

# Needs Assessment of the Rural and Remote Member Food Banks of the California Association of Food Banks



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## SECTION 1: INTRODUCTION AND BACKGROUND

The Nutrition Policy Institute (NPI) at the University of California worked with the California Association of Food Banks (CAFB) and their Rural and Remote Committee members over the period June 2016 to February 2017 to conduct a needs assessment of 15 selected rural and remote Food Banks in California. The purpose of the needs assessment was to identify strengths, challenges and priority strategies to increase the rural and remote food banks' capacity to better meet the needs of the communities they serve.

Section 1 of this report lays out the objectives of this needs assessment; Section 2 describes research methods; Section 3 presents key findings, including an overview of the current situation, challenges, positive practices and recommendations presented by both food bankers and the research team. Section 3 is divided into 4 sections, consisting of an overview of food bank characteristics, key practices (Section 3.1); food bank capacity (Section 3.2); meeting community needs (Section 3.3); and perceived attitudes toward the food banks (Section 3.4); Section 4, which presents a summary and synthesis of findings and Section 5, which is a consolidated list of recommendations appearing throughout the report.

### Research Questions for the Needs Assessment

The overarching question of the assessment was: To what extent are selected food banks meeting the hunger needs of food insecure residents in rural California and what actions are recommended to support rural food banks to better meet population needs? Specifically, data were obtained to address the following questions:

1. How large is the need in selected rural California communities for food assistance (including charitable food assistance) as documented by indicators such as socio-demographic characteristics, prevalence of food insecurity, participation in food assistance programs, health status indicators, etc., in areas served by rural food banks.
2. What are the key features, capacity and practices of the rural food banks such as organizational structure, staffing, infrastructure, food procurement, inventory, nutrition quality indicators and tracking systems, programs, agency relations, outreach, fundraising, community relations, networking, advocacy, and emergency preparedness?
3. What are the food banks' principal strengths, and the principal challenges they face, and their vision for the future in addressing food insecurity and procurement/provision of adequate quantities and quality of charitable food assistance in their communities? Contributing to/advocating for other initiatives to reduce food insecurity?
4. What are the options to assist and support rural food banks in better meeting the needs of the populations they serve?
5. How can CAFB contribute to increasing the capacity of its rural and remote members?

## Indicators of Food Bank Operations

NPI researchers considered the types of “indicators” to be documented in assessing the needs of rural food banks. The following list was generated in consultation with CAFB senior staff, members of the Rural and Remote committee, and also adapted from the Feeding America Capacity Self-Assessment Tool.<sup>1</sup> These indicators were used as the basis for developing the methods for data collection as outlined in section 2.

### Formal organization

1. **Leadership:** a vision/mission/goals for change
2. **Role in community food security: partnerships with other organizations,** advocacy for food security measures, policies
3. **Governance, formalized organization tools and methods:** standard operating procedures, policies (including food procurement policy re types of foods), instructions, guidelines, staff meetings, BOD guidance and support, etc.
4. **Problem-solving environment:** risks and challenges, previous successes, ideas for new solutions

### Organizational capacity

1. **Food Procurement/physical infrastructure - systems to meet needs:** diverse donors, storage, transportation, receiving, inventory
2. **Budget/fundraising:** plan, diversity of sources, dealing with shortages, use of unplanned funds received
3. **Staff infrastructure and communication:** numbers, skills/qualifications, staff training, turnover, staff buy-in to policies, vision, procedure changes
4. **Distribution infrastructure:** interactions with member agencies- communication, problem solving, system for orders, capacity for variety of modes of transportation/distribution of perishable foods in rural areas
5. **IT infrastructure and use:** inventory tracking, communications with staff, and community- email, website
6. **Network of community partnerships:** alliances for advocacy and action on food security, and inputs to nutrition education and other programs and services

### Organizational practices

1. **Fundraising & fiscal management**

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<sup>1</sup> Available online at <http://vpp.wcwid.info/sites/default/files/Feeding%20America%20Capacity%20Self-Assessment%20Tool%20-%20Final%20June%202010.pdf>.

2. **Food procurement practices:** diverse sources, proactive seeking new donors, types and quality procured/purchased in accordance with policies, use of wholesalers for purchase where possible, buying coops, etc., use of TEFAP and government food programs
3. **Inventory tracking:** accountability, review periodically and take actions
4. **Communication:** with staff, donors, government food programs, community orgs, community opinion leaders, elected officials
5. **Range and amounts of services provided:** food provided (pounds, types) nutrition ed, client intake procedures, outreach, referrals for food assistance, other services, policy advocacy, etc.

Meeting **community need to reduce hunger, promote food security and protect health**

1. **Population indicators:** Health status indicators, diet quality indicators of pop, % food insecurity, socio-demographic characteristics, food assistance program participation, hunger study information, etc.
2. **Food bank perspective on client needs and the extent to which they are meeting them**

## SECTION 2: NEEDS ASSESSMENT STUDY METHODS

The assessment was conducted utilizing a combination of qualitative and quantitative methods, relevant to the research questions and indicators outlined in previous section. Methods used in the study are described below.

### Meetings with the CAFB Staff and Rural and Remote Committee Members

The first phase of this assessment involved meeting with CAFB staff and a call with the CAFB Rural and Remote Food Bank Committee and CAFB staff to obtain an in-depth understanding of the current status of the rural and remote food bank members, lessons learned from past efforts to increase their capacity, and the specific goals of the current assessment. This provided an opportunity to review the evaluation plan and data collection tools to meet the CAFB's informational needs.

### Service Area Profiles from Existing Data Sources

We gathered key socio-demographic data and relevant food and nutrition-related data for each county served by the food banks. The list of indicators to be compiled was approved by the CAFB Rural and Remote Committee. Data were compiled from a range of sources, including the U.S. Census, American Community Survey, California Department of Public Health, California Department of Social Services, the California Health Interview Survey (CHIS), California Food Policy Advocates (CFPA) County Profiles and Nutrition and Food Insecurity Profiles, USDA Food and Nutrition Service (FNS), USDA Economic Research Service (ERS), the United States Department of Labor, and Feeding America.

Service Area profiles for each food bank are presented in Appendix 1. Data sources for the profiles and a short tutorial are presented in Appendix 2 to assist food bankers who wish to update their profiles annually. A list of Feeding America training resources is presented in Appendix 3.

### Online Survey

All food banks were requested to complete an online pre-survey prior to the site visits. The survey included questions primarily about food bank capacity such as number of staff, amount of storage, etc. which allowed more time for open ended interview questions at site visits. The pre-survey information was helpful in obtaining a sense of the food banks prior to the site visits, as well as highlighting specific areas of focus during the interviews. The survey asked the following types of questions:

1. **Services provided and food procurement/distribution:**  
*In 2015, how many clients were served by your food bank and member agencies? Unduplicated clients (verify and ask how they calculate these at interview). What was the total poundage of foods and beverages distributed by your food bank in 2015? In 2015, what proportion of the total pounds of foods and beverages came from the following sources (donations, government, purchased)? Which of the following products would you like to be able to provide more or less of to clients served by your food bank/member agencies? (Fruits, vegetables, dairy, beverages, etc.) Which of the following services do you provide, and how often, at what proportion of sites: nutrition education, CalFresh outreach, etc.*
2. **Staffing:** *Please list paid staff positions, and length of time working at the food bank*
3. **Governance, leadership:** *Please list Board of Directors members, their affiliations and how long on the board (or attach a list to this survey)*
4. **Networking/partnerships:** *Please list the community organizations of which your food bank is a member (or attach list) Is your food bank a member of Feeding America?*
5. **Finances/fundraising:** *How much revenue did you get from each of the following sources last year: individuals (direct mail, special events), businesses, foundations, government, member agencies, etc.?*
6. **Physical infrastructure** *details of storage space, refrigeration, trucks, computers, IT infrastructure. Do you use computers to manage and track inventory, email communications internally and with other organizations? What system do you use for these?*
7. **Distribution infrastructure:** *How many member agencies are affiliated with your food bank (by type - food pantry, soup kitchen, shelter, other.)? If different than the number of member agencies, how many direct distribution sites are in your service area? Do you provide charitable foods directly to clients from your food bank?*

As part of the survey, food banks were asked to compile copies of the following types of documents to give to the NPI researcher prior to or at the site visit. Information from these documents was to be abstracted systematically to provide a sense of the formality of their organization, and some factual information about board members and member agencies. [Note: few of these documents were available from food banks, so these sources were not used for the needs assessment.]

- Map of food bank's service area
- Descriptive information: square footage warehouse, freezer, refrigerated storage, trucks, refrigerated and total, forklifts, etc., computers,
- Recent Annual Report
- List of member agencies/distribution sites and addresses

- Organizational chart of food bank staff
- List of members of Board of Directors & their affiliations
- Copy of IRS Form 990
- Examples of fundraising letters
- Minutes of Board Meetings from one or more recent meetings
- Staff meeting minutes from one or more recent meetings
- Examples of newsletters

## Site Visits and Interviews

The NPI researcher and team lead for the needs assessment, Ron Strohlic, conducted site visits to each of the 15 rural and remote food banks included in the assessment during Sept-November 2016. The site visits were primarily conducted to interview EDs and other relevant food bank staff. A semi-structured interview guide was developed, adapting previously used tools at NPI for interviews with food bankers. With the exception of two food bank site visits, the researcher observed food distribution at a selected site. Interviews included the following types of questions:

1. **Vision:** *In your opinion, what would a rural food bank be like, if there were not the usual constraints they currently face? (Role in community, advocacy, capacity to meet community needs, how would the organization be different, how would operations be different, etc.)*
2. **Goals/vision/plan/policies:** *Where do you see your food bank in 5 years? (Role, services, capacity, operations, organization, advocacy) How are you working to get there? Do you have formal policies or plans related to your 5 year goals? Are there good models or examples you've heard about at other rural food banks that you would be interested in establishing at your food bank?*
3. **Governance/leadership/problem solving:** *Tell us about the role and activities of your Board of Directors. (Working, governing, fundraising, seeking donors) To what extent has the board been able to contribute to the successful operation of the food bank? Main successes and challenges? Are you able to recruit the types of Board members you would like? Looking at your list of board member affiliations, are there any who are particularly useful in helping recruit more donations of food or funds? Any conflicts of interest? What successes and challenges have you as the ED had in providing leadership for your food bank? What are your main worries about the future of your food bank? What thoughts do you have about addressing these and what would help you?*
4. **Overall capacity to meet community needs:** *To what extent do you feel your food bank is able to meet the hunger needs in your service area? How do you assess that? To what*



*extent are you able to supply clients with the types of foods they want and will use? Are you able to adequately serve different special groups in your service area such as seniors, homeless, students, people with diabetes or high blood pressure, etc.)? What would you say is the greatest unmet need of clients? What changes would you like to see? What would help you to better meet these needs?*

5. **Infrastructure and operations (several questions based on pre-survey) physical infrastructure, b) staffing, c) IT systems, d) procurement systems-. e) Distribution infrastructure –member agencies f) funding/fundraising:** *Thinking about these aspects of your food bank's set up and operations how well would you say things are working now, and what would you like to improve to increase your capacity to meet community hunger needs? (refer to list of equipment, space, storage, staffing- turnover, ability to recruit skilled staff, network of donors, participation in Farm to Family, use of all sources including TEFAP, wholesalers, coops, etc. IT systems, procurement and distribution system through member agencies, fiscal management- ability to spend unplanned, or unexpected funds such as the 17k allocation this year from state of CA).*
  
6. **Services provided/role in community food security,** *thinking about the list of services and programs you provide (refer to list on survey), are there additional services you would like to provide? Nutrition education, food assistance outreach, referrals for other social services, advocacy for policy and action for community food security/ What would it take in terms of assistance and resources, training, staff, etc. for you to be able to provide these services to your community?*

Interviews were recorded with permission of the food bankers who participated, and were used for later review in data analysis. Two food banks did not consent to recording the interview.

## Data Analysis

After each interview, recordings were stored on University of California, Davis Box Cloud secure storage (password protected encrypted folder). Detailed notes were made by the team lead who conducted the interviews. After collecting interview data from all food banks, the detailed notes were reviewed, and recordings were reviewed when necessary to fill in missing information. Key findings were summarized across all food banks, identifying the range of opinions, experiences, practices, etc. Terms were used as follows to describe the number of food banks who expressed similar views/experiences- "Most" referred to 10 or more food banks, "many" referred to 7-9, "some" referred to 4-6, and "few" referred to less than 4. Common patterns regarding strengths and challenges were identified, along with "positive practices" from food banks that were thought to be of interest for wider dissemination.

Thirteen of 15 food banks responded to the survey (one did not respond and one responded after the deadline for submission) and only 11 provided answers to several of the questions. Survey findings were reviewed prior to each site visit in order to identify areas for further exploration during the interviews. Frequencies of responses to each question were calculated and presented in the body of the report where relevant. Survey data regarding client counts, and total pounds of food distributed was deemed unreliable; those findings are not presented in the report.

## Synthesis of Findings and Draft Recommendations

All members of the NPI research team reviewed the early findings and identified ideas from the food bankers themselves that formed the basis of some recommendations. Additional recommendations were generated from members of the team that have extensive experience working with food banks, some in rural areas, and with Feeding America. The assessment covered a broad range of issues, rather than taking a deep dive into a single or limited set of issues. General findings are presented, with the possibility of more in-depth future exploration of specific issues.

This report presents and synthesizes findings and draft recommendations for review by CAFB. A revised final report will be submitted to CAFB and findings will be presented at the CAFB annual meeting for members.

## SECTION 3: FINDINGS

### Characteristics of Rural and Remote California Food Banks

The California Association of Food Banks' (CAFB) 15 rural and remote member food banks represent approximately one in three of CAFB's member agencies. Their combined service area covers 22 of California's 58 counties, stretching from Imperial County near the Mexican border to Humboldt County near the Oregon border. They serve an estimated 2.2 million people, or one in seventeen Californians. Despite their common status as "rural and remote," the CAFB food banks are quite variable. They range in size, with budgets of \$150,000 to \$1.9 million, staff sizes of 0 to 23, service areas of one to six counties and variable distances from large urban centers. Nonetheless, they face many common challenges, which are often distinct from their urban counterparts, including, but not limited to transportation challenges, geographic barriers to the distribution of food, historically low levels of foundation support, a limited individual and corporate donor base, limited access to retail donations and leadership that is typically more involved in day to day operations, with less time for activities such as advocacy.

With respect to organizational structure, nine of the rural and remote food banks are standalone 501(c)(3) nonprofit organizations, five are programs operating under the umbrella of Community Action Agencies (CAA), while one is affiliated with a large, not-for-profit healthcare organization. There are advantages and disadvantages to the different organizational structures. The principal advantages of 501(c)(3) organizations are autonomy with respect to programming and decision-making, as well as a dedicated Board of Directors; the principal disadvantage is a lack of institutional support from a larger, "parent" organization, as is the case for food banks affiliated with Community Action Agencies. The principal advantages of food banks operating under Community Action Agencies are institutional support and the ability to refer food bank clients to wraparound services supplied by the CAA; the principal disadvantage is not having a Board of Directors solely dedicated to the food bank, and in some cases, having to share fundraising and other revenue with the CAA. The CAA food banks are run by program managers, rather than executive directors. With the exception of Board of Director support, this did not appear to impact their ability to successfully manage the food bank. The Shasta food bank is affiliated with Dignity Health, a large healthcare organization. Shasta food bank described significant advantages to the affiliation, including administrative support and access to physical space, infrastructure, technology, payroll and fundraising assistance. While Shasta did not mention any disadvantages, and explained that "we couldn't survive if we weren't affiliated with Dignity Health," the food bank operates with a small budget and staff, which could possibly be larger given a different organizational structure.

With one exception, all of the rural and remote food banks are Feeding America Partner Distribution Organizations (PDO). They can purchase food from Feeding America regional

affiliates, receive donations from “blue receipt”<sup>2</sup> stores in their service area and access assistance in areas such as fundraising and establishing relationships with local growers. Some of the food banks are located at large distances from their affiliates, which can significantly increase freight costs and the timing of deliveries. A few cited concerns regarding an inability to obtain certain products from their affiliates, which is discussed below.

Like urban food banks, the rural food banks see their primary mission and role as acquiring and distributing foods to food insecure households in their communities. Some also saw their role extending to supplying low income households with other essential non-food items, such as toiletries, clothing, blankets, sleeping bags, etc. A few food bankers mentioned that their role or vision was to address not only hunger, but to contribute to the health protection of clients by providing healthful foods and providing nutrition education. Several mentioned that their vision was principally to obtain enough food for the food bank to meet the seemingly ever-growing demand for charitable foods.

A defining characteristic of many of the rural and remote food banks is their distance from the state’s principal population centers. As an ED explained, “We’re a medium sized food bank, but we’re in the middle of frickin’ nowhere.” Large distances translate to a number of challenges, including the following:

- High freight costs in general, and frequently high unit costs, since smaller food banks are often unable to fill an entire truck.
- High costs associated with vehicle purchase/lease, gas, maintenance and repairs, compounded by difficulties getting funds to cover operating costs.
- Long drives to Feeding America affiliates to pick up donated food, with subsequent staff and travel costs.
- Long travel times distributing food to isolated and spread out communities within the counties.
- High levels of coordination to obtain food. The Tuolumne food bank explained that they sometimes can’t get food delivered because they don’t buy large enough quantities. Food is sometimes delivered to locations in the Central Valley, and the food bank must get someone in the Central Valley to store the food for them until they can pick it up. As the program manager explained, “this requires lots of coordination. We have to work with the vendor, shipper, favor agency [agency that helps store the food], driver and purchaser. That’s five groups just to get six pallets of peanut butter.”
- Difficulties obtaining equipment The Tuolumne food bank noted challenges getting bids on a \$60,000 cooler because businesses in their area were reluctant to drive several hours to provide a bid.

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<sup>2</sup> The term “blue receipt” refers to local donations from national donors without using the Feeding America donor express process.

## 3.1 Key Practices of Rural and Remote Food Banks

### Food Procurement, Including Food Sources and Nutrition Quality

#### *Overview of Food Sources*

The rural and remote food banks responding to the survey reported procurement of between 1.1 and 4.4 million pounds of food annually from three main sources: donated (55%), government (25%), and purchased including Farm to Family (15%) and other purchased (5%) (Figure 1). While we only obtained rough estimates from food bankers about the quantities and sources of foods procured, we summarized the information they provided as “ballpark estimates.” The largest percentage of their food inventory comes from donations. These are acquired from Feeding America Regional Food Banks, national and local food distribution and grocery chains, growers, grower organizations such as “Donate Don’t Dump”, and community food drives. Second to donations, food banks receive a sizeable amount of food from federal government programs, namely TEFAP. In addition, California Food banks receive some food from the California Drought Food Assistance Program (DFAP), a temporary program serving communities that have suffered high levels of unemployment as a result of the drought in recent years. The third main source of foods are those purchased by the food bank from wholesalers and produce from the California Farm to Family program.

*Figure 1: Source of Foods in Rural and Remote California Food Banks, FY 2015*

Based on responses from 11 food banks, there was substantial variation regarding the percentage of inventory obtained from various sources, as follows: government (10-56%); purchased (0-45%), Farm to Family (0-31%), donated (18-76%), and other<sup>3</sup> (3-16%) (Figure 2).

*Figure 2: Source of Foods in Rural and Remote California Food Banks, FY15*

## TEFAP

### Overview: Strengths and Challenges

The food bankers expressed overall high levels of satisfaction with TEFAP, with several noting that quality has improved in recent years. Others cited a successful relationship with FoodLink, while one food banker cited concerns about the retirement of the current manager and potential changes that may negatively affect the rural and remote food banks.

Many food banks complained about the packaging of certain items, particularly meat and fish, which sometimes come frozen in large 10 to 25 pound bags which are hard for food banks to

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<sup>3</sup> "Other" sources included EFSP (n=1), Donate Don't Dump (n=1) and "waste" (unspecified, n=1).

separate and distribute equitably. As a food banker explained, “the 10 pound blocks are hard for us to handle, and hard for our pantries to handle.

Many food banks also complained about getting too much of certain items, particularly cranberries (in different forms) and grapefruit juice. Grapefruit juice is of particular concern to some clients, because it can affect the efficacy of certain medications. While some clients are aware of that, others are not. By way of example, two seniors were overheard at a distribution. One told the other she doesn’t take the grapefruit juice because it affects her medication, however, the other said she didn’t know if it affected her medication and took the juice.

One food bank complained that TEFAP allocations haven’t grown to accommodate an increased population, along with a gradual shift at USDA to offer more “bonus products.” While many bonus products, such as lamb, chicken and goose, are desirable, that shift has made the supply less predictable. A food banker reported that over the past two years, the proportion of bonus product has increased to more than 50% of total commodities, and has been as high as 75-100% in some months. The shift toward more bonus product and subsequent unpredictability in products has made it hard for food banks to plan.

Another food banker complained that USDA only reimburses them 50 cents per dollar spent on transportation and distribution costs. While this is an issue faced by all food banks in California, it was only mentioned by one person, perhaps indicating limited awareness of this issue among other food banks.

Given that food banks generally receive less TEFAP foods than they would like, some report that they have had to “police” clients to prevent “double-dipping” in order to ensure that there is at least some food available for all clients that qualify for commodities. A coping strategy adopted by one food bank has been to provide each client with a color coded card linked to a particular distribution site where they are entitled to collect food.

### **Recommendations**

- Host facilitated discussions between rural and remote food banks and Foodlink staff at least annually to promote better communication and problem solving to support rural food banks to receive the types and quantities of TEFAP foods they clients want.
- Work with rural and remote food banks to explore options for obtaining full truckloads of desirable TEFAP products by coordinating orders among the food bank members, as has successfully been done in states such as New York.
- On occasion, foods or beverages are acquired from TEFAP that are not advisable for all clients, such as grapefruit juice. Food banks should provide messaging and methods to alert clients on particular medications to avoid grapefruit juice.

## *Donations*

### Donations: Feeding America Regional Affiliates (Parent Food Banks)

#### **Overview: Strengths and Challenges**

As noted, all except one of the food banks are Feeding America PDOs, which entitles them to obtain food from Feeding America regional affiliates as well as donations from “blue receipt” grocery stores in their service areas. The food banks report obtaining an average of about 600,000 pounds of food from Feeding America, with a range of 50,000 to 1.4 million pounds.

Most of the food banks expressed dissatisfaction with the quality of food obtained from their Feeding America affiliates, particularly the “assorted food items,” an unknown mix that typically contains a high percentage of unhealthy products. Some have asked affiliates not to send unhealthy items, but noted that those requests were not honored. A food banker reviewed the list of items available from Feeding America during the site visit, explaining that “I don’t know how I could even make a single meal from that list. I’m not seeing a single meal in a tens of thousands of square feet warehouse.” A few food bankers also noted that member pantries have at times refused to take Feeding America products due to perceived poor quality. The food banks expressed concern that they are not always able to distribute the “high-demand, nutritious food” that their pantries want. They are also concerned about a loss of revenue from shared maintenance fees.

Food banks such as Humboldt and Shasta are located approximately 200 miles from their Feeding America regional affiliates. Large distances can result in high freight costs and challenges obtaining food in a timely manner. As an ED explained, “The biggest barrier for us is freight.” A few food banks do not utilize Feeding America as a source of donated foods because of these large distances and high costs.

A few food banks also cited challenges getting certain products from their affiliates. One explained that they requested a pallet of peanut butter, but their affiliate would only give them 10 cases, which they noted was barely enough for one of their pantries. Another expressed frustration with the fact that their Feeding America affiliate no longer offers chili because they feel it is unhealthy. However, this is a highly desirable product as it is a complete meal in a can. The food bank believes that if they were bigger and “could take eight or more pallets,” their affiliate might order that for them. However, given limited storage space, the most they can take is one pallet of any item. They believe that is not worthwhile for their affiliate, and therefore chili is something they can no longer obtain. That food banker lamented that “the small food banks don’t have a strong enough voice to create change.”



### **Positive Practices**

- Some food bankers have been proactive about not taking unhealthful items from Feeding America and other donors. One told donors they are not able to accept all donations due to limited storage space, which they need to reserve for more nutritionally dense items, an argument which seemed to resonate with donors.
- One program manager told their Feeding America affiliate to not “even put unhealthy items on the truck.” The affiliate insisted they had to take it, so they decided not to purchase Feeding America products and used the money to purchase healthful foods instead. The program manager explained that that strategy was ultimately effective: “we drew a line in the sand and within months we were allowed choice.”

### **Donations: Food Retailers (Including Stores Affiliated with Feeding America)**

#### **Overview: Strengths and Challenges**

Most food banks reported satisfaction with the quality and quantity of donations from retail stores affiliated with Feeding America. Nonetheless, the paucity of supermarkets in some regions makes it difficult to obtain enough donated food. A case in point is Calaveras County, which is so small and rural that there is only one significant sized supermarket in the County. The food bank gets one basket of frozen products from the supermarket each week, which “barely makes a dent.” Fewer supermarket donations means that the food bank needs more funds with which to purchase food to supplement TEFAP commodities.

The assessment also identified disparities with respect to donations from local stores and processors based on geographic location. For example, the Yuba-Sutter food bank obtains large donations of meat and other high quality products from Sysco, which is considerably more than accessible than for neighboring food banks, despite some sharing of product. Similarly, the Amador food bank explained that it has had a hard time getting bread since the Orowheat plant moved to Calaveras County.

A few cited challenges associated with donations from local stores. One complained that their local Walmart provides donations directly to their member agencies, when, according to Feeding America guidelines, they should only be donating to the food bank. The food banker would like member agencies to get food directly from the food bank, for reasons including food safety, networking, revenue, and product quality (i.e., concerns that others may be getting better products). He would like to air these concerns with Walmart, but noted that “it’s delicate,” since the food bank just got a \$25,000 grant from them and wondered if CAFB could help facilitate a dialogue with Walmart to address this concern. This may be an issue other food banks are facing as well, that would benefit from exploration.

Another food bank manager complained about unreasonable conditions for picking up donations at Starbucks, including pickups after midnight and a requirement to take all donations. They explained that Starbucks has offered the food bank a large amount of money, during the initial years of the agreement, at least. However, while the funding is attractive, they

feel that arrangement is ultimately not in food banks' or clients' best interests, given small quantities of food, that are mostly pastries and sandwiches, rather than shelf-stable staple items or produce.

### **Positive Practices**

- The Humboldt food bank spearheaded the formation of a Local Food Resources Collaborative several years ago, which coordinated pickups from local stores. That helped reduce food bank and grocery staff time and provided the food banks with a way of sharing excess food. As the ED explained, "We were able to set up a system that worked for everybody. 'Ok, we're going to these places on these days and you go to those places on those days'." They were also able to purchase scales with grant funding, to keep track of donations and thank store owners at the end of the year. The collaborative has since discontinued operations given the resources required to run it. The ED would love to see it running again, "as long as someone else wants to run it."

### **Recommendations**

- Development of more formal mechanisms for "sharing the wealth" across food banks, particularly those within the same geographical region.
- CAFB should encourage food banks to request assistance from their regional affiliates regarding concerns with Feeding America partner stores; as that is not a role that CAFB can play.
- Regional affiliates and PDOs would benefit from clear communication and negotiation about PDO needs and the types of assistance that affiliates are able to offer PDOs.
- CAFB should consider publicizing more widely to member food banks the kinds of assistance and support CAFB can (and cannot) provide, for example, regarding issues such as mediation with stores and other stakeholders.

## [Donations: Growers](#)

### **Overview: Strengths and Challenges**

Most food banks in agricultural regions have developed relationships with growers who donate produce. That has worked well for most, although less well in areas such as Napa, where the main agricultural product is wine grapes.

Some food banks have received donations of meat from local ranchers as well. The Humboldt food bank was unfortunately forced to discontinue receiving donations of high quality meat from a local rancher due to USDA food safety regulations.

### **Positive Practices**

- Growers in some agricultural regions engage in "plant a row" programs with local food banks, with a row of crops or trees dedicated for the food bank.

- Some growers ask local food banks what they would like them to plant on idle land. The growers plant specific crops and food bank volunteers harvest the product.
- The Yolo food bank purchases fruits and vegetables from local growers. They are exploring contracting directly with local farmers to grow specific products and varieties for the food bank.
- The Humboldt food bank is exploring a pilot project with a local rancher raising grass fed beef on Land Trust land. The rancher will donate high quality meat to the food bank and sell higher value cuts to offset the costs of donating.
- One food bank farms two acres of land, while several others have gardens on site.
- A church has planted an acre of land designated for the food bank in one region.

### **Recommendations**

- Provide technical assistance to rural and remote food banks to develop robust relationships with potential donors including growers, processors, and retailers, to increase the supply of local donations.
- CAFB could consider facilitating donations from USDA approved processors so that local food banks are able to take advantage of livestock donations in rural areas.

## Donations: Food Drives and Gleaning

### **Overview: Strengths and Challenges**

Food drives and gleaning provide only a minor supply of charitable foods compared with other sources. Nonetheless, many food banks note that they engage in food drives as a means of public relations. Food drive items need to be carefully sorted by food bank staff or volunteers because they are often past the “best by” date, which creates extra work and potential food safety problems.

Given the challenges of handling food obtained from community food drives, at least one food bank would like help developing food safety guidelines and training for staff and volunteers. As they explained, “The combination of old food being handled by not very highly-trained volunteers is a safety gap.” Another food banker reported that a client complained about food that was past the “best by” date, which resulted in a grand jury investigation. While not mentioned during the site visits, it is also likely that some clients are throwing away edible food that is past the “best by” date, due to safety and/or quality concerns.

The food banks would like to communicate with community members to request donations of higher quality items and raise awareness that people relying on food banks “like to eat what you like to eat.” Some food banks would like to see “virtual” community food drives so they can obtain more funds to purchase foods they need for clients, rather than relying on a grab bag of donated foods. They would also like to communicate with community members about donating food which is still within “best by” dates.

## **Positive Practices**

- The Calaveras food bank developed the Calaveras Food Project to increase the quality and quantity of donated food. The Food Project consists of forming small groups of community members that commit to filling a bag for the food bank every two months and has resulted in donations of approximately 5,000 pounds of food per year. The food bank has provided guidelines for the types of food they would like to receive, which has resulted in more healthful and varied donations.
- Several food banks also get produce from backyard gardeners and/or gleaning programs, who donate produce from backyard gardens and local farms to the food bank.

## **Recommendations: Donations**

- Disseminate the “RRFB1 Food Sources” and “RRFB9 Licensing, Certifications” training modules developed by CAFB rural and remote members via email, webinar, and in-person trainings at the CAFB conference and regional meetings, when possible.
- Facilitate communication, discussions, and problem-solving between regional Feeding America food banks and their rural and remote food bank PDOs on food procurement issues. Issues for attention include (but are not limited to):
  - The less desirable quality of foods procured through Feeding America sources.
  - Inconsistent inventory available to PDOs of core/popular items (e.g. peanut butter).
  - Consultation about changes in foods procured by Regional food banks.
  - Transportation charges levied by Regional Food Banks to PDOs.
  - Guidance and assistance in preparing for Feeding America audits.
- Assist food banks in the same geographic region to develop more formal mechanisms for “sharing the wealth” of donations from growers, retailers, processors and others among food banks in the same geographic region.
- Provide technical assistance to rural and remote food banks to develop robust relationships with potential donors including growers, processors, and retailers, to increase the supply of local donations.
  - Review and promote the online Feeding America course/certification in food sourcing, which is available to all members through HungerNet.
- CAFB could consider facilitating donations from USDA-approved processors so that local food banks are able to take advantage of livestock donations in rural areas.
- Assist food banks with messaging, outreach methods, and handling methods to improve the quantity and quality of donations from individual community members in food drives. Approaches include:
  - Raising awareness that cash vs. food donations allow food banks to obtain more and higher quality food.
  - Providing TA to conduct “virtual food drives” to increase cash donations, including disseminating the model used by the Yolo food bank.
  - Consider approaches such as the Calaveras Food Project, under which small groups of community members commit to providing desirable food on a regular basis. Assist food banks with messaging to increase community awareness of the benefits of cash donations over food donations.

- Provide TA to conduct effective messaging to the community about the types of (healthful) foods to donate, and quality/food safety issues (e.g. within best by dates).
- Training for staff and volunteers in handling and sorting donated food, with attention to food safety guidelines and food quality issues (e.g., distinguishing which donated foods are a safety or quality risk) and new product labeling regarding “use by” dates.

## Purchases

### Farm to Family

#### Overview: Strengths and Challenges

Farm to Family can be regarded as a hybrid of donated and purchased produce, with a small fee levied for transportation and handling. According to our survey, 6 of 7 food banks that utilize Farm to Family expressed satisfaction with that program. During interviews, all participating food banks expressed appreciation for Farm to Family. They noted that while quality can be variable, they understand that these are seconds and appreciate the opportunity to access fresh produce at an affordable price. As a food banker explained, “We’re happy with Farm to Family. We understand it’s second quality but we’re ok with that. We couldn’t do this without it.” A few food banks reported that Farm to Family produce is sometimes of too poor quality to distribute. Food bankers noted that they are sometimes able to get credit for produce they cannot use, however, one noted that they had to pay to dump unusable produce.

Some food banks do not use Farm to Family because they get produce donations from local growers or “Donate Don’t Dump,” which is free and delivers to them. One uses “Donate Don’t Dump” because they are located in the same region, noting that “it would be awkward not to take from them.” Donate Don’t Dump is apparently not seeking new donors and has been using Farm to Family produce. They have not changed their name and food banks may not realize they are getting Farm to Family produce via Donate Don’t Dump. This is an opportunity for improving communication between the Farm to Family program and food banks.

Another food bank noted that they no longer purchase Farm to Family products because their affiliate does not ship the produce until several days after receiving it, at which point it is in poor condition. Similarly, another explained that the freight company is only willing to pick up Farm to Family produce on Fridays, “which is the worst day of the week to deliver produce, since it doesn’t come until Monday. We tell them not to send it if it looks iffy on Friday.” Transport can also be unreliable. The same food banker explained that “last week the truck didn’t come at all. The trucking company manager said ‘we ended up filling up a truck for another customer’.” This was despite the fact that the food bank was paying the full rate of \$45 per pallet for freight. That resulted in not obtaining the food, since the cost to send someone to get it “would be prohibitive. It’s just far enough that it would require an overnight.”

