in addressing the outcomes of the current food system including obes ity, diet--

related chronic diseases, food insecurity, food borne illnesses and contaminated water supplies. Howev er, to

increase efficacy of public health interventions a comprehensive examination of the human, environme ntal,

social and economic health impacts of the food system is warranted. A comprehensive examination us ing an

evidence--based approach enables local public health agencies and their partners to identify the

interconnections and interdependence embedded within the food system. Understanding the connections will

lead to broader awareness of food system related issues, stronger public health program development and

coordination, and greater capacity to create positive food system change.

What follows is a state level snapshot of the challenges within each food system sector and the hum an,

environmental, social and economic health impacts resulting from the challenges. The goal of the snap shot is to

demonstrate the wide range of food system issues and data that may be examined and their impact o n public

health. The challenge and impact sections are not exhaustive lists and local public health agencies are

encouraged to expand their community examination beyond this snapshot.

Food System Sector - Production

#### Key Terms

• Agrobiodiversity is the diversification of animals, plants and microorganisms that are used directly or

indirectly for food and agriculture, including crops, livestock, forestry and fisheries. It comprises the d iversity

of genetic resources (varieties, breeds) and species used for food, feed, fiber, fuel and pharmaceuticals . It

also includes the diversity of non--harvested species that support production (soil microorganisms,

predators, pollinators) and those in the wider environment that support agro-ecosystems (agricultural, rangeland, forest and aquatic) as well as the diversity of agro-ecosystems.<sup>13</sup>

• Animal agriculture includes the raising of livestock, as well as fishing and hunting.

• Crop production is the process of growing food, feed, fiber and fuel by the cultivation of certain pl ants. The

scale, methods and type of food production vary widely across Iowa, but include small, mid-

sized and large

farming operations; backyard, community, workplace and school gardens/orchards; fishing; hunting and

foraging.

• *Monocropping* is the agricultural practice of growing large areas of one crop in the same location y ear after

year.

• Specialty crops consist of fruits and vegetables, tree nuts, dried fruits, horticulture, and nursery crops

(including floriculture). Eligible plants must be intensively cultivated and used by people for food, me dicinal

purposes, and/or aesthetic gratification to be considered specialty crops.14

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#### **Production Challenges**

Impacts on Public Health Agricultural consolidation -- Iowa has lost 113,000 farms over the past 60 years.15
Iowa has lost about 9,800 farm proprietors since 2001, nearly 100 per county.16
Most small farmers in Iowa derive the majority of their incomes from nonfarm sources.17

*Economic and social health* -- As agricultural consolidation has occurred, small-- and mid--sized farms have been less able to

compete.

• Agricultural consolidation is associated with money moving out of rural economies.18

*Biodiversity* -- The variety of agricultural commodity crops produced in Iowa has decreased from 34 in 1920 to just 7 in 2007.<sup>19</sup>

• The commoditization of agriculture has reduced the species of fruits, vegetables, and grains that are available for consumers to purchase. For example, there were once over 15,000 distinct apple varieties grown in the U.S. Today, only 11 varieties regularly appear on supermarket shelves.<sup>20</sup>

• In 2008, 93% of harvested acres were either corn or soybeans.<sup>21</sup> In 2009, more than two--thirds of Iowa's corn crop was used for ethanol production or livestock feed.<sup>22</sup>

*Human and environmental health* -- As diversity of food crops decreases, rates of poor health increase.23

• Industrial agriculture crops do not develop to their full nutrient potential, due to depleted soil nutrients as a result of monocropping, hybridization, plant spacing, and harvest prior to peak ripeness.24,25

*Fruits and vegetables* -- The number of acres devoted to fruit and vegetable production in Iowa has decreased by more than 88% since 1929.<sub>26.27</sub> Out of the 50 states, Iowa ranks 42<sub>nd</sub> and 38<sub>th</sub> in vegetable and fruit production, respectively.<sub>28</sub>

**Human health** -- If Iowa farms were to produce enough fruits and vegetables for the entire population to eat the number of servings recommended per day, only about 12,300 acres would be required for production. This is the equivalent of just 123 acres per county – slightly less than one--fifth of a square mile.<sup>29</sup>

• Between 1997 and 2007, U.S. imports of fish and seafood more than doubled; imports of fruits, vegetables, nuts, and grains doubled; imports of meat, poultry, and dairy products almost doubled.<sup>30</sup> Total value of food imports exceeds \$43 billion.<sup>31</sup> Greater reliance on other states and countries for the food that we eat increases food insecurity in our state.

*Pesticide use* -- Monocropping makes crops more vulnerable to pests, often resulting in higher levels of pesticide use.

• Pesticide use in Iowa has been steadily increasing since the 1940's.<sub>32</sub> Each year, 55 million pounds of pesticides are transported, handled, and applied by farmers and commercial applicators in Iowa.<sub>33</sub>

*Environmental health* -- Pesticide runoff and airborne "drift" affects surface and ground waters, and causes decline in bird and beneficial insect populations.<sup>34</sup>

*Human health* – Long--term effects include some cancers and problems in the reproductive, immune, endocrine, and nervous systems.<sup>35</sup>

 $\bullet$  Pesticide exposures are elevated for farm workers and those living near farms.  $^{36,37}$ 

*Economic health* – The public health costs of pesticides have been estimated at over \$1 billion per year.<sub>38</sub>

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#### **Production Challenges**

#### **Impacts on Public Health**

Erosion – The USDA estimates that, in 2007, soil erosion in Iowa averaged 5.2 tons per acre per year. Rates of erosion vary across time and location, however.<sup>39</sup>
Researchers from Iowa State University estimate that in some townships, more than 64 tons of soil per acre was lost each year.<sup>40</sup>

• When soil is lost, vital nutrients and microorganisms are lost, resulting in reduced ability to grow food or plants with reduced levels of nutrients.41

*Human and environmental health* – Healthy soil is necessary to grow healthy foods. According to the Soil Science Society of America, it takes 500 years to build one inch of topsoil. Loss of soil will deteriorate Iowa's ability to grow healthy, fresh foods and negatively impact the farm economy on which Iowans rely.

