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METROWEST MOVES, A MASS IN MOTION INITIATIVE



**FRAMINGHAM
COMMUNITY
FOOD
ASSESSMENT**



SPRING 2018



”

**IF YOU
CAN'T FEED
A HUNDRED
PEOPLE,
THEN JUST
FEED ONE**

“

MOTHER TERESA

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SPRING 2018

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The Greater Framingham Community Food Assessment wouldn't have been possible without the constant support, guidance, and visions of many organizations. MetroWest Moves would like to thank the many stakeholders who provided their input and contributed to the collection, analysis, and depiction of data for this project, including:

- City of Framingham
 - Framingham Health Department
 - Community and Economic Development
- Greater Framingham Hunger Relief Network, including:
 - A Place to Turn
 - Daniel's Table
 - Edward M. Kennedy Community Health Center
 - Framingham Health Department
 - Hudson Health Department
 - Gluten Free Food Bank
 - Greater Boston Food Bank
 - Jewish Family Services of MetroWest
 - Lovin' Spoonfuls
 - MetroWest Health Foundation
 - MetroWest YMCA
 - Natick Service Council
 - Salvation Army
 - South Middlesex Opportunity Council
 - St. Bridget's Food Pantry
 - United Way of Tri-County
 - Women, Infants, and Children
- Hudson Health Department
- Metropolitan Area Planning Council

Last but certainly not least, we would like to thank the community members who participated and provided their valuable insights into the Community Food Assessment (CFA).

Additionally, none of the research contained in this CFA would have been possible without the generous grant provided by the State of Massachusetts Department of Public Health for the Mass in Motion program.

Executive Summary

Everyone needs food. Food is on the short list of things that people literally cannot live without. Without access to healthy food, people are likely to suffer worse physical and mental health, have an increased likelihood of chronic disease, and have a lower quality of life. Unfortunately, not everyone is able to choose to eat a well-balanced and nutritious diet, if they can even afford enough food at all.

The Framingham Community Food Assessment was inspired by this fact: the idea that many people who live in Framingham are not able to access the food they need to be healthy on a daily basis, and actions need to be taken to correct this issue. In order to understand how to improve access to nutritious foods and reduce the social and health impacts of poor nutrition, the barriers that residents face in accessing healthy foods need to be identified. The CFA consists of focus groups with low-income community members, interviews with service providers, a survey with nearly 1,300 respondents, research from publications surrounding the impacts of food insecurity, and quantitative data regarding demographics, education, employment, and health in Framingham and the United States.

The CFA confirmed that the biggest cause of food insecurity in Framingham is the systemic lack of economic opportunity for low-income people. Money proves to be the biggest determinant of whether or not someone can access most services, including food and all the benefits that eating a balanced and nutritious diet can provide. Individuals of low-income are also less likely to own a car, often live in areas of the city where grocery stores are not in walking distance, and public transportation isn't feasible. Therefore, many people resort to nearby convenience stores that have less options and higher prices. The conditions that have created wealth disparities and actions to make Framingham more equitable in order to improve food access and quality of life are more broadly discussed at length in this assessment.

The difference between the northern portion and the southern portion of the city in terms of wealth, health outcomes, and food access is dramatic. Residents in South Framingham report having a harder time accessing food, experience more barriers to consistently consuming healthy foods, and report worse physical and mental health. South Framingham is also where the largest percentage of non-white and first-generation residents live, where people make the least amount of money, and where people have the lowest educational attainment. The disparities between South and North Framingham are explored extensively in this assessment by drawing on the broader economic trends in the United States and how they have shaped Framingham's economy, and therefore people's access to food.

In order to correct the economic forces that cause food insecurity, innovative practices and collaboration among traditional and non-traditional partners will be required. The role of government is to implement policies that are equitable in that they address the needs of all citizens and aim to ensure a higher quality of life for everyone. While one city government does not have the ability to supersede a national economic system, they do have the ability and responsibility to push the needle of what a municipality can do to ensure that individuals born into low-income families have more upward mobility. With a large business presence, proximity to social services, health care, universities, and human capital, Framingham has the opportunity to be a positive example for other small cities in this regard.

This assessment concludes with a series of recommendations where the city and its' partners can aim to reduce food insecurity and improve people's ability to access healthy foods. Each action falls under one of the following categories:

- Organize a coalition to work on improving food access
- Increase the number of healthy food access points in South Framingham
- Reduce the SNAP gap by maximizing enrollment and increasing access points for recipients
- Improve transportation accessibility for low-income individuals
- Improve outreach and communication efforts to ensure that people know what food-related services exist in Framingham
- Reduce the barriers to community agriculture as a way to reduce Framingham residents' reliance on external food sources and allow them the freedom to grow what they want
- Create a coalition whose main goal is to improve the income mobility of low-income residents in Framingham
- Maintain and expand redistribution efforts
- Continue to conduct assessments in order to improve Framingham's food system

Introduction

The Framingham Community Food Assessment was a Mass in Motion initiative launched as a way to understand the root causes of food insecurity, with a focus on identifying the actions that can be taken to improve people's ability to access healthy foods. The Office of Disease Prevention and Health Promotion's Healthy People 2020 Initiative defines food insecurity as "the disruption of food intake or eating patterns because of lack of money and other resources" (U.S. Office of Disease Prevention and Health Promotion, 2018).

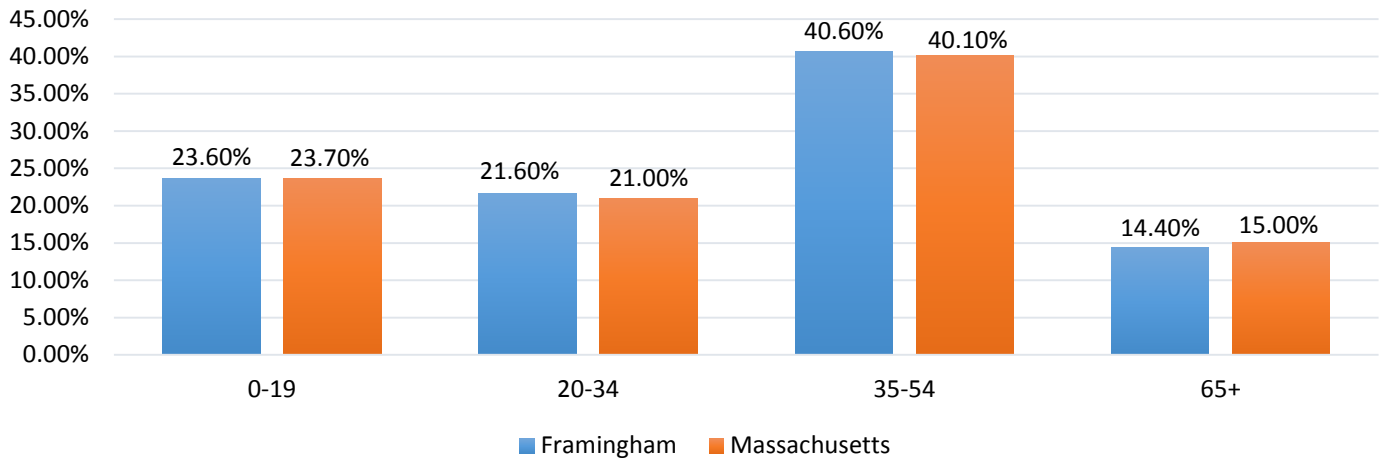
This assessment will show where existing food access points and food production sites are, with the primary focus being food insecurity. As a result of land use policies, urbanization, and the rise of large-scale agricultural production, the vast majority of the food that people consume in Framingham does not come from the city itself. People in Framingham generally do not grow the majority of their own food, especially in the southern, more urban portion of the city where people don't own enough property to grow their own food, and open space is harder to come by. Therefore, this assessment focuses on the broader social and economic processes that drive how and which foods are consumed.