A food bank manager complained that “we’re always losing money on Farm to Family produce. We can only charge agencies up to 19 cents a pound, but we’re often lucky to get 10 cents a pound – the member agencies can’t afford more. Sometimes we give it away for free.” That same person expressed concerns that they do not know the cost of Farm to Family produce until they receive the invoice, which is sent several months after they have made the purchases. That makes it hard for them to know how much they can afford to purchase, or in some cases, to come up with the funds when costs are higher than anticipated.<sup>4</sup>

## Other Purchases

### **Overview: Strengths and Challenges**

Most food banks reported purchasing foods for distribution, often at wholesale prices. Only two food banks reported no purchases. All food banks would like additional funds with which to purchase high quality items such as eggs, meat, dairy, nut butters, rice and beans to supplement charitable foods they acquire from other sources. The food banks have been appreciative of SEFAP funding, noting however that the “money has to be spent quickly and it’s sometimes hard to find shelf stable California grown items.”

The Humboldt food bank has obtained funds from the County for the purchase of additional items. As with SEFAP, that funding is tenuous. “Every year we wonder if this is the year it’s gonna change, but so far they’ve been happy with the way it’s worked.” Humboldt has also received funds to purchase food from the St. Joseph Health System.

### **Positive Practices:**

- The Yolo food bank has conducted a “virtual food drive,” asking donors to send checks to pay for items on the drive rather than donating food, which has resulted in increased quality and quantity of foods they are able to purchase. They have reached out to local companies and government offices to participate in these virtual food drives.

### **Recommendations: Purchases**

- Consider methods for addressing transportation challenges for Farm to Family produce, including delivery schedules and routes, to increase the quantity and quality of produce so that rural and remote food banks are able to participate and take full advantage of Farm to Family. This will contribute to rural and remote food banks receiving sufficient produce in a timely way that preserves product quality.
- Consider assessing current Farm to Family distribution mechanisms, including how food banks obtain Farm to Family produce (i.e., from another food bank or directly from Farm to Family), along with the quality of produce delivered by food banks.

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<sup>4</sup> Since this was the only person who complained of this, it is not clear if that is an issue that other food banks have experienced.

- Work with food banks to maximize the distribution of high quality Farm to Family produce, and minimize distributing poor quality products
- CAFB encourage food banks to utilize appropriate mechanisms for reporting receipt of poor quality produce
- CAFB can increase communications about Farm to Family to food banks (including for example that Donate Don't Dump delivers Farm to Family produce as well), as a means of raising food bank awareness of CAFB assistance.
- Provide support for food banks to develop “virtual food drives” and other means of raising funds with which to purchase food.
- Assist interested food banks with fundraising so they can conduct bulk purchases to supplement what they can offer clients and member agencies.
- Consider specific suggestions from particular food banks:
  - Encourage healthcare foundations to provide grants for the purchase of food. [As a food bank manager explained, “Purchases may be the most expensive way of getting food, but they’re the least expensive way of creating health.”]
  - One food bank would like Farm to Family to include more greens and other nutrient dense foods, i.e., “more row crops vs. tree crops.” Since Farm to Family does provide these types of items to affiliates, affiliates should let food banks know which items they do or don’t order from Farm to Family and the reasons for not ordering certain items.

### *Nutritional Quality of Foods Procured*

All of the rural and remote food bankers are aware of the relationship between diet, obesity and chronic disease and are interested in improving the nutritional quality of the food they distribute – providing more protein and fresh produce and fewer unhealthy products.

Survey results indicate that the principal items the food banks would like to provide more of are protein foods in general, including eggs, and dairy foods. They would also like to provide more fresh produce. The main items they would like to provide less of are sweet and savory snack foods, soda and energy drinks and non-100% juice fruit drinks.

Most food banks report that they have increased the amount of fresh produce they offer, and many report they are offering fewer sugary or salty snacks, desserts and drinks. A few food banks have adopted “behavioral economics” type approaches, placing unhealthy items in more out-of-the way location during distributions, making them available but less likely to be taken as “impulse selections” by clients not actively seeking them out.

Only a few food banks have adopted formal policies specifying the types of products they will accept and distribute to clients. Several said they would like a nutrition policy, however this did not appear to be a high priority given lukewarm responses to this question. Some felt a formal policy was not necessary because they have put healthy food practices into place. Many are reluctant to turn away donations of less healthful foods and beverages, fearing that donors will be upset with them and reduce or discontinue donations of other foods.

Food bankers note that these concerns are greater in small communities, where they know the donors personally. As the director of one food bank explained, “word gets around if even one or two people are offended. It’s a domino effect. You could lose other supporters. People say, ‘Why give to them? They’re so ungrateful.’ We won’t risk it.” The same director noted that “in a small community, you can’t afford to have anyone upset with you. It’s much easier to turn away donations in a place like Stockton, where there are a lot of supermarkets – here there’s only one.” Another ED, who has experience running a grocery store, is reluctant to turn down unhealthy items since he knows how hard it is for stores to separate items. He explained that “food banks do supermarkets a favor by taking everything and separating it for them.” Some food banks accept sugary products and donate them to substance abuse rehabilitation centers, where they are in high demand.

Two food bankers also noted that clients expect pastries, chips and soda, and are concerned that clients will be upset if they do not offer those items. One ED noted that “you’re darned if you do and darned if you don’t,” explaining that the food bank is criticized by outsiders for offering unhealthy products, but criticized by clients for not doing so. The same ED noted that their “clients are not interested in healthful food and often give back fruits and vegetables.” That was echoed by another food banker, who cited poverty and low educational levels as reasons for poor food selections. Another food banker felt that a focus on nutritional quality was a luxury, explaining that “we’re busting our backs here just to get food out to our rural communities. [Improving the nutritional quality of food] sounds nice, but...” [Author’s note: client preferences for charitable foods varies, but client surveys conducted in several states consistently show preferences for protein foods and fresh produce, and rank other foods like sugary beverages, snacks and desserts lowest. We interpret that to mean that clients prefer to receive foods that are expensive and save their limited food dollars. This is becoming more widely used by food banks and distribution sites to explain to clients the shift away from distributing low nutrient foods to those which are of higher nutrition quality and assist clients most with their food budgets. Clients are thus free to purchase these supplementary/unhealthy items which are generally lower cost.)

### **Positive Practices**

- The Calaveras food bank warehouse manager uses a green/yellow/red system to categorize healthy and unhealthy items, based on the scannable “Fooducate” app, which assigns a grade to thousands of products. Although the food bank still distributes “red” food, they hope to offer less in the future.
- The Humboldt food bank feels that their efforts to raise awareness of healthy eating have had positive impacts, noting that fresh produce is one of top three items clients ask for on surveys.
- The Tuolumne food bank worked with a nutritionist to conduct an analysis of the nutrients in their inventory. They identified insufficient calcium and are now making greater efforts to provide dairy items.



## Recommendations

- Facilitate/disseminate the use of existing resources and provide technical assistance to help food bankers:
  - Develop sound food bank nutrition policies or guidelines.
  - Procure more healthful foods in alignment with policies or guidelines.
  - Learn strategies to work with/communicate with donors, Regional Food Banks, and local retailers to reduce/decline donations of less healthful foods without risk of declining total pounds of donations (i.e., communicating with donors, providing convincing arguments, using data persuasively, etc.).
  - Such resources include:
    - Free NPI online course “Developing a Food Bank Nutrition Policy” and free and downloadable guides available from the course. The course includes a unit on negotiating with stakeholders, including donors and video clips of successful strategies food banks have used to decline unhealthy donations. Website: [http://npi.ucanr.edu/Food\\_Bank\\_Nutrition/](http://npi.ucanr.edu/Food_Bank_Nutrition/).
    - Cooperative extension advisors and local health departments with nutrition expertise, who can assist with interpreting “foods to encourage” and other nutrition guidelines for healthful food procurement.
- Engage NPI to assist food bankers with using their inventory system to assess the nutritional quality of their foods and track over time, as requested by one food bank and of possible interest to others.
  - Food banks should consider expanding the nutrition education they provide (or partner with other agencies to provide), to encourage clients to make healthier choices and increase client capacity to incorporate fresh produce into their diets.

## Food Distribution

### Overview: Strengths and Challenges

The rural and remote food banks distribute food to community members directly and through a network of member agencies. Direct distribution is conducted at food bank warehouses, locations throughout the service areas, school-based backpack and snack programs, and summer youth feeding programs. Survey responses indicate an average of 18 direct distribution sites, with a range of 1 to 62. The food banks report an average of 32 member agencies, with a range of 1 to 86 (Table 1).

*Table 1: Food distribution sites and agencies among food banks in rural and remote California, FY 15. (n=13 food banks)*

Type of site/agency	Average # of sites/agencies	Range (min-max)
Food bank direct distribution sites	18	1-62

<b>Total member agencies</b>	32	1-86
Food pantries	17	0-41
Soup kitchens	3	0-6
Shelters	2	0-5
Youth programs	3	0-12
Senior programs	3	1-12
Other	14	0-35

Three quarters (77%) of survey respondents report between 1 and 20 direct distribution sites. Approximately half (54%) report between 1 and 28 member agencies (Table 2).

*Table 2: Distribution of number of food distribution sites and agencies among food banks in rural and remote California, FY 15. (n=13 food banks)*

Type of site/agency	N	%
<b>Food bank direct distribution sites</b>		
Few (1-20)	10	76.9
Moderate (21-41)	2	15.4
Many (42-62)	1	7.7
<b>Total member agencies</b>		
Few (1-28)	7	53.9
Moderate (29-57)	4	30.8
Many (58-86)	2	15.4

Most food banks conduct direct distributions from their warehouses, as well as locations including parks, parking lots, community centers, family resource centers and senior centers throughout their service areas. Many conduct mobile distributions as well. Survey responses indicate a range of direct distribution styles, with most reporting pre-bagged distribution, and many reporting different types of client choice, including farmers' market style distribution. Very few food banks report conducting direct distributions outside of typical business hours (Table 3). While this was not explored in detail during the site visits due to time constraints, it could present a barrier to access for working people and merits further exploration.

One food bank conducts on-going direct distributions at their main site, which is open to clients from 9 AM to 4:30 PM, Monday through Friday. This on-going distribution is very onerous for the food bank, however they fear it would be difficult to “train” clients to come at set times only. They expressed admiration for food banks that have set times, or that require clients to make appointments ahead of time and would like to do so.

**Table 3: Food bank direct distribution methods in rural and remote California, FY 15. (n = 13 food banks)**

	N	%
<b>Distribute from food bank warehouse</b>	11	84.6
<b>Conduct mobile distributions</b>	9	69.2
<b>Methods of distribution to clients</b>		
Pre-bagged	12	92.3
Client choice	9	69.2
Farmers market style	6	46.2
Backpacks	1	7.7
Other	1	7.7
<b>% of distribution sites open outside of normal business hours</b>		
0-25%	12	92.3
25-50%	0	0.0
51-75%	1	7.7
76-100%	0	0.0

All food banks distribute a portion of their food via pantries. Most cited pantry capacity as a factor affecting the quantity, quality and safety of food, as well as the frequency of distributions. Pantries are typically small and volunteer run, with minimal dry, cool and freezer storage capacity. One food bank noted that only 5% of their partner agencies have any cold storage, which precludes most of them from distributing items such as bonus TEFAP chicken, which often comes frozen in large ten pound bags. Another noted that some pantries have had to store dry goods and other food in sheds, resulting in insect contamination.

Pantries are typically underfunded and are often unable to purchase much to supplement what they receive from the food banks for free. This results in less food for clients and reduced revenue from shared maintenance fees. Most food banks noted that pantry volunteers are often in short supply, further limiting hours and frequency of distributions. As a food bank ED explained, a significant “barrier is that so many of our pantry sites are only open for a few hours once a month.” Another noted that the people running the pantries are often stretched thin, since the same few people in each community take on multiple roles, an issue that is “endemic to small communities.”

While Feeding America PDO food banks are required to monitor their member agencies, most did not appear to have a clear picture of issues such as type and amounts of food distributed by the pantries, the frequency of distributions and pantry ability to meet the needs of special needs clients. Most food bankers said they were not aware of the amount and type of food, if any, that the pantries are able to obtain to supplement what they receive from the food bank.

A food bank ED explained that relationships between food banks and pantries can be tense and that efforts to help increase pantry capacity are not always welcome. As she explained, “rural food pantry directors can be stubborn... They basically tell us, ‘don’t tell us what to do’.” She has encouraged them to become nonprofit food banks in order to get Feeding America food, but they are not interested in having a board of directors, or other “hassles” associated with 501(c)(3) status. As a result, the relationship can sometimes be characterized as “you’re on your own – see you once a month with TEFAP food.” A few food bankers also cited tensions associated with pantry dissatisfaction with the quality of food available for purchase at the food banks. That is frustrating for food banks, as supply is often beyond their control. As one explained, “it’s not easy working with pantries. They expect supply and demand, just like customers.”

Additional concerns regarding pantries include theft of food by volunteers and instances of faith-based pantries requiring clients to pray in order to receive food. One food bank noted they had to take over a local pantry because it was not in compliance with food safety regulations, with potential ramifications for clients and the food bank.

According to one food banker, pantries are “localized, inefficient and have limited hours.” As a result, some food banks prefer to distribute most food via direct distributions. Nonetheless, it can be hard to find hosts to provide space. Some food banks also note that getting food bank volunteers for direct distributions in more outlying areas can be challenging, and one reported having to discontinue direct distribution sites due to a lack of volunteers. Ultimately, most food banks are reliant on pantries to some degree, as they do not have sufficient staff or volunteers to conduct all distributions on their own. Increasing pantry capacity or food bank capacity to distribute food is key to meeting the needs of food insecure residents of more outlying communities.

### **Positive Practices**

- The Humboldt and Napa food banks offer client choice, a more pleasant and dignified shopping experience for clients than other types of distribution.
- The Humboldt food bank helped all its pantries purchase refrigerators, freezers, carts and storage racks with county and grant funding.
- The Tuolumne food bank reviews its member agencies on a quarterly basis. They attend distributions to assess customer service, and review monthly reports, including inventory data. The program manager knows the freezer capacity of every pantry and can better advocate for their needs.
- Some food banks have received CDBG or USDA funding or loans for upgrades or construction of new facilities. The San Benito food bank’s new facility will offer a “Whole Foods type” shopping experience for customers.
- The San Benito County food bank has shifted to an ethos of “dignity and choice,” in which the food bank is not a charity model. They have abandoned the term “client” in favor of “customer” and have instructed staff and volunteers that their job is “helping, not policing.” The food bank claims that has been a “big game changer,” which they believe has contributed to an increasing the number of people shopping at the food bank.

- The Yolo food bank has been doing bulk buying to better serve partner agencies, some of which had been buying retail because the food bank did not have what they want. The food bank is working to purchase more wholesale items in order to better serve pantries and provide them with food at lower cost than retail.
- In addition to free food distributions, the Imperial food bank sells a “Box of Basics” to all interested community members. The “Box of Basics” is a subsidized box that typically includes 10 pounds of chicken, one pound of ground beef, one gallon of milk, 1 dozen eggs, five to ten pounds of potatoes, assorted canned goods and other staples. The retail value of the box is estimated at \$40 and the cost to customers is \$25. The food bank purchases the items in bulk at a cost of approximately \$17, on which it breaks even. Customers must order in advance and can pay with EBT cards. Local pick up is at the food bank and boxes are delivered to more outlying areas on distribution days.
- The Imperial food bank also offers a “Senior Box” for \$15, which is smaller and tailored for diabetics. Some customers buy those boxes for low-income elderly parents, which has worked well, as many do not want “handouts” but will accept the box.

### **Recommendations**

- Disseminate the “RRFB5 Program Development” training module developed by CAFB rural and remote members via email, webinar, and in-person trainings at the CAFB conference and regional meetings, when possible.
- Provide food banks with technical assistance to more effectively monitor and communicate with member agencies and assess the extent to which they are able to meet community need.
- Identify ways that food banks can better meet community needs when increasing pantry capacity is not feasible, e.g., via mobile distributions.
- Encourage food banks to explore approaches to food distribution such as the Imperial food bank’s “Box of Basics,” a subsidized box of staple items that all interested community members can purchase with cash or EBT. Ensure that food banks interested in such efforts are aware that they may only sell purchased items, not donated items.

## **Fundraising**

### **Overview: Strengths and Challenges**

Obtaining adequate funding for food and operating costs is one of the biggest challenges facing rural food banks. Virtually all noted that it is much easier to obtain funds for food and capital expenses than for operating costs such as salaries and benefits, utilities and vehicle gas, maintenance and repairs.

The food banks report average annual revenues of \$750,000, which range from a low of \$150,000 to a high of \$1.9 million. Five food banks reported budgets under \$500,000, three have budgets of \$0.5 - \$1 million, and three have budgets over \$1 million. Average expenses are \$730,000, which are overall in line with revenues, although three food banks reported

higher expenses than revenues. Government funding and combined individual donations each account for approximately one third of food bank revenue. Grants from private foundations and earned income from member agencies account for 13% and 11% of revenue respectively, followed by donations from private sector businesses (7%) (Table 4).

Most of the food banks would like to increase their budgets somewhat, albeit not significantly. Increased funding would go to additional staff positions (principally warehouse and administrative staff), improved salaries and benefits, purchase of higher quality food items, vehicle maintenance and improved storage. One food bank noted they would use increased funding to increase the capacity of their member agencies.

**Table 4: Food bank revenue and sources, rural and remote California, FY 15. (n = 11 food banks)**

	<b>N</b>	<b>Average</b>	<b>Range (min-max)</b>
Cash Income/Revenue (\$)	11	\$750,496	151,766 – 1,876,590
Expenses (\$)	11	\$730,107	200,569-1,804,916
Difference (\$)	11	\$20,389	-104,049-145,005
<b>Percent of revenue from each source</b>			
Government	9	33.9%	5-66%
Foundations/Grants	9	12.6%	0-33%
Private sector	9	7.0%	0-24%
Earned income from member agencies	9	11.4%	0-39%
Interest or endowments	9	0.8%	0-7%
Direct mail	9	11.8%	0-53%
Special events	9	6.5%	0-30%
Other individual donations	9	15.5%	0-56%
Other sources of funds	9	0.50%	0-3.5%

With some exceptions, the ED is the main grant writer and fundraiser at the rural foods, which can present a challenge, given their multiple other responsibilities. Some EDs cited limited grant writing skills as a challenge to fundraising as well.

Most food banks cited limited access to businesses, corporations and wealthy donors in their communities as a challenge to fundraising. Some cited “donor fatigue” and the fact that donors are “tapped out,” given the small number of affluent individuals and high levels of need in rural areas. That can make continued donations feel tenuous. As a food banker explained, “there’s a lot of nonprofits diving into the same pool here. It’s a limited donor pool, so I’m always nervous about that.”

Food banks in agricultural communities noted that while growers are typically the wealthiest people in their communities, they are often not particularly generous due to insecurities associated with precarious agricultural incomes. Natural disasters can also impact donations. A food bank in an area that recently experience a large fire noted that donations have been down since many people have moved out of the area.

Several food banks noted challenges obtaining Feeding America funding, for which there is “lots of competition.” One cited possible Feeding America bias, noting that larger, direct affiliates seem more successful getting funding.

One food bank cited a need for more financial support from local governments. “It’s surprising how much is left up to the little food banks.” They wonder if other food banks are getting money from local government and whether that is something they could work toward.

A food bank associated with a CAA noted that they must share funding with the rest of CAA. They sometimes think about going off on their own but are afraid of losing donors, since “politics in a small town are challenging.”

One food banker cited concerns regarding federal grant requirements, citing frustration with the fact that only 10% of their budget is from the government. The challenge is that food banks with a physical address in urban areas with a population over 50,000 cannot apply for grants targeting rural areas, even if they are serving rural areas. This presents a Catch-22, since small, rural organizations often have limited capacity to administer large federal grants. The ED explained that “rural is defined by the Midwest, but California isn’t rural in the same way” and would like to see changes in those requirements.

### **Positive Practices**

- Imperial county has implemented automatic payroll deductions of \$15 per month with county employees to help pay for their backpack program.
- The Imperial food bank has a grant writer on retainer, a potentially cost-effective approach. That has been particularly helpful since the ED claims to not have strong grant writing skills.
- The Imperial food bank board has been conducting fundraising with Imperial Valley “expats” currently living in San Diego.
- The Yolo food bank has conducted an inventory of agricultural (production, processing and distribution) businesses in Yolo County to identify businesses they can approach for food and cash donations. They have obtained data on agricultural businesses from their local Agricultural Commissioner’s office, which also forwards information on food and agriculture-related grant opportunities.
- The San Benito fundraising approach consists of three pillars: (a) cultivating a large group of small donors, rather than a small group of large donors, which they feel is a more realistic approach in less affluent areas (“it’s more work, but it’s worth it”); (b) always portraying a positive image of the food bank and avoiding “doom and gloom” stories and images (“if you don’t donate, the puppy gets it”), to make people feel they’re supporting a winning cause (“no one wants to support a failing cause - you can be part of this”); and (c) bringing people

to the food bank (“the most powerful thing we can do is get people in the building - it moves something in them”). Bringing people to the food bank also raises awareness about hunger – visitors see their neighbors at the food bank and realized that “hunger touches everyone.”

- The San Benito food bank is also planning several revenue generating ventures, including tuition income from a proposed culinary academy and selling “branded” food produced in the commercial kitchen its new facility.

### **Recommendations**

- Disseminate the “RRFB4 Fund Development” training module developed by CAFB rural and remote members via email, webinar, and in-person trainings at the CAFB conference and regional meetings, when possible.
- Consider hiring a CAFB grant writer to write grant proposals for rural and remote food banks. As one food banker noted, that could be particularly helpful for federal grants, which are too onerous for many food banks to write on their own, with prohibitive reporting, evaluation and matching requirements.
  - Grants could be collaborative to meet specific needs, e.g., transportation or storage infrastructure
- Provide technical assistance to increase food bank fundraising capacity in areas including:
  - Individual donations
  - Donations from local businesses
  - Corporate funding
  - Public grants, including local government
  - Contracts with local government (e.g., for CalFresh outreach)
  - Foundation grants
  - Grant opportunities on HungerNet
  - Legacy funding and planned giving
  - Developing and maintaining donor lists
  - Use of donor management software
  - Identifying and reaching out to growers in agricultural communities
  - Identifying and reaching out to affluent “expatriates” living outside the service area
- Create a “bank” of successful funding proposals that food banks can review as good examples.
- Consider approaching large insurance companies and making the case that they are investing in health by reducing food insecurity; pass funds to rural food banks.
- Increase funder awareness of the importance of providing food banks with operating funds.
- Send emails with grant opportunities to all rural and remote food banks in addition to the notifications that appear in CAFB newsletters, which food banks do not always see on time.
- Consider offering a repeat of the fundraising workshop that conducted with TCE funding several years ago, which some food bankers found very helpful and would like CAFB to offer again.
- Highlight food banks with thrift shops or other revenue generating businesses that help support their work.



- Consider the recommendation of one food bank to identify fundraising consultants who “get rural” and can successfully fundraise in rural areas.

## Client Services

Most food banks provide client services, in addition to distributing food. These include nutrition education, referrals to health and social services and CalFresh outreach. Survey responses indicate that most food banks offer nutrition education, while five offer referrals to health services, nine offer referrals to social services and four conduct CalFresh outreach (based on responses to the CAFB 2015 member survey). Few food banks offer nutrition education at all or most distribution sites, with half offering nutrition education on a weekly or monthly basis. Nutrition education is provided by a range of actors. Many reported reliance on food bank staff or volunteers, while a few collaborate with outside agencies such as UC Cooperative Extension and SNAP-ED (Table 5).

**Table 5: Client services provided by food banks and member agencies in rural and remote California, FY 15. (n=13 food banks)**

	# of food banks	Percent of food banks
<b>Services Provided</b>		
Nutrition education	10	76.9
Referrals to health services	5	38.5
Referrals to social services	9	69.2
CalFresh outreach <sup>1</sup> (n=14)	4	28.6
<b>Proportion of food bank distribution sites at which nutrition education is offered</b>		
All	2	15.4
Most	1	7.7
Few	6	46.2
None	1	7.7
Don't know	3	23.1
<b>Frequency of providing nutrition education at distribution sites</b>		
Weekly	2	20.0
Monthly	3	30.0
Several times a year	3	30.0
Once per year or less	0	0.00
Other	2	20.0
<b>Proportion of member agency distribution sites at which nutrition education is offered</b>		

All	1	7.7
Most	1	7.7
Few	4	30.8
None	1	7.7
Don't know	3	23.1
<b>Frequency of providing nutrition education at member agencies</b>		
Weekly	0	0.0
Monthly	4	44.4
Several times a year	2	22.2
Once per year or less	1	11.1
Other <sup>2</sup>	2	22.2
<b>Agencies providing nutrition education at food bank and member agency distribution sites</b>		
Food bank staff or volunteers	7	53.9
UC Cooperative extension	3	23.1
SNAP-Ed staff	4	30.8
Other	3	23.1

<sup>1</sup> Responses to CAFB 2015 Member Survey

<sup>2</sup> "Don't know," "Not sure what you mean by member agencies"

Although many food banks provide or partner with organizations to provide some level of CalFresh outreach to clients, this was not mentioned by any food bank as a key role of the food bank, nor did any visions include 'increased participation of eligible clients in WIC and SNAP'. Nonetheless, some food banks have robust CalFresh outreach programs with dedicated staff, and also make it a point to talk with clients about WIC and other sources of food. Since a considerable percentage of the eligible population in California is not enrolled in SNAP; increasing enrollment in SNAP and WIC could extend and increase income support, and increase household food security for families receiving charitable foods.

Some food banks receive funding from CAFB and other sources to provide client services such as CalFresh outreach and nutrition education. Food banks near local universities have cited long-standing and successful partnerships for the provision of nutrition education. Others collaborate with local organizations, including health departments, nonprofits, and UC Cooperative Extension, who provide those services at distribution sites. Food bankers collaborating with partner agencies were often unclear about the details of nutrition education and CalFresh outreach, with some noting that the provision of services was at times haphazard. One food bank ED explained that they no longer offer CalFresh outreach, explaining that "we've invited them and they came a couple of times. But, we'd need to hire someone on staff for it to be more of a regular thing." She feels remiss about not providing CalFresh outreach and wonders, "is it our role?" She has been puzzled talking to CAFB about this, noting that there is no central place providing guidance.

In addition to current services, many food banks cited more ambitious goals when asked about their 5-year visions. These include new or expanded facilities, including kitchens for nutrition education, cooking demonstrations, meal preparation and/or incubator businesses. A few would like to offer cooking classes for community members and culinary training in collaboration with community colleges or job training programs. The Imperial food bank would like to work with health care providers to “prescribe” cooking classes, which would improve community health and generate revenue for the food bank. The Yolo and Shasta food banks would like to create food distribution hubs sourcing from local small farmers, which could generate revenue and provide backhaul opportunities to increase access to fresh produce. The Yolo food bank is interested in drying and freezing excess produce, which they would like to sell retail or turn into soups for meal programs. The San Benito food bank would like to open a WIC store, noting that there are currently none in the County and shopping at regular supermarkets can be a humiliating experience for WIC recipients. The San Benito food bank is also planning several revenue generating ventures, including tuition income from a proposed culinary academy and selling “branded” food produced in the commercial kitchen its new facility.

### **Positive Practices**

- Food banks affiliated with Community Action Agencies are able to refer clients to services offered by their parent agency.
- The Yolo food bank is working with graduate students at the UC Davis Innovation Institute for Food and Health to develop its food distribution hub.
- The Humboldt and Imperial food banks have received County funding to conduct CalFresh outreach, which has been a win-win for the Counties and the food banks. According to the Humboldt food bank ED, “the Department [of Social Services] has learned, ‘wow, we’re doing a much better job of getting people enrolled, and keeping them enrolled, thanks to our partnerships with CBOs, who have personal relationships with the people we’re serving and are a lot of times more trusted than the County. [People say] ‘we’d rather go to Food for People and fill out an application than go to the County welfare office.’” That was corroborated by the Imperial food bank ED, who explained that, “people love the food bank, but don’t always love DPH.”

### **Recommendations**

- Encourage each rural food bank to review the quality of CalFresh outreach and nutrition education at all direct and member agency distribution sites. Provide step by step instructions, and examples from successful food banks to increase coverage and effectiveness of these services.
- Help foster relationships with local partners, including UCCE EFNEP, UC CalFresh, Master Gardeners, and local community colleges with nutrition programs to support or provide nutrition education.

## Advocacy and Awareness Raising

Most food bankers believe it's important for food banks to engage in policy advocacy for food assistance and poverty alleviation at the local, state and/or national levels. Most reported engaging in some form of advocacy, including responding to action alerts or attending Legislative Day in Sacramento. Food banks engaged in advocacy have found CAFB assistance very helpful, and spoke highly of CAFB advocacy staff. Nonetheless, most claimed they would like to do more, but reported limited capacity to extend their role beyond fundraising and running the day to day operations. As an ED explained, "CAFB makes it easy, but I just don't have the time."

Two food banks do not believe that advocacy is part of their mission and would prefer that CAFB refrain from asking them to engage in that. As an ED commented, "What does advocacy even mean? I do zero, it's outside of my domain." Coming from a business background, that person does not count on the government to solve people's problems. Another ED explained that, "Advocacy is not part of our mission. I don't consider it time well spent. Other people do that."

The majority of food bankers saw their role as helping to raise awareness about hunger as an issue in the community, including the underlying causes of hunger and the fact that many people affected by hunger may not "look hungry." They would like to reduce the social stigma on those receiving charitable foods and increase a sense of community responsibility to recognize and address hunger in all its forms. As an ED noted, "We're trying to change the dialogue from 'it's just homeless bums on the street' to 'no, it's our friends and neighbors, and these are some of the reasons why'."

Some food banks were taking active steps to fill this role, such as messaging via local print, radio (and TV when possible), social media, and presentations to elected officials and civic organizations such as the Rotary Club. The food bankers note that an advantage of rural communities is that media and opinion leaders are typically more accessible than in large, urban areas, which makes it easier to get their messages out. Several food banks would like to do more community awareness raising but are stretched too thin to take this on at present. One ED noted that they would like their member agencies to do a better job of mentioning the food bank when interviewed by local media.

One food banker would like CAFB to advocate for a requirement that the nutritional quality of food distributed via banks be monitored, explaining that "food banks need to be monitored. We are an industry. Chronic disease is disproportionately high – we need to be part of the solution."

### Positive Practices

- The Yolo food bank has made a concerted effort to raise awareness in their community of the work of the food bank and the prevalence and consequences of hunger. Food bank staff

wear logo t-shirts when working in the community and carry a “cheat sheet” with facts and figures to raise community awareness about hunger.

- The Yolo food bank also tracks statistics regarding hunger and poverty for each of five regions of the county that they have delineated. They communicate these findings to local mayors and supervisors, to raise awareness of the issues and what the food bank does to address these issues.
- One ED has asked board members to engage in advocacy on behalf of the food bank. That has met with limited success so far, but is an idea worth exploring, given the limited time EDs have for advocacy.
- The Humboldt ED explained that it’s important to “find the angle” when advocating in conservative rural areas. For example, when advocating for funding for CalFresh outreach, she informed elected officials that “\$2.5 million goes into our local economy each month thanks to CalFresh. Then business people said, ‘oh, that’s a lot of jobs’.” As she explained, “there’s always an argument to be made, sometimes you just have to come at it from a different angle.”

### **Recommendations**

- Seek funding to develop an “Introduction to Advocacy” video and/or webinar to develop a shared understanding about the importance of advocacy and steps food banks can take to become involved at local, state and federal levels. Potential funding source may include MAZON, whose mission is partly to encourage food banks to participate in advocacy.
- Encourage food banks to participate in Feeding America webinars on advocacy at the federal level, as well as CAFB activities regarding advocacy at the state level, which would likely result in greater benefits for California food banks.
- Provide food banks with guidance, data and technical assistance regarding messaging to educate local officials and potential funders about food banks, the reasons for hunger and who is affected by hunger.
- Consider the recommendation of one food banker, who would like CAFB to respond to action alerts on behalf of EDs.

## **Disaster Planning**

### **Overview: Strengths and Challenges**

Most of the food banks are interested in disaster planning. A few have disaster plans and some are considering developing them. Most food banks are in touch with their county disaster services office or the Red Cross. One has obtained a grant from the county to develop a county-wide disaster plan. Some have attended CAFB disaster planning workshops, which they have found helpful, while others are planning to attend upcoming workshops. One food bank noted that they are the “go to” organization in their county for disaster planning, and that they maintain a 90-120 day supply of food. Conversely, another food bank felt that developing a disaster plan was “too much of a stretch” for them.

Disaster plans and messages vary significantly from county to county. Some food banks are told to “keep doing what we always do,” while others have more defined plans. One noted that they were told “to call the police department to see how we can help” in the event of a disaster. That approach seemed adequate to her, since “it’s so small here.” Some food bankers note that while disaster plans are useful, experience has shown them it’s impossible to know how things will play out in an actual disaster. As one explained, “nothing went as planned during the fires. We can only plan to a point.” The same person noted that it’s important to let food banks know of resources when there are disasters. For example, she did not know that there was a state mobile unit that she could call during a recent fire.

### **Positive Practices**

- The Yuba-Sutter food bank is the “go to” organization in their county for disaster planning. They maintain a 90-120 day supply of food.
- The Imperial food bank has been contracted by the County to develop the disaster plan for all of Imperial County.

### **Recommendations**

- Disseminate the “RRFB7 Disaster Planning” training module developed by CAFB rural and remote members via email, webinar, and in-person trainings at the CAFB conference and regional meetings, when possible.
- CAFB should consider communicating with county emergency managers to identify instructions food banks have gotten from them, discuss how local food banks can best partner with emergency services and explore funding opportunities.
- Consider one food bank’s recommendation to develop a disaster plan template for smaller food banks, since “the template for larger ones is overkill.”

## **Communications**

### **Overview: Strengths and Challenges**

Communications, as a topic, per se, did not rise to the surface as a pressing need for change for most food banks. This is notable given challenges and difficulties mentioned above where communication would likely improve the situation, e.g. between PDOs and FA affiliates, between food banks and their member agencies, and between food banks and communities re food drives, etc.) Food banks report using a range of tools for communications, including newsletters, email and social media platforms such as Facebook and Twitter. Communication styles vary by region, client demographics and food bank culture.

The food banks noted several challenges regarding communications with clients. Most clients have cell phones, making text messaging a potentially effective way of communicating about distributions and related information. However, food banks expressed concerns about doing so, since clients often have limited data plans. Another challenge is that the food banks cannot

afford to provide staff with cell phones, but would prefer that staff not communicate with clients using their personal phones, which would allow clients to contact them at all hours.

### **Positive Practices**

- The Yolo food bank partnered with a PR firm to develop materials for its capital campaign.