*Water quality* -- The quality of Iowa's streams has improved, however the average water quality score still remains in the poor category.42

• Fertilizers and pesticides applied to farm fields, commercial and residential lands are the leading cause of water pollution in Iowa's rivers and streams.43

Human and environmental health – Water is necessary for the maintenance of life for humans, plants, animals, food production and as a raw ingredient in industry.
Poor water quality can result in reduced ability for aquatic life to survive, health hazards in drinking water supplies, and reduced opportunities for water--related recreational activities.44

• Climate change affects water quality. Scientists predict that the amount of rainfall during heavy storms is likely to increase, which could cause both increased soil erosion and decreased water quality.45

*Gardening surveillance* -- While national estimates indicate that the popularity of gardening has been growing in recent years, no systems for monitoring state or local data are in place.<sup>46</sup>

*Human and environmental health* – The public health impact of food gardens is difficult to estimate, due to lack of data regarding prevalence, methods, types of food grown, and contribution of garden produce to consumers' diets. However, food gardening can lessen the impact of food insecurity, poor health, declining economy, environmental degradation, and social problems.<sup>47</sup>

*Consolidation of livestock* -- As consolidation of beef, pork, and poultry processing companies has occurred, farmers have been forced to increase the size of their operations, or go out of business.48

• In 1978, there were over 60,000 hog producers in Iowa; in 2007, there were only 8,700. In 1978, the average number of hogs sold per producer was 368; by

2007 that number had jumped to 5,398.
In 1978, there were over 69,000 farms raising cattle in Iowa; in 2007, there were 29,000.
In 1978, there were 1142 poultry operations in Iowa; in 2007, there were 598.49 In 1978, the average number of chickens sold per producer was 592; by 2007 that number had jumped to 17,153.50

*Food value* -- The dollar value of Iowa agricultural products sold to Iowans for direct human consumption has decreased by almost \$9 million since 1997.<sub>51</sub>

**Social and economic health** – As the number of producers has declined, rural areas have lost valuable jobs and income. • Although remaining producers are selling larger numbers of animals to processors, net real income that they receive has declined due to consolidation among processors and increased grain prices. For example, while Iowa farmers sold twice as many hogs in 2007 as in 1982, the total real value of Iowa's hog sales was 12% lower in 2007.<sub>52</sub>

• About one in ten farm households has income below the poverty line.53

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#### **Production Challenges**

#### Impacts on Public Health

*Agrobiodiversity* – Changes in agriculture have led to specialization of farm animals. The most productive species are used. For example, while there are more than 250 species of cattle worldwide, and more than 60 species bred in the U.S., one breed (Holstein) produces almost all milk.<sup>54</sup> The Holstein was selected for its ability to produce large amounts of milk.<sup>55</sup>

• In the U.S., a single breed of chicken (White Leghorn) is used for almost all egg production, and one turkey variety (Broad Breasted White) is used for almost all turkey meat production.<sup>56</sup>

• In the U.S., about one hundred farm animal breeds are rare, and some are in danger of extinction.<sup>57</sup>

*Environmental and economic health* -- Species diversity has decreased, as breeds have been favored for beneficial characteristics, such as productivity. This results in increased vulnerability to disease or changes in the environment. Studies have shown that as animal diversity increases, resistance to disease decreases.<sup>58</sup>

• Genetic diversity is necessary for resilience and health of a species; species contain unique genes and traits that allow climate adaptation, forage efficiency, hardiness, longevity, and maternal abilities that allow them to thrive in a variety of environments.<sup>59,60,61</sup>

*Human health* – Lack of diversity in animal agriculture results in less diversity in human diets.

*Antibiotic use* – Up to 70% of antibiotics sold in the U.S. go to healthy food animals. $_{62}$  This translates to about 25 million pounds of antibiotics given to livestock per year. $_{63}$ 

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• Antibiotics are routinely used with livestock that are raised in confinement facilities to control the spread of disease and promote growth.64

*Human health* -- There is a link between the routine, nontherapeutic use of antibiotics in food animal production and antibiotic resistance in humans.<sup>65</sup> Use of antibiotics in livestock causes microbes to become resistant to drugs used to treat human illness, making some human illnesses harder to treat.<sup>66</sup>

• Researchers at the University of Iowa found MRSA (Methicillin--resistant *Staphylococcus aureus*) present in 49% of swine and 45% of farm workers in their study population.<sup>67</sup>

• University of Iowa researchers have linked transmission of MRSA between swine and humans. Once MRSA is introduced, it may spread between the animals and their caretakers, with the animals acting as reservoirs for the bacterium.68

Use of resources – Converting grain into meat entails a large loss of food energy. Conservative estimates state that cattle require 7kg of grain to create 1 kg of beef.<sup>69</sup> Approximately 55% of the corn grown in the U.S. and 50% of the soybeans grown are used to feed livestock. <sup>70</sup> The U.S. livestock population consumes seven times as much grain as consumed directly by the entire U.S. population.<sup>71</sup>
Compared to the water required to produce grains, beef production requires 100 times the volume of water to produce the same amount of protein.<sup>72</sup>
The amount of fossil fuel energy required in a typical feedlot has been estimated to be 35 kcal of energy per kcal of beef protein produced. This does not include the energy required for processing, packaging, cold storage, and transportation.<sup>73</sup>

*Greenhouse gas emissions* – Approximately 18% of all greenhouse gas emissions come from industrial livestock production.<sup>74</sup>

*Human and environmental health* -- A food system that requires greater inputs of energy, food, and water to create calories than the calories that are gained is inherently unsustainable over the long--term and threatens long--term food security.<sup>75</sup>

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#### **Production Challenges**

Impacts on Public Health Animal waste -- U.S. industrial food animal producers generate more than 335 million tons of dry manure waste each year.<sup>76</sup>

**Social and economic health** – Research in Iowa has suggested that there may be a 9% drop in home property values if a moderately sized (measured as 250,000 pounds animal weight capacity) new livestock feeding operation is located upwind and near a residence.77

*Environmental health* -- Disposal of animal waste by applying it to land can lead to soil saturation with nitrogen and phosphorus, with excess seeping into and contaminating streams and groundwater.<sup>78,79</sup>

*Air quality* – Industrial food animal production facilities emit ammonia, hydrogen sulfide, carbon dioxide, organic dusts, bacterial endotoxins, and particles contaminated with many different microorganisms.<sup>80</sup>

*Human health* -- Workers and community members living near industrial food animal facilities have elevated rates of respiratory health conditions, including childhood asthma.81,82

*Nutritional quality* – Meat from corn-- and soy--fed animals is high in omega--6 fatty acids, whereas grass--fed and pastured animals are higher in beneficial omega--3 fatty acids.83

• Meat from grain--fed cattle contains higher levels of total fat than meat from grass--fed cattle.