The CFA began on the hypothesis that the biggest leverage point for the health of Framingham's food system was food security, and this hypothesis is tested and confirmed throughout this document.

Framingham Community Profile

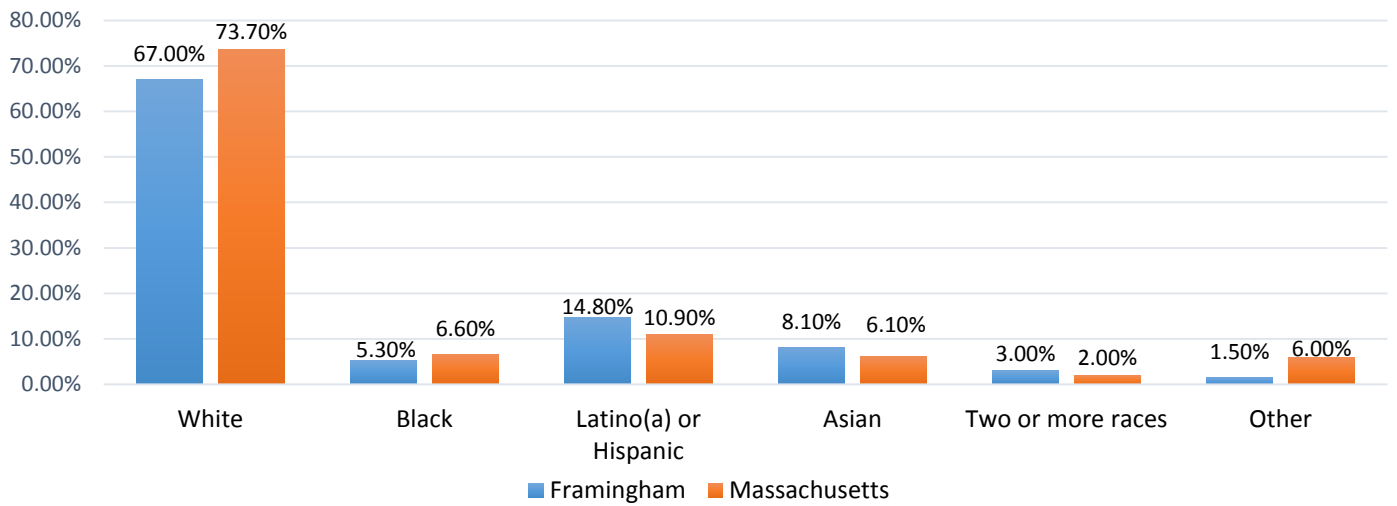
In order to understand the dynamics of the food system and food insecurity in Framingham, it is important to take note of the general demographic makeup of the city. This section will compare the demographic and public health measures of Framingham to those of the Massachusetts statewide average, drawing on existing reports and census data.

Age Distribution



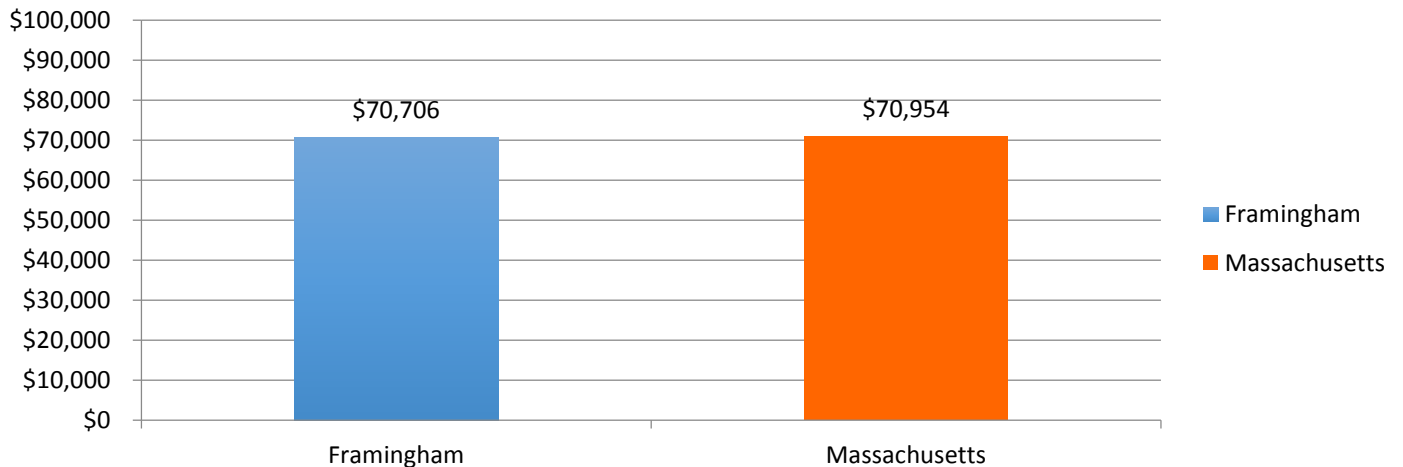
Source: American Community Survey 2012-2016 Estimates

Racial and Ethnic Demographics



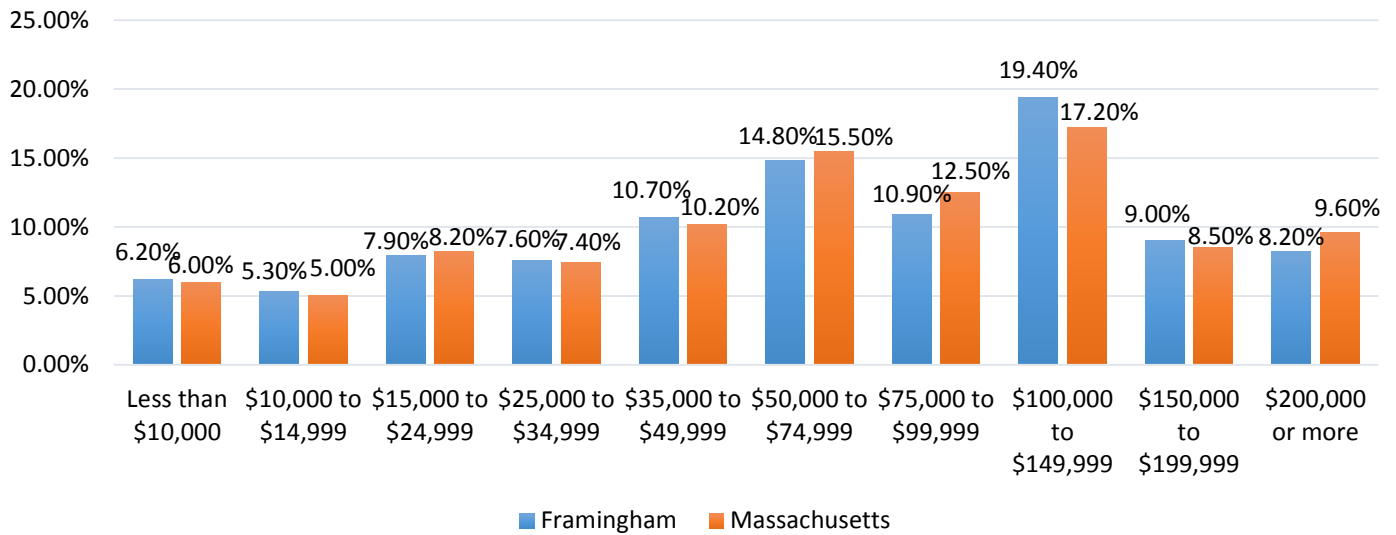
Source: American Community Survey 2012-2016 Estimates