### **Recommendations**

Several recommendations have been made throughout that focus on improved communications and collaboration, including those between rural food banks and their Feeding America regional food bank, between rural food banks and their affiliated member agencies, between rural food banks and CAFB, between rural food banks in the same region, between food banks and potential funders, and between food banks and policy makers. Those below refer to communications between food banks and the communities they serve.

- Disseminate the “RRFB6 Messaging & Partnerships” training module developed by CAFB rural and remote members via email, webinar, and in-person trainings at the CAFB conference and regional meetings, when possible.
- Provide food banks with articles for use in their newsletters.
- Provide assistance in developing press releases.
- Help food banks encourage member agencies to mention the food bank when interviewed by local media.

## **3.2: Capacity of Rural and Remote Food Banks**

### **Leadership and Governance**

#### *Leadership: Executive Directors and Food Bank Managers*

#### **Overview: Strengths and Challenges**

The food bank EDs and program managers are hardworking and dedicated and strive to serve their communities despite significant challenges. Virtually all food bank EDs noted that they are stretched very thin, wearing multiple hats ranging from working in the warehouse to fundraising. Most note that they are understaffed, necessitating more ED involvement in day-to-day operations than is the case for their urban counterparts. Several EDs also noted that it is often difficult to hire high caliber staff to whom they can delegate more complex tasks. They cannot offer very competitive salaries and thus attract staff with lower educational attainment. Food banks run by Community Assistance Agencies (CAA) typically have managers that work under the ED. In some cases, this may free up some of their time, as some (but not all) are not required to raise funds. On the other hand, food banks under the aegis of CAA’s typically have less support from the Board of Directors.

A number of the food banks have new EDs. The new EDs noted that they have had a difficult time “learning the ropes” regarding different aspects of the food bank world such as procurement, rules and regulations. They complained of having to learn most things on their own, with little outside guidance or assistance. As one noted, “I had to hit the ground running, and I’m still running.” A food bank manager explained that she went to the CAFB conference when she first started, hoping to learn about the rules and regulations, but claims she was told that “there are no rules and regs besides Feeding America.” The new EDs are very interested in training, networking and mentoring. All were excited to hear about the training manual that was recently developed.

ED succession planning presents an additional challenge. A number of EDs are close to retirement, however, none seem to have a clear succession plan in place. This is of particular concern in the case of one food bank that is entirely volunteer run and does not appear to have the funds to hire a paid ED. Another food bank is considering hiring the current EDs son, who has been an active food bank volunteer, which could present challenges.

One ED running a food bank in a county he is not from reported challenges associated with being an “outsider,” including mistrust, limited access to “good old boy” networks, and reduced ability to compete against “locals” for donations. As he explained, “It’s hard if you’re not from this area. It’s a tight community with entrenched good old boy networks and relationships that are hard to break into.”

### **Positive Practices**

- Several EDs have joined local service organizations such as the Shriners, Masons, Rotary Club and Elks as a means of networking, increasing awareness about the food bank and hunger in their communities, soliciting donations and recruiting board members.

### **Recommendations**

- Provide the following training and mentoring opportunities:
  - Explore the possibility of new EDs participating in the Feeding America new ED orientation.
  - Facilitate mentoring opportunities for new EDs and program managers, ideally with experienced colleagues at food banks in the same geographic region.
  - Provide networking and information-sharing opportunities for new EDs and managers to get questions answered.
- Provide assistance with succession planning for food banks with EDs who are nearing retirement.



## *Governance: Board of Directors*

### **Overview: Strengths and Challenges**

As noted, the standalone food banks have dedicated Boards of Directors, while those affiliated with CAAs do not. Some food bank boards have been very supportive, particularly with respect to engagement in capital campaigns. Nonetheless, most food bankers noted room for improvement with respect to their Boards of Directors, in areas such as fundraising, advocacy and outreach. Some EDs did not seem very clear on how to use their boards, or how to get them to be more effective, while others did not feel comfortable taking on a more assertive role. One ED noted that he would like to know “how to recruit specific skill sets, how to have an active board and get rid of slouches. How to figure out who knows who? How to get board members to do their job?”

The CAA boards (and Dignity Health, in the case of Shasta) serve the entire organization. Some CAA food banks have board members “assigned” to them, which does not always work well. As a manager explained, “we don’t always get board members that are passionate about our work.”

Most EDs felt that some type of board training would be helpful (with the exception of one, who felt that “I’ve already trained them as much as they’re going to get trained”). One ED thought the board might be more receptive to training if it came from CAFB, “since that way it wouldn’t seem punitive.” Another ED cautioned that while board training would be helpful, it must be done carefully, since “there would be concerns about the urban food banks dictating what’s gonna work for us. I don’t want people to feel that they’re being called out.” That same person expressed skepticism about traditional board trainings that encourage “a lawyer and a doctor. You need one from each category to build a good board. What you need are people with passion for your mission - the rest will work itself out.”

### **Positive Practices**

- The Yolo food bank has made efforts to promote the geographic diversity of its board members. They have divided the county into regions and have recruited board members from each region.
- The Imperial food bank asks its board members to march in a local parade under the food bank banner. This allows community members to see who is on the board, improving the food bank’s reputation in the community and perhaps encouraging others to join the board.
- The ED at the Imperial food bank, which is currently conducting a capital campaign, has asked board members to start replacing themselves now, since “I know they’ll be completely burnt out by the end of this campaign.”
- Some food banks have joined the local Farm Bureau as a means of recruiting growers and representatives of other agricultural firms, including equipment, input suppliers, processors and distributors.

- The Butte food bank ED, which is a CAA, asks all program managers report at Board of Director meetings, which has helped keep the food bank on the board’s radar.
- The Kings County food bank, which is also a CAA, has a separate sub-committee for the food bank. Food bank staff present to the sub-committee during board meetings.
- The Napa food bank, which is also a CAA, has formed an advisory committee with community members who are passionate about the food bank.

### **Recommendations**

- Disseminate the “RRFB4 Board Development” training module developed by CAFB rural and remote members via email, webinar, and in-person trainings at the CAFB conference and regional meetings, when possible.
- Encourage food banks to recruit board members representing the geographic diversity of their service areas, in addition to other forms of diversity.
- Consider the recommendation of one food banker, who would like CAFB to identify board training and development providers who are familiar with rural areas.
- Community Action Agencies may want to consider creating sub-committees or advisory committees that are dedicated to the food bank. An alternative is to allow food bank managers to recruit board members who are passionate about the food bank.
- CAFB should consider sponsoring a webinar or other mechanism to help Community Action Agency EDs and Boards of Directors better understand the food bank’s role, concerns and how the Board of Directors can contribute to improved food bank functioning and increased capacity.
- Disseminate the “RRFB4 Board Development” training module developed by CAFB rural and remote members via email, webinar, and in-person trainings at the CAFB conference and regional meetings, when possible.
- Encourage food banks to recruit board members representing the geographic diversity of their service areas, in addition to other forms of diversity.
- Consider the recommendation of one food banker, who would like CAFB to identify board training and development providers who are familiar with rural areas.
- Community Action Agencies may want to consider creating sub-committees or advisory committees that are dedicated to the food bank. An alternative is to allow food bank managers to recruit board members who are passionate about the food bank.

## **Staff and Volunteers**

### *Staff*

#### **Overview: Strengths and Challenges**

Survey findings indicate an average of 8.8 paid staff across all food banks, ranging from 0 (at a food bank that is entirely volunteer run) to 23. Food banks with paid staff report an average of 8.0 full time equivalent staff, with a range of 1.7 to 20. The majority of paid staff time is devoted to operations and programs, while the least is devoted to advocacy, agency relations

and fundraising. The food banks also report high utilization of volunteers, with an average of nearly 100 volunteers (Table 6.)

**Table 6: Distribution of number of paid and volunteer staff among food banks in rural and remote California, FY 15 (n=13 food banks).**

	N	Average	Range (min-max)
<b>Number of paid staff (n=13)</b>	13	8.8	0.0-23.0
<b>Number of FTE<sup>1</sup> paid staff</b>	12	8.0	1.7-20.0
<b>Number of PAID STAFF contributing to:</b>			
Administration	13	2.6	0.0-5.0
Operations	12	4.0	0.0-11.0
Programs	13	2.6	0.0-7.0
Development/ Fundraising	12	1.4	0.0-3.0
Advocacy	12	1.2	0.0-3.5
Agency Relations	9	0.8	0.0-2.0
Other	4	1.0	0.0-3.0
<b>Total</b>	<b>13</b>	<b>12.2</b>	<b>0.0-25.0</b>
<b>Number of NONPAID/VOLUNTEER STAFF contributing to:</b>			
Administration	8	2.1	0.0-8.0
Operations	10	36.4	3.0-137.0
Programs	9	62.0	0.0-334.0
Development/ Fundraising	7	31.9	0.0-217.0
Advocacy	6	1.2	0.0-6.0
Agency Relations	6	0.8	0.0-4.0
Other	4	2.5	0.0-7.0
<b>Total</b>	<b>12</b>	<b>98.7</b>	<b>2.0-690.0</b>

<sup>1</sup>FTE: full-time equivalent

Six food banks report between 0-6 paid staff, four have 7-12 paid staff and three have more than 12 paid staff (Table 7).

**Table 7: Distribution of number of paid staff among food banks in rural and remote California, FY 15 (n=13 food banks).**

	N	%
<b>Number of paid staff (n=13)</b>		
Small (0-6)	6	46.2
Medium (7-12)	4	30.8
Large (>12)	3	23.1

Many food banks cited dedicated staff and volunteers and good teamwork as an important asset. Nonetheless, most feel understaffed and would like to increase their FTEs, while all would like to provide more competitive salaries and benefits. Many offer no employee benefits, which presents a challenge to recruiting and retaining a stable and well-trained workforce; in particular high caliber staff to whom EDs can delegate complex tasks. Food banks with no health insurance program are concerned about losing staff to employers offering health insurance if the Affordable Care Act is repealed, while those in cannabis growing regions cited challenges competing with higher wages offered in that sector. Some food banks cited limited opportunities for advancement as a challenge.

One ED cited challenges hiring skilled development staff from the area, who can successfully engage with community members. She explained that a previous development staff member from outside the area “was good, but I knew there were people she just didn’t connect with because she had a different style, which can be a big deal in a rural community.” She went on to explain that the current development director “is from here. She has a good sense of how to engage the local community”

Several food bankers cited challenges providing staff and volunteers with training to address angry or abusive clients, or domestic violence situations in which men come to the food bank seeking out partners. As one explained, “food banks are a soft target. We don’t have the training on how to deal with those situations.”

**Positive Practices**

- The Humboldt food bank is exploring ways to address limited advancement opportunities by giving staff the freedom to expand their positions to be more satisfying. They encourage staff ask themselves, “What would I really like to do with this program that would be an opportunity for growth?” As the ED explained, “It’s not just moving up into a management position. It’s about expanding your role.” The ED cited the example of staff member who “doesn’t care about being a manager as long as she gets to do creative things with that program.”

## Volunteers

### Overview: Strengths and Challenges

All of the food banks rely heavily on volunteers. As one program manager explained, “we only have 1.5 FTE staff and the rest are volunteers. We have volunteers driving a \$100,000 truck for seven hours.” While most food banks have a dedicated core of volunteers, they note that not enough people always show up at distributions. That can be particularly challenging in the summer, when many volunteers are on vacation.

Many, if not most of the food banks’ core volunteers are retirees, who may have limited capacity for heavy lifting. Most food banks also have access to volunteers through court-ordered community service. While those volunteers typically work out well, high investment in training coupled with high turnover presents a challenge. Most food banks do not have a dedicated Volunteer Coordinator position and must rely on volunteers to fulfill that role, which can present a particular set of challenges.

### Positive Practices

- As an ED explained, “appreciating the heck out of volunteers” is key to successful volunteer recruitment and retention. Many food banks do this via regular celebrations and recognition events. Some also provide volunteers with prizes, often toiletries and other non-food items obtained from Feeding America stores.
- Some food banks encourage volunteers to include skills such as customer service, inventory management, warehousing and operating equipment on their resumes.
- The Humboldt food bank made the Volunteer Coordinator a management level position, citing a need to “engage folks on a deeper level if we want them to stay.”
- The Humboldt food bank has been studying “Lessons from the Mouse,” a book about customer service at Disneyland. They have taken a “customer service” approach with volunteers as well, treating volunteers like customers. Guiding questions are: “How do we make this a more satisfying experience for them? How do we develop leadership potential in our volunteer pool?”

### Recommendations: Staff and Volunteers

- Disseminate the “RRFB2 Staff and Volunteers” training module developed by CAFB rural and remote members via email, webinar, and in-person trainings at the CAFB conference and regional meetings, when possible.
- Explore pooled options to reduce the cost of benefits and services such as health insurance and payroll services.
- Provide assistance with specific issues raised by food banks, including:
  - Recruiting volunteers with specific skill sets.
  - Sensitivity training for volunteers regarding the needs and circumstances of low-income people.

- Dealing with abusive clients and dangerous situations (e.g., domestic violence perpetrators looking for partners at the food bank)
- Provide assistance to help food banks ensure legal compliance re: staffing, including:
  - Updates regarding changes in federal and state HR rules and regulations.
  - Assistance writing or reviewing job descriptions to ensure legal compliance and/or best practices.
- Encourage participation in the Feeding America University volunteer training module on HungerNet.
- Food banks should consider hiring via Americorps, the Feeding America Child Hunger Corps, the Emerson National Hunger Fellows and other service organizations to address staffing needs.
- Food banks in the same geographic region should consider job-sharing positions, such as warehouse staff or drivers who could go between organizations as needed.

## Facilities

### **Overview: Strengths and Challenges**

Survey responses from 12 food banks indicate an average of 8,217 square feet of dry storage space, 1,065 square feet of refrigerated storage space and 364 square feet of freezer space. These figures include offsite storage space that three food banks report renting. Since survey data regarding client counts was deemed unreliable, storage space can unfortunately not be contextualized based on numbers of clients served. Respondents report an average of two refrigerated and two non-refrigerated vehicles. All food banks reported at least one vehicle, however three food banks report no refrigerated vehicles and one reported no non-refrigerated vehicles (Table 8).

**Table 8: Food bank physical facilities/capacity in rural and remote California, FY 15.**

	Average	Range (min-max)
<b>Square footage of storage</b>		
Dry storage (n=12) <sup>1</sup>	8,217	2,600-24,000
Refrigerated storage (n=12)	1,065	250-7,000
Freezer storage (n=12)	364	90-964
<b>Vehicles and moving equipment</b>		
Refrigerated trucks or vans (n=13)	2	0-5
Non-refrigerated trucks of vans (n=13)	2	0-6
Forklifts (n=12)	3	1-5
Electric pallet jacks (n=12)	2	0-5
Hand pallet jacks (n=12)	4	1-8
Other <sup>2</sup> (n=2)	1	1

<sup>1</sup>Number of responses vary and are in brackets.

<sup>2</sup>Walking stacker (n=1); pick up (n=1)

Most food banks cited access to adequate dry storage, cooler and/or freezer space as a challenge. In addition to limiting the amount of food the food banks are able to distribute, several food banks cited a need to sometimes dump items or give away more than they normally would in order to free up space for incoming shipments. Some food banks use narrow freight cars that have been converted to coolers or freezers, which can require significant labor in the form of “pallet shuffling” and rotating to distribute food on a “first in, first out” basis.

One food bank received funding to purchase a converted freight car freezer. However, they were not allowed to use the grant funding to pour the required concrete foundation, so were unable to install the new unit. Several food banks noted that they lack sufficient space to install larger coolers or freezers, even if they had the resources to purchase them.

Another food bank lacks sufficient space to display food available to member agencies and must tell them what they have, rather than letting them peruse available items, as is the case in most food banks. They believe they could move more product if customers could see it.

One food bank noted that lack of space has limited their ability to expand programming targeting clients, such as nutrition education. As an ED noted, “We need more of everything. Just write those two words down at the top: ‘need more’.”

Several food banks cited a need for additional and/or larger vehicles. This need did not however seem as pressing as the need for more adequate storage space. For one food bank, space

constraints trumped everything else. As the ED explained, “if we had a larger vehicle we could deliver more food. But then, we would need more staff. But where do we put more food and more staff? I can’t fit one more person in this building.”

### **Positive Practices**

- Some food banks have sought – or are seeking – funding via capital campaigns, grants or loans to expand or improve their facilities. Improvements include expanded storage facilities, the installation of commercial kitchens and improved client areas.

### **Recommendations**

- Disseminate the “RRFB8 Fleet, Lg Equip, Facil, Infrastructure” training module developed by CAFB rural and remote members via email, webinar, and in-person trainings at the CAFB conference and regional meetings, when possible.
- Provide food banks with information about grant and loan opportunities for improving physical facilities.
- Seek funding for infrastructure improvements across multiple food banks with similar needs or in the same geographic region.
- Consider facilitating a workshop on how to expand physical space, including information on grants and loans as well conducting successful capital campaigns.
  - Facilitate networking and information-sharing with food banks that have raised funds to expand physical space.
- Gather and share success stories of food banks that have obtained access to additional free or low-cost storage space through arrangements with local businesses.
  - Explore tax incentives for businesses providing food banks with free or low-cost storage space.

## **IT Infrastructure**

### **Overview: Strengths and Challenges**

Survey findings indicate that the food banks are most likely to use computer-based software for inventory management, client tracking and donor management (Table 9).



**Table 9: Technology used by food banks in rural and remote California, FY 15 (n = 13 food banks)**

	N	%
<b>Computer software or other technology for food bank operations</b>		
Inventory management	8	61.5
Tracking food sources and types	5	38.5
Client tracking	8	61.5
Identifying service gaps in service area	1	7.7
Food donor contact management	5	38.5
Fundraising contact management	7	53.9
Other	2	15.4

A few food banks are satisfied with their IT infrastructure, while many expressed frustration with their current capacity. The main areas of need cited was inventory management, followed by client tracking and donor management software. Several food banks associated with CAA’s cited challenges associated with being required to use agency-wide inventory systems, which are not necessarily well-suited to the needs of food banks. As a program manager explained, “We have a horrible inventory system. We’re kind of stuck with it because it’s what the agency uses, but we’re open to a better system. Perhaps we could switch, or use both?”

While the food banks expressed an interest in technical assistance for IT, they also expressed wariness in that regard. As one explained, “we’d like help with software, but when we’re ready. I don’t want anything pushed on us.” Another expressed concerns regarding scale, noting that “inventory systems serving large food banks are not always appropriate for smaller food banks.” Another explained that while current systems are not always optimal, switching can be challenging. As they explained, “we use Access for inventory management. It’s hard to get training for that, but it would be a big deal to change.”

Another food banker cited the high cost of software, noting that purchasing food is a higher priority for them. As she explained, “the large food banks want rural food banks to buy a license for inventory software that costs \$30,000, plus \$15,000 a year. No, that’s not going to happen. Resources are already tight. I would be more inclined to devote those resources to food than a fancy inventory system.”

**Positive Practices**

- The Humboldt and Imperial food banks both use “Fishbowl” software for inventory management. Humboldt notes that they have “worked out the bugs” and can help other food banks that use that.

- Two food banks mentioned working with Tech Soup, a nonprofit that helps other nonprofits with technology needs. One thinks very highly of the program, while one does not.

### **Recommendations**

- Assess the feasibility of upgrading and right-sizing IT infrastructure among interested food banks:
  - Share best practices regarding current inventory management practices among food banks.
  - Some food banks expressed interest in exploring a common inventory system, which could result in lower costs, easier access to training and technical assistance, the ability to compare inventory across food banks and CAFB access to inventory data for fundraising, programming and technical assistance.
  - Conduct an assessment of IT hardware, software and staff capacity across rural food banks to identify challenges, what’s working well, and software programs that could be adopted across multiple food banks to reduce costs and facilitate TA and information sharing.
  - Ensure that efforts to improve IT infrastructure are sensitive to the needs and capacity of rural and remote food banks. Several food banks noted that they would like to increase their IT capacity, but expressed concerns about “top down” approaches that were not sensitive to their needs or capacity.

## **3.3 Meeting Community Need to Reduce Hunger, Promote Food Security and Protect Health**

### **Overview: Strengths and Challenges**

As part of the assessment NPI gathered secondary data regarding income, health, food security and utilization of food assistance programs for the 22 counties in the food banks’ service areas (see Appendix 1 for complete Service Area Profiles). As seen in Table 10, the majority of counties have rates above California state averages for all indicators. Diabetes, high blood pressure, obesity, food insecurity and WIC uptake are areas of particular concern.

**Table 10: Key Indicators for Rural and Remote Service Areas (n=22 counties)**

	Range	CA State	Counties with Rates Above State Average	
			N	%
<b>Demographic Indicators</b>				
% of households with seniors (over 65)	20.4-40.6	25.6	16	73%
<b>Economic Indicators</b>				
Individuals below 185% of FPL	22.8-49.4	32.6	14	64%
<b>Health Indicators</b>				
Diabetes prevalence	2.3-17.8	8.5	18	82%
Heart disease	2-12.3	5.9	14	64%
High blood pressure	24.7-39.7	26.2	20	91%
% Overweight	24.4-42	33.6	12	55%
% Obese	14.7-43.2	22.7	20	91%
Pre-diabetes prevalence	43-54	46	14	64%
<b>Federal Food Programs</b>				
CalFresh - % eligible non-participants	19.1-63.5	37.0	N/A	N/A
WIC - % eligible non-participants	18.3-36.8	20.9	21	95%
<b>Food Insecurity</b>				
% food insecure	9-18.3	13.9	20	91%

Food bankers had a good sense of geographic coverage, but seemed less clear regarding the extent to which they are able to reach all food insecure residents of their service areas. Most food bankers reported good geographic coverage and felt they were able to serve the principal population centers in their counties. Nonetheless, a few noted that there were parts of their service areas they were not able to reach. As an ED explained, “we cover a large geographic area, with only two trucks and limited staff. We’d probably need twice the resources we have now to meet the actual need.” Another food bank was clear that they were not adequately serving members in the southern part of their county, noting that there were only two pantries in the county seat and a direct distribution site in one additional town only. They would like to identify ways of better serving their county’s population, perhaps via mobile or school-based distributions.

A few food banks expressed a desire to increase geographic coverage and/or the frequency of distributions to more outlying parts of their counties. One food bank expressed concerns over their ability to reach people in very rural areas and “pockets of deep poverty where people have no cars,” explaining that “we’re not sure how to get food to them.” Secondary data

indicate that between 1.7% and 8.7% of households in the counties served by the food banks do not have a vehicle, with three of 22 counties having percentages above the California average of 7.8%. While this was mentioned by only one food banker, it is an issue meriting further exploration, as it affects community members in all counties served by the food banks.

A few food banks noted that they have had to discontinue distributions in outlying areas due to limited pantry and/or volunteer capacity. Others cited a need to better serve homebound seniors and others. A food bank noted that it would like one or two more mobile pantries to conduct more frequent produce distributions in more outlying parts of the county, explaining that in addition to getting produce to people, a mobile pantry would help “put a face” on the food bank, in contrast to food coming from a local pantry.

A few food bankers noted that while they feel they are able to adequately meet community need, they would like to do better. As one commented, “people adapt to what’s available, but that’s not necessarily a best practice.” As another explained, “We do a pretty good job of meeting community need, but that’s because a lot of our clientele are used to scrimping.” Another food bank feels they are able to meet community need, but are “concerned about creating more need that we’re not able to meet.” These comments indicate that “meeting community need” is subjective, and that while food banks may feel they are able to meet minimal demand for food, there is likely additional demand that is not being met.

One food bank noted that while they have successfully addressed hunger and created “caloric security” among their clients, the food their clients get is not nutritionally adequate. They are working to improve the quality of food and are changing their slogan from “Ending Hunger” to “Creating Health.”

All food banks are aware of the need to better serve special populations including seniors, the homeless and clients with chronic health conditions, however most have not developed robust efforts for doing so. Many food banks reported access to nutritionists, however most have not developed distribution bags to meet the dietary needs of clients with special needs. While several food banks offer “homeless kits” consisting of ready-to-eat meals such as soup or chili in pop-top cans, most feel the homeless are better served via congregate feeding programs run by other agencies. Several food banks expressed a desire for more gluten free items while one would like to offer vitamins and other dietary supplements.

Food banks in agricultural regions expressed challenges reaching farmworker and other Latino populations, given language barriers and lack of legal documentation and subsequent mistrust. One food bank noted particular concerns reaching indigenous farmworkers from southern Mexico and Central America, who are reluctant to access services, often speak little or no Spanish or English and have dietary preferences the food bank is not familiar with. A food bank in the Sacramento Valley expressed similar concerns regarding Punjabi Indian community members in its service area, while another expressed similar concerns regarding Native American communities.

Several food bankers cited challenges adequately serving children during the summer and expressed concerns around child hunger, noting that congregate feeding summer food programs work well in urban areas, but do not serve children in isolated rural areas.

A few food banks expressed concerns regarding the ability of people on SSI to access sufficient food. “They don’t have access to CalFresh, so we’re pretty much their only resource.” While not mentioned, lack of access to CalFresh is a significant challenge for both documented and undocumented immigrants as well, given ineligibility or fear of accessing services, which is likely to increase with the current political climate.

### 3.4 Perceived Attitudes Toward Rural Food Banks

A few food banks cited a need for greater sensitivity and more realistic expectations regarding the constraints and capacities of rural food banks among both urban food banks and CAFB. A program manager explained that rural food banks are not the same as urban food banks. “We’re adults, but small. We’re fully developed, not developing.” They cited a need to raise awareness that rural food banks operate under different constraints than their urban counterparts, with smaller budgets, limited access to financial and other resources, geographic constraints and limitations in terms of ED time, staffing, fundraising, and advocacy. An ED cited a conversation regarding fundraising with an urban food banker, who said that “I’m just calling these donors and getting a commitment of \$500,000 a year. You could do that.” They went on to explain that “No, I don’t think so. We don’t have any big corporate entities here. We don’t have all the vineyards.” As the ED explained, the urban food banker has “been here and he knows that, but his world is very different than the world we’re dealing with here.”

An ED explained that she welcomes this assessment’s focus on rural food banks, noting that “it’s been hard to convince some of the other [non-rural CAFB] members that this is important. Urban food banks are operating on a different level from us. Our operations look very different. Rural EDs have multiple roles, functioning as operations manager and development director, who would love to be doing more advocacy work, but are too busy with the hands-on part of the job. It’s one thing to have somebody say that in a meeting and another thing to have a real understanding of what that means and how it impacts your business model or your goals.”

Another food banker cited the example of the CAFB conference, noting that “they said to send your Development Director to the fundraising session. I thought, ‘what Development Director?’ They clearly aren’t thinking about rural food banks.” An ED also noted that only she and one other person are typically able to attend the CAFB conference, since they have so few staff that the others must stay behind to run the food bank.

Some would like CAFB staff to have more realistic expectations of small and rural food banks. As a food banker explained, “CAFB doesn’t get rural food banks. They think we should do as much as possible. They don’t get that rural food banks can’t do everything – we need to focus on a smaller number of things that we can do well.”

## **Recommendations**

- Provide assistance to rural and remote food banks by promoting greater awareness of the constraints facing them, the need for more realistic expectations regarding their capacity among both urban food banks and CAFB staff, and the need for more models of practice appropriate for smaller scale and rural geographic challenges.
- Facilitate dialogue between rural and urban food banks to promote a more collaborative relationship, greater understanding of each sector's contributions and appropriate roles and expectations.
- Consider the recommendation of some food bankers that the CAFB conference:
  - Offer tracks specifically geared to the needs of rural food banks. Potential topics cited include fundraising; volunteer management (recruitment, training, retention); and operations (how to do more with less).
  - Provide scholarships each year for rural food bankers to attend the CAFB conference, as CAFB has done in the past.

## SECTION 4: SUMMARY AND SYNTHESIS OF FINDINGS AND RECOMMENDATIONS

### **1. *How large is the need in selected rural California communities for food assistance (including charitable food assistance) as documented by indicators such as socio-demographic characteristics, prevalence of food insecurity, participation in food assistance programs, health status indicators, etc., in areas served by rural food banks.***

Secondary data indicate high need for food assistance in the rural and remote food banks' service areas, with 20 of 22 counties in the food banks' service areas reporting rates of food insecurity that are above the state average. Secondary data also indicate high rates of poverty, diet-related chronic disease and large senior populations in most counties.

These findings are corroborated by the food banks, most of which have indicated a desire to meet community need for sufficient and healthful food that is tailored to the dietary needs of special populations. Nonetheless, many food banks are unable to foresee being able to expand much more, given their limited capacity. Many food banks also indicated a desire to better serve more outlying areas, via increased frequency of direct distributions and/or increased capacity of local pantries, but are unsure how to realistically achieve that. Some food banks have had to discontinue distributions in outlying areas due to limited pantry and/or volunteer capacity. Others cited a desire to better serve homebound seniors and other community members. The extent to which clients with no vehicle are able to access distributions is an additional issue meriting exploration.

Most food bankers stated that they are able to meet the current demand for charitable food, however, some also noted that demand increasing. A few food banks facing limited supplies of food have felt the need to "police" food bank clients to prevent "double-dipping." As noted, food banks such as San Benito have adopted a "customer service" approach. They have eliminated efforts to "police" clients, which has resulted in increased utilization of the food bank.

While food banks are tasked with providing charitable food on an emergency basis, it is clear that much of the demand is chronic, and that food banks often serve the same clients from month to month and year to year. Populations such as undocumented immigrants and individuals on SSI are especially reliant on food banks. While food banks are generally able to meet the demand for a several-day supply of food, they are not able to address food insecurity more broadly. Thus, food bankers can contribute to addressing food insecurity (beyond the provision of short term stop gap supplies) by steps to increase participation in federal food assistance for those who qualify, advocacy for greater access to increased income support, and collaborating with community organizations on referral systems and other actions to increase access to goods and services for households in need. Creating increased access to emergency foods is also possible, by introducing models of distribution through health care settings, schools, community centers, and other community touchpoints.

**2. What are the key features, capacity and practices of the rural food banks such as organizational structure, staffing, infrastructure, food procurement, inventory, nutrition quality indicators and tracking systems, programs, agency relations, outreach, fundraising, community relations, networking, advocacy, and emergency preparedness?**

Nine food banks are standalone 501(c)(3) nonprofit organizations, five operate under the umbrella of Community Action Agencies (CAA) and one is affiliated with a large, not-for-profit healthcare organization. The 501(c)(3) food banks are run by executive directors, while the remainder are run by program managers. All of the food banks run lean operations, with limited staff and funding. While all would like to increase budgets and staffing, most cited a desire for modest increases in both areas.

All food banks cited a desire to increase the amount and quality of food they distribute and to better meet the needs of special populations. With one exception, all are Feeding America PDOs and obtain food from regional affiliates and local “blue receipt” stores. Satisfaction with food sourced from affiliates was for the most part low, with concerns about the overall healthfulness of food as well as the ability to obtain certain items. On the other hand, satisfaction with donations from local stores was generally high. Food bankers cited overall high levels of satisfaction with TEFAP food, with a few concerns, such as getting too much of certain products, e.g., cranberries and grapefruit, as well as concerns about overly large packaging of frozen meat and fish. Food banks participating in Farm to Family expressed overall high levels of appreciation for that program, with a desire to see improved product quality in the future. While most food banks engage in food drives largely for PR purposes, a few have been more creative and proactive about obtaining higher quality items or individual donations with which to purchase more and higher quality food.

Many food banks, particularly those at a greater distance from urban centers cited transportation as a significant barrier to the quantity and quality of foods they are able to distribute. Transportation challenges include high freight costs, long travel distances to pick up food from regional affiliates, unreliable trucking companies, challenges obtaining funding for vehicle-related operating costs and a high need for coordination when food is delivered to nearby urban centers. Large distances can also impact other issues, for example, challenges getting bids for infrastructure improvements.

All food banks cited fundraising challenges. These include a lack of development staff, limited ED time for fundraising, low awareness of funding opportunities, a small base of corporate and individual donors, few funders serving rural areas, low success rates for Feeding America grants, onerous federal funding requirements, and federal regulations that preclude organizations with addresses in urban areas from applying for grants targeting rural areas. Most food banks also cited challenges obtaining funding for operational expenses such as salaries, vehicle maintenance, gasoline and utilities.



All except two food banks believe that engagement in advocacy is an important role for food banks, however, most noted that they are stretched thin and are unable to engage in advocacy to the degree they would like. Two do not feel that advocacy is a role for food banks and would prefer that CAFB temper expectations and communications in that regard. Most food banks expressed high levels of satisfaction with and appreciation for CAFB advocacy staff.

Most food banks cited a desire to improve IT systems, particularly inventory tracking. Some felt that adoption of a common inventory system across all food banks would allow them to compare notes and would facilitate technical assistance. Nonetheless, some cautioned that IT assistance needs to be geared to the financial means and capacity of small food banks.

All food banks are clear on the need for disaster planning and are at varying stages of developing disaster plans. However, food banks have received different messages from their counties regarding their expected role in an emergency. Most also noted that while disaster plans serve as guidelines, it is impossible to know how things will play out in an actual disaster. Food banks participating in CAFB disaster planning workshops expressed high levels of satisfaction with those events.

***3. What are the food banks' principal strengths, and the principal challenges they face, and their vision for the future in addressing food insecurity and procurement/provision of adequate quantities and quality of charitable food assistance in their communities? Contributing to/advocating for other initiatives to reduce food insecurity?***

The assessment findings revealed strengths and challenges with respect to the capacity and practices of the CAFB rural and remote food banks. Principal areas of strength include:

- Strong and dedicated leadership;
- Committed staff and volunteers;
- Easy access to local media;
- Positive reputations in their communities; and
- Relationships of trust with clients and community stakeholders.

Challenges to better meeting community need include the following:

- The ability to procure sufficient high quality food and funds for operating costs;
- Transportation challenges;
- Distribution challenges, including limited pantry capacity and limited capacity to conduct direct distributions in outlying areas;
- Inadequate storage infrastructure;
- Challenges obtaining operating funds to cover non-food costs;
- Access to sufficient, high-caliber staff;
- Access to a reliable cadre of volunteers;
- Limited access to funding from individuals, corporations, foundations, public sector

- agencies and Feeding America grants;
- New EDs cited challenges “learning the ropes,” while EDs from outside the area cited challenges being accepted and breaking into existing networks;
- Most EDs cited a desire for Boards of Directors to play a stronger leadership role.

**4. *What are the options to assist and support rural food banks in better meeting the needs of the populations they serve?***

The assessment identified a number of recommendations for increasing the food banks’ capacity to serve their communities. Many recommendations were made throughout this report. Principal among them are the following (see Section 5 for a complete list of recommendations):

**Fundraising**

- Provide food banks with timely information regarding funding opportunities.
- Consider writing collaborative grants to address common needs across multiple food banks. Principal areas of need cited by food banks are funds for the purchase of more and higher quality food; funds for operational expenses such as salaries, vehicle expenses and utilities; and funds for improved/expanded storage.
- Consider working on a way to collect and report on ‘true’ service numbers of unduplicated clients. There is not a good understanding of whether people are meeting the needs of their community. These figures will also be helpful for fundraising purposes.