Human health -- Diets that contain more omega--6 fatty acids in proportion to omega--3 fatty acids may be associated with higher risk of cardiovascular disease, cancer, and inflammatory and autoimmune diseases.<sup>84</sup>
Diets high in saturated fat are associated with increased risk of heart disease, stroke, and some cancers.
Fish kills -- In 2011, there were 17 reported fish kills in Iowa, with a total of over 190,000 fish killed.<sup>85</sup>

*Environmental health* – Sudden, large fish kills may be caused by the die--off of large algae blooms; the decay of water weeds after treatment with herbicide; the turnover of oxygen--poor bottom waters following a storm; run--off of livestock waste; pesticides; chlorine; gasoline; fuel oil; ammonia fertilizer; acids; or other toxic chemicals.<sup>86</sup>

**Pollinators** – Honeybee populations have been declining for decades, but the rate has increased in recent years. Beekeepers once commonly experienced annual colony losses of 15--20%; in recent years there have been losses of up to 70% in Iowa.<sup>87</sup>

• Scientists are still investigating this issue; hypothesized causes include landscape changes, viral diseases, and nutrition and human impacts, including pesticides.88,89

*Economic health* – The USDA reports that bee pollination is responsible for \$15 billion in added crop value.<sup>90</sup>

*Human health* – Approximately one--third of the food consumed in the US comes from plants that require pollination. If pollinators disappear from the food chain, the human diet will be much less diverse.91

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Food System Sector – Transformation

#### Key Terms

• Food transformation, or processing, is the practice of converting raw agricultural products into food

products intended for consumption by humans or animals. This includes butchering, cleaning, and pac kaging

of meats, fish, and poultry; milling grains; and pressing oils. Also included is the preparation and pac kaging

of value--

added food products such as dried, frozen, canned, pickled, or otherwise preserved foods. Once a raw product has undergone processing to its final form, the product is packaged, labeled, and ready f or sale

to wholesale or retail markets. Transformation does not include home preservation such as freezing, canning, or drying. The transformation sector presents an opportunity to localize the food system beyo nd

just fruits and vegetables, by connecting processing and packaging infrastructure to growers, local foo d

businesses, and consumers.

#### **Transformation Challenges**

#### Impacts on Public Health

*Nutritional--quality* -- While food processing methods such as canning, drying, pickling, or preserving can contribute to a sustainable food system by extending product shelf life, processing is often currently used by conventional food manufacturers as a way to add "filler" ingredients that raise profit margins while depleting a product's nutritional value. • According to the USDA, the average US diet consists of 49% of processed food.<sup>92</sup>

*Human health* -- Consumption of highly processed foods, which are often high in sodium, trans fats, saturated fats, and refined sugars, has contributed to higher levels of nutrition--related disease, especially among low--income communities.93,94

*Food safety* -- The more elaborate a supply--chain, the more vulnerable food is to contamination.

• In 2010, two Iowa egg producers were implicated in a national *Salmonella* outbreak. As a result, a recall was ordered for eggs labeled under 16 different brand names from food wholesalers, distribution centers, foodservice companies, and retail grocery stores in 23 states. The outbreak resulted in 1,939 cases of *salmonella* nationwide.95

*Human and economic health* -- The CDC estimates that each year roughly 1 in 6 Americans contracts a food--borne illness.<sup>96</sup> In Iowa, there were 62 reported cases of food--borne illness in 2011.<sup>97</sup> Four outbreaks that affected Iowa residents were part of national outbreaks, originating with foods produced outside of Iowa.

• Centralized food processing by a small number of facilities increases the likelihood that any contamination

will have widespread effects.Large-scale containment efforts have large negative economic impacts on producers and workers.

*Occupational safety* -- In 2002, meat processing had the highest reported rate of occupational injuries and illnesses of any industry in the country.98 *Human and economic health* -- The food--processing industry has one of the highest incidences of injury and illness in the nation, contributing to lost productivity and income. • Nationally, immigrants make up between 20 and 50 percent of meatpacking workers.99 Issues facing these workers include workplace safety, medical needs, housing, corporate control of labor, discrimination, abuse from supervisors, and isolation.100

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#### **Transformation Challenges**

#### Impacts on Public Health

Local industry -- Iowa lost 50% of its fruit and vegetable canning, pickling, and drying facilities between 1997 and 2007, bringing the total number of facilities down to four.<sup>101</sup>
In 2007, there were 10 poultry processing facilities in Iowa. Only 5 facilities employed less than 20 employees for local farmers' use.<sup>102</sup>
Nationally, meat and grain processing industries have become very concentrated with four companies controlling almost 85% of the beef packing industry; four companies controlling more than 66% of the pork packing market; and four companies controlling 80% of the soybean crushing business.<sup>103</sup>
In 1965, there were more than 550 small meat processors in Iowa. Today, there are less than 200.<sup>104</sup>

**Social and economic health** – Loss of local processing facilities is the result of smaller processors unable to compete with larger processors, which translates into fewer jobs available for Iowans and less money in the local economy.<sup>105</sup>

*Natural resources* -- Food processing requires energy and water for cleaning, sorting, cooking, cold storage, packaging, and waste disposal. Between 1997 and 2002, energy use in the transformation sector outpaced all other food--related sectors. This sector accounts for about 10% of the food system's greenhouse gas emissions.<sup>106</sup>

*Environmental health* – A food system, which heavily relies on large amounts of fossil fuels and water for processing, contributes to depletion of natural resources, and is inherently unsustainable.<sup>107</sup>

*Marketing to children* -- Total spending on food marketing to children ages 2--17 was \$1.79 billion in 2009. Spending on marketing of carbonated beverages (excludes water and juice) to this age group was over \$511 million.108