Median Household Income



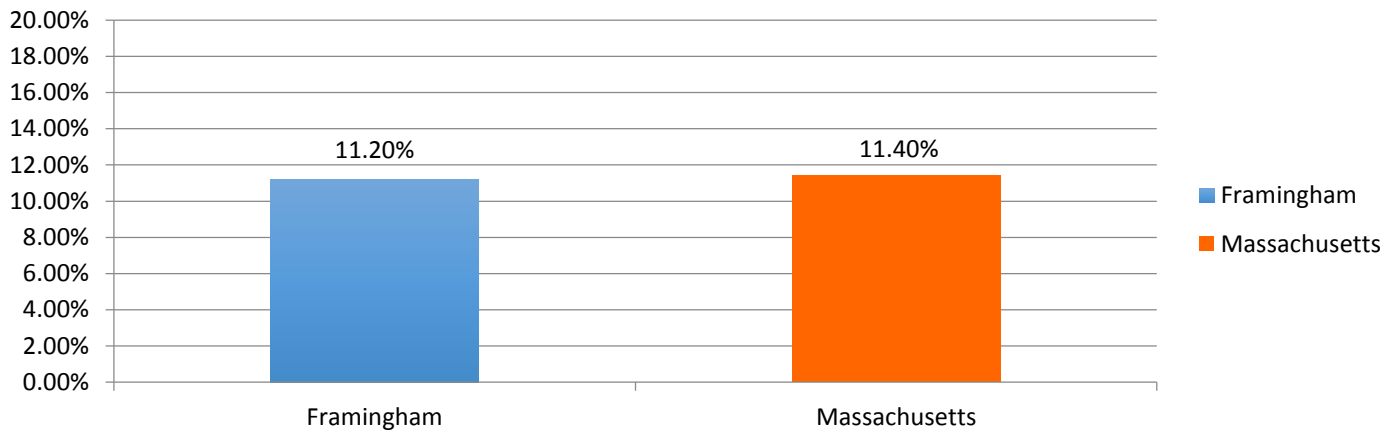
Source: 2012-2016 American Community Survey Estimates

Income Distribution



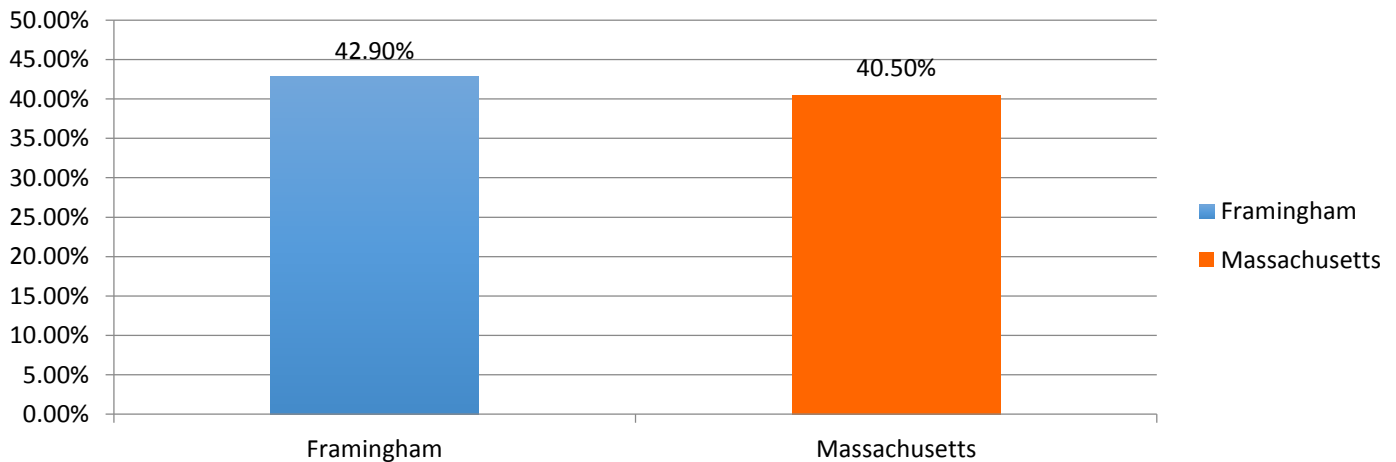
Source: 2012-2016 American Community Survey Estimates

Poverty Rate



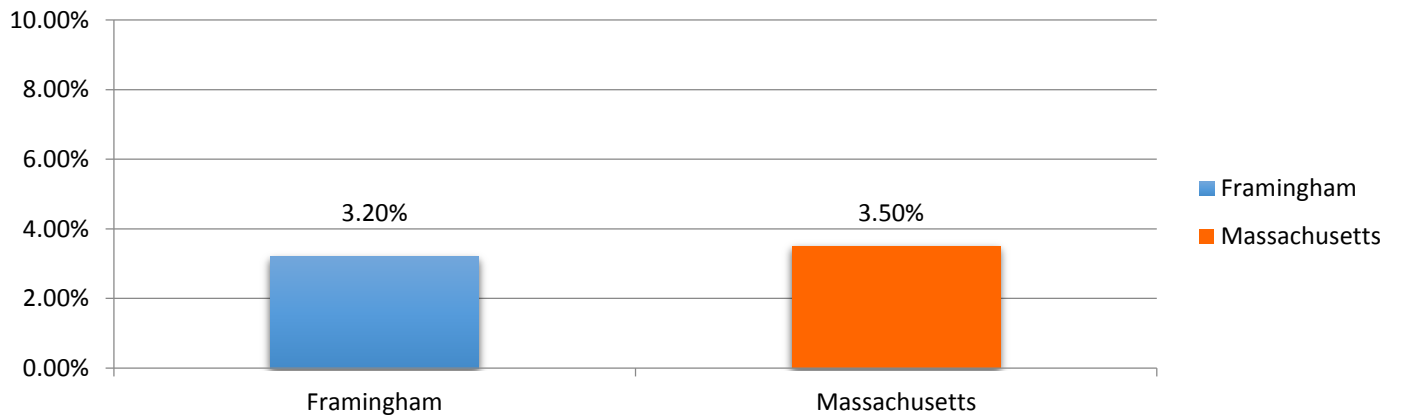
Source: 2012-2016 American Community Survey Estimates