**Nutritional Quality of Food**

- Help food banks advocate to obtain higher quality products from Feeding America affiliates.
- Food banks should reach out to regional affiliates to seek assistance mediating difficult conversations with local stores regarding the quality of donated products and donations to other entities.
- Help food banks with messaging to increase the quality of individually donated products and encouraging cash donations in lieu of food.
- Help food banks transition from food drives to cash contributions that support purchasing foods of choice.

**Transportation**

- As expected, transportation is a significant challenge for rural food banks and partner agencies to enable procurement and distribution of foods, including those which are perishable, and more healthful. CAFB could usefully focus on developing creative ways to use existing transportation resources in rural areas, as well as developing new strategies and resources. Specific suggestions to consider are:

- Disseminate the “RRFB8 Fleet, Lg Equip, Facil, Infrastructure” training module developed by CAFB rural and remote members via email, webinar and in-person trainings at the CAFB conference and regional meetings, when possible.
- Explore utilizing commercial trucking partnerships (FEDEX, Roberts Trucking, UPS, etc.) and trucking routes to back haul food to food banks and partner agencies when trucks would normally have no cargo on return trips.
- Assess the feasibility of partnering with existing government run transportation outlets such as United States Postal Service, public school buses, and bus services to transport food among food banks, to partner agencies, or directly to clients.
- Explore the success of the Pittsburgh-based Food Rescue Hero app that is connecting volunteer drivers to food donations and local food pantries. Assess feasibility of connecting rural commuters to urban areas with local food banks and pantries.<sup>5</sup>
- Explore how rural food banks can work with other food systems in the region to become the central warehouse and logistics center (food hubs) and how this could benefit multiple stakeholders in the region including the Emergency Food Network.
- Explore centralizing transportation scheduling and logistics for remote food banks in order to optimize transportation routes and donations.
- Building upon the current work of CAFB, consider partnering with NPI to conduct ‘innovation workshops’ where rural and remote food banks and partner agencies would connect with transportation experts in their regions (i.e. school transportation officers, postal service representatives, trucking company and delivery based services). These innovation labs could develop partnership ideas and become the basis for potential grant proposals.

### **Pantries**

- Identify mechanisms to increase local pantry capacity to store and distribute food.
- Help food banks improve their connections with pantries to monitor and improve their capacity to meet community need.

### **Leadership**

- Provide training and orientations to help new EDs and food bank managers get up to speed more quickly.
- Provide networking opportunities to connect new EDs and food bank managers with more experienced colleagues, particularly in the same region.
- Encourage Community Action Agencies to create advisory committees that are dedicated to the food bank.
- Facilitate access to technical assistance for Board Development among interested food banks.

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<sup>5</sup> See <http://wesa.fm/post/pittsburgh-group-pioneering-uber-food-recovery#stream/0> for more information.

## **Networking and Sharing Positive Practices**

- Create a forum for rural and remote food banks to network, ask questions and share positive practices.
- Create opportunities to allow food banks, especially those in the same geographic region, to visit with and learn from one another. As one of the people that developed the training manual explained, “One of the great things about the training grant [from the California Endowment] is that it paid for us to go visit each other. What a great thing that was! To have your eyes on somebody else’s operation and ask your bazillion questions. How do you do this? How do you do that?”
- Consider publishing an annual “best practices” report, which could include categories such as fundraising, special events, programming, rural distribution, etc. Ask food banks send in submissions for each category, compile, and share with members.

### ***5. How can CAFB contribute to increasing the capacity of its rural and remote members?***

CAFB can increase the capacity of its rural and remote members by providing and facilitating training, technical assistance and funding in the areas outlined in this assessment. CAFB can also promote greater awareness and utilization of other training resources such as those developed by CAFB members, Feeding America, and NPI among others.

As noted, some rural and remote food banks would like CAFB to identify the special role and circumstances of rural food banks, and to manage peer expectations of “capacity”, as distinct from the role and capacity of their urban counterparts. They would like CAFB to raise awareness that rural food banks are “fully developed,” but do not have access to same resources as their urban counterparts and must focus their efforts on a narrower range of activities, and develop new models of practice suited to their circumstances.

CAFB can provide food banks with opportunities for networking and information sharing via regional meetings, which 12 of 15 food banks expressed high interest in. Most indicated they could travel 2-3 hours to attend such meetings. Topics of interest cited include the following:

- Transportation
- Procurement
- Distribution, including, equitable distribution to different sized households and alternatives to a tiered system (i.e., not providing the same amount for households of 1-3 individuals, 4-6 individuals, etc.)
- Infrastructure
- Fundraising
  - How to approach potential donors; how to “make the ask”

- Available funding for food banks
- Where does funding originate from?
- What are the restrictions for different funding sources?
- Staffing
- Comparing metrics – how do food banks compare to one another?
- Meeting community need
  - How to better serve disabled and elderly customers;
  - More strategic client outreach: getting people in need to come to the food bank; lifting the shame and stigma; reaching out to undocumented people who are fearful.
- Disaster preparedness
- Advocacy
  - How to talk to elected officials
  - How to make food a key issue with decision makers
- What are common needs across all food banks? How can food banks work collaboratively to address those?
- What are existing areas of expertise among the rural and remote food banks? Who can food bankers approach with specific questions or issues?

## **CONCLUSIONS**

CAFB commissioned this needs assessment of its rural and remote member food banks in California to better understand the full range of problems and issues, with a view to helping food banks to find solutions to the most serious of these. While many of the issues raised by food bankers are outside the scope of work of the CAFB, they are keen to support and facilitate problem solving by promoting dialogue among the key stakeholders.

There are also many actions that foodbanks themselves can initiate to obtain support, ideas for best practices, expansion of procurement opportunities, including logistics for transporting food to rural and remote areas. Becoming more familiar with and taking advantage of opportunities and resources available to food banks through CAFB, Feeding America, and other groups would be well worthwhile.

## SECTION 5: COMPLETE LIST OF RECOMMENDATIONS FOR CONSIDERATION BY CAFB IN PARTNERSHIP WITH RURAL AND REMOTE FOOD BANKS

### **Food Procurement: General**

1. Disseminate the “RRFB1 Food Sources” and “RRFB9 Licensing, Certifications” training modules developed by CAFB rural and remote members via email, webinar, and in-person trainings at the CAFB conference and regional meetings, when possible.

### **Food Procurement: TEFAP foods**

2. Host facilitated discussions between rural and remote food banks and Foodlink staff at least annually to promote better communication and problem solving to support rural food banks to receive the types and quantities of TEFAP foods they want.
3. Work with rural and remote food banks to explore options for obtaining full truckloads of desirable TEFAP products by coordinating orders among food bank members, as has successfully been done in states such as New York.
4. On occasion, foods or beverages are acquired from TEFAP that are not advisable for all clients, such as grapefruit juice. Food banks should provide messaging and methods to alert clients on particular medications to avoid grapefruit juice.

### **Food Procurement: Donated Foods**

5. Facilitate communication, discussions, and problem-solving between regional Feeding America food banks and their rural and remote food bank PDOs on food procurement issues. Issues for attention include (but are not limited to):
  - The less desirable quality of foods procured through Feeding America sources.
  - Inconsistent inventory available to PDOs of core/popular items (e.g. peanut butter).
  - Consultation about changes in foods procured by Regional food banks.
  - Transportation charges levied by Regional Food Banks to PDOs.
  - Guidance and assistance in preparing for Feeding America audits.
6. Assist food banks in the same geographic region to develop more formal mechanisms for “sharing the wealth” of donations from growers, retailers, processors and others among food banks in the same geographic region.
7. CAFB should encourage food banks to request assistance from their regional affiliates regarding concerns with Feeding America partner stores; as that is not a role that CAFB can play.
8. Regional affiliates and PDOs would benefit from clear communication and negotiation about PDO needs and the types of assistance that affiliates are able to offer PDOs.

9. CAFB should consider publicizing more widely to member food banks the kinds of assistance and support CAFB can (and cannot) provide, for example, regarding issues such as mediation with stores and other stakeholders.
10. Provide technical assistance to rural and remote food banks to develop robust relationships with potential donors including growers, processors, and retailers, to increase the supply of local donations.
  - Review and promote the online Feeding America course/certification in food sourcing, which is available to all members through HungerNet.
11. CAFB could consider facilitating donations from USDA-approved processors so that local food banks are able to take advantage of livestock donations in rural areas.
12. Assist food banks with messaging, outreach methods, and handling methods to improve the quantity and quality of donations from individual community members in food drives. Approaches include:
  - Raising awareness that cash vs. food donations allow food banks to obtain more and higher quality food.
  - Providing TA to conduct “virtual food drives” to increase cash donations, including disseminating the model used by the Yolo food bank.
  - Consider approaches such as the Calaveras Food Project, under which small groups of community members commit to providing desirable food on a regular basis. Assist food banks with messaging to increase community awareness of the benefits of cash donations over food donations.
  - Provide TA to conduct effective messaging to the community about the types of (healthful) foods to donate, and quality/food safety issues (e.g. within best by dates).
  - Training for staff and volunteers in handling and sorting donated food, with attention to food safety guidelines and food quality issues (e.g., distinguishing which donated foods are a safety or quality risk) and new product labeling regarding “use by” dates.

### **Food Procurement: Farm to Family and Other Purchases**

13. Consider methods for addressing transportation challenges for Farm to Family produce, including delivery schedules and routes, to increase the quantity and quality of produce so that rural and remote food banks are able to participate and take full advantage of Farm to Family. This will contribute to rural and remote food banks receiving sufficient produce in a timely way that preserves product quality.
14. Consider assessing current Farm to Family distribution mechanisms, including how food banks obtain Farm to Family produce (i.e., from another food bank or directly from Farm to Family?) along with the quality of produce delivered by food banks.
  - Work with food banks to maximize the distribution of high quality Farm to Family produce, and minimize distributing poor quality products
  - CAFB encourage food banks to utilize appropriate mechanisms for reporting receipt of poor quality produce

15. CAFB can increase communications about Farm to Family to food banks (including for example that Donate Don't Dump delivers Farm to Family produce as well), as a means of raising food bank awareness of CAFB assistance.
16. Provide support for food banks to develop "virtual food drives" and other means of raising funds with which to purchase food.
17. Assist interested food banks with fundraising so they can conduct bulk purchases to supplement what they can offer clients and member agencies.
18. Consider specific suggestions from particular food banks:
  - Encourage healthcare foundations to provide grants for the purchase of food. [As a food bank manager explained, "Purchases may be the most expensive way of getting food, but they're the least expensive way of creating health."]
  - One food bank would like Farm to Family to include more greens and other nutrient dense foods, i.e., "more row crops vs. tree crops." Since Farm to Family does provide these types of items to affiliates, affiliates should let food banks know which items they do or don't order from Farm to Family and the reasons for not ordering certain items.

### **Nutritional Quality of Foods Procured**

19. Facilitate/disseminate the use of existing resources and provide technical assistance to help food bankers:
  - Develop sound food bank nutrition policies or guidelines.
  - Procure more healthful foods in alignment with policies or guidelines.
  - Learn strategies to work with/communicate with donors, Regional Food Banks, and local retailers to reduce/decline donations of less healthful foods without risk of declining total pounds of donations (i.e., communicating with donors, providing convincing arguments, using data persuasively, etc.).
  - Such resources include:
    - Free NPI online course "Developing a Food Bank Nutrition Policy" and free and downloadable guides available from the course. The course includes a unit on negotiating with stakeholders, including donors and video clips of successful strategies food banks have used to decline unhealthy donations. Website: [http://npi.ucanr.edu/Food\\_Bank\\_Nutrition/](http://npi.ucanr.edu/Food_Bank_Nutrition/).
    - Cooperative extension advisors and local health departments with nutrition expertise, who can assist with interpreting "foods to encourage" and other nutrition guidelines for healthful food procurement.
20. Engage NPI to assist food bankers with using their inventory system to assess the nutritional quality of their foods and track over time, as requested by one food bank and of possible interest to others.
  - Food banks should consider expanding the nutrition education they provide (or partner with other agencies to provide), to encourage clients to make healthier choices and increase client capacity to incorporate fresh produce into their diets.

### **Food Distribution**



21. Disseminate the “RRFB5 Program Development” training module developed by CAFB rural and remote members via email, webinar, and in-person trainings at the CAFB conference and regional meetings, when possible.
22. Provide food banks with technical assistance to more effectively monitor and communicate with member agencies and assess the extent to which they are able to meet community need.
23. Identify ways that food banks can better meet community needs when increasing pantry capacity is not feasible, e.g., via mobile distributions.
24. Encourage food banks to explore approaches to food distribution such as the Imperial food bank’s “Box of Basics,” a subsidized box of staple items that all interested community members can purchase with cash or EBT. Ensure that food banks interested in such efforts are aware that they may only sell purchased items, not donated items.

## **Fundraising**

25. Disseminate the “RRFB4 Fund Development” training module developed by CAFB rural and remote members via email, webinar, and in-person trainings at the CAFB conference and regional meetings, when possible.
26. Consider hiring a CAFB grant writer to write grant proposals for rural and remote food banks. As one food banker noted, that could be particularly helpful for federal grants, which are too onerous for many food banks to write on their own, with prohibitive reporting, evaluation and matching requirements.
  - Grants could be collaborative to meet specific needs, e.g., transportation or storage infrastructure
27. Provide technical assistance to increase food bank fundraising capacity in areas including:
  - Individual donations
  - Donations from local businesses
  - Corporate funding
  - Public grants, including local governments
  - Contracts with local government (e.g., for CalFresh outreach)
  - Foundation grants
  - Grant opportunities on HungerNet
  - Legacy funding and planned giving
  - Developing and maintaining donor lists
  - Use of donor management software
  - Identifying and reaching out to growers in agricultural communities
  - Identifying and reaching out to affluent “expatriates” living outside the service area
28. Create a “bank” of successful funding proposals that food banks can review as good examples.
29. Consider approaching large insurance companies and making the case that they are investing in health by reducing food insecurity; pass funds to rural food banks.
30. Increase funder awareness of the importance of providing food banks with operating funds.

31. Send emails with grant opportunities to all rural and remote food banks in addition to the notifications that appear in CAFB newsletters, which food banks do not always see on time.
32. Consider offering a repeat of the fundraising workshop that conducted with TCE funding several years ago, which some food bankers found very helpful and would like CAFB to offer again.
33. Highlight food banks with thrift shops or other revenue generating businesses that help support their work.
34. Consider the recommendation of one food bank to identify fundraising consultants who “get rural” and can successfully fundraise in rural areas.

### **Client Services**

35. Encourage each rural food bank to review the quality of CalFresh outreach and nutrition education at all direct and member agency distribution sites. Provide step by step instructions, and examples from successful food banks to increase coverage and effectiveness of these services.
36. Help foster relationships with local partners, including UCCE EFNEP, UC CalFresh, Master Gardeners, and local community colleges and universities with nutrition programs to support or provide nutrition education at distribution sites.

### **Advocacy and Awareness Raising**

37. Seek funding to develop an “Introduction to Advocacy” video and/or webinar to develop a shared understanding about the importance of advocacy and steps food banks can take to become involved at local, state and federal levels. Potential funding source may include MAZON, whose mission is partly to encourage food banks to participate in advocacy.
38. Encourage food banks to participate in Feeding America webinars on advocacy at the federal level, as well as CAFB activities regarding advocacy at the state level, which would likely result in greater benefits for California food banks.
39. Provide food banks with guidance, data and technical assistance regarding messaging to educate local officials and potential funders about food banks, the reasons for hunger and who is affected by hunger.
40. Consider the recommendation of one food banker, who would like CAFB to respond to action alerts on behalf of EDs.

### **Disaster Planning**

41. Disseminate the “RRFB7 Disaster Planning” training module developed by CAFB rural and remote members via email, webinar, and in-person trainings at the CAFB conference and regional meetings, when possible.
42. CAFB should consider communicating with county emergency managers to identify instructions food banks have gotten from them, discuss how local food banks can best partner with emergency services and explore funding opportunities.

43. Consider one food bank's recommendation to develop a disaster plan template for smaller food banks, since "the template for larger ones is overkill."

### **Communications**

Several recommendations have been made throughout that focus on improved communications and collaboration, including those between rural food banks and their Feeding America regional food bank, between rural food banks and their affiliated member agencies, between rural food banks and CAFB, between rural food banks in the same region, between food banks and potential funders, and between food banks and policy makers. Those below refer to communications between food banks and the communities they serve.

44. Disseminate the "RRFB6 Messaging & Partnerships" training module developed by CAFB rural and remote members via email, webinar, and in-person trainings at the CAFB conference and regional meetings, when possible.
45. Provide food banks with articles for use in their newsletters.
46. Provide assistance in developing press releases.
47. Help food banks encourage member agencies to mention the food bank when interviewed by local media.

### **Leadership: Executive Directors and Food Bank Managers**

48. Provide the following training and mentoring opportunities:
  - Explore the possibility of new EDs participating in the Feeding America new ED orientation.
  - Facilitate mentoring opportunities for new EDs and program managers, ideally with experienced colleagues at food banks in the same geographic region.
  - Provide networking and information-sharing opportunities for new EDs and managers to get questions answered.
49. Provide assistance with succession planning for food banks with EDs who are nearing retirement.

### **Governance: Board of Directors**

50. Disseminate the "RRFB4 Board Development" training module developed by CAFB rural and remote members via email, webinar, and in-person trainings at the CAFB conference and regional meetings, when possible.
51. Encourage food banks to recruit board members representing the geographic diversity of their service areas, in addition to other forms of diversity.
52. Consider the recommendation of one food banker, who would like CAFB to identify board training and development providers who are familiar with rural areas.

53. Community Action Agencies may want to consider creating sub-committees or advisory committees that are dedicated to the food bank. An alternative is to allow food bank managers to recruit board members who are passionate about the food bank.
54. CAFB should consider sponsoring a webinar or other mechanism to help Community Action Agency EDs and Boards of Directors better understand the food bank's role, concerns and how the Board of Directors can contribute to improved food bank functioning and increased capacity.

### **Staff and Volunteers**

55. Disseminate the "RRFB2 Staff and Volunteers" training module developed by CAFB rural and remote members via email, webinar, and in-person trainings at the CAFB conference and regional meetings, when possible.
56. Explore pooled options to reduce the cost of benefits and services such as health insurance and payroll services.
57. Provide assistance with specific issues raised by food banks, including:
  - Recruiting volunteers with specific skill sets
  - Sensitivity training for volunteers regarding the needs and circumstances of low-income people
  - Dealing with abusive clients and dangerous situations (e.g., domestic violence perpetrators looking for partners at the food bank)
58. Provide assistance to help food banks ensure legal compliance re: staffing, including:
  - Updates regarding changes in federal and state HR rules and regulations.
  - Assistance writing or reviewing job descriptions to ensure legal compliance and/or best practices.
59. Encourage participation in the Feeding America University volunteer training module on HungerNet.
60. Food banks should consider hiring via Americorps, the Feeding America Child Hunger Corps, the Emerson National Hunger Fellows and other service organizations to address staffing needs.
61. Food banks in the same geographic region should consider job-sharing positions, such as warehouse staff or drivers who could go between organizations as needed.

### **Facilities**

62. Disseminate the "RRFB8 Fleet, Lg Equip, Facil, Infrastructure" training module developed by CAFB rural and remote members via email, webinar, and in-person trainings at the CAFB conference and regional meetings, when possible.
63. Provide food banks with information about grant and loan opportunities for improving physical facilities.
64. Seek funding for infrastructure improvements across multiple food banks with similar needs or in the same geographic region.

65. Consider facilitating a workshop on how to expand physical space, including information on grants and loans as well conducting successful capital campaigns.
  - Facilitate networking and information-sharing with food banks that have raised funds to expand physical space.
66. Gather and share success stories of food banks that have obtained access to additional free or low-cost storage space through arrangements with local businesses.
  - Explore creating tax incentives for businesses providing food banks with free or low-cost storage space.

## **IT Infrastructure**

67. Assess the feasibility of upgrading and right-sizing IT infrastructure among interested food banks:
  - Share best practices regarding current inventory management practices among food banks.
  - Some food banks expressed interest in exploring a common inventory system, which could result in lower costs, easier access to training and technical assistance, the ability to compare inventory across food banks, and CAFB access to inventory data for fundraising, programming and technical assistance.
  - Conduct an assessment of IT hardware, software and staff capacity across rural food banks to identify challenges, what's working well, and software programs that could be adopted across multiple food banks to reduce costs and facilitate TA and information sharing.
  - Ensure that efforts to improve IT infrastructure are sensitive to the needs and capacity of rural and remote food banks. Several food banks noted that they would like to increase their IT capacity, but expressed concerns about "top down" approaches that were not sensitive to their needs or capacity.

## **Training and Technical Assistance**

Several recommendations have been made throughout regarding training and technical assistance which could be provided, publicized, promoted or facilitated by CAFB. Recommendations below refer primarily to training modules developed by rural members of CAFB, and by Feeding America.

68. CAFB rural and remote food bank members have developed a set of training modules targeting the unique needs of rural and remote food banks.
  - Disseminate the training modules to all rural and remote food banks.
  - Suggest that EDs and program managers share the training modules with board members and relevant staff.
  - Offer trainings on individual modules via webinars, at the CAFB conference and when possible, at regional meetings.

69. Promote awareness and utilization of Feeding America resources, including webinars, online courses, HungerNet, annual conferences, discussion boards, newsletters, and training modules. (See Appendix 3 for a list of Feeding America training and education resources.)

### **Perceived Attitudes Toward Rural Food Banks**

70. Provide assistance to rural and remote food banks by promoting greater awareness of the constraints facing them, the need for more realistic expectations regarding their capacity among both urban food banks and CAFB staff, and the need for more models of practice appropriate for smaller scale and rural geographic challenges.
71. Facilitate dialogue between rural and urban food banks to promote a more collaborative relationship, greater understanding of each sector's contributions and appropriate roles and expectations.
72. Consider the recommendation of some food bankers that the CAFB conference:
- Offer tracks specifically geared to the needs of rural food banks. Potential topics cited include fundraising; volunteer management (recruitment, training, retention); and operations (how to do more with less).
  - Provide scholarships each year for rural food bankers to attend the CAFB conference, as CAFB has done in the past.

## APPENDIX 1: SERVICE AREA PROFILES

This section presents service area profiles providing health and demographic data for each of the 22 counties served by the 15 rural and remote food banks. Appendix 2 presents data sources and instructions for updating indicator data.

# State of California

**Total Population<sup>1</sup>** 39,144,818

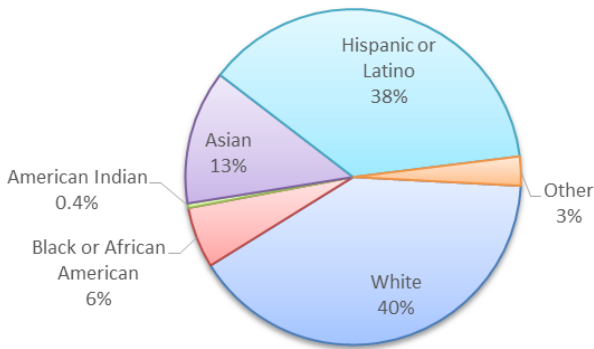
Age <sup>1</sup>	
Under 5 years old	2,508,752 (6.4%)
5 – 19 years old	7,664,160 (19.6%)
20 – 64 years old	23,783,152 (60.8%)
65- 74 years old	2,977,403 (7.6%)
Over 75 years old	2,211,351 (5.6%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	81.5%
Bachelor's degree or higher	31.0%

Language Profile <sup>1</sup>	
Speaks language other than English	43.8%
Most common language(s) spoken other than English	Spanish (6.0%)
	Tagalog (2.2%)
	Chinese (1.6%)
	Vietnamese (1.4%)
	Korean (1.1%)
Speak English less than very well	19.1%



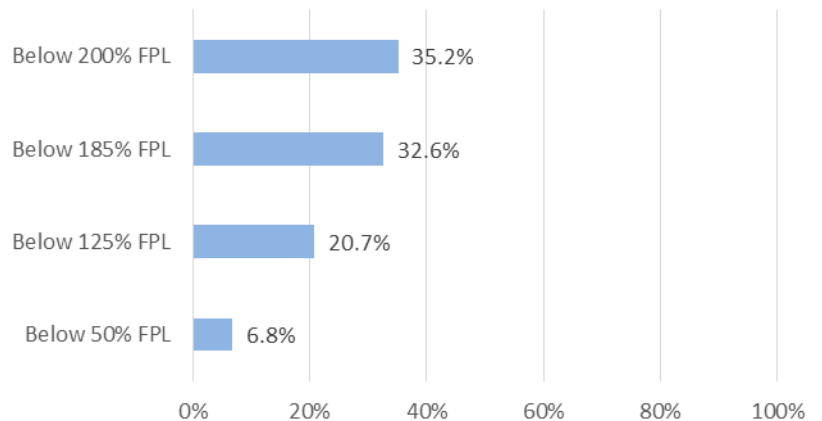
California State Race



## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$61,489</b>
<b>Unemployment</b>	<b>6.2%</b>
Home and Car Ownership	
Home owned	54.8%
Home rented	45.2%
No vehicle owned	3.8%
Household Demographics	
% households with seniors	25.6%
% households with children	36.5%
% single-parent households	9.8%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs



## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**46.0%**

### Diabetic Adults

(doctor diagnosed)

**8.5%**

### Adult Overweight/Obesity

#### Prevalence

**33.6%** Overweight

**22.7%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**5.9%** Heart Disease

**26.2%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Individual CalFresh Participants	4,421,016
Estimated number of eligible individuals	7,017,486
Eligible individuals not participating	2,596,470

### WIC - 2011

Average participation	1,853,262
Estimated eligible	1,466,238
Coverage rate	79.1%

### Students Eligible for Free or

#### Reduced Price Meals

**3,655,624 (58.7%)**

## Food Access and Insecurity<sup>10</sup>

### Food insecure individuals

**5,401,770**

### Food insecurity rate (individual)

**13.9%**

*Feeding America Estimate (Map the Meal Gap)*

<sup>1</sup> American Community Study 2015. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>2</sup> *Small Area Income and Poverty Estimates for 2014*; United States Census Bureau.

<https://www.census.gov/did/www/saipe/data/statecounty/data/2014.html>

<sup>3</sup> *Labor Force Data by County, 2015 Annual Averages*; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> *Prediabetes in California*, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

<sup>5</sup> California Health Interview Study, UCLA. <http://ask.chis.ucla.edu/>

<sup>6</sup> *Lost Dollars, Empty Plate*; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-FullReport-2015.pdf>

<sup>7</sup> *State, County and Regional Profiles of WIC Eligibility and Participation, California 2011*; California Department of Public Health.

[http://www.cdph.ca.gov/programs/wicworks/Documents/Research-](http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICeligibilityandParticipationCalifornia2011(March%202016).pdf)

[Evaluation/StateCountyandRegionalProfilesofWICeligibilityandParticipationCalifornia2011\(March%202016\).pdf](http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICeligibilityandParticipationCalifornia2011(March%202016).pdf)

<sup>8</sup> *2015-16 CACFP Center Sites*; California Department of Education. <http://www.cde.ca.gov/ds/sh/sn/cacfpcentermap.asp>

<sup>9</sup> *SNAP-Ed County Profiles*; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> *Map the Meal Gap*; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

# Amador County – Interfaith Council of Amador

**Total Population<sup>1</sup>** 37,001

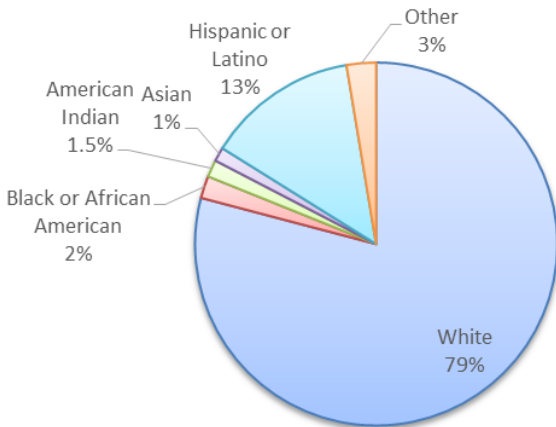
Age <sup>1</sup>	
Under 5 years old	1,337 (3.6%)
5 – 19 years old	4,948 (13.4%)
20 – 64 years old	21,177 (57.2%)
65- 74 years old	5,804 (15.7%)
Over 75 years old	3,735 (10.1%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	88.4%
Bachelor’s degree or higher	20.5%

Language Profile <sup>1</sup>	
Speaks language other than English	10.0%
Most common language(s) spoken other than English	Spanish (6.0%)
Speak English less than very well	3.4%



Amador County Race



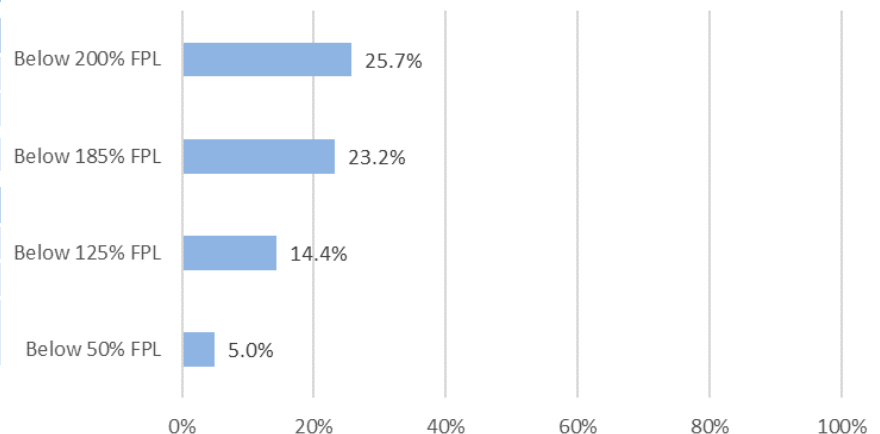
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$54,610</b>
<b>Unemployment</b>	<b>8.3%</b>

Home and Car Ownership	
Home owned	74.7%
Home rented	25.3%
No vehicle owned	3.8%

Household Demographics	
% households with seniors	37.9%
% households with children	23.8%
% single-parent households	6.6%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs

## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**54.0%**

### Diabetic Adults

(doctor diagnosed)

**9.4%**

### Adult Overweight/Obesity

#### Prevalence

**34.1%** Overweight

**27.8%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**8.6%** Heart Disease

**39.1%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants	3,279
Number of income eligible individuals	5,031
Eligible non-participants	1,752

### WIC - 2011

Average participation	3,980
Estimated eligible	5,588
Coverage rate	71.2%

### Child and Adult Care Food Program Participating Institutions

**4**

### Students Eligible for Free or Reduced Price Meals

**1,836 (45.6%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**5,450**

### Food insecurity rate (individual)

**14.7%**

*Feeding America Estimate (Map the Meal Gap)*

### Food Access

Low access*, low income** people 1 mile from a supermarket	5,814
Low access people 10+ miles from a supermarket	N/A
Low access, low income people 10+ miles from a supermarket	N/A

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
- The tract's median family income is less than or equal to 80 percent of the State-wide median family income; or
- The tract is in a metropolitan area and has a median family income less than or equal to 80 percent of the metropolitan area's median family income."

<sup>1</sup> American Community Study 2015. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saie/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

<sup>5</sup> California Health Interview Study, UCLA. <http://ask.chis.ucla.edu/>

<sup>6</sup> Lost Dollars, Empty Plate; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

<sup>7</sup> State, County and Regional Profiles of WIC Eligibility and Participation, California 2011; California Department of Public Health.

[http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011\(March%202016\).pdf](http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011(March%202016).pdf)

<sup>8</sup> 2015-16 CACFP Center Sites; California Department of Education. <http://www.cde.ca.gov/ds/sh/sn/cacfpcentermap.asp>

<sup>9</sup> SNAP-Ed County Profiles; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

# Butte County – CAA of Butte County

**Total Population<sup>1</sup>** 221,578

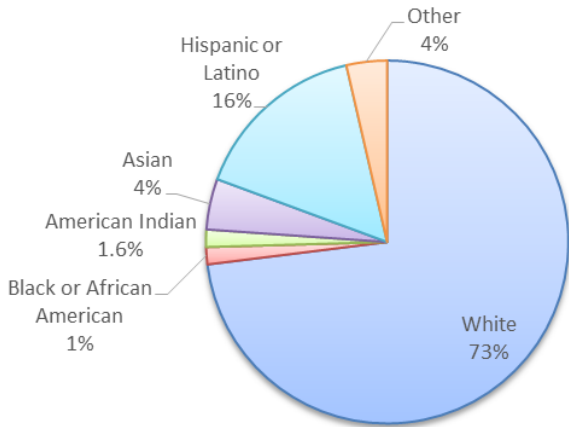
Age <sup>1</sup>	
Under 5 years old	12,178 (5.5%)
5 – 19 years old	40,728 (18.4%)
20 – 64 years old	132,162 (59.6%)
65- 74 years old	19,065 (8.6%)
Over 75 years old	16,645 (7.6%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	88.0%
Bachelor's degree or higher	25.0%

Language Profile <sup>1</sup>	
Speaks language other than English	13.3%
Most common language(s) spoken other than English	Spanish (9.3%)
	Hmong (1.3%)
Speaks language other than English	5.5%



Butte County Race



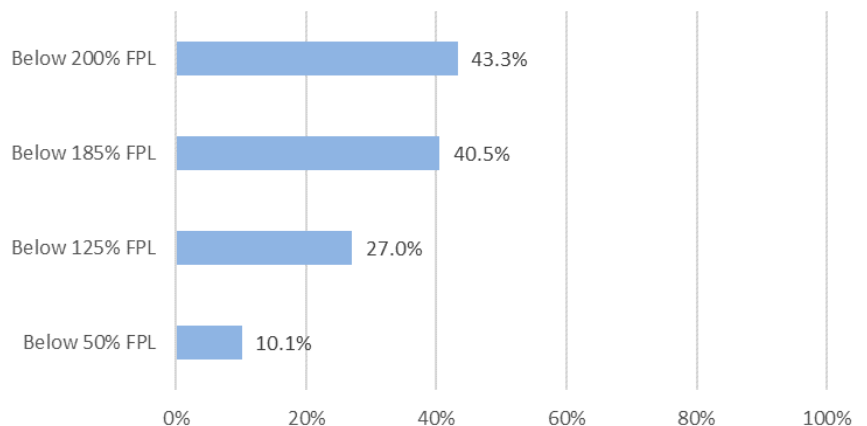
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$43,165</b>
<b>Unemployment</b>	<b>8.6%</b>

Home and Car Ownership	
Home owned	59.4%
Home rented	40.6%
No vehicle owned	7.1%

Household Demographics	
% households with seniors	29.7%
% households with children	27.2%
% single-parent households	8.9%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs

## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**43.0%**

### Diabetic Adults

doctor diagnosed

**8.8%**

### Adult Overweight/Obesity Prevalence

**30.6%** Overweight

**33.6%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**6.9%** Heart Disease

**25.5%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants	29,969
Number of income eligible individuals	51,492
Eligible non-participants	21,532

### WIC - 2011

Average participation	6,739
Estimated eligible	10,463
Coverage rate	64.4%

### Child and Adult Care Food Program Participating Institutions

**68**

### Students Eligible for Free or Reduced Price Meals

**17,714 (57.2%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**39,960**

### Food insecurity rate (individual)

**18.0%**

*Feeding America Estimate (Map the Meal Gap)*

### Food Access

Low access*, low income** people 1 mile from a supermarket	30,381
Low access people 10+ miles from a supermarket	1,257
Low access, low income people 10+ miles from a supermarket	N/A

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
- The tract's median family income is less than or equal to 80 percent of the State-wide median family income; or
- The tract is in a metropolitan area and has a median family income less than or equal to 80 percent of the metropolitan area's median family income."