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• In 2011, preschoolers saw on average 11 food and beverage ads per day. Youth exposure to food advertising increased with age, and peaked at 15 ads per day for 12-- to 14--year--olds.<sup>109</sup>

*Human health* -- From 1989 to 2008, calories from sugar sweetened beverages increased by 60% in children ages 6 to 11, from 130 to 209 calories per day, and the percentage of children consuming them rose from 79% to 91%.<sup>110</sup> • Consumption of sugar sweetened beverages increases risk of obesity, diabetes, heart disease, and gout.<sup>111</sup> One study found that for each additional 12--ounce soft drink children consumed each day, the odds of becoming obese increased by 60% during 1½ years of follow--up.<sup>112</sup>

**Food labels** – Existing food label requirements may not provide sufficient information for consumers to make truly informed choices about the products that they purchase.<sup>113</sup> **Social and human health** – Consumers have an interest in knowing more about the products that they purchase and the companies that they purchase from (e.g., where and how products are produced, whether animals were treated humanely, whether the product contains genetically modified organisms, whether workers are paid a fair wage and have safe working conditions, and whether products are produced in environmentally responsible ways).<sup>114</sup>

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#### Food System Sector – Food Distribution & Retail

### Key Terms

• *Food distribution* is the process of moving and storing food products among producers, processors, and

consumers. *Food retail* includes the various outlets where individuals can access and purchase foods. These

include mega stores, supermarkets, convenience stores, gas stations, corner markets, liquor stores, food

cooperatives, restaurants, cafeterias, vending machines, farmers' markets, and community supported agriculture farms.

• Food hub is a business or organization that actively manages the aggregation, distribution, and mark eting of

source--

identified food products primarily from local and regional producers to strengthen their ability to satisfy wholesale, retail, and institutional demand.<sup>115</sup>

#### Food Distribution Challenges

#### Impacts on Public Health

*Distance food travels* -- Fresh produce purchased in Iowa has travelled an average of 1500 miles; locally produced food travels an average of 56 miles.<sup>116</sup>

• On average, non--local broccoli has traveled more than 90 times further than locally--sourced broccoli. Non--local carrots, sweet corn, garlic, onions, and spinach have traveled at least 50 times further than their locally-grown counterparts.<sup>117</sup>

*Human health* -- Most fruit and vegetables are bred for transportability, color, or standard size, rather than taste. They are often picked before they are ripe, reducing flavor and nutrient content. Many nutrients, and especially vitamin C, start to break down immediately after harvest.<sup>118</sup> *Consolidation* -- Wholesale buyers often find it too costly to purchase products directly from numerous farms, and prefer to reduce transaction costs by buying from distributors. <sup>119</sup> • There are very few regional food distribution networks in Iowa.<sup>120</sup>

• Just five supermarket chains account for over 40% of retail food sales in the U.S.<sub>121</sub> Only three supermarket chains account for almost 80% of retail food sales in Iowa.<sub>122</sub>

*Social and economic health* -- Rural financial wealth leaks out of communities when local people lose ownership of farmland and food supply chains.<sup>123</sup> • Regional aggregation and distribution centers, or food hubs, can provide producers with increased

opportunities. Hubs can support increased production, opportunities for local processing, infrastructure for local distribution, and demand through marketing, outreach, and capacity building.<sup>124</sup> • Retail consolidation has been associated with money

moving out of rural communities.125

*Human health* -- Horizontal and vertical integration in the food system may lead to decreased food access for consumers and decreased diversity of available products.

Energy -- Food distribution is heavily reliant on infrastructure such as roads, trucks, rail, air, and ships - each of which is dependent on fossil fuels.
Transportation contributes 11% of the food system's greenhouse gas emissions in the U.S.127
Environmental health - A food system that heavily relies on large amounts of fossil fuels to transport and store products contributes to depletion of natural resources, and is inherently unsustainable.128

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Food Distribution Challenges

#### Impacts on Public Health

*Food retailers* -- According to the CDC, 63.3% of the census tracts in Iowa have a healthy food retailer (supermarkets, larger grocery stores, warehouse clubs, and fruit/vegetable markets) located within ½ mile; the U.S. average is 72.0%.129 • The number of Healthy Food Retailers per 100,000 Iowans declined from about 27 in 1997 to less than 23 in 2007.130

*Human and social health* – Decreased availability of supermarkets and grocery stores may translate to decreased intake of healthful foods such as fruit and vegetables, especially within low--income neighborhoods.<sup>131</sup>

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Food System Sector – Food Access & Consumption

#### Key Terms

• *Community food insecurity* may occur when there are inadequate resources from which people can purchase food, available food purchasing resources are not accessible to all community members, avail able

food is not sufficient in quantity or variety, available food is not competitively priced and thus not af fordable

for all households, there are inadequate food assistance resources, there are no local food production resources, or locally produced food is not available to community members.<sup>132</sup>

• Food access is the individual's point of contact with food. This may include purchasing food at a g rocery

store, convenience store, restaurant, community supported agriculture farm, farm stand, or farmers'

market. It may also include accessing fresh food from a garden or orchard, acquiring food from emer gency

food assistance programs or using benefits supplied by federal food and nutrition programs (e.g., SNA  $\ensuremath{\mathsf{P}}$  and

WIC) to purchase food.

• Food deserts are areas in which supermarkets have closed in urban and rural locations, and food sw amps

are areas in which convenience stores, liquor stores and fast food restaurants become the only accessi ble

outlets for food.

• *Food preservation*, such as freezing, canning, or drying, enables longer--term storage of food at the household level.

• *Health* is a state of complete physical, mental, and social wellbeing, and not merely the absence of disease

or infirmity.133 Individual health is a result of the ability to access food, as well as the nutritional qu ality,

quantity, and safety of the food consumed.