Households where Housing Costs are 35% or more of Household Income



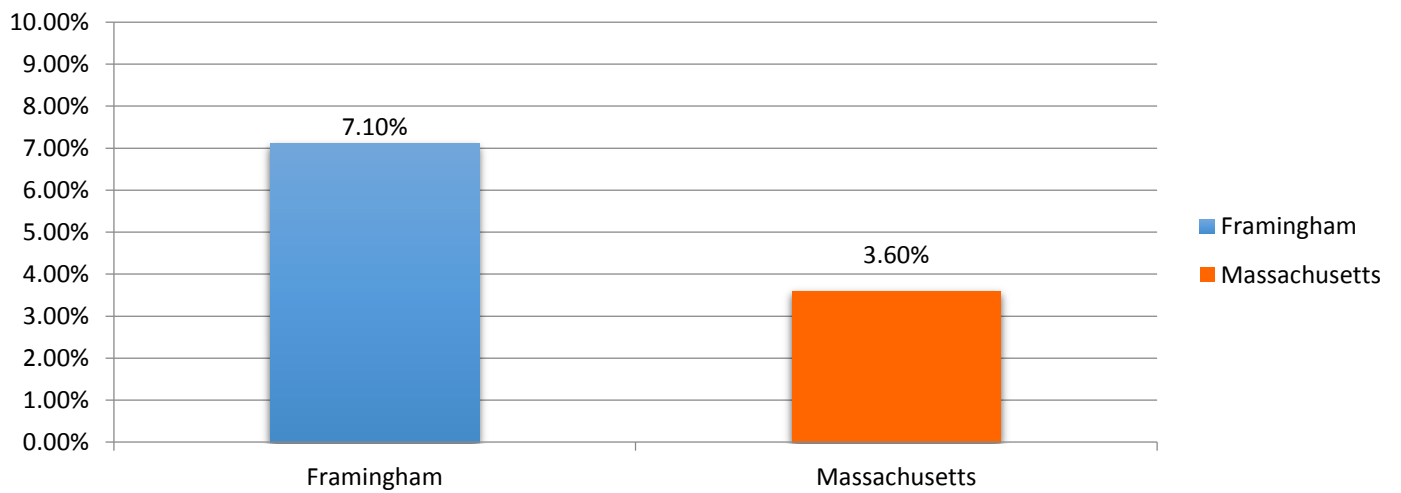
Source: 2012-2016 American Community Survey Estimates

Unemployment Rate



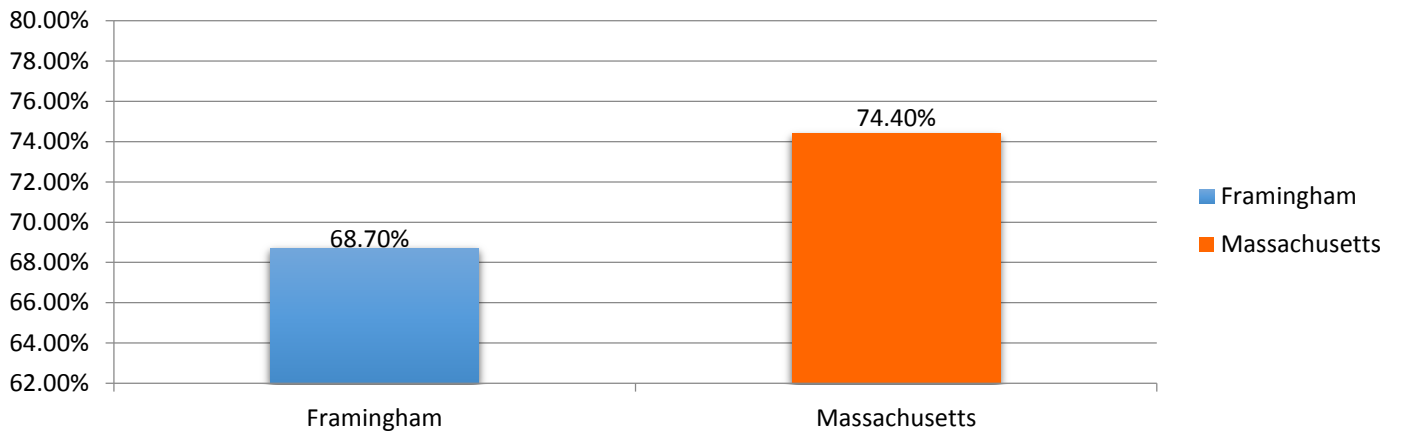
Source: Bureau of Labor Statistics March 2018 Employment Statistics

Uninsured Rates



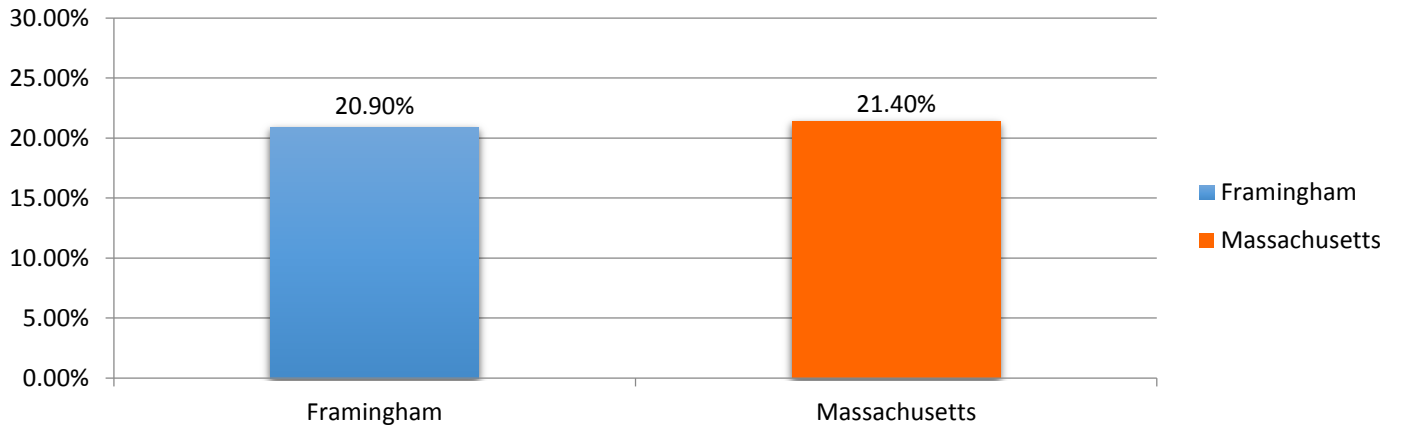
Source: 2012-2016 American Community Survey Estimates