<sup>1</sup> American Community Study 2015. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saie/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

<sup>5</sup> California Health Interview Study, UCLA. <http://ask.chis.ucla.edu/>

<sup>6</sup> Lost Dollars, Empty Plate; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

<sup>7</sup> State, County and Regional Profiles of WIC Eligibility and Participation, California 2011; California Department of Public Health.

[http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011\(March%202016\).pdf](http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011(March%202016).pdf)

<sup>8</sup> 2015-16 CACFP Center Sites; California Department of Education. <http://www.cde.ca.gov/ds/sh/sn/cacfpcentermap.asp>

<sup>9</sup> SNAP-Ed County Profiles; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

# Calaveras County – The Resource Connection Food Bank

**Total Population<sup>1</sup>** 44,828

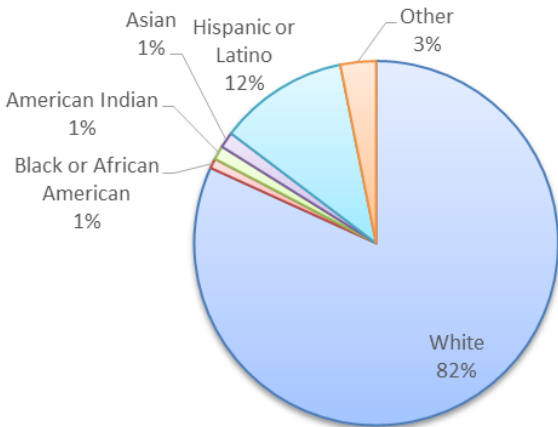
Age <sup>1</sup>	
Under 5 years old	1,732 (3.9%)
5 – 19 years old	6,938 (15.5%)
20 – 64 years old	24,563 (54.8%)
65- 74 years old	7,272 (16.2%)
Over 75 years old	4,323 (9.6%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	82.1%
Bachelor’s degree or higher	14.1%

Language Profile <sup>1</sup>	
Speaks language other than English	7.5%
Most common language(s) spoken other than English	Spanish (3.9%)
Speak English less than very well	2.3%



Calaveras County Race



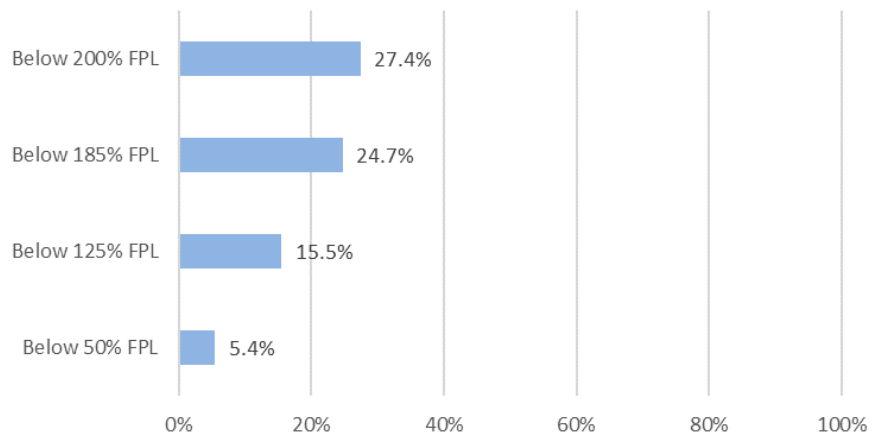
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$54,936</b>
<b>Unemployment</b>	<b>8.0%</b>

Home and Car Ownership	
Home owned	76.9%
Home rented	23.1%
No vehicle owned	4.1%

Household Demographics	
% households with seniors	35.7%
% households with children	25.2%
% single-parent households	6.4%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs

## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**54.0%**

### Diabetic Adults

(doctor diagnosed)

**9.4%**

### Adult Overweight/Obesity Prevalence

**34.1%** Overweight

**27.8%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**8.6%** Heart Disease

**39.1%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants 4,966

Number of income eligible individuals 6,139

Eligible non-participants 1,173

### WIC - 2011

Average participation 3,980

Estimated eligible 5,588

Coverage rate 71.2%

### Child and Adult Care Food Program Participating Institutions

**13**

### Students Eligible for Free or Reduced Price Meals

**2,886 (50.2%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**6,320**

### Food insecurity rate (individual)

**14.1%**

### Feeding America Estimate (Map the Meal Gap)

#### Food Access

Low access\*, low income\*\* people 1 mile from a supermarket 8,226

Low access people 10+ miles from a supermarket N/A

Low access, low income people 10+ miles from a supermarket N/A

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
- The tract's median family income is less than or equal to 80 percent of the State-wide median family income; or
- The tract is in a metropolitan area and has a median family income less than or equal to 80 percent of the metropolitan area's median family income."

<sup>1</sup> American Community Study 2015. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saie/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

<sup>5</sup> California Health Interview Study, UCLA. <http://ask.chis.ucla.edu/>

<sup>6</sup> Lost Dollars, Empty Plate; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

<sup>7</sup> State, County and Regional Profiles of WIC Eligibility and Participation, California 2011; California Department of Public Health.

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<sup>9</sup> SNAP-Ed County Profiles; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

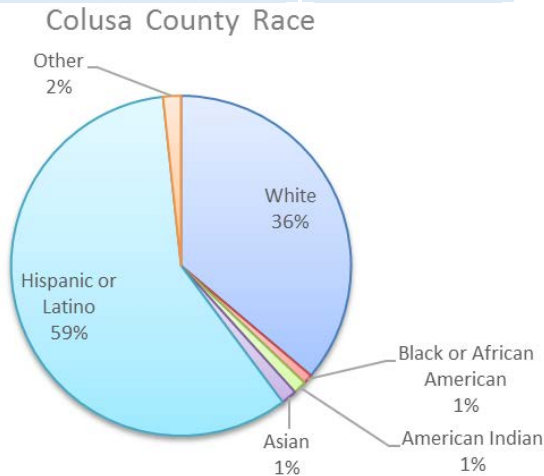
# Colusa County – CAA of Butte County

**Total Population<sup>1</sup>** 21,482

Age <sup>1</sup>	
Under 5 years old	1,552 (7.2%)
5 – 19 years old	4,954 (23.1%)
20 – 64 years old	12,087 (56.3%)
65- 74 years old	1,672 (7.8%)
Over 75 years old	1,217 (5.7%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	68.7%
Bachelor’s degree or higher	14.3%

Language Profile <sup>1</sup>	
Speaks language other than English	47.5%
Most common language(s) spoken other than English	Spanish (44.1%)
Speak English less than very well	21.5%



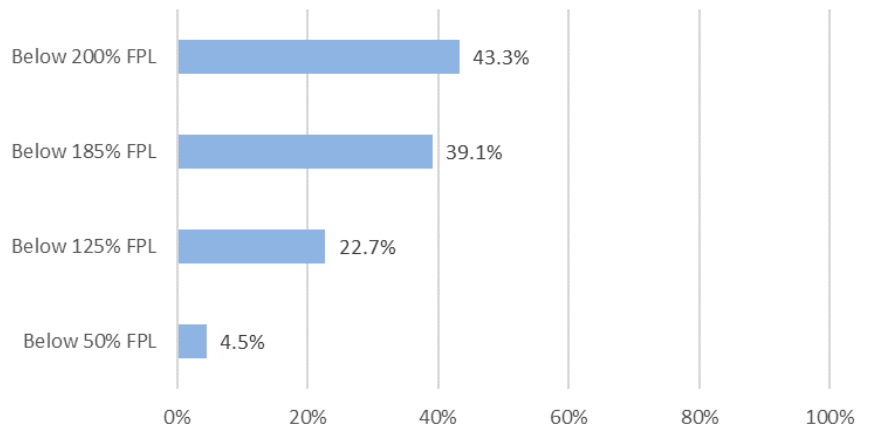
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$50,503</b>
<b>Unemployment</b>	<b>17.4%</b>

Home and Car Ownership	
Home owned	63.6%
Home rented	36.4%
No vehicle owned	5.5%

Household Demographics	
% households with seniors	27.7%
% households with children	38.9%
% single-parent households	12.1%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs



## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**46.0%**

### Diabetic Adults

(doctor diagnosed)

**9.1%**

### Adult Overweight/Obesity Prevalence

**26.5%** Overweight

**34.2%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**4.3%** Heart Disease

**26.7%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants 1,733

Number of income eligible individuals 4,131

Eligible non-participants 2,398

### WIC - 2011

Average participation 6,213

Estimated eligible 8,166

Coverage rate 76.1%

### Child and Adult Care Food Program Participating Institutions

**10**

### Students Eligible for Free or Reduced Price Meals

**3,235 (70.6%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**5,450**

### Food insecurity rate (individual)

**14.7%**

*Feeding America Estimate (Map the Meal Gap)*

### Food Access

Low access\*, low income\*\* people 1 mile from a supermarket 2,471

Low access people 10+ miles from a supermarket 1,951

Low access, low income people 10+ miles from a supermarket 650

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

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<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saie/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

<sup>5</sup> California Health Interview Study, UCLA. <http://ask.chis.ucla.edu/>

<sup>6</sup> Lost Dollars, Empty Plate; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

<sup>7</sup> State, County and Regional Profiles of WIC Eligibility and Participation, California 2011; California Department of Public Health.

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<sup>9</sup> SNAP-Ed County Profiles; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

# Glenn County – CAA of Butte County

**Total Population<sup>1</sup>** 28,017

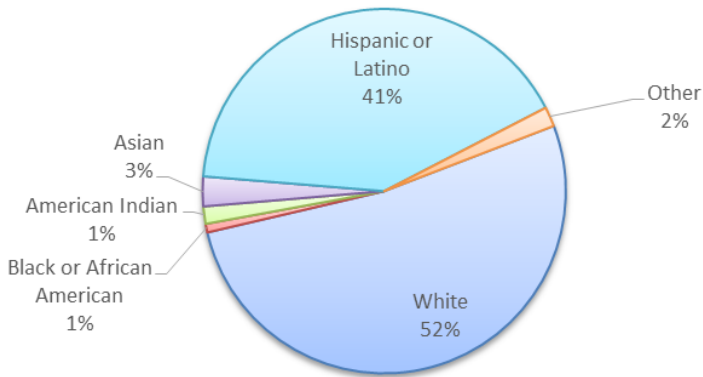
Age <sup>1</sup>	
Under 5 years old	2,012 (7.2%)
5 – 19 years old	6,223 (22.2%)
20 – 64 years old	15,562 (55.5%)
65- 74 years old	2,384 (8.5%)
Over 75 years old	1,836 (6.6%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	75.3%
Bachelor's degree or higher	15.7%

Language Profile <sup>1</sup>	
Speaks language other than English	36.7%
Most common language(s) spoken other than English	Spanish (26.6%)
Speak English less than very well	15.3%



Glenn County Race



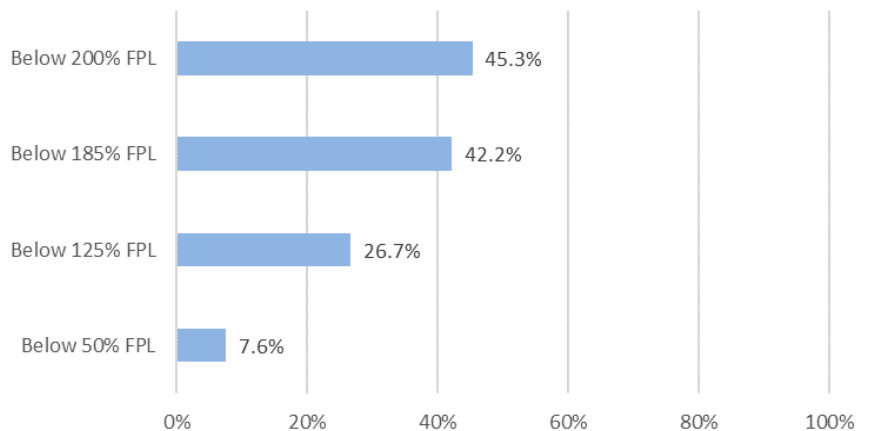
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$40,106</b>
<b>Unemployment</b>	<b>10.6%</b>

Home and Car Ownership	
Home owned	61.6%
Home rented	38.4%
No vehicle owned	7.3%

Household Demographics	
% households with seniors	28.7%
% households with children	35.2%
% single-parent households	10.5%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs

## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**46.0%**

### Diabetic Adults

(doctor diagnosed)

**9.1%**

### Adult Overweight/Obesity Prevalence

**26.5%** Overweight

**34.2%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**4.3%** Heart Disease

**26.7%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants	3,521
Number of income eligible individuals	6,700
Eligible non-participants	3,179

### WIC - 2011

Average participation	6,213
Estimated eligible	8,166
Coverage rate	76.1%

### Child and Adult Care Food Program Participating Institutions

**6**

### Students Eligible for Free or Reduced Price Meals

**3,987 (70.4%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**4,170**

### Food insecurity rate (individual)

**14.9%**

*Feeding America Estimate (Map the Meal Gap)*

### Food Access

Low access*, low income** people 1 mile from a supermarket	6,020
Low access people 10+ miles from a supermarket	1,634
Low access, low income people 10+ miles from a supermarket	494

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
- The tract's median family income is less than or equal to 80 percent of the State-wide median family income; or
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<sup>1</sup> American Community Study 2015. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saipe/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

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<sup>6</sup> Lost Dollars, Empty Plate; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

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<sup>9</sup> SNAP-Ed County Profiles; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

# Humboldt County – Food for People

**Total Population<sup>1</sup>** 135,727

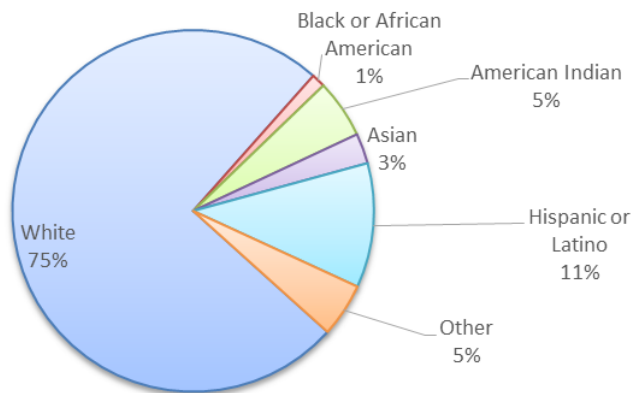
Age <sup>1</sup>	
Under 5 years old	7,396 (5.4%)
5 – 19 years old	23,715 (17.5%)
20 – 64 years old	82,825 (61.0%)
65- 74 years old	13,528 (10.0%)
Over 75 years old	8,263 (6.1%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	90.3%
Bachelor’s degree or higher	27.5%

Language Profile <sup>1</sup>	
Speaks language other than English	10.1%
Most common language(s) spoken other than English	Spanish (5.7%)
Speak English less than very well	3.3%



Humboldt County Race



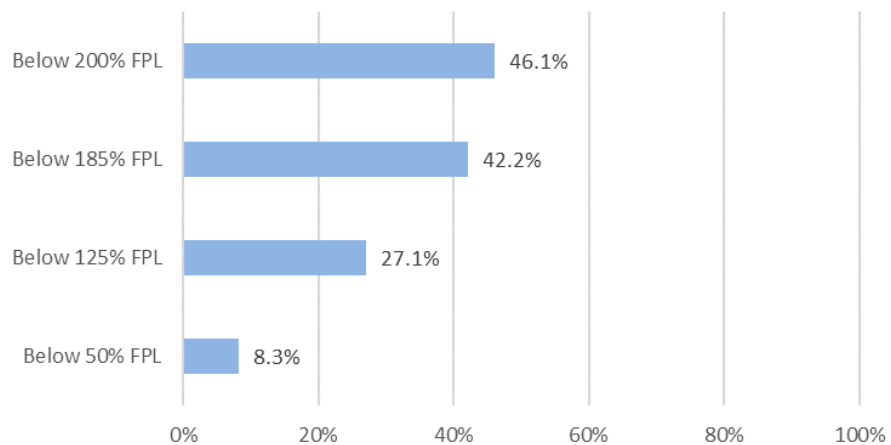
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$42,153</b>
<b>Unemployment</b>	<b>6.7%</b>

Home and Car Ownership	
Home owned	55.0%
Home rented	45.0%
No vehicle owned	7.4%

Household Demographics	
% households with seniors	23.4%
% households with children	26.5%
% single-parent households	9.7%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs

## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**48.0%**

### Diabetic Adults

(doctor diagnosed)

**7.3%**

### Adult Overweight/Obesity Prevalence

**33.7%** Overweight

**30.0%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**6.7%** Heart Disease

**24.7%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants	16,198
Number of income eligible individuals	30,186
Eligible non-participants	13,989

### WIC - 2011

Average participation	4,192
Estimated eligible	6,638
Coverage rate	63.2%

### Child and Adult Care Food Program Participating Institutions

**73**

### Students Eligible for Free or Reduced Price Meals

**10,009 (54.9%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**24,340**

### Food insecurity rate (individual)

**18.0%**

*Feeding America Estimate (Map the Meal Gap)*

### Food Access

Low access*, low income** people 1 mile from a supermarket	19,707
Low access people 10+ miles from a supermarket	5,018
Low access, low income people 10+ miles from a supermarket	2,191

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
- The tract's median family income is less than or equal to 80 percent of the State-wide median family income; or
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<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saie/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

<sup>5</sup> California Health Interview Study, UCLA. <http://ask.chis.ucla.edu/>

<sup>6</sup> Lost Dollars, Empty Plate; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

<sup>7</sup> State, County and Regional Profiles of WIC Eligibility and Participation, California 2011; California Department of Public Health.

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<sup>9</sup> SNAP-Ed County Profiles; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

# Imperial County – Imperial Valley Food Bank

**Total Population<sup>1</sup>** **180,191**

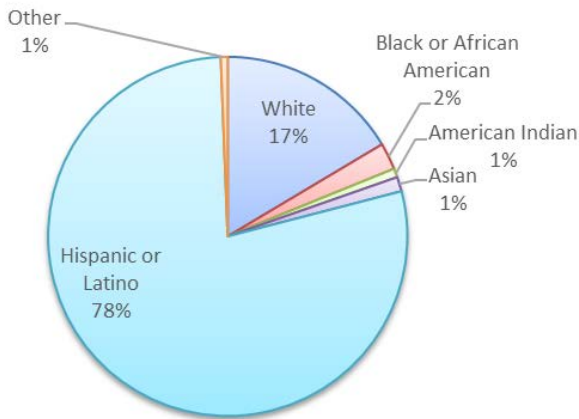
Age <sup>1</sup>	
Under 5 years old	15,275 (8.5%)
5 – 19 years old	41,087 (22.8%)
20 – 64 years old	101,387 (56.3%)
65- 74 years old	12,253 (6.8%)
Over 75 years old	10,189 (5.7%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	65.2%
Bachelor’s degree or higher	13.4%

Language Profile <sup>1</sup>	
Speaks language other than English	74.3%
Most common language(s) spoken other than English	Spanish (71.1%)
Speak English less than very well	32.8%



Imperial County Race



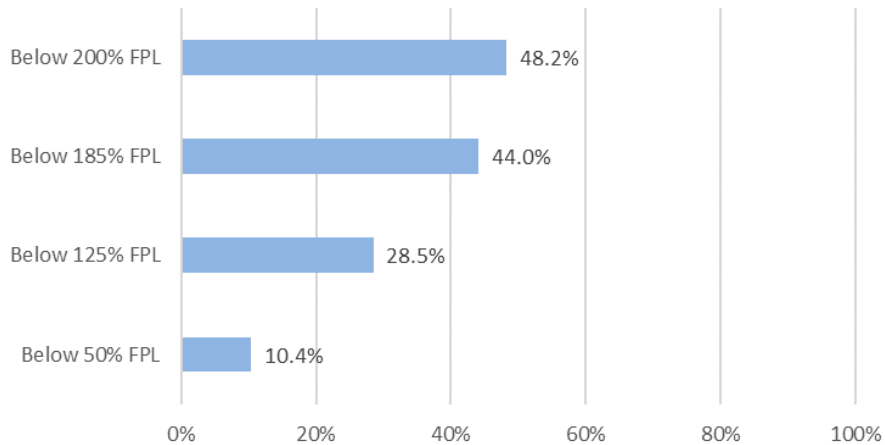
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$41,772</b>
<b>Unemployment</b>	<b>8.7%</b>

Home and Car Ownership	
Home owned	55.9%
Home rented	44.1%
No vehicle owned	8.7%

Household Demographics	
% households with seniors	27.1%
% households with children	50.0%
% single-parent households	14.2%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs

## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**44.0%**

### Diabetic Adults

(doctor diagnosed)

**15.9%**

### Adult Overweight/Obesity Prevalence

**36.2%** Overweight

**41.9%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**5.9%** Heart Disease

**28.4%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants 36,640

Number of income eligible individuals 47,545

Eligible non-participants 10,905

### WIC - 2011

Average participation 8,778

Estimated eligible 11,599

Coverage rate 75.7%

### Child and Adult Care Food Program Participating Institutions

**59**

### Students Eligible for Free or Reduced Price Meals

**27,579 (74.2%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**29,380**

### Food insecurity rate (individual)

**16.6%**

### Feeding America Estimate (Map the Meal Gap)

#### Food Access

Low access\*, low income\*\* people 1 mile from a supermarket 25,267

Low access people 10+ miles from a supermarket 13,840

Low access, low income people 10+ miles from a supermarket 6,966

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
- The tract's median family income is less than or equal to 80 percent of the State-wide median family income; or
- The tract is in a metropolitan area and has a median family income less than or equal to 80 percent of the metropolitan area's median family income."

<sup>1</sup> American Community Study 2015. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saie/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

<sup>5</sup> California Health Interview Study, UCLA. <http://ask.chis.ucla.edu/>

<sup>6</sup> Lost Dollars, Empty Plate; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

<sup>7</sup> State, County and Regional Profiles of WIC Eligibility and Participation, California 2011; California Department of Public Health.

[http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011\(March%202016\).pdf](http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011(March%202016).pdf)

<sup>8</sup> 2015-16 CACFP Center Sites; California Department of Education. <http://www.cde.ca.gov/ds/sh/sn/cacfpcentermap.asp>

<sup>9</sup> SNAP-Ed County Profiles; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

# Kings County – Kings Community Action Organization

**Total Population<sup>1</sup>** 150,965

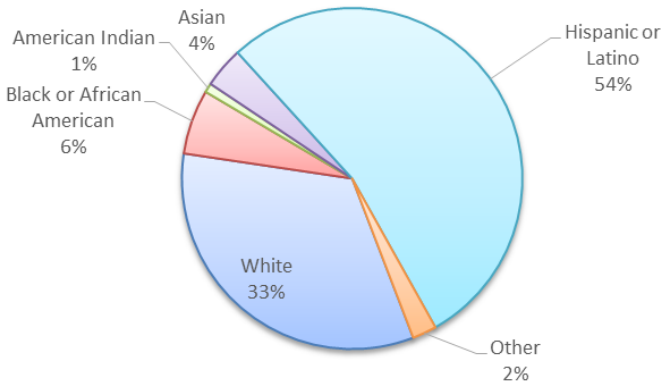
Age <sup>1</sup>	
Under 5 years old	11,835 (7.8%)
5 – 19 years old	33,683 (22.3%)
20 – 64 years old	91,303 (60.5%)
65- 74 years old	8,149 (5.4%)
Over 75 years old	5,997 (4.0%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	70.9%
Bachelor’s degree or higher	12.5%

Language Profile <sup>1</sup>	
Speaks language other than English	42.2%
Most common language(s) spoken other than English	Spanish (37.9%)
	Tagalog (1.6%)
Speaks language other than English	18.4%



Kings County Race



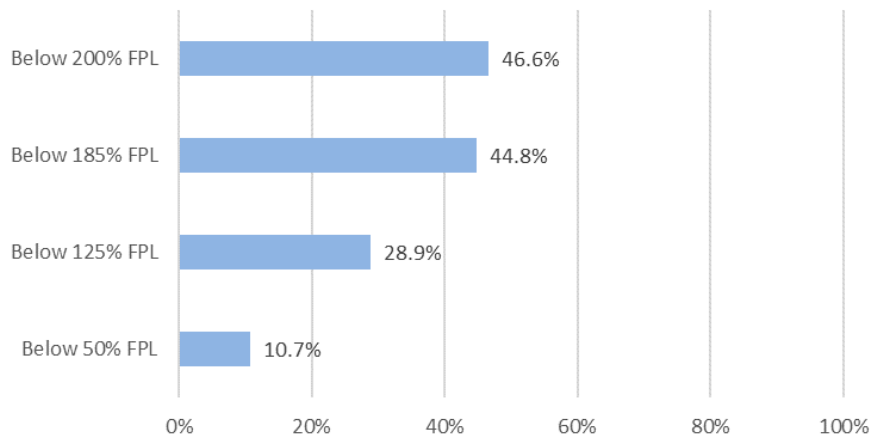
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$47,341</b>
<b>Unemployment</b>	<b>11.9%</b>

Home and Car Ownership	
Home owned	54.2%
Home rented	45.8%
No vehicle owned	6.9%

Household Demographics	
% households with seniors	20.4%
% households with children	49.0%
% single-parent households	14.3%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs



## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**48.0%**

### Diabetic Adults

(doctor diagnosed)

**17.8%**

### Adult Overweight/Obesity Prevalence

**38.7%** Overweight

**43.2%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**11.2%** Heart Disease

**35.2%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants	23,354
Number of income eligible individuals	34,361
Eligible non-participants	11,007

### WIC - 2011

Average participation	8,351
Estimated eligible	11,619
Coverage rate	71.9%

### Child and Adult Care Food Program Participating Institutions

**25**

### Students Eligible for Free or Reduced Price Meals

**19,383 (67.7%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**23,590**

### Food insecurity rate (individual)

**15.6%**

*Feeding America Estimate (Map the Meal Gap)*

### Food Access

Low access*, low income** people 1 mile from a supermarket	16,777
Low access people 10+ miles from a supermarket	N/A
Low access, low income people 10+ miles from a supermarket	N/A

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
- The tract's median family income is less than or equal to 80 percent of the State-wide median family income; or
- The tract is in a metropolitan area and has a median family income less than or equal to 80 percent of the metropolitan area's median family income."

<sup>1</sup> American Community Study 2015. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saie/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

<sup>5</sup> California Health Interview Study, UCLA. <http://ask.chis.ucla.edu/>

<sup>6</sup> Lost Dollars, Empty Plate; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

<sup>7</sup> State, County and Regional Profiles of WIC Eligibility and Participation, California 2011; California Department of Public Health.

[http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011\(March%202016\).pdf](http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011(March%202016).pdf)

<sup>8</sup> 2015-16 CACFP Center Sites; California Department of Education. <http://www.cde.ca.gov/ds/sh/sn/cacfpcentermap.asp>

<sup>9</sup> SNAP-Ed County Profiles; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

# Mariposa County – Amador Tuolumne CAA Food Bank

**Total Population<sup>1</sup>** 17,531

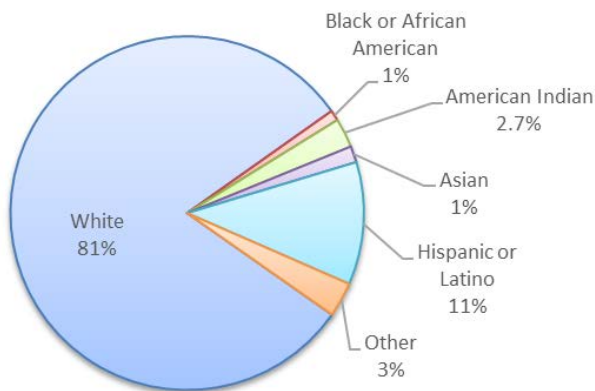
Age <sup>1</sup>	
Under 5 years old	744 (4.2%)
5 – 19 years old	2,448 (14.0%)
20 – 64 years old	9,918 (56.6%)
65- 74 years old	2,645 (15.1%)
Over 75 years old	1,776 (10.1%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	89.0%
Bachelor’s degree or higher	22.4%

Language Profile <sup>1</sup>	
Speaks language other than English	9.7%
Most common language(s) spoken other than English	Spanish (4.8%)
Speak English less than very well	2.5%



Mariposa County Race



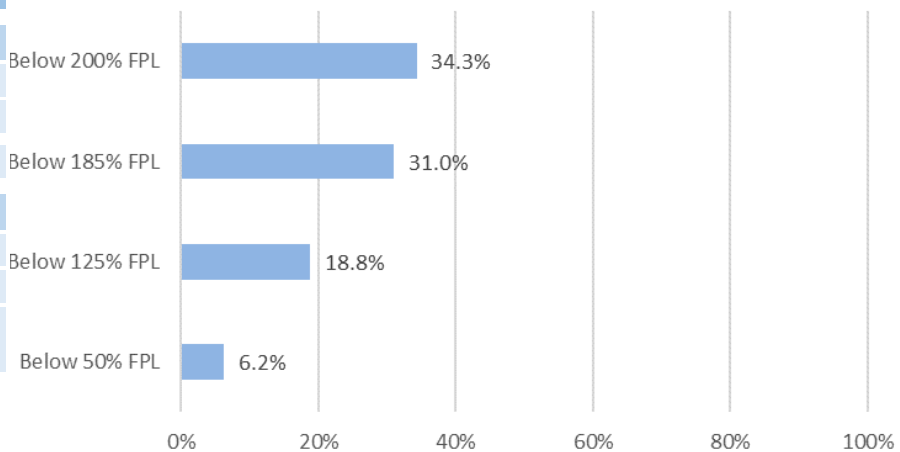
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$50,560</b>
<b>Unemployment</b>	<b>8.7%</b>

Home and Car Ownership	
Home owned	72.8%
Home rented	27.2%
No vehicle owned	3.4%

Household Demographics	
% households with seniors	40.6%
% households with children	21.9%
% single-parent households	5.8%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs

## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**54.0%**

### Diabetic Adults

(doctor diagnosed)

**9.4%**

### Adult Overweight/Obesity Prevalence

**34.1%** Overweight

**27.8%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**8.6%** Heart Disease

**39.1%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants	1,867
Number of income eligible individuals	3,166
Eligible non-participants	1,300

### WIC - 2011

Average participation	3,980
Estimated eligible	5,588
Coverage rate	71.2%

### Child and Adult Care Food Program Participating Institutions

**0**

### Students Eligible for Free or Reduced Price Meals

**972 (52.1%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**2,920**

### Food insecurity rate (individual)

**16.3%**

*Feeding America Estimate (Map the Meal Gap)*

### Food Access

Low access*, low income** people 1 mile from a supermarket	4,993
Low access people 10+ miles from a supermarket	4,203
Low access, low income people 10+ miles from a supermarket	1,507

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
- The tract's median family income is less than or equal to 80 percent of the State-wide median family income; or
- The tract is in a metropolitan area and has a median family income less than or equal to 80 percent of the metropolitan area's median family income."

<sup>1</sup> American Community Study 2015. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saie/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

<sup>5</sup> California Health Interview Study, UCLA. <http://ask.chis.ucla.edu/>

<sup>6</sup> Lost Dollars, Empty Plate; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

<sup>7</sup> State, County and Regional Profiles of WIC Eligibility and Participation, California 2011; California Department of Public Health.