• *Household food insecurity* is the limited or uncertain availability of nutritionally adequate and safe f oods, or

limited or uncertain ability to acquire foods in socially acceptable ways (without resorting to emergen cy

food supplies, scavenging, stealing, or other coping strategies). In households with very low food secu rity,

eating patterns of one or more household members are disrupted and food intake reduced because the

household lacked money or other resources for food.134

Food Access & Consumption Challenges Impacts on Public Health *Food access* –Over the past decades, food deserts and food swamps have increased in prevalence.
Iowa lost more than half (52.6%) of its grocery stores from 1976 to 2000, many of which were main street businesses in small rural towns across Iowa.135
Even where grocery services exist, produce offerings in low--income neighborhoods are often of poorer quality yet higher price compared to more affluent neighborhoods.136

Human and social health -- The greater distance an individual must travel to purchase fresh, healthy food, the greater the rates of diet--related chronic diseases.<sup>137</sup>
People tend to make food choices based on the food outlets available in their immediate neighborhoods.<sup>138</sup>
Residents with poor supermarket access have increased exposure to high calorie foods with little nutritional value at convenience stores and fast food restaurants, intake of which contributes to increased risk of disease.
Low--income and younger households in rural Iowa food deserts are less successful than others in avoiding food insecurity.<sup>139</sup>

*Environmental health* – Diets high in processed and packaged foods require much more energy for production and waste management than fresh, locally grown diets.<sup>140</sup>

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18 Community Food Systems: A Primer for Local Public Health Agencies Food Access & Consumption Challenges Impacts on Public Health Food insecurity -- In 2011, 12% of Iowa households were identified as food insecure, with 4.7% of households rated as having very low food security. 141 • In 2010, 19.5% of children in Iowa were food insecure. Among those children, 43% did not qualify for federal food nutrition programs (family income >185% of poverty level).142 • In 2010, almost 40% of Iowans eligible for WIC did not participate.143 Eight percent of Iowans eligible for SNAP did not participate.144 • In 2011, 12% of Iowans received SNAP benefits, and almost 80,000 Iowans participated in WIC. Food costs for WIC in Iowa in 2011 totaled almost \$35 million.145,146,147

*Human, social and economic health* – Food insecurity results in poor physical and mental health in adults and depression in women, overweight and weight gain, adverse health outcomes for infants and toddlers, behavior problems in preschool--aged children, lower educational achievement in kindergarteners, and depressive disorder and suicidal symptoms in adolescents.<sup>148</sup>

Participation in federal nutrition assistance programs has been shown to reduce food insecurity.149,150
Hunger is estimated to cost Iowans \$900 million annually.151 Costs include those for charity to help feed the hungry, mental health and medical care due to increased rates of illness, and costs associated with lost productivity. *Food waste* – From 1998 to 2011, Iowa landfills saw an increase of 62% in food waste disposal.152

Human and environmental health – To divert food waste from landfills, food could be collected and distributed to food pantries and food banks for distribution. This includes unpicked vegetables and fruit in fields and gardens; food discarded from processing facilities; near expired food from grocery stores; and unused inventory from restaurants, schools and hospitals.
Table to Table, a food recovery organization in Iowa City, rescued over 1 million pounds of bread, bakery items, produce, dairy, and prepared foods from entering landfills in 2012. This food was used to create over 750,000 meals at the community organizations that they serve. Food was collected from grocery stores, dairies, food warehouses, schools, and restaurants.153

*Calorie intake* -- Compared to 1970, Americans are eating an additional 523 calories per day, and are consuming 1000% more refined sugars such as high fructose corn syrup.154

Agricultural subsidies have enabled food manufacturers to produce energy dense foods at a low cost. Cheaper foods are often high in calories, highly processed, and low in nutritional value. *Human and economic health* -- Increased calorie intake increases risk for overweight/obesity.
Obesity rates increased by 10% for all U.S. children 10-- to 17--years old between 2003 and 2007, but by 23% during the same time period for low--income children.<sup>155</sup>
Overweight and obesity increase risk for many diseases, including heart disease, diabetes, cancers, stroke, hypertension, high cholesterol, and liver and gallbladder diseases.<sup>156</sup>

• Iowa's estimated medical costs attributable to obesity are more than \$1.2 billion.157

*Fruit and vegetable intake* -- Less than 14% of Iowa adults eat five servings of fruits and vegetables per day,158 and less than 20% of Iowa adolescents eat five servings of fruits and vegetables per day.159 • Among low--income Americans, median fruit consumption is less than 1 serving per day; median vegetable consumption is between <sup>3</sup>/<sub>4</sub> and 1 serving per day.160 *Human health* -- Consumption of fruits and vegetables is directly linked to the prevention of diet--related chronic disease.161,162

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#### Community Food Systems: A Primer for Local Public Health Agencies 19 Food Access & Consumption Challenges Impacts on Public Health *Natural resources* – Processed foods, foods transported long distances, and animal protein require a greater amount of resources (packaging, fossil fuels, water, waste) to produce than do whole foods, local foods, and plant--based sources of protein.163,164,165 *Environmental health* – A food system which heavily relies on

large amounts of fossil fuels and water for producing, processing, packaging, marketing, storing, and transporting food products contributes to depletion of natural resources, and is inherently unsustainable.<sup>166</sup>

# *Sweetened beverage consumption* -- The prevalence of soft drink consumption among children increased 48%

between 1978 and 1998.167

In 2008, 12 to 18 year old males consumed an average of 273 calories from sugar--sweetened beverages each day; females averaged 171 calories per day.<sup>168</sup>
Between 1965 and 2002, adults increased the

number of calories consumed from sugar-sweetened beverages by an average of 222 calories per day.169

*Human health* -- High intake of sugar--sweetened beverages in childhood is associated with increased risk of obesity and diabetes later in life.170

• One study found that for each additional 12--ounce soft drink children consumed each day, the odds of becoming obese increased by 60% during 11/2 years of follow--up.171 • Among adults, sugar--sweetened beverages increase the risk of obesity, diabetes, heart disease, and gout.172 *Breastfeeding* – Globally, about 79% of infants are breastfeed for 12 months, compared to only 21.4% in the U.S. Less than 12% of infants in the U.S. are exclusively breastfed for the first 6 months of life.173 • Among 2012 WIC participants in Iowa, less than 25% of babies were breastfed at 3 months of age, and less than 18% were breastfed at 6 months of age.174 • Rates of breastfeeding initiation and exclusive breastfeeding at 3 and 6 months are lowest among low--income women.175 • As of 2007, only 13% of Iowa hospitals had comprehensive breastfeeding policies. Comprehensive breastfeeding policies in hospitals significantly increase initiation and duration of

breastfeeding.176

*Human health* – Breastfeeding is associated with numerous health benefits for both child and mother. Benefits to the infant include reduced risk of mortality and morbidity, including reduced rates of ear infections, asthma, lower respiratory diseases, and lower risk of later development of obesity and diabetes. Benefits to mother include lower risk of diabetes, breast cancer, ovarian cancer and post--partum depression.177

*Economic health* -- It has been estimated at least \$3.6 billion could be saved nationally if breastfeeding rates increased from current rates to those recommended by the U.S. Surgeon General.<sup>178</sup> This estimate reflects savings from reduced medical expenditures due to reduced childhood illness, lost wages of parents attending to those children, and prevention of premature deaths of infants.