Percent of Adults eating fewer than 5 Servings of Fruits and Vegetables Daily



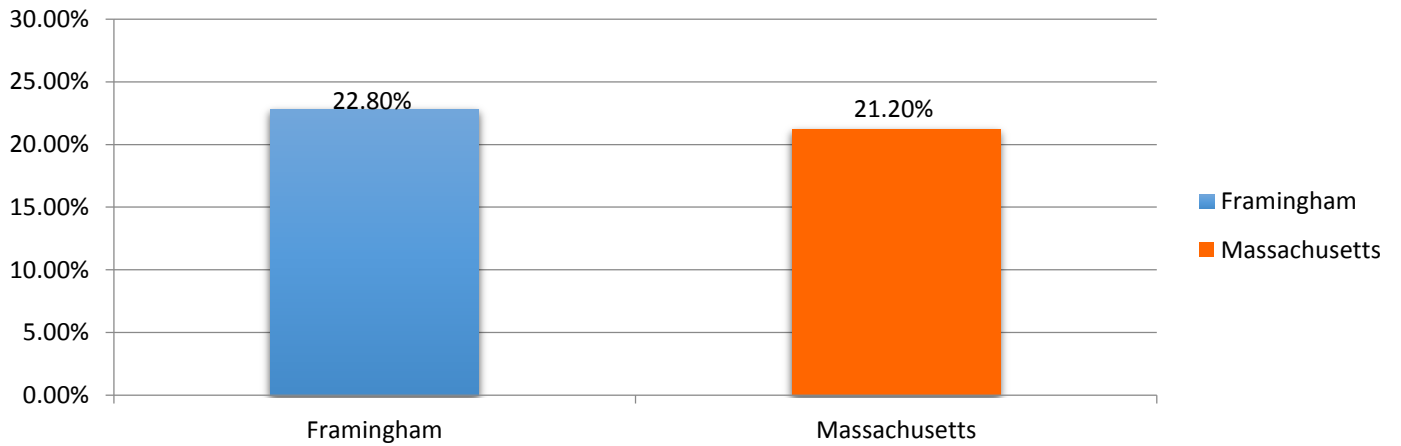
Source: MetroWest Health Foundation, Behavioral Risk Factor Statistical Estimates, Clinical Tests and Care, 2005- 2011

Obesity



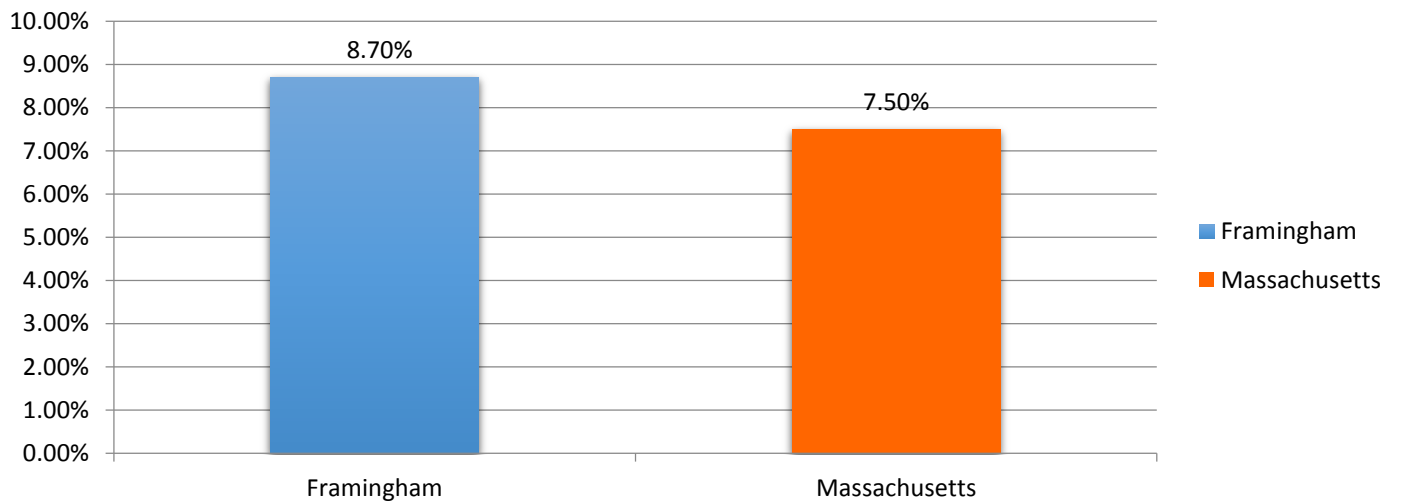
Source: MetroWest Health Foundation, Behavioral Risk Factor Statistical Estimates, Clinical Tests and Care, 2005- 2011

Adults Lacking Regular Physical Activity



Source: MetroWest Health Foundation, Behavioral Risk Factor Statistical Estimates, Clinical Tests and Care, 2005- 2011

Diabetes Prevalence



Source: MetroWest Health Foundation, Behavioral Risk Factor Statistical Estimates, Clinical Tests and Care, 2005- 2011

On the surface, the general demographics of Framingham shouldn't raise any great concern in comparison to the statewide averages. However, Framingham struggles with systemic economic inequality, as most communities in Massachusetts and the United States do.

A Tale of Two Cities: North Framingham & South Framingham

Framingham has two zip codes: North Framingham (01701), and South Framingham (01702). These two areas of the city are drastically different places by most statistical measures, including: health outcomes, incomes, educational attainment, racial and ethnic composition, and development patterns. Therefore, people's ability to access the food they need on a consistent basis varies as well.

South Framingham is a more urban, young, diverse, and lower income area in contrast to North Framingham, which consists of more open space, and an older, less racially diverse, wealthier population. The data below highlights some of the stark differences between these two parts of the city¹.

	North Framingham 01701	South Framingham 01702
% of residents identifying as white	81.5%	52.4%
% of residents identifying as Hispanic or Latina(o)	4.8%	20.3%
Median age	44.7	34.3
Median Household Income	\$100,788	\$51,137
Individuals below the poverty level	4.6%	17.0%
Percent with a high school degree or higher	95.7%	83.2%
Working in service occupations	16.7%	28.4%
Vacant housing units	2.8%	3.5%
Owner-occupied housing	79.6%	33.2%
Housing units consisting of 20+ units	8.8%	20.2%
No health insurance coverage	3.2%	9.4%
Received SNAP benefits in last 12 months	3.9%	16.6%

¹ Maps will be shown throughout this assessment to depict the differences between North and South Framingham. Note that the border between the two runs along Route 9, which is visible in the majority of the maps.