[http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011\(March%202016\).pdf](http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011(March%202016).pdf)

<sup>8</sup> 2015-16 CACFP Center Sites; California Department of Education. <http://www.cde.ca.gov/ds/sh/sn/cacfpcentermap.asp>

<sup>9</sup> SNAP-Ed County Profiles; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

# Mendocino County – Mendocino Food and Nutrition Fort Bragg Food Bank

**Total Population<sup>1</sup>** 87,649

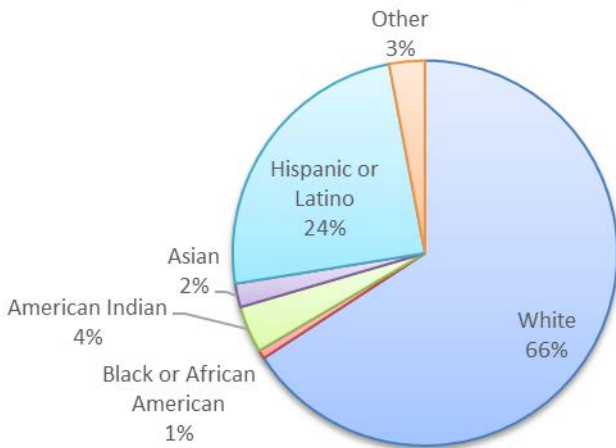
Age <sup>1</sup>	
Under 5 years old	5,245 (6.0%)
5 – 19 years old	15,557 (17.7%)
20 – 64 years old	49,465 (56.4%)
65- 74 years old	11,071 (12.6%)
Over 75 years old	6,311 (7.2%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	85.9%
Bachelor’s degree or higher	22.5%

Language Profile <sup>1</sup>	
Speaks language other than English	21.4%
Most common language(s) spoken other than English	Spanish (16.5%)
Speak English less than very well	9.8%



Mendocino County Race



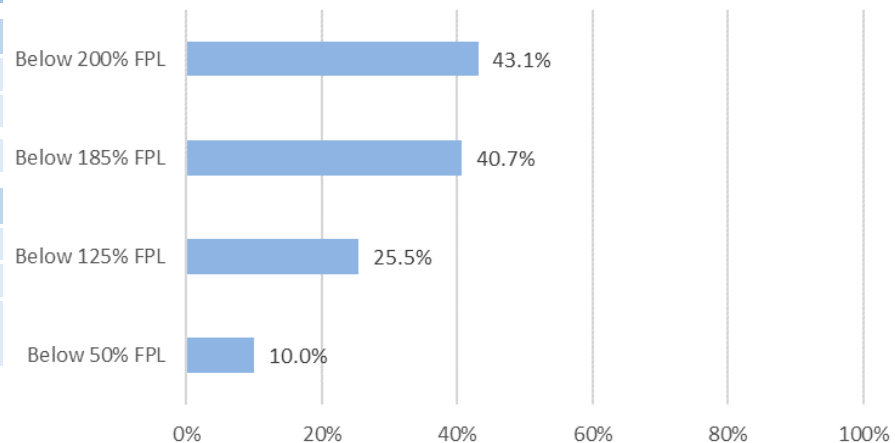
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$43,290</b>
<b>Unemployment</b>	<b>7.0%</b>

Home and Car Ownership	
Home owned	59.0%
Home rented	41.0%
No vehicle owned	7.8%

Household Demographics	
% households with seniors	28.9%
% households with children	29.4%
% single-parent households	9.8%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs

## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**48.0%**

### Diabetic Adults

(doctor diagnosed)

**11.0%**

### Adult Overweight/Obesity Prevalence

**36.5%** Overweight

**22.2%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**7.5%** Heart Disease

**33.8%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants	13,162
Number of income eligible individuals	19,282
Eligible non-participants	6,119

### WIC - 2011

Average participation	5,794
Estimated eligible	8,498
Coverage rate	68.2%

### Child and Adult Care Food Program Participating Institutions

**0**

### Students Eligible for Free or Reduced Price Meals

**9,516 (73.2%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**13,780**

### Food insecurity rate (individual)

**15.7%**

### Feeding America Estimate (Map the Meal Gap)

#### Food Access

Low access*, low income** people 1 mile from a supermarket	19,774
Low access people 10+ miles from a supermarket	6,270
Low access, low income people 10+ miles from a supermarket	2,717

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
- The tract's median family income is less than or equal to 80 percent of the State-wide median family income; or
- The tract is in a metropolitan area and has a median family income less than or equal to 80 percent of the metropolitan area's median family income."

<sup>1</sup> American Community Study 2015. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saie/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty14.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

<sup>5</sup> California Health Interview Study, UCLA. <http://ask.chis.ucla.edu/>

<sup>6</sup> Lost Dollars, Empty Plate; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

<sup>7</sup> State, County and Regional Profiles of WIC Eligibility and Participation, California 2011; California Department of Public Health.

<sup>8</sup> 2015-16 CACFP Center Sites; California Department of Education. <http://www.cde.ca.gov/ds/sh/sn/cacfpcentermap.asp>

<sup>9</sup> SNAP-Ed County Profiles; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

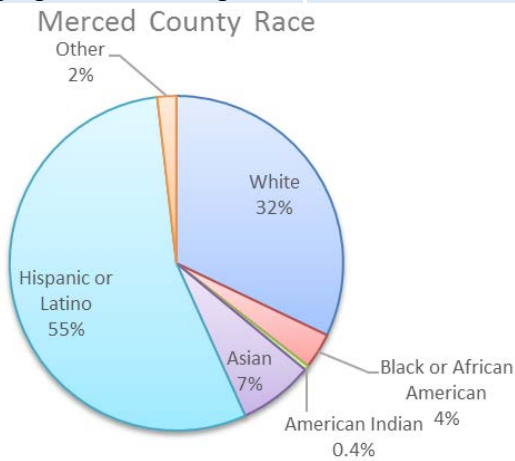
# Merced County – Merced Food Bank

**Total Population<sup>1</sup>** 268,455

Age <sup>1</sup>	
Under 5 years old	21,418 (8.0%)
5 – 19 years old	68,368 (25.5%)
20 – 64 years old	150,152 (55.9%)
65- 74 years old	16,654 (6.2%)
Over 75 years old	11,863 (4.4%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	68.0%
Bachelor’s degree or higher	13.0%

Language Profile <sup>1</sup>	
Speaks language other than English	51.9%
Most common language(s) spoken other than English	Spanish (42.4%)
	Hmong (2.5%), Portuguese (2.2%)
Speaks language other than English	22.8%



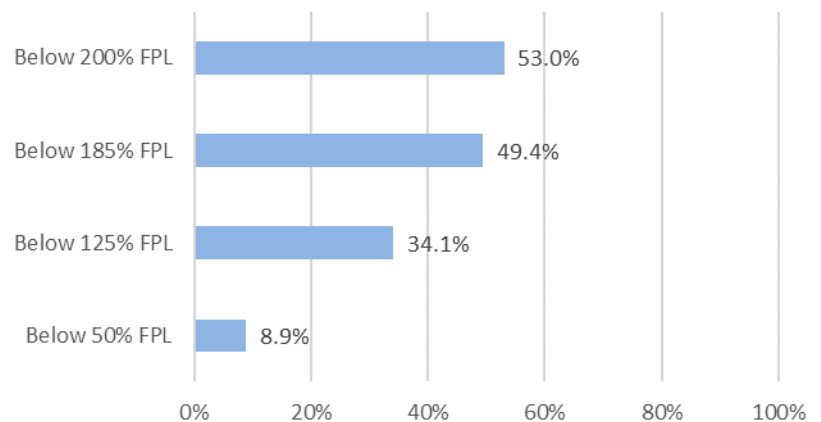
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$43,066</b>
<b>Unemployment</b>	<b>12.8%</b>

Home and Car Ownership	
Home owned	52.7%
Home rented	47.3%
No vehicle owned	7.5%

Household Demographics	
% households with seniors	23.5%
% households with children	47.4%
% single-parent households	9.8%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs

## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**46.0%**

### Diabetic Adults

(doctor diagnosed)

**9.0%**

### Adult Overweight/Obesity Prevalence

**39.1%** Overweight

**23.4%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**7.0%** Heart Disease

**32.7%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants	55,180
Number of income eligible individuals	76,610
Eligible non-participants	21,430

### WIC - 2011

Average participation	16,484
Estimated eligible	20,177
Coverage rate	81.7%

### Child and Adult Care Food Program Participating Institutions

**50**

### Students Eligible for Free or Reduced Price Meals

**45,380 (79.6%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecurity rate (individual)

**15.5%**

### Food insecure individuals

**40,480**

*Feeding America Estimate (Map the Meal Gap)*

### Food Access

Low access*, low income** people 1 mile from a supermarket	35,092
Low access people 10+ miles from a supermarket	1,601
Low access, low income people 10+ miles from a supermarket	769

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
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- The tract is in a metropolitan area and has a median family income less than or equal to 80 percent of the metropolitan area's median family income."

<sup>1</sup> American Community Study 2015. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>2</sup> *Small Area Income and Poverty Estimates for 2014*; United States Census Bureau.

<https://www.census.gov/did/www/saie/data/statecounty/data/2014.html>

<sup>3</sup> *Labor Force Data by County, 2015 Annual Averages*; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> *Prediabetes in California*, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

<sup>5</sup> *California Health Interview Study*, UCLA. <http://ask.chis.ucla.edu/>

<sup>6</sup> *Lost Dollars, Empty Plate*; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

<sup>7</sup> *State, County and Regional Profiles of WIC Eligibility and Participation, California 2011*; California Department of Public Health.

[http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011\(March%202016\).pdf](http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011(March%202016).pdf)

<sup>8</sup> *2015-16 CACFP Center Sites*; California Department of Education. <http://www.cde.ca.gov/ds/sh/sn/cacfpcentermap.asp>

<sup>9</sup> *SNAP-Ed County Profiles*; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> *Map the Meal Gap*; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> *Food Desert Atlas*; USDA. <http://www.ers.usda.gov/data/fooddesert>

# Napa County – Napa Valley Food Bank

**Total Population<sup>1</sup>** 142,456

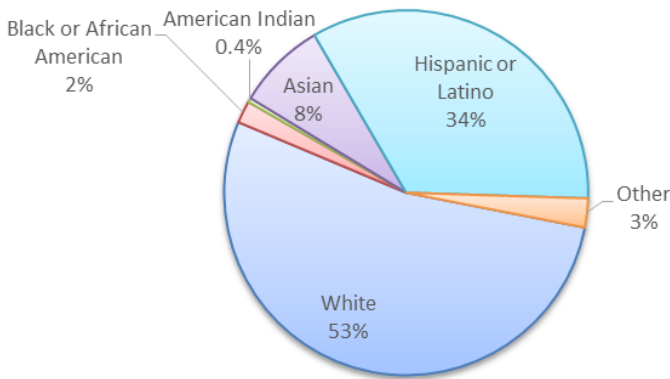
Age <sup>1</sup>	
Under 5 years old	7,658 (5.4%)
5 – 19 years old	26,593 (18.7%)
20 – 64 years old	83,384 (58.5%)
65- 74 years old	14,041 (9.9%)
Over 75 years old	10,780 (7.6%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	82.8%
Bachelor's degree or higher	31.9%

Language Profile <sup>1</sup>	
Speaks language other than English	35.4%
Most common language(s) spoken other than English	Spanish (26.3%)
	Tagalog (2.4%)
Speaks language other than English	16.3%



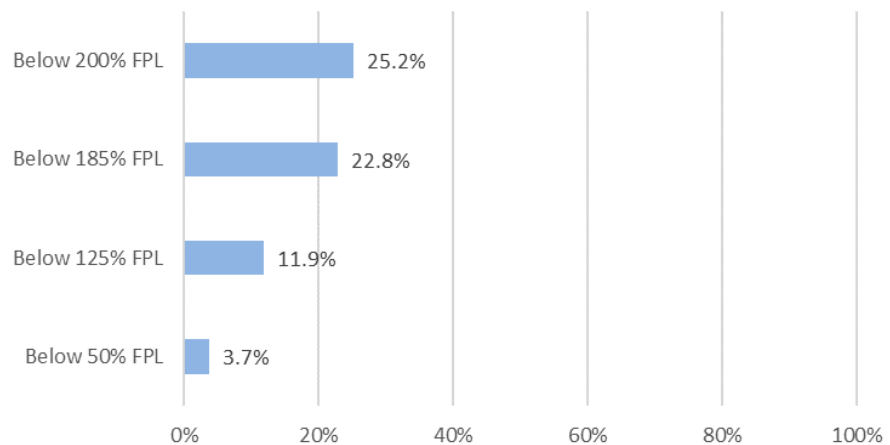
Napa County Race



## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$70,925</b>
<b>Unemployment</b>	<b>5.6%</b>
Home and Car Ownership	
Home owned	62.6%
Home rented	37.4%
No vehicle owned	5.0%
Household Demographics	
% households with seniors	29.3%
% households with children	33.8%
% single-parent households	8.0%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs



## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**48.0%**

### Diabetic Adults

(doctor diagnosed)

**4.1%**

### Adult Overweight/Obesity Prevalence

**33.6%** Overweight

**24.3%** Obese

### Cardiovascular Disease (doctor diagnosed)

**4.5%** Heart Disease

**32.5%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants	6,821
Number of income eligible individuals	18,699
Eligible non-participants	11,878

### WIC - 2011

Average participation	4,038
Estimated eligible	5,810
Coverage rate	69.5%

### Child and Adult Care Food Program Participating Institutions

**32**

### Students Eligible for Free or Reduced Price Meals

**9,593 (45.7%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**14,820**

### Food insecurity rate (individual)

**10.6%**

### Feeding America Estimate (Map the Meal Gap)

#### Food Access

Low access*, low income** people 1 mile from a supermarket	6,127
Low access people 10+ miles from a supermarket	N/A
Low access, low income people 10+ miles from a supermarket	N/A

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
- The tract's median family income is less than or equal to 80 percent of the State-wide median family income; or
- The tract is in a metropolitan area and has a median family income less than or equal to 80 percent of the metropolitan area's median family income."

<sup>1</sup> American Community Study 2015. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saie/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

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<sup>6</sup> Lost Dollars, Empty Plate; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

<sup>7</sup> State, County and Regional Profiles of WIC Eligibility and Participation, California 2011; California Department of Public Health.

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<sup>8</sup> 2015-16 CACFP Center Sites; California Department of Education. <http://www.cde.ca.gov/ds/sh/sn/cacfpcentermap.asp>

<sup>9</sup> SNAP-Ed County Profiles; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

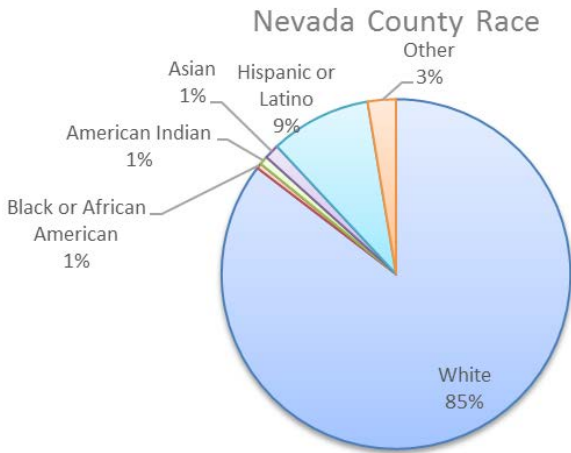
# Nevada County – Food Bank of Nevada County

**Total Population<sup>1</sup>** 98,877

Age <sup>1</sup>	
Under 5 years old	4,266 (4.3%)
5 – 19 years old	14,990 (15.2%)
20 – 64 years old	55,420 (56.0%)
65- 74 years old	14,708 (14.9%)
Over 75 years old	9,493 (9.6%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	94.3%
Bachelor’s degree or higher	32.8%

Language Profile <sup>1</sup>	
Speaks language other than English	8.6%
Most common language(s) spoken other than English	Spanish (4.1%)
Speak English less than very well	2.8%



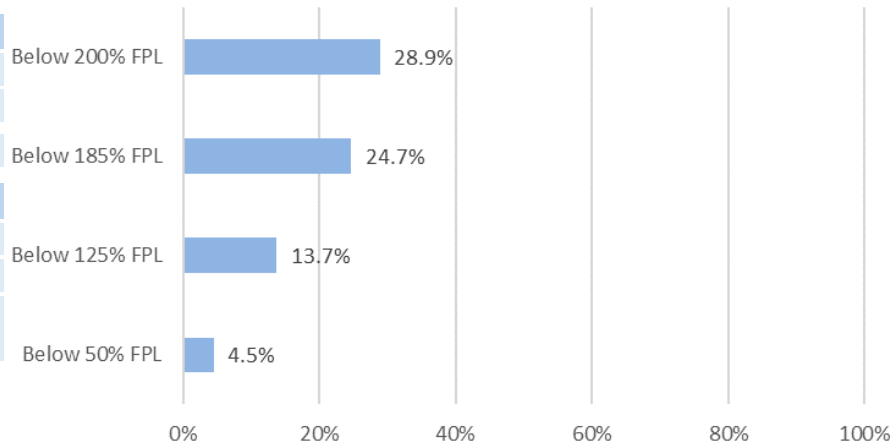
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$56,949</b>
<b>Unemployment</b>	<b>6.5%</b>

Home and Car Ownership	
Home owned	72.5%
Home rented	27.5%
No vehicle owned	4.4%

Household Demographics	
% households with seniors	35.4%
% households with children	22.9%
% single-parent households	5.5%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs

## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**54.0%**

### Diabetic Adults

(doctor diagnosed)

**2.3%**

### Adult Overweight/Obesity Prevalence

**42.0%** Overweight

**14.7%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**4.7%** Heart Disease

**30.9%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants	7,393
Number of income eligible individuals	14,420
Eligible non-participants	7,028

### WIC - 2011

Average participation	5,622
Estimated eligible	8,692
Coverage rate	64.7%

### Child and Adult Care Food Program Participating Institutions

**10**

### Students Eligible for Free or Reduced Price Meals

**5,963 (48.5%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**14,000**

### Food insecurity rate (individual)

**14.2%**

### Feeding America Estimate (Map the Meal Gap)

#### Food Access

Low access*, low income** people 1 mile from a supermarket	14,489
Low access people 10+ miles from a supermarket	N/A
Low access, low income people 10+ miles from a supermarket	N/A

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
- The tract's median family income is less than or equal to 80 percent of the State-wide median family income; or
- The tract is in a metropolitan area and has a median family income less than or equal to 80 percent of the metropolitan area's median family income."

<sup>1</sup> American Community Study 2015. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saie/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

<sup>5</sup> California Health Interview Study, UCLA. <http://ask.chis.ucla.edu/>

<sup>6</sup> Lost Dollars, Empty Plate; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

<sup>7</sup> State, County and Regional Profiles of WIC Eligibility and Participation, California 2011; California Department of Public Health.

[http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011\(March%202016\).pdf](http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011(March%202016).pdf)

<sup>8</sup> 2015-16 CACFP Center Sites; California Department of Education. <http://www.cde.ca.gov/ds/sh/sn/cacfpcentermap.asp>

<sup>9</sup> SNAP-Ed County Profiles; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

# Plumas County – CAA of Butte County

**Total Population<sup>1</sup>** 18,409

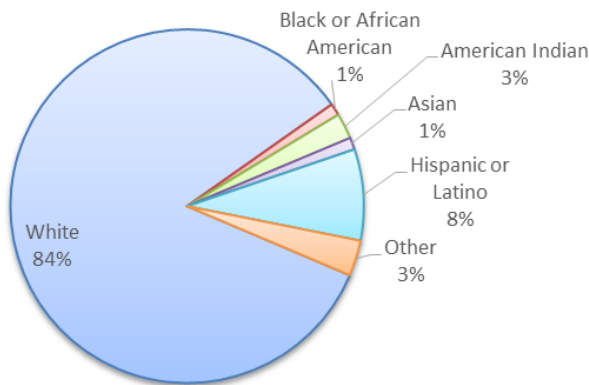
Age <sup>1</sup>	
Under 5 years old	803 (4.4%)
5 – 19 years old	2,722 (14.8%)
20 – 64 years old	10,155 (55.2%)
65- 74 years old	2,990 (16.2%)
Over 75 years old	1,739 (9.4%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	89.8%
Bachelor's degree or higher	22.7%

Language Profile <sup>1</sup>	
Speaks language other than English	9.6%
Most common language(s) spoken other than English	Spanish (5.9%)
Speak English less than very well	2.1%



Plumas County Race



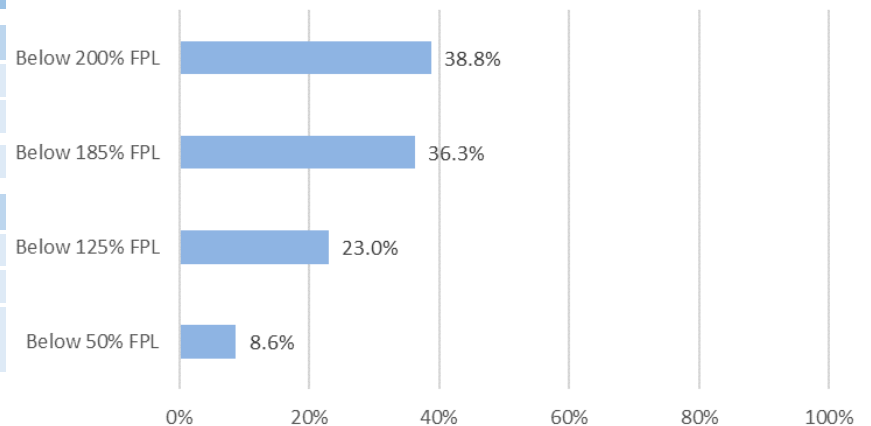
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$48,032</b>
<b>Unemployment</b>	<b>11.5%</b>

Home and Car Ownership	
Home owned	71.5%
Home rented	28.5%
No vehicle owned	6.8%

Household Demographics	
% households with seniors	36.2%
% households with children	22.0%
% single-parent households	6.7%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs

## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**49.0%**

### Diabetic Adults

(doctor diagnosed)

**10.2%**

### Adult Overweight/Obesity

#### Prevalence

**29.0%** Overweight

**25.3%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**7.8%** Heart Disease

**36.6%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants	1,678
Number of income eligible individuals	3,650
Eligible non-participants	1,972

### WIC - 2011

Average participation	5,622
Estimated eligible	8,692
Coverage rate	64.7%

### Child and Adult Care Food Program Participating Institutions

**9**

### Students Eligible for Free or Reduced Price Meals

**1,072 (49.7%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**3,490**

### Food insecurity rate (individual)

**18.1%**

### Feeding America Estimate (Map the Meal Gap)

#### Food Access

Low access*, low income** people 1 mile from a supermarket	2,772
Low access people 10+ miles from a supermarket	1,175
Low access, low income people 10+ miles from a supermarket	205

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
- The tract's median family income is less than or equal to 80 percent of the State-wide median family income; or
- The tract is in a metropolitan area and has a median family income less than or equal to 80 percent of the metropolitan area's median family income."

<sup>1</sup> American Community Study 2015. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saipa/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

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<sup>6</sup> Lost Dollars, Empty Plate; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

<sup>7</sup> State, County and Regional Profiles of WIC Eligibility and Participation, California 2011; California Department of Public Health.

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<sup>9</sup> SNAP-Ed County Profiles; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

# San Benito County – Community Food Bank

**Total Population<sup>1</sup>** 58,792

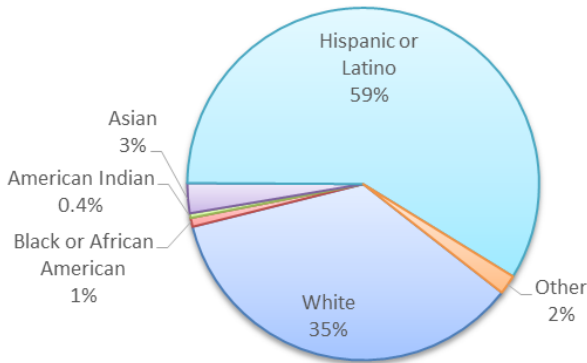
Age <sup>1</sup>	
Under 5 years old	3,978 (6.8%)
5 – 19 years old	13,271 (22.6%)
20 – 64 years old	34,586 (58.8%)
65- 74 years old	4,200 (7.1%)
Over 75 years old	2,757 (4.7%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	77.9%
Bachelor’s degree or higher	19.0%

Language Profile <sup>1</sup>	
Speaks language other than English	39.2%
Most common language(s) spoken other than English	Spanish (37.3%)
Speak English less than very well	18.2%



San Benito County Race



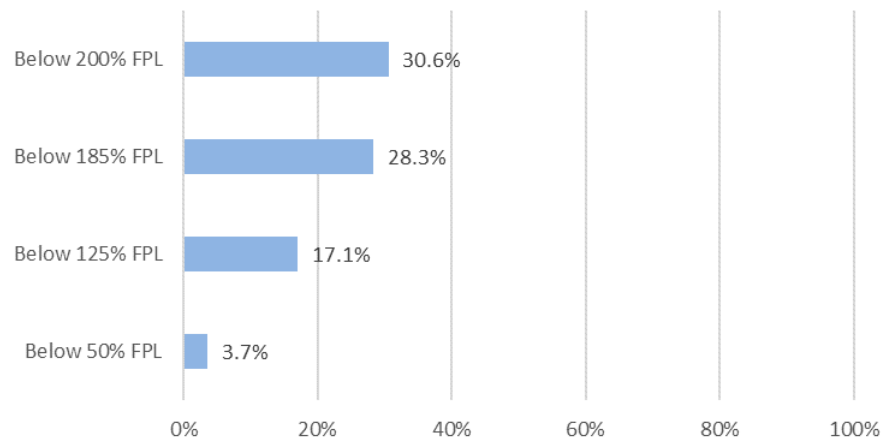
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$67,874</b>
<b>Unemployment</b>	<b>9.3%</b>

Home and Car Ownership	
Home owned	62.0%
Home rented	38.0%
No vehicle owned	3.2%

Household Demographics	
% households with seniors	24.2%
% households with children	44.6%
% single-parent households	10.9%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs

## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**47.0%**

### Diabetic Adults

(doctor diagnosed)

**15.2%**

### Adult Overweight/Obesity

#### Prevalence

**34.9%** Overweight

**33.3%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**5.9%** Heart Disease

**34.0%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants	6,192
Number of income eligible individuals	9,416
Eligible non-participants	3,224

### WIC - 2011

Average participation	24,258
Estimated eligible	31,829
Coverage rate	76.2%

### Child and Adult Care Food Program Participating Institutions

**11**

### Students Eligible for Free or Reduced Price Meals

**6,270 (55.3%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**5,100**

### Food insecurity rate (individual)

**9.0%**

*Feeding America Estimate (Map the Meal Gap)*

### Food Access

Low access*, low income** people 1 mile from a supermarket	3,626
Low access people 10+ miles from a supermarket	N/A
Low access, low income people 10+ miles from a supermarket	N/A

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
- The tract's median family income is less than or equal to 80 percent of the State-wide median family income; or
- The tract is in a metropolitan area and has a median family income less than or equal to 80 percent of the metropolitan area's median family income."

<sup>1</sup> American Community Study 2015. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saipe/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

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<sup>6</sup> Lost Dollars, Empty Plate; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

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<sup>9</sup> SNAP-Ed County Profiles; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

# Shasta County – Shasta Senior Nutrition Programs

**Total Population<sup>1</sup>** 179,533

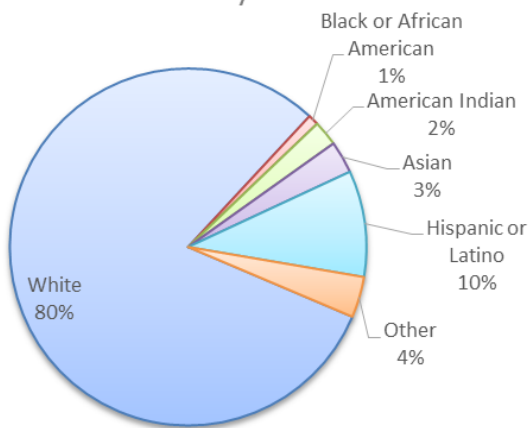
Age <sup>1</sup>	
Under 5 years old	10,572 (5.9%)
5 – 19 years old	32,005 (17.8%)
20 – 64 years old	101,328 (56.4%)
65- 74 years old	20,975 (11.7%)
Over 75 years old	14,653 (8.2%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	88.7%
Bachelor’s degree or higher	19.1%

Language Profile <sup>1</sup>	
Speaks language other than English	8.4%
Most common language(s) spoken other than English	Spanish (4.6%)
Speak English less than very well	2.8%



Shasta County Race



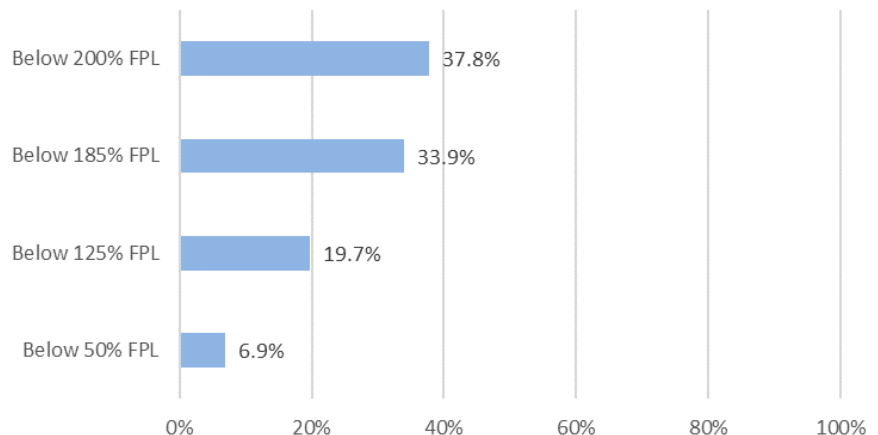
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$44,556</b>
<b>Unemployment</b>	<b>9.6%</b>

Home and Car Ownership	
Home owned	63.4%
Home rented	36.6%
No vehicle owned	7.1%

Household Demographics	
% households with seniors	33.3%
% households with children	27.3%
% single-parent households	9.1%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs



## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**50.0%**

### Diabetic Adults

(doctor diagnosed)

**11.3%**

### Adult Overweight/Obesity Prevalence\*

**30.9%** Overweight

**29.0%** Obese

\*self-reported

### Cardiovascular Disease

(doctor diagnosed)

**12.3%** Heart Disease

**35.6%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants	23,446
Number of income eligible individuals	35,397
Eligible non-participants	11,951

### WIC - 2011

Average participation	6,060
Estimated eligible	9,445
Coverage rate	64.2%

### Child and Adult Care Food Program Participating Institutions

**65**

### Students Eligible for Free or Reduced Price Meals

**14,449 (54.5%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**32,710**

### Food insecurity rate (individual)

**18.3%**

### Feeding America Estimate (Map the Meal Gap)

#### Food Access

Low access*, low income** people 1 mile from a supermarket	28,106
Low access people 10+ miles from a supermarket	5,460
Low access, low income people 10+ miles from a supermarket	1,638

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
- The tract's median family income is less than or equal to 80 percent of the State-wide median family income; or
- The tract is in a metropolitan area and has a median family income less than or equal to 80 percent of the metropolitan area's median family income."

<sup>1</sup> American Community Study 2015. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saie/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

<sup>5</sup> California Health Interview Study, UCLA. <http://ask.chis.ucla.edu/>

<sup>6</sup> Lost Dollars, Empty Plate; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

<sup>7</sup> State, County and Regional Profiles of WIC Eligibility and Participation, California 2011; California Department of Public Health.

[http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011\(March%202016\).pdf](http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011(March%202016).pdf)

<sup>8</sup> 2015-16 CACFP Center Sites; California Department of Education. <http://www.cde.ca.gov/ds/sh/sn/cacfpcentermap.asp>

<sup>9</sup> SNAP-Ed County Profiles; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

# Sierra County – CAA of Butte County

**Total Population<sup>1</sup>** 2,967

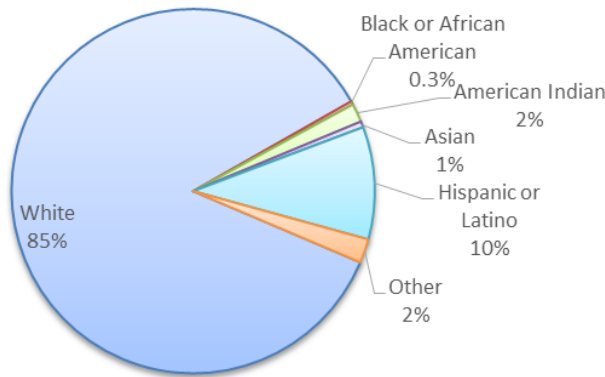
Age <sup>1</sup>	
Under 5 years old	80 (2.7%)
5 – 19 years old	438 (14.8%)
20 – 64 years old	1,628 (54.9%)
65- 74 years old	526 (17.7%)
Over 75 years old	295 (9.9%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	90.1%
Bachelor's degree or higher	19.0%

Language Profile <sup>1</sup>	
Speaks language other than English	9.8%
Most common language(s) spoken other than English	Spanish (5.8%)
Speak English less than very well	5.6%



Sierra County Race



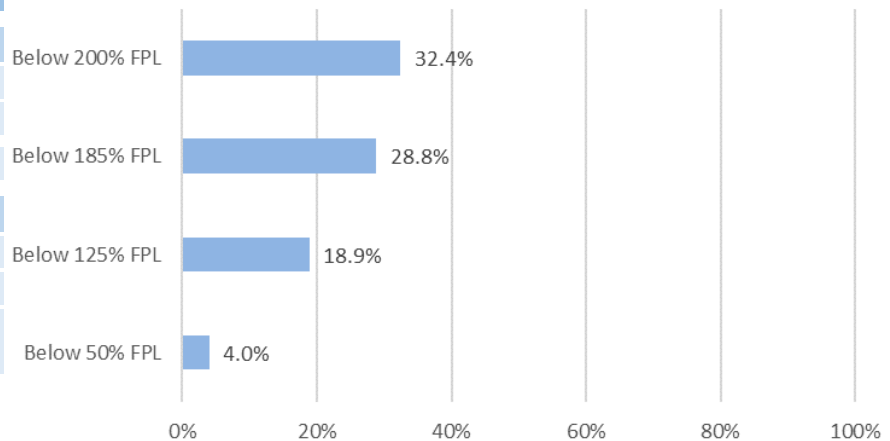
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$43,107</b>
<b>Unemployment</b>	<b>10.1%</b>

Home and Car Ownership	
Home owned	75.8%
Home rented	24.2%
No vehicle owned	1.7%

Household Demographics	
% households with seniors	36.3%
% households with children	18.7%
% single-parent households	3.9%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs

## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**49.0%**

### Diabetic Adults

(doctor diagnosed)

**10.2%**

### Adult Overweight/Obesity Prevalence

**29.0%** Overweight

**25.3%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**7.8%** Heart Disease

**36.6%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants	303
Number of income eligible individuals	667
Eligible non-participants	364

### WIC - 2011

Average participation	5,622
Estimated eligible	8,692
Coverage rate	64.7%

### Child and Adult Care Food Program Participating Institutions

**0**

### Students Eligible for Free or Reduced Price Meals

**152 (40.9%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**500**

### Food insecurity rate (individual)

**16.7%**

### Feeding America Estimate (Map the Meal Gap)

#### Food Access

Low access*, low income** people 1 mile from a supermarket	768
Low access people 10+ miles from a supermarket	N/A
Low access, low income people 10+ miles from a supermarket	704

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
- The tract's median family income is less than or equal to 80 percent of the State-wide median family income; or
- The tract is in a metropolitan area and has a median family income less than or equal to 80 percent of the metropolitan area's median family income."

<sup>1</sup> American Community Study 2015. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saie/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

<sup>5</sup> California Health Interview Study, UCLA. <http://ask.chis.ucla.edu/>

<sup>6</sup> Lost Dollars, Empty Plate; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

<sup>7</sup> State, County and Regional Profiles of WIC Eligibility and Participation, California 2011; California Department of Public Health.