*Environmental health* -- Breastfeeding benefits the environment by reducing materials and energy required to produce, package, transport, and market formula, and to dispose of associated waste.

*Food handling practices* -- A national survey revealed that a high percentage of home food processors are using practices that put them at high risk for foodborne illness.<sup>179</sup>

• Only 3--5% of home food preservers recognize the Extension Service or USDA as their source of home food preservation information.180

• In Iowa, there were 62 reported cases of food--borne illness in 2011.181 Out of nine reported outbreaks, four occurred in private homes, at potlucks, and churches. Infectious agents included clostridium, E. coli, salmonella, and listeria.182

*Human health* – Lack of proper methods of food preservation will increase risk of foodborne illness.

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# Food System Sector - Waste Management

#### Key Terms

• *Externalized costs* are a cost or benefit not transmitted through prices that are incurred by a party who did

not agree to the action causing the cost or benefit. General types of externalities associated with food

include ecological effects, environmental quality, greenhouse gas emissions, animal welfare, social cost s

associated with labor, and public health effects.183

• Waste management includes food waste and food--

related packaging resulting from growing, processing,

packaging, labeling, transporting, selling, purchasing, preparing, and consuming food. The process of waste

management includes the collection, transportation, processing, recycling and disposal of food waste an  $\boldsymbol{d}$ 

food--

related packaging across all sectors of the food system. This includes residential, commercial and industrial food wastes.

#### Food Waste Challenges

#### Impacts on Public Health

Landfill waste -- About 46% of waste in Iowa landfills is organic matter, including wood, food, paper and yard wastes. 184

• According to a 2011 study by the Iowa Department of Natural Resources, 13.3% of waste in Iowa landfills is food waste.185

• Although waste from food--related packaging is not calculated, the disposed paper component of the waste stream in 2011 in Iowa included more than 562,600 tons of materials that could be recovered through composting and recycling.<sup>186</sup>

*Environmental health* – Currently, many compostable, organic materials end up in landfills, where they are unable to degrade and replenish soil nutrients.<sup>187</sup>

*Methane production* -- Landfills are a source of both odorous and non--odorous gasses<sub>188</sub> and are the third largest source of human--related methane emissions in the nation.<sub>189</sub> The comparative impact of methane on climate change is over 20 times greater than carbon dioxide over a 100--year period.<sub>190</sub>

*Environmental, human and social health* – When compostable food waste and packaging materials end up in landfills, lack of oxygen prevents decomposition of otherwise biodegradable food waste.

• Living near municipal solid waste facilities increases risk of poor birth outcomes including low birth weight; respiratory conditions including bronchitis and shortness of breath; and cancers of the stomach, liver, and pancreas.191,192,193,194,195

• Noise exposures related to municipal waste facilities have been shown to affect wellbeing and induce stress.<sup>196</sup>

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#### Food Waste Challenges

#### Impacts on Public Health

*Vulnerable communities*– Low resource communities (low levels of civic engagement, home ownership and disposable income) are more vulnerable to high concentrations of polluting facilities.<sup>197</sup>

**Social and environmental health** – Noise, odor, traffic, and visual pollution from landfills may act as visual repellants, preventing health--promoting amenities such as food stores, recreational facilities, and health care facilities from locating nearby.<sup>198</sup>

• Many facilities that were formerly used for municipal solid waste disposal are now sources of groundwater contamination.199,200,201

• Heavy truck traffic on roads leading to waste facilities may present safety concerns.202

*Manure storage* -- Manure storage facilities used by industrial animal feeding operations emit methane. Estimates of methane emissions from manure storage facilities were 65% higher than in 1990.203 It is estimated that one--third of the methane produced each year comes from agriculture, primarily through animals and manure storage units.204

• Other airborne emissions from animal agriculture include carbon dioxide, ammonia, dust, pathogens, and flies.205

*Environmental health* – Liquid or slurry manure applications to fields may result in nutrient overload of soils; effect ground and surface water quality; release methane, carbon dioxide and ammonia; and impact air quality.<sup>206,207</sup>

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# **Opportunities to Advance a Healthy and Sustainable Food Syst em**

#### How Does Public Health Advance a Healthy, Sustainable Food System?

Food system change requires multifaceted strategies that support human, environmental, social and economic health. The Spectrum of Prevention model outlines the multiple levels of intervention and guides public health practitioners beyond preventative education to making organizational, community and public policy changes.

The Spectrum of Prevention<sub>208</sub> is a framework for a more comprehensive understanding of prevention that includes six levels for strategy development. These levels (Figure 4) are complementary and when used together produce a synergy that results in greater effectiveness than would be possible by implementing a single activity or linear initiative.

In the following pages, the Spectrum of Prevention model has been adapted to demonstrate the breadth of activities that local public health agencies and their partners could consider when developing food system plans to advance a healthy, sustainable food system. These are just a few examples and do not constitute an exhaustive list.

As local public health agencies and stakeholders begin planning activities that strengthen healthy and sustainable food systems, the following food system sector objectives may serve as a guide.

• **Production Objective**. Create an economically viable, sustainable system of crop and livestock production that preserves and enhances natural resources, promotes the health of producers,

consumers, and communities while producing an adequate amount of diverse foods to allow all Iowan s

to eat a healthy diet.

• Transformation Objective. Create a sustainable food transformation system that produces safe, healt hy

food products; markets products in such a way that allows for informed consumer choice; and protect s

and promotes the health of individuals, workers, communities, and the environment.

• Distribution & Retail Objective. Promote a sustainable system of food distribution and retail that includes a diversity of locally owned retailers and food distribution networks.