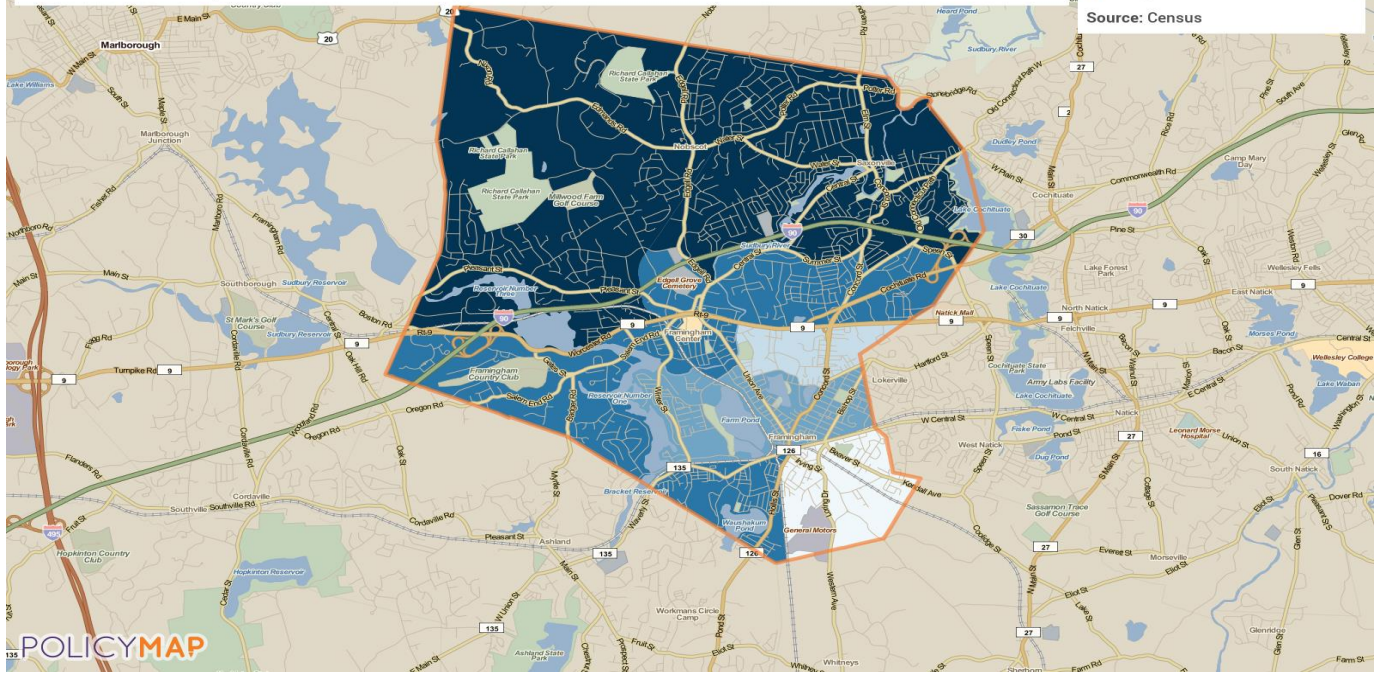
Estimated typical (median) income of a household between 2012-2016.

Estimated median household income in the past 12 months, as reported between 2012-2016. A household includes all the people who occupy a housing unit as their usual place of residence. Medians were suppressed in cases where the sample of the average was less than 10 of the unit that is being described (eg, households, people, householders, etc). Such areas are represented as having 'Insufficient Data' in the map. ACS employs values to indicate top and bottom ranges of income. A value of 250,001 indicates a value of 250,000 or greater, whereas a value of 2,499 indicates a value of 2,500 or less.

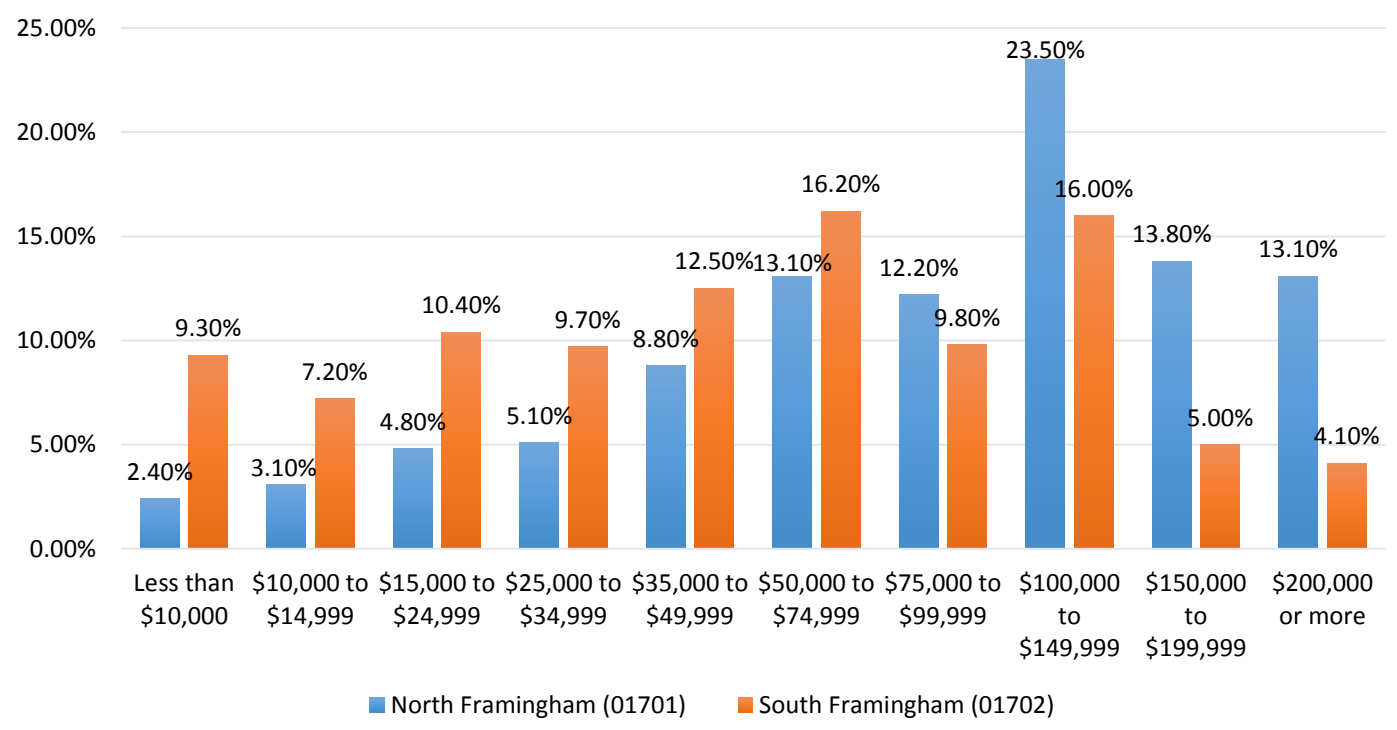
Median Household Income
Year: 2012-2016
Shaded by: Census Tract, 2010

- Insufficient Data
- \$35,813 or less
- \$35,814 - \$46,842
- \$46,843 - \$58,835
- \$58,836 - \$78,210
- \$78,211 or more

Source: Census



Income Distribution



Source: 2012-2016 American Community Survey Estimates

Estimated percent of all people who were Hispanic between 2012-2016.

Estimated percent of the population that is Hispanic or Latino between 2012-2016. Estimated percentage calculations are suppressed in cases where the denominator of the calculation was less than 10 of the unit that is being described (e.g., households, people, householders, etc). Such areas are represented as having 'Insufficient Data' in the map. Denominators for percentage calculations were created by summing all of the component data items in a particular dataset.