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<sup>9</sup> SNAP-Ed County Profiles; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

# Sutter County – Yuba Sutter Food Bank

**Total Population<sup>1</sup>** 96,463

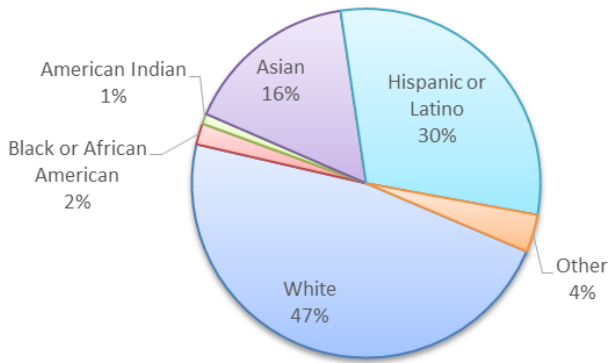
Age <sup>1</sup>	
Under 5 years old	6,380 (6.6%)
5 – 19 years old	21,149 (21.9%)
20 – 64 years old	54,592 (56.6%)
65- 74 years old	7,943 (8.2%)
Over 75 years old	6,399 (6.6%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	78.4%
Bachelor’s degree or higher	18.5%

Language Profile <sup>1</sup>	
Speaks language other than English	37.8%
Most common language(s) spoken other than English	Spanish (20.5%)
	Other Indic Language (9.4%)
Speak English less than very well	18.0%



Sutter County Race



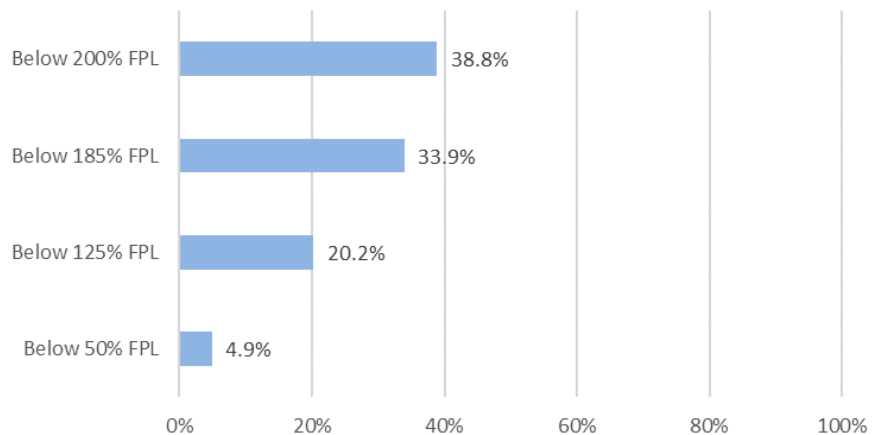
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$51,527</b>
<b>Unemployment</b>	<b>12.6%</b>

Home and Car Ownership	
Home owned	59.1%
Home rented	40.9%
No vehicle owned	6.1%

Household Demographics	
% households with seniors	28.9%
% households with children	40.5%
% single-parent households	9.7%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs

## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**43.0%**

### Diabetic Adults

(doctor diagnosed)

**8.9%**

### Adult Overweight/Obesity Prevalence

**30.4%** Overweight

**32.7%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**6.6%** Heart Disease

**27.7%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants	12,300
Number of income eligible individuals	21,143
Eligible non-participants	8,843

### WIC - 2011

Average participation	8,096
Estimated eligible	11,495
Coverage rate	70.4%

### Child and Adult Care Food Program Participating Institutions

**21**

### Students Eligible for Free or Reduced Price Meals

**13,261 (61.8%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**16,100**

### Food insecurity rate (individual)

**16.9%**

### Feeding America Estimate (Map the Meal Gap)

#### Food Access

Low access*, low income** people 1 mile from a supermarket	13,572
Low access people 10+ miles from a supermarket	1,202
Low access, low income people 10+ miles from a supermarket	N/A

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
- The tract's median family income is less than or equal to 80 percent of the State-wide median family income; or
- The tract is in a metropolitan area and has a median family income less than or equal to 80 percent of the metropolitan area's median family income."

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<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saipe/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

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<sup>6</sup> Lost Dollars, Empty Plate; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

<sup>7</sup> State, County and Regional Profiles of WIC Eligibility and Participation, California 2011; California Department of Public Health.

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<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

# Tehama County – CAA of Butte County

**Total Population<sup>1</sup>** 63,308

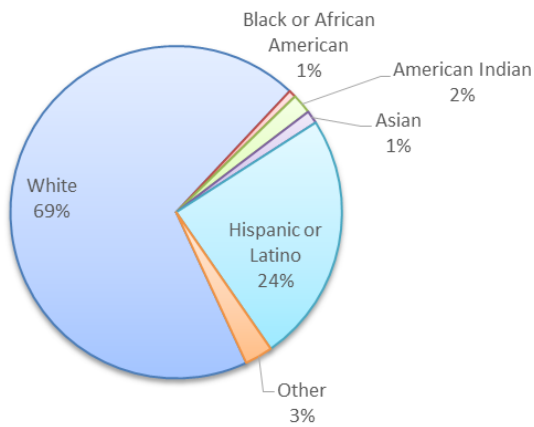
Age <sup>1</sup>	
Under 5 years old	3,797 (6.0%)
5 – 19 years old	12,767 (20.2%)
20 – 64 years old	35,263 (55.7%)
65- 74 years old	6,647 (10.5%)
Over 75 years old	4,834 (7.6%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	88.5%
Bachelor's degree or higher	1.3%

Language Profile <sup>1</sup>	
Speaks language other than English	18.6%
Most common language(s) spoken other than English	Spanish (16.9%)
Speak English less than very well	7.0%



Tehama County Race



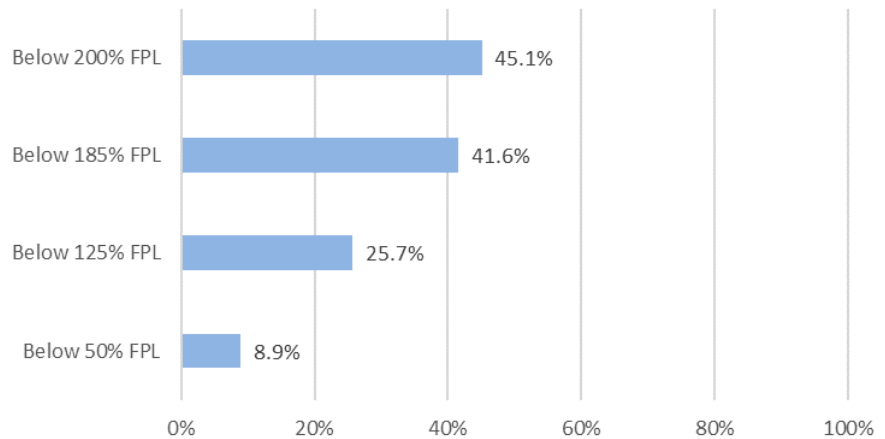
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$42,369</b>
<b>Unemployment</b>	<b>9.6%</b>

Home and Car Ownership	
Home owned	68.4%
Home rented	31.6%
No vehicle owned	5.4%

Household Demographics	
% households with seniors	32.5%
% households with children	33.9%
% single-parent households	9.6%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs

## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**46.0%**

### Diabetic Adults

(doctor diagnosed)

**9.1%**

### Adult Overweight/Obesity Prevalence

**26.5%** Overweight

**34.2%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**4.3%** Heart Disease

**26.7%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants	9,888
Number of income eligible individuals	15,303
Eligible non-participants	5,415

### WIC - 2011

Average participation	6,213
Estimated eligible	8,166
Coverage rate	76.1%

### Child and Adult Care Food Program Participating Institutions

**24**

### Students Eligible for Free or Reduced Price Meals

**7,598 (71.9%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**9,960**

### Food insecurity rate (individual)

**15.7%**

### Feeding America Estimate (Map the Meal Gap)

#### Food Access

Low access*, low income** people 1 mile from a supermarket	15,405
Low access people 10+ miles from a supermarket	3,570
Low access, low income people 10+ miles from a supermarket	1,832

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
- The tract's median family income is less than or equal to 80 percent of the State-wide median family income; or
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<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saie/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

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<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

# Tuolumne County – Amador Tuolumne CAA Food Bank

**Total Population<sup>1</sup>** 53,709

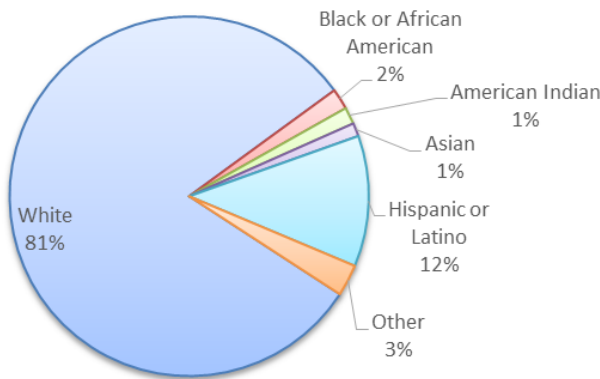
Age <sup>1</sup>	
Under 5 years old	2,326 (4.3%)
5 – 19 years old	7,655 (14.3%)
20 – 64 years old	30,752 (57.3%)
65- 74 years old	7,612 (14.2%)
Over 75 years old	5,364 (10.0%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	89.6%
Bachelor’s degree or higher	19.8%

Language Profile <sup>1</sup>	
Speaks language other than English	7.0%
Most common language(s) spoken other than English	Spanish (5.0%)
Speak English less than very well	2.5%



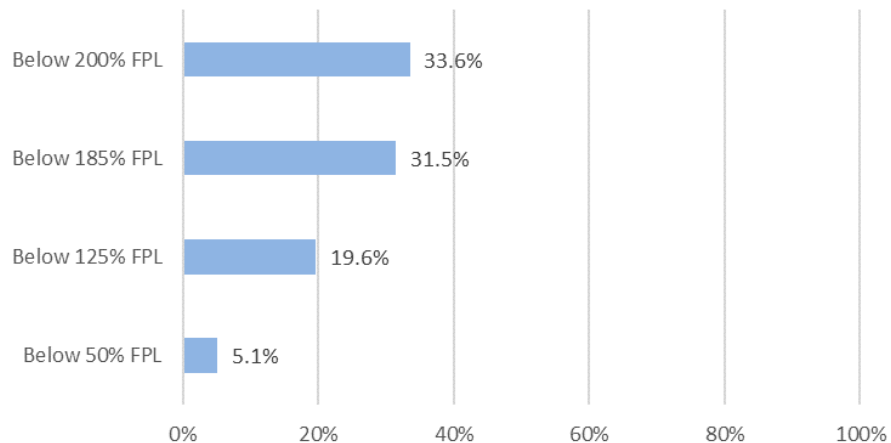
Tuolumne County Race



## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$48,493</b>
<b>Unemployment</b>	<b>8.6%</b>
Home and Car Ownership	
Home owned	69.3%
Home rented	30.7%
No vehicle owned	5.0%
Household Demographics	
% households with seniors	37.7%
% households with children	23.6%
% single-parent households	6.9%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs



## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**54.0%**

### Diabetic Adults

(doctor diagnosed)

**9.4%**

### Adult Overweight/Obesity Prevalence

**34.1%** Overweight

**27.8%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**8.6%** Heart Disease

**39.1%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants	5,218
Number of income eligible individuals	9,900
Eligible non-participants	4,682

### WIC - 2011

Average participation	3,980
Estimated eligible	5,588
Coverage rate	71.2%

### Child and Adult Care Food Program Participating Institutions

**8**

### Students Eligible for Free or Reduced Price Meals

**2,845 (46.5%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**8,810**

### Food insecurity rate (individual)

**16.2%**

### Feeding America Estimate (Map the Meal Gap)

#### Food Access

Low access*, low income** people 1 mile from a supermarket	11,927
Low access people 10+ miles from a supermarket	N/A
Low access, low income people 10+ miles from a supermarket	N/A

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

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<sup>1</sup> American Community Study 2015. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saiper/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

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<sup>7</sup> State, County and Regional Profiles of WIC Eligibility and Participation, California 2011; California Department of Public Health.

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<sup>9</sup> SNAP-Ed County Profiles; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

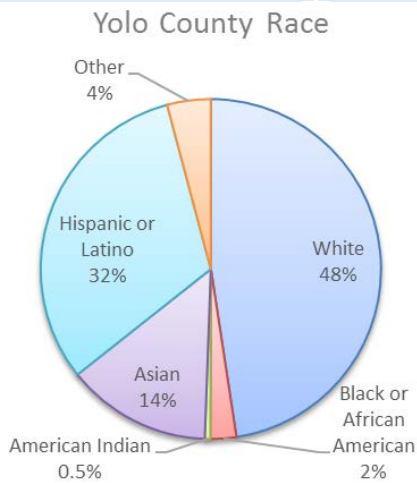
# Yolo County – Yolo Food Bank

**Total Population<sup>1</sup>** 213,016

Age <sup>1</sup>	
Under 5 years old	12,418 (5.8%)
5 – 19 years old	44,874 (21.1%)
20 – 64 years old	130,730 (61.4%)
65- 74 years old	14,342 (6.7%)
Over 75 years old	10,652 (5.0%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	85.0%
Bachelor’s degree or higher	38.3%

Language Profile <sup>1</sup>	
Speaks language other than English	35.0%
Most common language(s) spoken other than English	Spanish (20.2%)
	Chinese (3.3%)
Speak English less than very well	15.1%



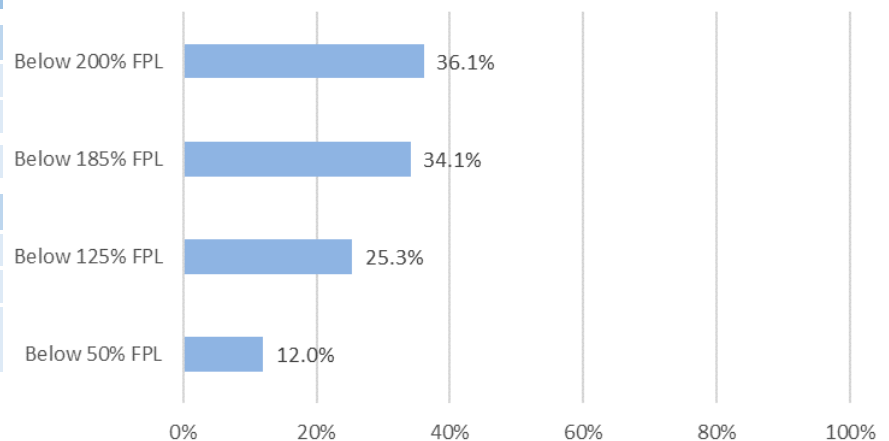
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$55,508</b>
<b>Unemployment</b>	<b>7.5%</b>

Home and Car Ownership	
Home owned	52.4%
Home rented	47.6%
No vehicle owned	7.8%

Household Demographics	
% households with seniors	22.6%
% households with children	33.3%
% single-parent households	8.1%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs

## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**44.0%**

### Diabetic Adults

(doctor diagnosed)

**3.8%**

### Adult Overweight/Obesity

#### Prevalence

**24.4%** Overweight

**29.2%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**2.0%** Heart Disease

**28.9%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants 16,728

Number of income eligible individuals 43,265

Eligible non-participants 26,537

### WIC - 2011

Average participation 5,730

Estimated eligible 7,769

Coverage rate 73.8%

### CACFP Participating Institutions

**52**

### Students Eligible for FRPM

**15,705 (53.6%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**31,100**

### Food insecurity rate (individual)

**15.2%**

*Feeding America Estimate (Map the Meal Gap)*

### Food Access

Low access\*, low income\*\* people 1 mile from a supermarket 11,017

Low access people 10+ miles from a supermarket 5,321

Low access, low income people 10+ miles from a supermarket 1,332

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
- The tract's median family income is less than or equal to 80 percent of the State-wide median family income; or
- The tract is in a metropolitan area and has a median family income less than or equal to 80 percent of the metropolitan area's median family income."

<sup>1</sup> American Community Study 2015. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>2</sup> Small Area Income and Poverty Estimates for 2014; United States Census Bureau.

<https://www.census.gov/did/www/saipe/data/statecounty/data/2014.html>

<sup>3</sup> Labor Force Data by County, 2015 Annual Averages; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> Prediabetes in California, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

<sup>5</sup> California Health Interview Study, UCLA. <http://ask.chis.ucla.edu/>

<sup>6</sup> Lost Dollars, Empty Plate; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

<sup>7</sup> State, County and Regional Profiles of WIC Eligibility and Participation, California 2011; California Department of Public Health.

[http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011\(March%202016\).pdf](http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011(March%202016).pdf)

<sup>8</sup> 2015-16 CACFP Center Sites; California Department of Education. <http://www.cde.ca.gov/ds/sh/sn/cacfpcentermap.asp>

<sup>9</sup> SNAP-Ed County Profiles; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> Map the Meal Gap; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> Food Desert Atlas; USDA. <http://www.ers.usda.gov/data/fooddesert>

# Yuba County – Yuba Sutter Food Bank

**Total Population<sup>1</sup>** **74,492**

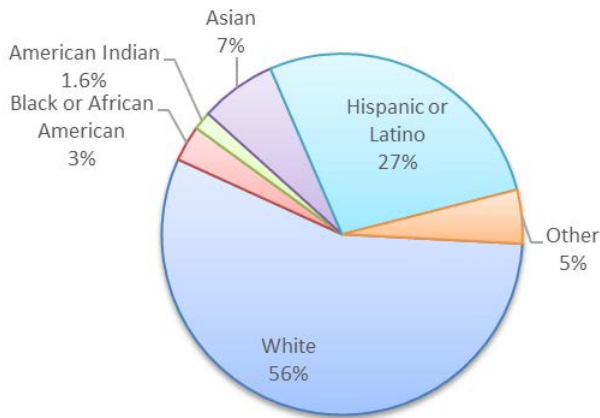
Age <sup>1</sup>	
Under 5 years old	5,948 (8.0%)
5 – 19 years old	16,479 (22.1%)
20 – 64 years old	43,300 (58.1%)
65- 74 years old	5,389 (7.2%)
Over 75 years old	3,376 (4.5%)

Educational Attainment <sup>1</sup>	
High school graduate or higher	79.6%
Bachelor’s degree or higher	14.2%

Language Profile <sup>1</sup>	
Speaks language other than English	25.6%
Most common language(s) spoken other than English	Spanish (17.8%)
	Hmong (3.0%)
Speaks language other than English	10.1%



Yuba County Race



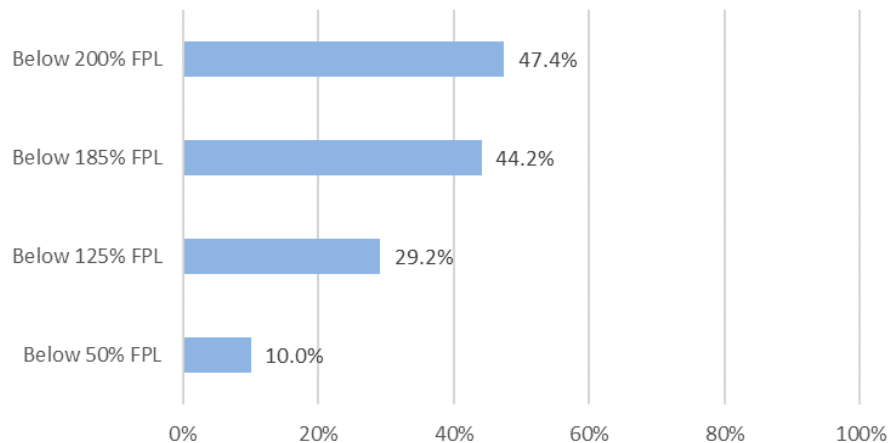
## Households and Poverty Status<sup>1,2,3</sup>

<b>Median Income</b>	<b>\$45,470</b>
<b>Unemployment</b>	<b>11.2%</b>

Home and Car Ownership	
Home owned	58.1%
Home rented	41.9%
No vehicle owned	7.2%

Household Demographics	
% households with seniors	23.3%
% households with children	41.9%
% single-parent households	12.5%

Cumulative Percent of Individuals Below FPL



FPL = Federal Poverty Level; annual income level by household size that determines eligibility for assistance programs

## Health Indicators<sup>4,5</sup>

### Pre-Diabetic Adults

(estimate, 2014)

**48.0%**

### Diabetic Adults

(doctor diagnosed)

**15.3%**

### Adult Overweight/Obesity Prevalence

**38.6%** Overweight

**39.1%** Obese

### Cardiovascular Disease

(doctor diagnosed)

**8.9%** Heart Disease

**39.7%** High Blood Pressure

## Federal Food Programs<sup>6,7,8,9</sup>

### Cal Fresh - 2013

Average monthly participants	12,818
Number of income eligible individuals	17,929
Eligible non-participants	5,111

### WIC - 2011

Average participation	8,096
Estimated eligible	11,495
Coverage rate	70.4%

### Child and Adult Care Food Program Participating Institutions

**21**

### Students Eligible for Free or Reduced Price Meals

**9,568 (68.5%)**

## Food Access and Insecurity<sup>10,11</sup>

### Food insecure individuals

**13,190**

### Food insecurity rate (individual)

**18.1%**

*Feeding America Estimate (Map the Meal Gap)*

### Food Access

Low access*, low income** people 1 mile from a supermarket	14,819
Low access people 10+ miles from a supermarket	N/A
Low access, low income people 10+ miles from a supermarket	N/A

\* "In the Food Access Research Atlas, low access to healthy food is defined as being far from a supermarket, supercenter, or large grocery store ("supermarket" for short). A census tract is considered to have low access if a significant number or share of individuals in the tract is far from a supermarket."

\*\* "The criteria for identifying a census tract as low income are from the Department of Treasury's New Markets Tax Credit (NMTC) program. This program defines a low-income census tract as any tract where:

- The tract's poverty rate is 20 percent or greater; or
- The tract's median family income is less than or equal to 80 percent of the State-wide median family income; or
- The tract is in a metropolitan area and has a median family income less than or equal to 80 percent of the metropolitan area's median family income."

<sup>1</sup> American Community Study 2015. <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>2</sup> *Small Area Income and Poverty Estimates for 2014*; United States Census Bureau.

<https://www.census.gov/did/www/saie/data/statecounty/data/2014.html>

<sup>3</sup> *Labor Force Data by County, 2015 Annual Averages*; Bureau of Labor Statistics. <http://www.bls.gov/lau/laucnty15.txt>

<sup>4</sup> *Prediabetes in California*, Health Policy Brief; UCLA Center for Healthy Policy Research. [http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)

<sup>5</sup> California Health Interview Study, UCLA. <http://ask.chis.ucla.edu/>

<sup>6</sup> *Lost Dollars, Empty Plate*; California Food Policy Advocates. <http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

<sup>7</sup> *State, County and Regional Profiles of WIC Eligibility and Participation, California 2011*; California Department of Public Health.

[http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011\(March%202016\).pdf](http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011(March%202016).pdf)

<sup>8</sup> *2015-16 CACFP Center Sites*; California Department of Education. <http://www.cde.ca.gov/ds/sh/sn/cacfpcentermap.asp>

<sup>9</sup> *SNAP-Ed County Profiles*; California Department of Public Health. <https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

<sup>10</sup> *Map the Meal Gap*; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

<sup>11</sup> *Food Desert Atlas*; USDA. <http://www.ers.usda.gov/data/fooddesert>

## APPENDIX 2: SERVICE AREA PROFILE DATA SOURCES & TUTORIAL

The Service Area Profiles can be helpful to describe the communities served by rural and remote food banks, and in understanding the scope of need in these communities. We have pulled a variety of indicators – from demographic information and poverty status, to utilization of federal food programs and health indicators. For food banks who serve multiple counties, a profile was developed for each county in their service area.

In the next section, you'll find links to all of the sources of each indicator used in the profiles, as well as explanatory notes when relevant. We prioritized using readily accessible and frequently updated data that had robust county-level data or estimates.

Finally, we have provided a tutorial that covers how to pull data from the main sources we used, and how to put trend data together. Food banks might be interested in how various indicators have changed over time – or they might be interested in updating these profiles in the future – this information will help with that.

### Data Sources & Notes

#### **DEMOGRAPHICS**

##### Total population, age breakdown

Source: American Community Study 2015; Table DP05

<http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

##### Educational attainment

Source: American Community Study 2015; Table S1501

<http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

##### Languages spoken

Source: American Community Study 2015; Table DP02

<http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

##### Ethnic and racial breakdown

Source: American Community Study 2015; Table DP05

<http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

#### **HOUSEHOLDS AND POVERTY STATUS**

##### Median income

*Small Area Income and Poverty Estimates for 2014*; United States Census Bureau.  
<https://www.census.gov/did/www/saipe/data/statecounty/data/2014.html>

Unemployment rate

*Labor Force Data by County, 2015 Annual Averages*; Bureau of Labor Statistics.  
<http://www.bls.gov/lau/laucnty15.txt>

Home and Car ownership

Source: American Community Study 2015; Table DP03  
<http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

Household demographics

Source: American Community Study 2015; Table S1101  
<http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

Individuals below Federal Poverty Line

Source: American Community Study 2015; Table S1701  
<http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>

***HOUSEHOLDS AND POVERTY STATUS***

Pre-diabetic adults

Source: *Prediabetes in California*, Health Policy Brief; UCLA Center for Health Policy Research.  
[http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes\\_Policy-Brief-1.pdf](http://www.phadvocates.org/wp-content/uploads/2016/04/Prediabetes_Policy-Brief-1.pdf)  
Note: Estimated prevalence, methodology described on page 6

Diabetic adults

California Health Interview Study, UCLA.  
<http://ask.chis.ucla.edu/>  
Note: Self-report of doctor diagnosis of diabetes

Adult overweight and obesity prevalence

California Health Interview Study, UCLA.  
<http://ask.chis.ucla.edu/>  
Note: Proportion of population with Body Mass Index (BMI) of 25 or greater. Height and weight self-reported.

Cardiovascular disease – heart disease and high blood pressure

California Health Interview Study, UCLA.  
<http://ask.chis.ucla.edu/>  
Note: Self-report of doctor diagnosis of each condition

## **FEDERAL FOOD PROGRAMS**

CalFresh participation, income eligible individual, and eligible non-participants

*Lost Dollars, Empty Plate*; California Food Policy Advocates.

<http://cfpa.net/CalFresh/CFPAPublications/LDEP-CountyTablesMethodology-2015.pdf>

WIC participation, estimated eligible, coverage rate

*State, County and Regional Profiles of WIC Eligibility and Participation, California 2011*;

California Department of Public Health.

[http://www.cdph.ca.gov/programs/wicworks/Documents/Research-](http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011(Marc)

[Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011\(Marc  
h%202016\).pdf](http://www.cdph.ca.gov/programs/wicworks/Documents/Research-Evaluation/StateCountyandRegionalProfilesofWICEligibilityandParticipationCalifornia2011(Marc)

Child and Adult Care Food Program (CACFP) participating institutions

*2015-16 CACFP Center Sites*; California Department of Education.

<http://www.cde.ca.gov/ds/sh/sn/cacfpcentermap.asp>

Students eligible for Free or Reduced Price Meals

*SNAP-Ed County Profiles*; California Department of Public Health.

<https://www.cdph.ca.gov/programs/NEOPB/Pages/2015SNAP-EdCountyProfiles.aspx>

## **FOOD ACCESS AND INSECURITY**

Food insecure individuals and rate

*Map the Meal Gap*; Feeding America. <http://map.feedingamerica.org/county/2014/overall>

Note: [Estimated prevalence](#)

Food access

*Food Desert Atlas*; USDA. <http://www.ers.usda.gov/data/fooddesert>

## Tutorial: How to Pull Indicators

In this section you'll find step-by-step instructions for using the sources noted above.

### **Using American FactFinder**

*Below you'll find step by step instructions for accessing data from the US Census Bureau*

- Go to <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>
- Navigate to Popular Tables



## Community Facts

Find useful facts, statistics, trends, and local history. Research data about your community.

Enter a ZIP code, city, or state to search.

City, State, ZIP

- Guided Search
- Advanced Search
- Download Center



### Popular Tables

#### Population and Housing

- Annual Population Estimates (2015 PEP, PEPANNRES)
- Demographic and Housing Estimates (2015 ACS, DP05)
- General Housing Characteristics (2015 ACS, DP04)
- General Demographic Characteristics (2010 Census, DP-1)

- General Economic Characteristics (2015 ACS, DP03)

#### Age, Race, Sex and Education

- Selected Social Characteristics (2015 ACS, DP02)
- Educational Attainment (2015 ACS, S1501)

#### Poverty and Income

- For Age, Sex, Race, and Total Population data, select Demographic and Housing Estimates (DP05)

### Popular Tables

#### Population and Housing

- Annual Population Estimates (2015 PEP, PEPANNRES)
- Demographic and Housing Estimates (2015 ACS, DP05)
- General Housing Characteristics (2015 ACS, DP04)
- General Demographic Characteristics (2010 Census, DP-1)

- General Economic Characteristics (2015 ACS, DP03)

#### Age, Race, Sex and Education

- Selected Social Characteristics (2015 ACS, DP02)
- Educational Attainment (2015 ACS, S1501)

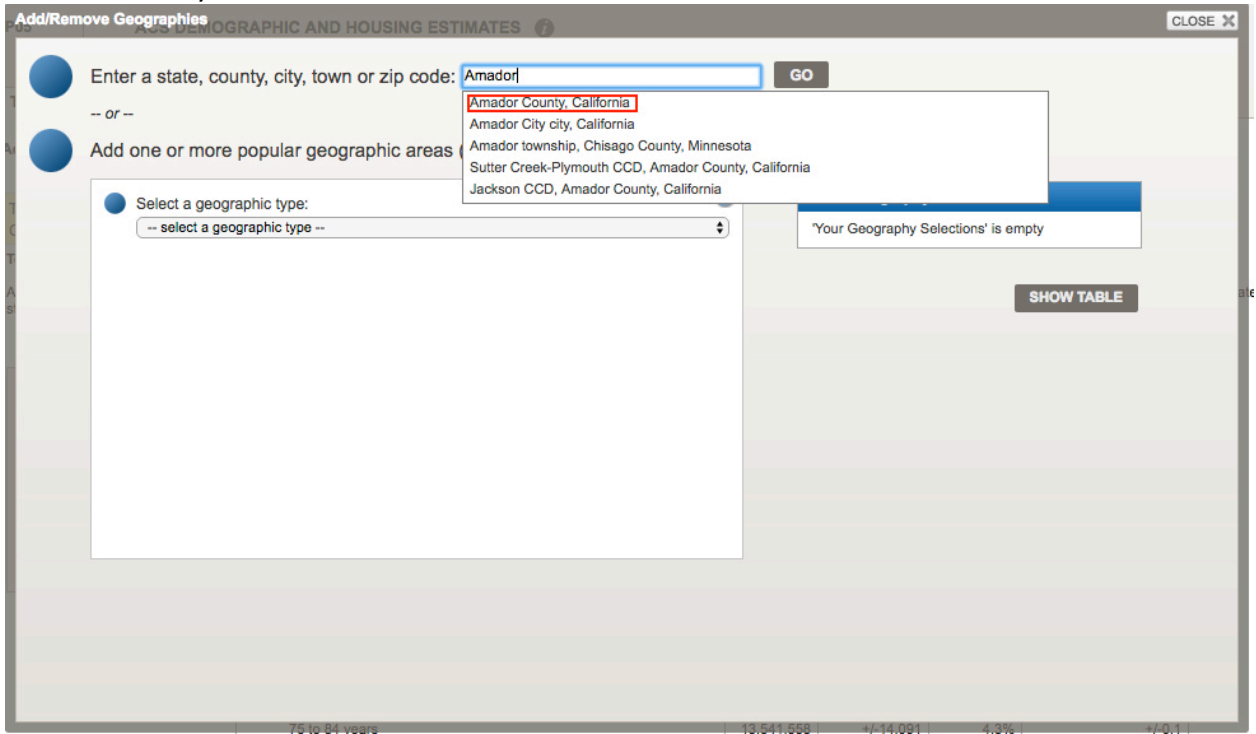
#### Poverty and Income

- To view data in your desired area, click Add/Remove Geographies

Geography	Population	Median Age	Median Income	Median Housing Value
United States	318,509,433	37.6	\$56,538	\$133,997
Alabama	4,779,736	38.1	\$50,151	\$118,214
Alaska	713,732	35.9	\$9,925	\$187,871
Arizona	7,151,502	38.9	\$60,326	\$159,921
Arkansas	3,011,913	39.7	\$41,893	\$109,876
California	38,965,152	36.5	\$70,231	\$248,511
Colorado	5,773,714	37.9	\$72,657	\$200,000
Connecticut	3,588,261	41.6	\$70,327	\$200,000
Delaware	988,289	41.1	\$70,327	\$200,000
Florida	21,538,187	38.1	\$59,223	\$159,921
Georgia	10,519,564	38.1	\$50,151	\$118,214
Hawaii	1,415,872	38.1	\$50,151	\$118,214
Idaho	1,609,378	38.1	\$50,151	\$118,214
Illinois	12,812,508	38.1	\$50,151	\$118,214
Indiana	6,597,884	38.1	\$50,151	\$118,214
Iowa	3,191,868	38.1	\$50,151	\$118,214
Kansas	3,675,969	38.1	\$50,151	\$118,214
Kentucky	4,469,297	38.1	\$50,151	\$118,214
Louisiana	4,603,891	38.1	\$50,151	\$118,214
Maine	1,362,358	41.1	\$70,327	\$200,000
Maryland	6,045,380	38.1	\$50,151	\$118,214
Massachusetts	7,001,421	41.1	\$70,327	\$200,000
Michigan	10,336,413	38.1	\$50,151	\$118,214
Minnesota	5,638,831	38.1	\$50,151	\$118,214
Mississippi	2,967,297	38.1	\$50,151	\$118,214
Missouri	6,154,741	38.1	\$50,151	\$118,214
Montana	1,080,371	38.1	\$50,151	\$118,214
Nebraska	1,938,051	38.1	\$50,151	\$118,214
Nevada	3,080,156	38.1	\$50,151	\$118,214
New Hampshire	1,323,411	41.1	\$70,327	\$200,000
New Jersey	9,128,813	38.1	\$50,151	\$118,214
New Mexico	2,096,628	38.1	\$50,151	\$118,214
New York	20,186,194	38.1	\$50,151	\$118,214
North Carolina	10,417,734	38.1	\$50,151	\$118,214
North Dakota	762,051	38.1	\$50,151	\$118,214
Ohio	11,536,514	38.1	\$50,151	\$118,214
Oklahoma	3,959,349	38.1	\$50,151	\$118,214
Oregon	4,058,931	38.1	\$50,151	\$118,214
Pennsylvania	12,772,351	38.1	\$50,151	\$118,214
Rhode Island	1,058,317	41.1	\$70,327	\$200,000
South Carolina	4,625,738	38.1	\$50,151	\$118,214
South Dakota	814,181	38.1	\$50,151	\$118,214
Tennessee	6,346,105	38.1	\$50,151	\$118,214
Texas	28,189,481	38.1	\$50,151	\$118,214
Utah	3,271,619	38.1	\$50,151	\$118,214
Vermont	623,989	41.1	\$70,327	\$200,000
Virginia	8,001,000	38.1	\$50,151	\$118,214
Washington	7,693,311	38.1	\$50,151	\$118,214
West Virginia	1,852,984	38.1	\$50,151	\$118,214
Wisconsin	5,847,361	38.1	\$50,151	\$118,214
Wyoming	576,851	38.1	\$50,151	\$118,214

- A pop-up window will appear that will allow you to search by state, county, city, town, or zip code.