• Food Access & Consumption Objective. Ensure that sustainable, safe, healthful, affordable and culturally appropriate food choices are the easiest choices for all Iowans, in order to protect and promote the health of all individuals and communities.

• Waste Management Objective. Create a sustainable food waste management system that conserves, protects, and regenerates natural resources, landscapes, and biodiversity to protect and promote the health of Iowa's landscape and citizens.

- 6. Public Policy Educa on
- 5. Organiza onal Prac ces
- 4. Coali ons and Networks
- 3. Provider Educa on
- 2. Community Educa on
- 1. Individual Knowledge & Skills
- Figure 4. Spectrum of Prevention

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Community Food Systems: A Primer for Local Public Health Agencies 23 Level 1. Individual Knowledge and Skills

Enhancing an individual's capability of health and safety, while preventing injury or illness through the food system

# Examples of Public Health Action with Community Partners to Advance Healthy, Sustainable Fo od Systems

#### Production

- $\checkmark$  Disseminate information on the public health benefits of crop diversity
- ✓ Provide education and online resources on home gardening

## Transformation

✓ Provide materials to consumers on proper hand washing and safe food handling

# **Distribution & Retail**

1

Develop a fact sheet on the public health benefits of regionally grown foods (e.g., increased flavor, nutrition, keeps food dollars within the community and agrobiodiversity)

#### Food Access & Consumption

 $\checkmark$  Promote increased consumption of fruits, vegetables and whole grains to benefit human and environmental health

 $\checkmark$  Provide information to consumers on farmers' markets, CSAs and U--

pick farms within the community

✓

Encourage use of WIC fruit and vegetable cash value voucher, WIC Farmers' Market Nutrition Progra m

and Senior Farmers' Market Nutrition Program coupons

#### Waste Management

 $\checkmark$  Develop a tip sheet for reducing food waste in the home

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# 24 Community Food Systems: A Primer for Local Public Health Agencies Level 2. Community Education

Reaching groups of people with information and resources to promote a healthy and safe food system

# Examples of Public Health Action with Community Partners to Advance Healthy, Sustainable Fo od Systems

### Production

✓ Educate growers and consumers on:

o The human and environmental health impacts of pesticides and fertilizers

o Integrated Pest Management (IPM) and alternative food production practices

o Methods for decreasing soil erosion to ensure future food production

o The links between a diverse agricultural economy and a safe, stable, healthy food system

✓ Promote the *Cultivate Iowa* campaign to faith--

based organizations, businesses, prisons and community

groups to encourage fresh produce donation to food banks and food pantries

✓ Provide business development assistance for small-- and medium--scale agriculture operations

✓ Host field days and farm visits to connect consumers with agriculture

# Transformation

 $\checkmark$  Provide food safety education and technical support to local and regional food processors  $\checkmark$ 

Educate processors and food service workers on occupational safety risks and proper procedures to avoid injury

 $\checkmark$  Promote a community campaign to increase awareness of food safety concerns associated with improper home food preservation methods

# **Distribution & Retail**

#### ✓

Create a directory of farmers' markets, Community Supported Agriculture (CSA) farms, grocery stores

and restaurants that carry regional foods (Note: some communities in Iowa provide a Buy Fresh Buy

Local Guide)

#### Food Access & Consumption

✓ Host a farmers' market at the hospital or health department
 ✓ Develop and implement community- wide programs aimed at healthy eating and weight management
 ✓
 Work with food pantries, grocers, farmers' market managers, Extension or community colleges to offer
 r cooking demonstrations to consumers regarding preparation of whole foods

# Waste Management

✓ Provide in-services to foodservice directors (schools, hospitals, colleges, universities) to reduce food waste by improving forecasting accuracy

✓ Develop a curriculum for school--aged children on reducing and composting food waste

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# Community Food Systems: A Primer for Local Public Health Agencies 25 Level 3. Provider Education

Informing providers\* who will transmit skills and knowledge about food systems to others

# Examples of Public Health Action with Community Partners to Advance Healthy, Sustainable Fo od Systems

#### Production

 $\checkmark$  Educate healthcare providers on the human and environmental health risks of antibiotic overuse in animal agriculture

#### Transformation

✓ Support and assist with continuing education of food inspectors

#### **Distribution & Retail**

✓ Convene local food retailers (grocers, convenience stores, restaurants) to address the economic and human health impacts of increasing availability of fresh healthy foods

1

Conduct a feasibility study and market analysis for the establishment of a food hub in the community

#### Food Access & Consumption

 $\checkmark$  Provide technical and marketing assistance to convenience store operators to encourage increased availability of fresh healthy foods

#### Waste Management

 $\checkmark$  Host a forum on the human, environmental, social and economic impacts of food waste in the community. Attendees may include municipal landfills, waste haulers, natural resource agencies, food recovery programs and policymakers.

\* Providers may refer to anyone working within a food system sector in addition to public health, healthcare and social serv ice providers

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# 26 Community Food Systems: A Primer for Local Public Health Agencies Level 4. Coalitions & Networks

Convening groups and individuals for broader food system goals and greater impact

# Examples of Public Health Action with Community Partners to Advance Healthy, Sustainable Fo od Systems

## General

1

Form a food policy council that includes stakeholders from all segments of a food system who closel y

examine the operation of the food system at the community level and make recommendations for improving the food system through organizational, community and public policy changes

## Production

 $\checkmark$  Work with agricultural partners to recruit and support beginning or transitioning farmers  $\checkmark$ 

Support the development of farmer food cooperatives for supply purchasing, marketing and product sales

# Transformation

 $\checkmark$  Establish a network of commercial kitchens available for value--added food processing. Provide assistance with:

o Funding opportunities

o Food--safety training

o Licensing requirements

# **Distribution & Retail**

 $\checkmark$  Connect institutional food buyers (from schools, hospitals, long-term care facilities, universities, restaurants, and correctional facilities) with farmers

# Food Access & Consumption

1

Convene a food access work group that addresses food security and health issues in the community  $\checkmark$  Encourage development of food--

buying cooperatives to save households money by pooling resources

✓ Organize local breastfeeding support groups

#### Waste Management

✓ Organize a community food-recovery network that diverts healthful and safe food from the landfills to food pantries and community organizations. Provide training on liability and food safety.209,210,211 The network may include community organizations (Boy Scouts, Girl Scouts, 4--H, Rotary Club), institutions (schools, hospitals) and retail (grocery stores, restaurants, convenience stores)

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# Community Food Systems: A Primer for Local Public Health Agencies 27 Level 5. Organizational Practices

Adapting regulations and policies within organizations that shape norms to improve the health and safety of the food system

# Examples of Public Health Action with Community Partners to Advance Healthy, Sustainable Fo od Systems

## General

1

Encourage schools to incorporate gardening, food preservation, food preparation, healthy eating and food safety programs into education curriculum

## Production

1

Provide funding and business development assistance for specialty crop growers; women and minority-

owned farms and beginning farmers. This may include support for growing season extension, cool storage, washing stations, on--farm processing, expansion, etc.