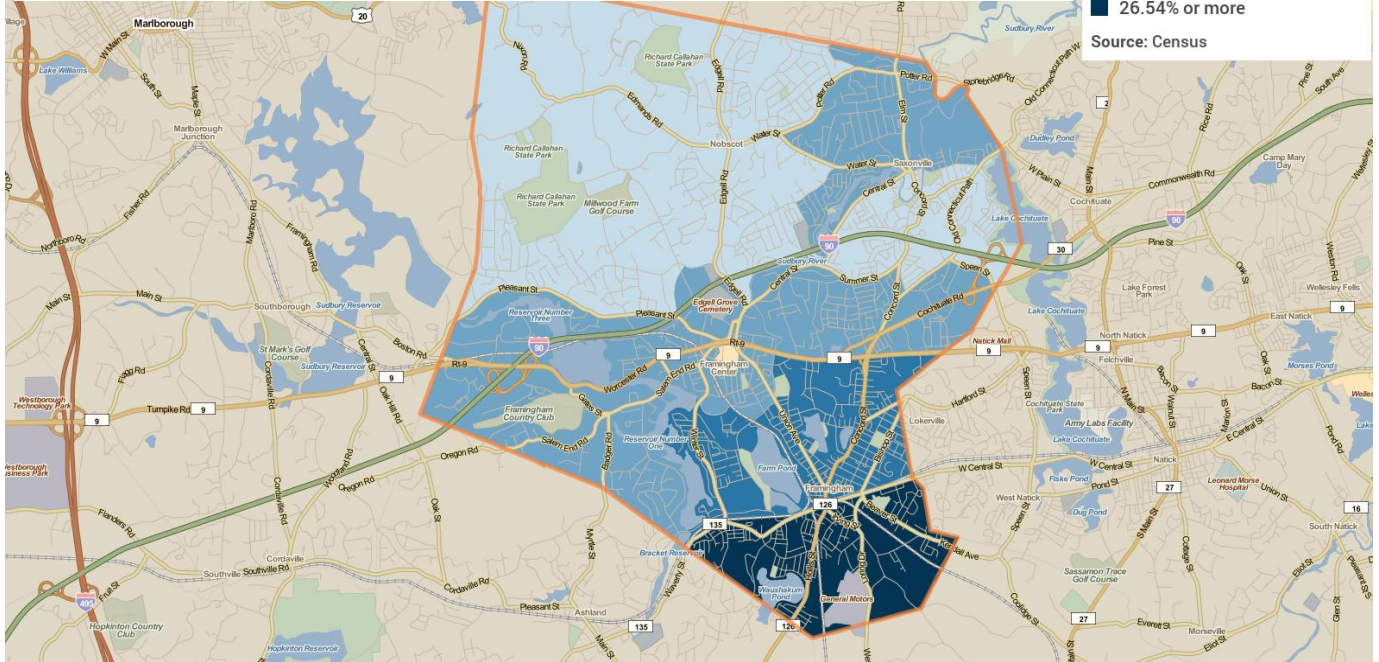
Percent Hispanic Population

Year: 2012-2016

Shaded by: Census Tract, 2010

- Insufficient Data
- 1.91% or less
- 1.92% - 4.82%
- 4.83% - 10.55%
- 10.56% - 26.53%
- 26.54% or more

Source: Census



Estimated percent of all people who were 'foreign born' as of 2012-2016.

Estimated percent of population who are foreign born, as reported between 2012-2016. The U.S. Census defines 'foreign born' to refer to anyone who is not a U.S. citizen at birth. This includes naturalized U.S. citizens, lawful permanent residents (immigrants), temporary migrants (such as students), humanitarian migrants (such as refugees), and persons illegally present in the United States.

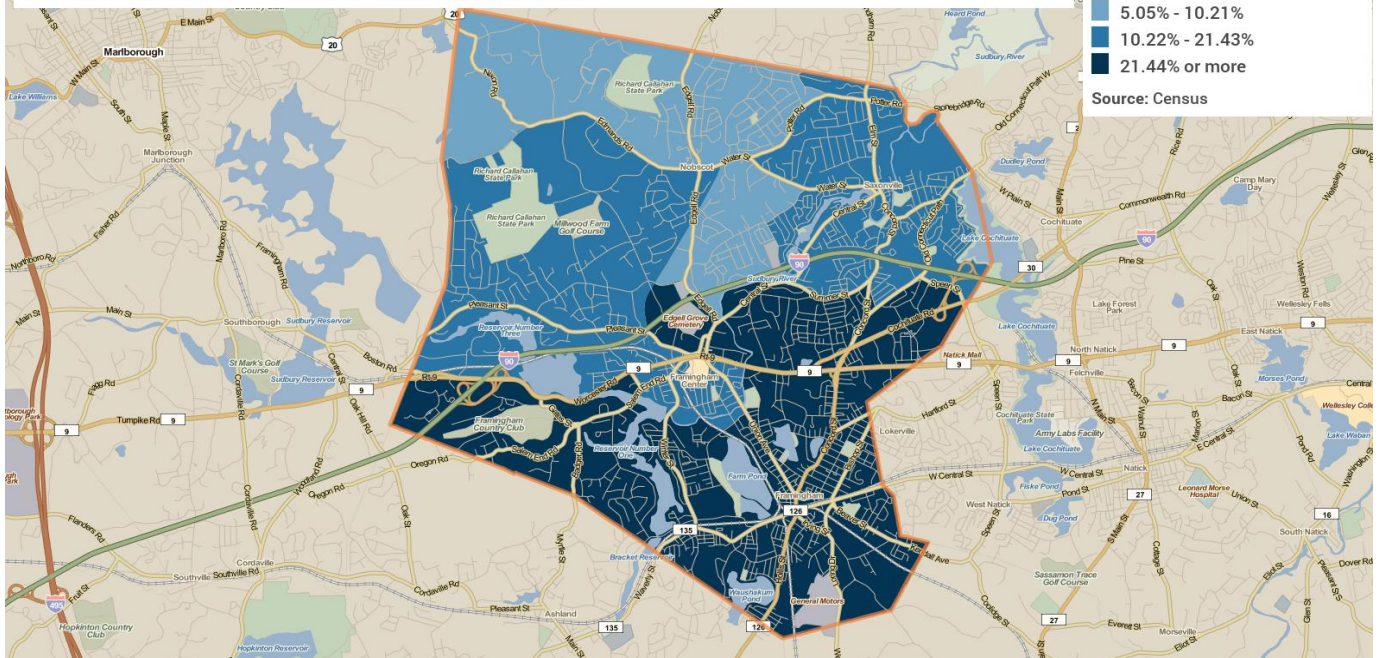
Percent Foreign Born Population

Year: 2012-2016

Shaded by: Census Tract, 2010

- Insufficient Data
- 1.95% or less
- 1.96% - 5.04%
- 5.05% - 10.21%
- 10.22% - 21.43%
- 21.44% or more

Source: Census



Estimated percent of all people who were of a race other than White between 2012-2016.

Estimated percent of the population that is not White between 2012-2016. Percentage calculations are suppressed in cases where the denominator of the calculation was less than 10 of the unit that is being described (e.g., households, people, householders, etc). Such areas are represented as having 'Insufficient Data' in the map. Denominators for percentage calculations were created by summing all of the component data items in a particular dataset.