- Select an option from the drop down menu, and click go. For example, we will select Amador County.



- You will be presented with multiple search results in a new pop-up window.
- Select one option and click Show Table. For this example, we will select Amador County.

**Geography Search Results** ✕

Select one of the following geographic areas: ?

County

- Amador County, California**

County Subdivision

- Ione CCD, Amador County, California
- Jackson CCD, Amador County, California
- Pine Grove-Silver Lake CCD, Amador County, California
- Sutter Creek-Plymouth CCD, Amador County, California

Census Tract

- Census Tract 1.01, Amador County, California
- Census Tract 1.02, Amador County, California
- Census Tract 2, Amador County, California
- Census Tract 3.01, Amador County, California
- Census Tract 3.03, Amador County, California
- Census Tract 3.04, Amador County, California
- Census Tract 4.01, Amador County, California
- Census Tract 4.02, Amador County, California
- Census Tract 5, Amador County, California

School District (Unified)/Remainder

- Amador County Unified School District, California

**CANCEL**

- Now the table is only showing data for the selected area, as opposed to the country.
- To access data from prior years, simply click the year in the left hand table.

Advanced Search - Search all data in American FactFinder

Advanced Search | Table Search

2015 | ACS 2015 American Community Survey 5-Year Estimates

Table #0121

2015 | ACS 2015 American Community Survey 5-Year Estimates

Advanced | Geography | Demographics | Health | Education | Income

The table is associated with subject geography. This table is limited to certain other geographic levels using the search options on the left.

Table #0121: Median household income in the United States, by race and Hispanic or Latino ethnicity, 2010-2015

Although the American Community Survey (ACS) produces population, demographic and housing unit estimates for the United States in the American Community Survey, the estimates are based on a sample of households.

Versions of this table are available for the following years:

2015 ▶

2014

2013

2012

2011

2010

Table #	Subject	2010-2015			
		2010	2011	2012	2013
0121	Median household income	48,400	49,000	49,000	49,000
0121	White	58,000	58,000	58,000	58,000
0121	Black	32,000	32,000	32,000	32,000
0121	Hispanic or Latino	32,000	32,000	32,000	32,000
0121	Asian	68,000	68,000	68,000	68,000
0121	Native Hawaiian or Other Pacific Islander	48,000	48,000	48,000	48,000
0121	Two or more races	48,000	48,000	48,000	48,000
0121	Hispanic or Latino of any race	32,000	32,000	32,000	32,000
0121	White of any race	58,000	58,000	58,000	58,000
0121	Black of any race	32,000	32,000	32,000	32,000
0121	Hispanic or Latino of any race	32,000	32,000	32,000	32,000
0121	Asian of any race	68,000	68,000	68,000	68,000
0121	Native Hawaiian or Other Pacific Islander of any race	48,000	48,000	48,000	48,000
0121	Two or more races of any race	48,000	48,000	48,000	48,000
0121	Hispanic or Latino of any race	32,000	32,000	32,000	32,000
0121	White of any race	58,000	58,000	58,000	58,000
0121	Black of any race	32,000	32,000	32,000	32,000
0121	Hispanic or Latino of any race	32,000	32,000	32,000	32,000
0121	Asian of any race	68,000	68,000	68,000	68,000
0121	Native Hawaiian or Other Pacific Islander of any race	48,000	48,000	48,000	48,000
0121	Two or more races of any race	48,000	48,000	48,000	48,000

- Use the same procedure to view other ACS data, such as General Housing Characteristics or Educational Attainment, use the Table #s specified in the “Data Sources & Notes” document, or browse available indicators on the American FactFinder site.
- If you’d like to see how various indicators have changed over time, you can click through each year and compare the values.

### Using AskCHIS

AskCHIS is a system that provides access to search data collected by The California Health Interview Survey (CHIS). CHIS covers many different health topics and is conducted on a yearly basis.

- Go to: <http://ask.chis.ucla.edu/AskCHIS/tools/layouts/AskChisTool/home.aspx#/geography>
  - You will need an account to use the website, but account registration is available to anyone.
- Select the county you would like information for. In this example, we will select Napa County. Click the orange “Next” button when you are done.

Geographic Area	Topic	Compare Topics	Limit Population	Years	Get Data
County or county group (Napa) <input type="text"/>	<b>required</b>	optional	optional	<b>required</b>	<input type="button" value="Get Data"/>

### Select a Geographic Area

Search all of California

Counties and Regions: Los Angeles County Service Plan Areas (SPA) | San Diego County Health Regions

**Northern / Sierra Counties**

- Butte
- Humboldt
- Mendocino
- Tehama, Glenn, Colusa
- Yuba
- Tuolumne, Calaveras, Amador, Inyo, Mariposa, Mono, Alpine
- Shasta
- Del Norte, Siskiyou, Lassen, Trinity, Modoc, Plumas, Sierra
- Lake
- Sutter
- Nevada

**Bay Area Counties**

- Santa Clara
- Contra Costa
- San Mateo
- Solano
- Napa
- Alameda
- San Francisco
- Sonoma
- Marin

- Next, select the Health Topic you are interested in. You can either type in a keyword, or click “Select a Category” for a list of topics. We will choose “Health Conditions (not Cancer)” for this example.

Geographic Area	Topic	Compare Topics	Limit Population	Years	Get Data
County or county group (Napa) <input type="text"/>	<b>required</b>	optional	optional	<b>required</b>	<input type="button" value="Get Data"/>

### Select a Topic

Search |

Search for a topic

Geographic Area    Topic    Compare Topics    Limit Population    Years    Get Data

County or county group (Napa)    required    optional    optional    required

### Select a Topic ⓘ

Search    Select a Category

- Health Status
- Health Conditions (not Cancer)**
- Cancer and Cancer Prevention
- Health Behaviors
- Women's Health
- Oral Health
- Access & Utilization
- Health Insurance
- Mental and Emotional Health
- Public Program Participation
- Demographic
- Place of Residence
- Injury & Violence Prevention
- Child Care/Parental Involvement
- Elder Health
- Community Involvement

Select a category to the left to view subcategories

Select a category to the left to view subcategories

- Another list will appear on the right, and you can choose a subcategory. We will choose “Diabetes.”

Search    Select a Category

- Health Status
- Health Conditions (not Cancer)**
- Cancer and Cancer Prevention
- Health Behaviors
- Women's Health
- Oral Health
- Access & Utilization
- Health Insurance
- Mental and Emotional Health
- Public Program Participation
- Demographic
- Place of Residence
- Injury & Violence Prevention
- Child Care/Parental Involvement
- Elder Health
- Community Involvement

**Health Conditions (not Cancer)**

- ADD/ADHD
- Arthritis
- Asthma
- Child Development
- Cholesterol
- Diabetes**
- Heart Disease
- High Blood Pressure
- Seizure Disorder / Epilepsy
- Stroke
- Lung Disease
- Allergy

Select a category to the left to view subcategories

- A final list will appear on the right with data pertaining to the category you have selected. Choose one and click “Next.”

The screenshot shows a web application interface for selecting health conditions. On the left, there is a sidebar with a search bar and a 'Select a Category' dropdown. The sidebar lists various health categories, with 'Health Conditions (not Cancer)' currently selected. Under this category, 'Diabetes' is highlighted. The main content area displays a list of diabetes-related conditions, each with a radio button for selection. The 'Ever diagnosed with diabetes' option is selected. Below the list, there are navigation buttons: '< Previous' and 'Next >'. The 'Next >' button is highlighted with a red box.

- This page gives Common Comparisons such as insurance coverage and gender. If you wish to view data for these categories, you can select one. For this example, we will skip this feature.

The screenshot shows a web application interface for comparing a topic. At the top, there is a navigation bar with five tabs: 'Geographic Area', 'Topic', 'Compare Topics', 'Limit Population', and 'Years'. Below this, there is a table with columns for these categories. The 'Topic' column is selected, and 'Ever diagnosed with diabetes' is entered. Below the table, there is a 'Compare a Topic' section with a search bar and a 'Select a Category' dropdown. The 'Common Comparisons' section shows two options: 'Currently insured' and 'Gender', each with radio buttons for selection.

- On the next page you can select options to further limit your population data. In this example, we are going to limit our population data to people aged 40-75 and click "Next." You can also skip this section by clicking "Skip."

Geographic Area    Topic    Compare Topics    Limit Population    Years    [Get Data](#)

County or county group (Napa)    Ever diagnosed with diabetes    optional    Age in years ( 40 - 75 )    2015

### Limit Population

**Age in years**

include all ages

Select an age range:

40 - 75

**Race - OMB/Department of Finance**

include all races

Latino

White (non-latino)

African American (non-latino)

American-Indian/Alaska Native (non-latino)

Asian (non-latino)

Native Hawaiian/Pacific Islander (non-latino)

Two or More Races (non-latino)

**Federal Poverty Level - Continuous**

include all FPL

Select a FPL range:

From - To

**Gender**

include both genders

Male

Female

- The final page shows your data results. There are several different ways to view the data.
  - The "Data" tab gives a table of data.

Geographic Area    Topic    Compare Topics    Limit Population    Years    [Get Data](#)

County or county group (Napa)    Ever diagnosed with diabetes    optional    Age in years ( 40 - 75 )    2015

### Your Data Results

[Data](#)   [Charts](#)   [Trends](#)    [Email Results](#)   [Export](#)   [Print](#)

Compare Geography    Adjust layout

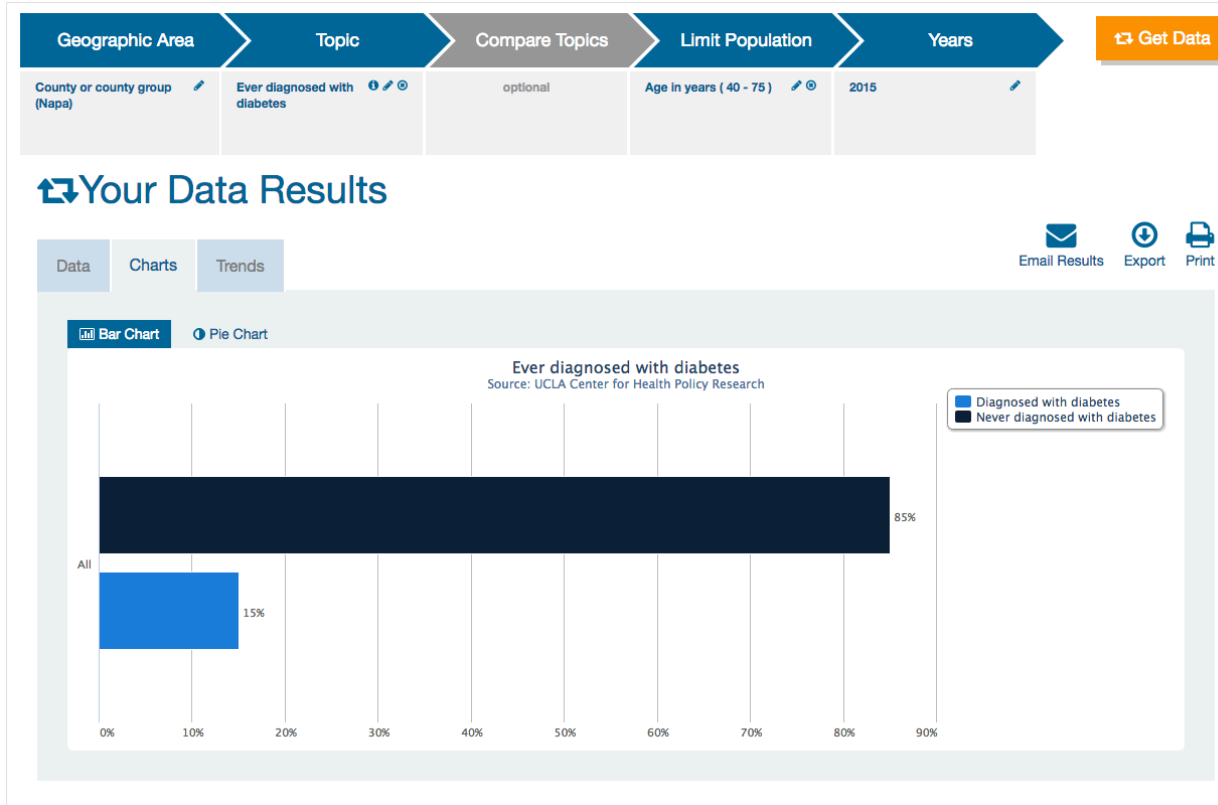
Ever diagnosed with diabetes	All
Diagnosed with diabetes	15.0% * ( 0.0 - 41.3 ) 9,000
Never diagnosed with diabetes	85.0% * ( 58.7 - 100.0 ) 48,000
Total	100.0% 57,000

\* statistically unstable  
95% confidence intervals displayed in table  
Source: 2015 California Health Interview Survey

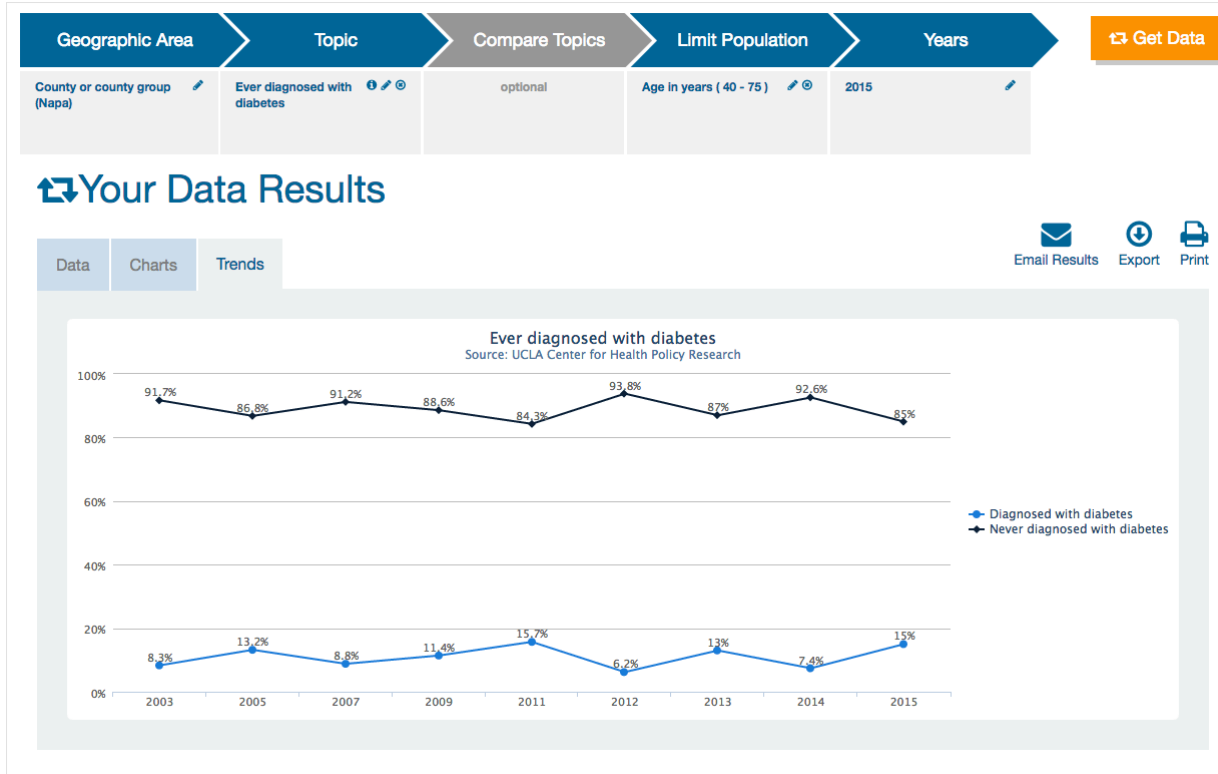
**Notes**  
If your table includes 2001 data, it may exclude survey responses for which answers are unknown. For all other years, unknown answers are imputed.

- Select the "Charts" tab. You can choose between a Bar Chart and a Pie Chart.

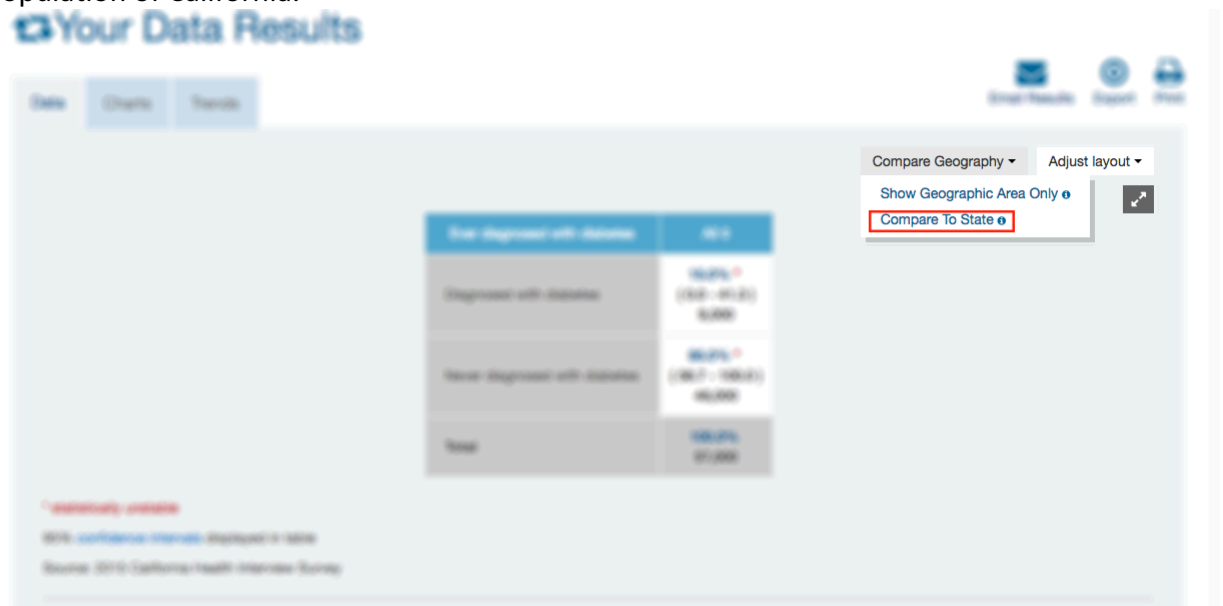




- Select the “Trends” tab. Here you can see the trends of the condition you selected over the years (if available).



- In the Data section, there is a drop-down menu on the right titled “Compare Geography.” Select “Compare to State” to compare the results to that of the entire population of California.



- On the right side of the page, you can select “Export” to export the data as an Excel file or “Print” to print the results.



### **Using Feeding America’s Map the Meal Gap**

*Feeding America’s Map the Meal Gap is an interactive map that shows two types of community-level data: county-level food insecurity estimates by income level and food budget shortfall as reported by food insecure individuals.*

- Go to: <http://map.feedingamerica.org/county/2014/overall>
- Use the last drop-down menu to select the state you are interested in.

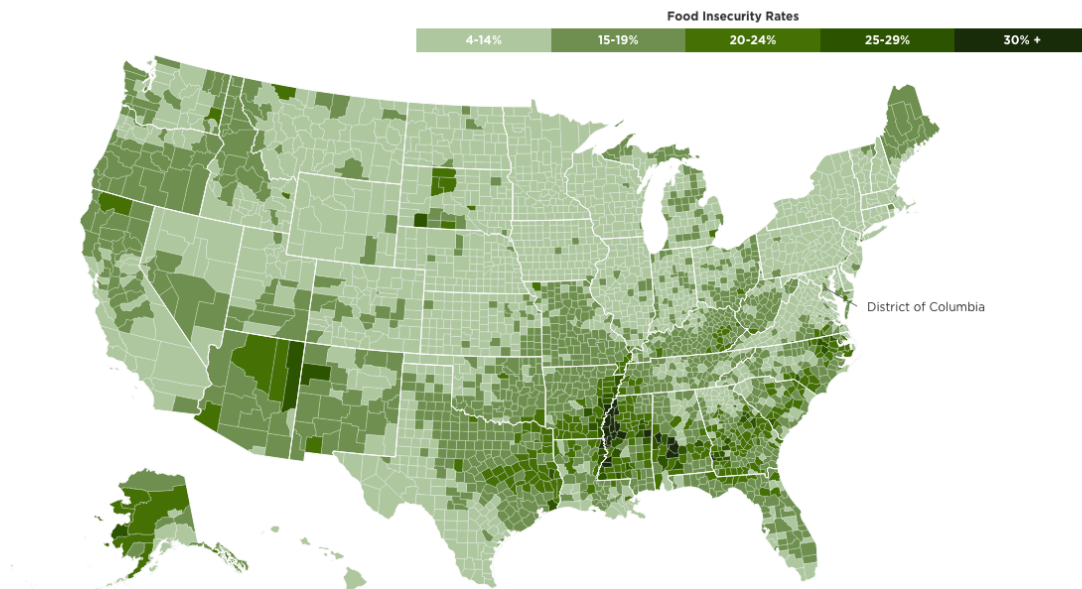
Change the selections below or simply click on the map to start exploring.

Map Type

Year

Demographic

Location



- Select a county or hover over the counties with your mouse to see the data.

## Food Insecurity in Alameda County

Change the selections below or simply click on the map to start exploring.

Map Type

Year

Demographic

Location

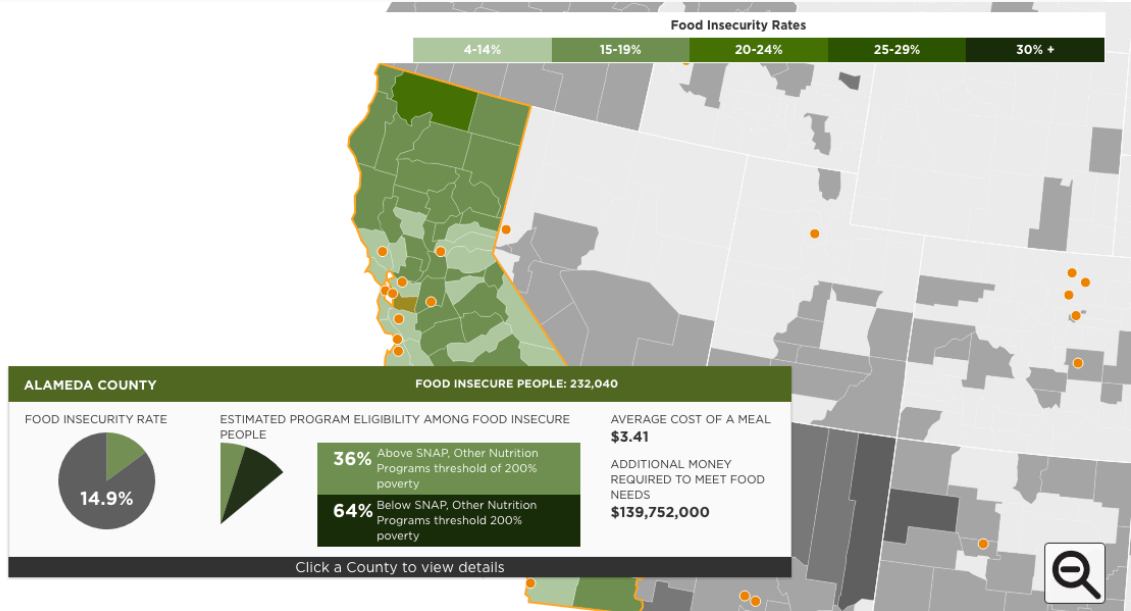
or

Year: 2014

Demographic: Overall

Location: California

All Counties or All Organizations



- You can also select an organization to view data for the county they serve, food insecurity rate in that area, and contact info at the bottom of the page.

Change the selections below or simply click on the map to start exploring.

Map Type: County

Year: 2014

Demographic: Overall

Location: California

All Counties or Alameda County Community Food Bank

County 2014 Overall California Alameda County Community Food Bank

FOOD INSECURE PEOPLE IN THIS SERVICE AREA: **232,040**

FOOD INSECURITY RATE IN THIS SERVICE AREA: **14.9%**

ABOUT ALAMEDA COUNTY COMMUNITY FOOD BANK

ADDRESS	1 COUNTIES SERVED	CONTACT
7900 Edgewater Drive Oakland California 94621	Alameda	Website

**Using the Food Access Research Atlas**

The USDA Food Access Research Atlas is a map representing supermarket availability and food access by census tracts. Maps can be created using different indicators of food availability, such as by income level and distance from a supermarket.

- Go to: <https://www.ers.usda.gov/data/fooddesert>
- If you would like an Excel file containing data on all research tracts, you can click “Download the Data.”

- Click “Food Access Research Atlas Data Download” and download the Excel file.
- NOTE: This Excel file contains data for **every** county in the entire United States. You will have to look for the county you want by searching the Excel file.
- If you would like to view the map instead, click the green “Enter the Map” button.

# Food Access Research Atlas

## The Food Access Research Atlas

- Presents a spatial overview of food access indicators for low-income and other census tracts using different measures of supermarket accessibility
- Provides food access data for populations within census tracts, and
- Offers census tract-level data on food access that can be downloaded for community planning or research purposes.

### What can you do with the Atlas?

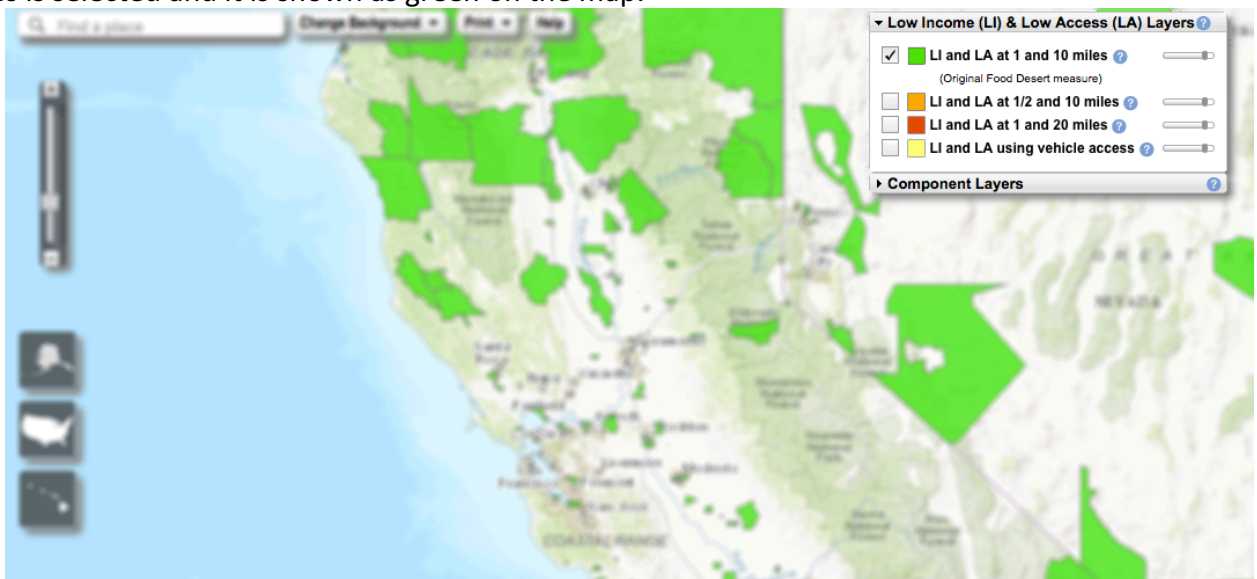
- Create maps showing food access indicators by census tract using different measures and indicators of supermarket accessibility
- View indicators of food access for selected subpopulations, and
- Download census tract-level data on food access measures.

Note: For information about data sources and updates/revisions to the data and mapping application, see [Documentation](#) and [Download the Data](#).

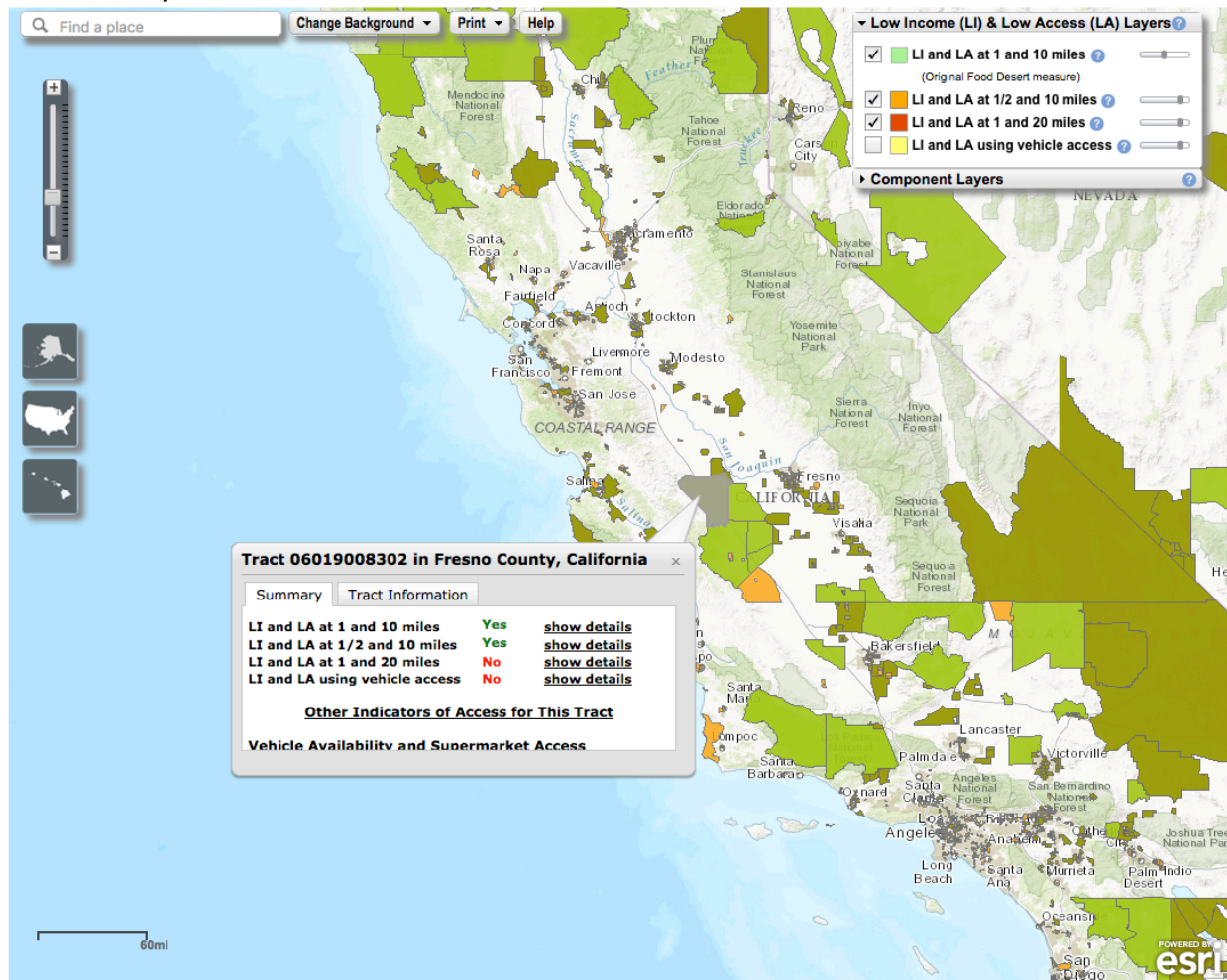
Enter the Map

The [Food Environment Atlas](#) provides a wider set of statistics on food stores, health and well-being, and community characteristics for all communities in the United States than the Food Access Research Atlas.

- You can search for a place in the search bar at the top, or you can also zoom in on the area you are interested in.
- In the top right corner of the map, there is table where you can choose what data you want to see in the form of layers on the map. By default, Low Income (LI) and Low Access (LA) at 1 and 10 miles is selected and it is shown as green on the map.



- In this example, we will also add the orange LI and LA at 1/2 and 10 miles layer and the red LI and LA at 1 and 20 miles.
  - Some layers overlap with each other, so we may not be able to see, for instance, the red layers.
  - Use the sliders next to the layer options to adjust the opacity of the layers on the map. We can lower the green layer if we want to see the red or orange layers more clearly.
- You can select a tract by clicking on it on the map. A dialog box will appear and give Summary information and Tract Information.



## APPENDIX 3: RELEVANT FEEDING AMERICA RESOURCES

### *Conferences:*

- Agency, Capacity, Programs, and Nutrition
- Finance, Technology, and HR
- Food Sourcing and Operations
- Mobilizing the Public
- Network Leadership Conferences
- National Anti-Hunger Policy
- New Executive Director Orientation

### *Discussion Boards on the following topics:*

- Administration and Operations
- Agency Partnerships
- Collaborating for Clients
- Environmental Peer Groups (EPG)
- Food
- Funds and Donors
- General
- Government Relations, Advocacy and Public Policy
- HungerNet
- Knowledge and Learning
- Marketing and Communications
- National Council
- Programs
- Research and Analysis
- State Associations
- Site Contents

### *Online Courses (Feeding America University):*

- Course catalog from food safety and purchasing to grant writing and accounting

### *Newsletters:*

- Communications resource updates newsletter
- Top hunger news story
- Network connection
- Programs newsletter
- Legislative newsletter
- Data newsletter
- Research newsletter
- Corporate donor newsletter
- Food safety recall



*Webinars:*

- Monthly programs webinar
- Retail store donation call
- Food sourcing webinar covering 6 topics bimonthly
- Corporate partnerships/cause marketing monthly webinar
- PR/Marketing monthly webinar
- Monthly legislative updates

*Documents, Written Resources, and Weblinks:*

Available on HungerNet by department:

- Advocacy & Policy
- Agencies, Partners, & Programs
- Development
- Finance, Technology, & HR
- Food Sourcing & Operations
- Marketing & Communications
- Member Business Solutions
- Member Contracts & Auditing
- Org Leadership
- Research & Network Data