 $\checkmark$  Establish edible landscaping on city-- and county--owned property and implement chemical-free pest

management and lawn care

✓ Maintain an online list of community (public and private), school and workplace gardens

 $\checkmark$  Provide compost and water to community gardens

✓ Start and maintain a workplace food garden for employees

# Transformation

 $\checkmark$  Support the development of small regional USDA--inspected processing facilities, including mobile processing units

1

Research and report on the safety and social justice issues of workers in food production, processing,

and food service industries

# **Distribution & Retail**

1

Develop point of purchase signage that identifies regionally produced food for cafeterias, grocery store s

and restaurants

1

Provide support and technical assistance to promote expansion of farmers' markets, CSAs, online food

marketplaces, and other methods of direct farm--to--consumer sales

✓

Encourage schools, businesses, hospitals and government agencies to adopt procurement policies for the purchase of regionally grown and sustainably produced foods

✓

Promote development of a food hub or centrally located facility that aggregates, storages, processes, distributes and markets of regionally--produced food to retailers and institutional buyers

✓ Establish business incubators for cooperative, collectively--owned grocery stores

✓ Propose minimum healthy food and beverage options for school and community concession stands

# Food Access & Consumption

1

Launch a community garden "delivery" program to deliver produce to senior, disabled or rural residen ts

who may lack transportation

 $\checkmark$  Assess, develop, and adopt strategies to increase the purchase of fruits and vegetables at farmers' markets by low--income Iowans. For example:

o Secure financial support to provide incentives for SNAP participants to purchase fruits and vegetables (e.g., *Double Up Bucks Program*)

o Use public--private partnerships to purchase wireless EBT devices

o Launch outreach initiatives targeted to farmers' market managers, vendors, and low--income Iowans ✓ Locate farmers' markets at hospitals or public health agencies

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# 28 Community Food Systems: A Primer for Local Public Health Agencies Level 5. Organizational Practices

Adapting regulations and policies within organizations that shape norms to improve the health and safety of the food system

 $\checkmark$  Support school, workplace, and business policies that make healthy foods accessible at reasonable prices and set nutritional quality standards for food sold in vending machines

 $\checkmark$  Work with public and private businesses to develop policies that support breast--feeding

# Waste Management

1

Encourage schools, colleges and universities, hospitals, daycares and restaurants to decrease their use of disposable service ware (foam, plastic, paper) and replace with re--usable dishes and utensils  $\checkmark$ 

Support college, university and hospital cafeterias that go trayless to reduce dishes used and food was te

 $\checkmark$  Encourage institutional food buyers to purchase bulk products for onsite preparation, rather than individually pre--packaged items

 $\checkmark$  Support policies in school, hospitals, and workplaces that provide composting and recycling opportunities. This may include working with waste management companies/departments to redesign/replace containers and bins to allow easier separation and collection of recyclable and compostable materials

✓ Expand recycling drop--off locations

# Community Food Systems: A Primer for Local Public Health Agencies 29 Level 6. Public Policy Education

Developing messages and strategies that inform food system laws, policies and outcomes

Examples of Public Health Action with Community Partners to Advance Healthy, Sustainable Fo od Systems

Note: It is important for local public health agency staff involved with Level 6 initiatives to unders tand

any possibly lobbying restrictions related to the program funding that supports their work.

## Production

 $\checkmark$  Integrate fruit and vegetable production into municipal and county economic development plans

 $\checkmark$  Provide allowances and agreements for organizations to lease non-developable city--

owned property for

community gardens or urban farms

✓ Enforce land--use protections for urban agriculture, community gardens and farmers' markets

 $\checkmark$  Educate on the benefits of allowing residents to maintain food gardens on their property and keep chickens, ducks, rabbits, and beehives

## Transformation

 $\checkmark$  Inform community leaders on the benefits of establishing of a food enterprise business park and providing financial incentives (grants, loans, tax incentives) to encourage the development of small-- and

mid--size food processors, especially food and vegetable processors

 $\checkmark$  Enforce workplace policies that provide living wages and reduce risk of occupational injury  $\checkmark$ 

Educate on the benefits of policies that eliminate the marketing of unhealthy foods and beverages to children at schools and public places

# **Distribution & Retail**

 $\checkmark$  Educate about standards for signage/labeling for grocery stores, restaurants, schools, colleges, and hospitals that provide consumers with more information regarding foods and beverages (how, where, and by whom products were produced)

1

Educate on the benefits of establishing tax incentives for retailers who increase shelf space for fruits and

vegetables in areas that do not have a grocery store or who locate in rural or urban food deserts. Th is

may include redevelopment financing, technical assistance, and marketing services

 $\checkmark$  Inform about land use and zoning regulations that allow healthy food retail in mixed-residential and

commercial buildings

#### Food Access & Consumption

#### 1

Inform on the benefits of municipal transportation policies that increase access to healthy food such a s bus routes, pedestrian walkways and bike paths that connect to farmers' markets, food retail and food

#### assistance programs

1

Educate on the availability and benefits of a tax credit for food producers to donate excess harvest to

food banks or food pantries

#### Waste Management

- ✓ Institute municipal curbside composting and recycling programs
- ✓ Provide incentives and technical assistance for farmers to install methane digesters

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**30** Community Food Systems: A Primer for Local Public Health Agencies **Appendix A. Principles of a Healthy, Sustainable Food System** A PDF can be accessed at https://www.planning.org/nationalcenters/health/foodprinciples.htm

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