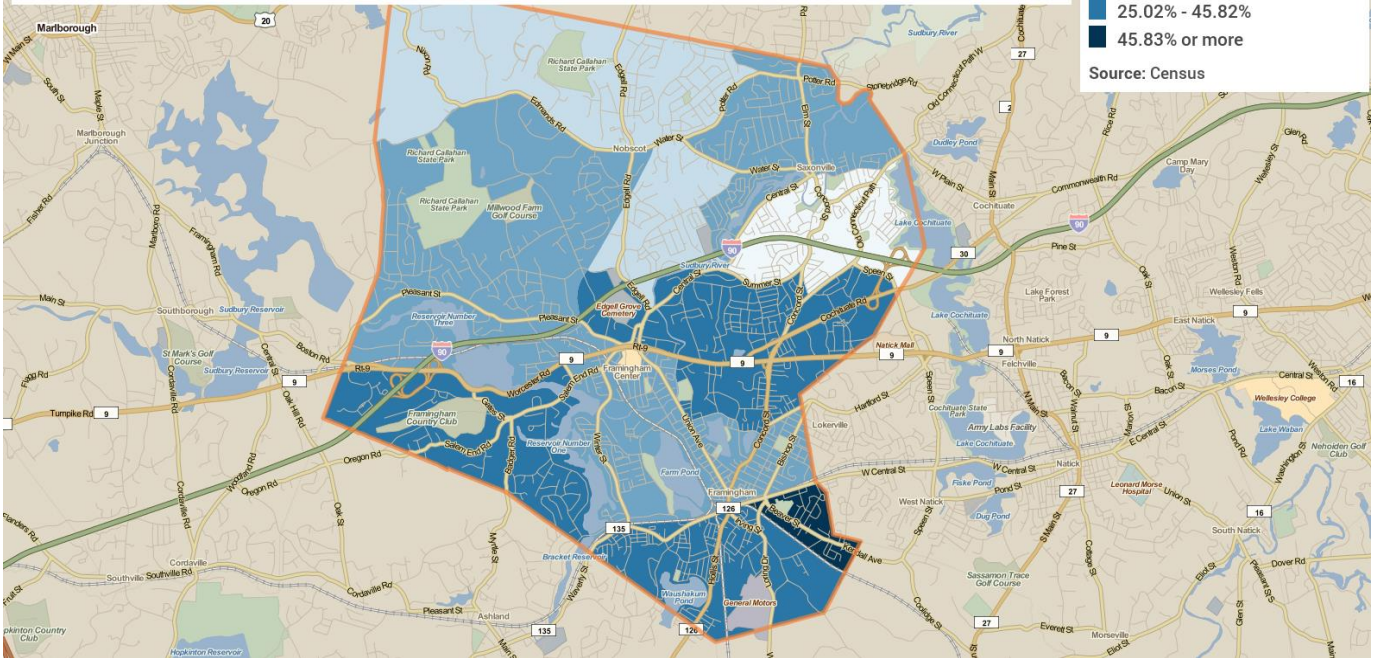
Percent Non-White Population

Year: 2012-2016

Shaded by: Census Tract, 2010

- Insufficient Data
- 5.95% or less
- 5.96% - 13.53%
- 13.54% - 25.01%
- 25.02% - 45.82%
- 45.83% or more

Source: Census



Estimated percent of all people age 5 and older who were non-English speaking between 2012-2016.

Estimated percent of population age 5 and older speaking English 'less than 'very well' between 2012-2016. Those speaking English less than 'very well' include people who reported speaking a language other than English and indicating their English-speaking ability as 'Well,' 'Not well,' or 'Not at all.' Percentage calculations are suppressed in cases where the denominator of the calculation was less than 10 of the unit that is being described (e.g., households, people, householders, etc). Such areas are represented as having 'Insufficient Data' in the map. Denominators for percentage calculations were created by summing all of the component data items in a particular dataset.

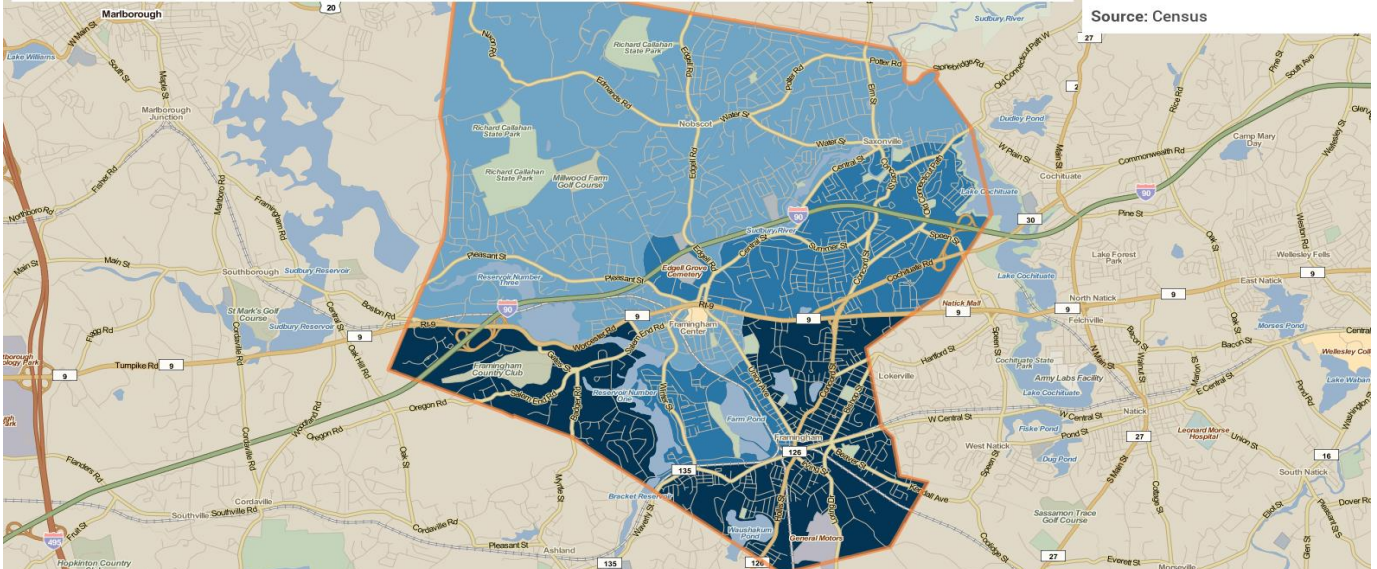
Percent Non-English Speaking Population

Year: 2012-2016

Shaded by: Census Tract, 2010

- Insufficient Data
- 0.80% or less
- 0.81% - 2.29%
- 2.30% - 5.29%
- 5.30% - 13.08%
- 13.09% or more

Source: Census



Understanding these differences is vital to understanding the two communities' challenges in accessing healthy food. These statistics, while not explicitly food-related, are reflected in the ways in which people are able to access food. A substantial portion of individuals in South Framingham struggle to get the food they need on a daily basis, and that concern supersedes thinking about eating nutritionally balanced meals.

The inability for people in South Framingham to access food is inherently a concern of money. It is also important to note that the disparity in being able to access food is not an isolated issue, as it is only one of the many concurrent issues that are facing people in this area. A lack of economic mobility causes food insecurity in Framingham, as well as a number of other issues that will be discussed throughout this assessment.

Methodology

In order to conduct a thorough assessment, a wide-variety of sources were utilized to adequately capture the views and needs of the broader community. The initial suggested methods came from the Massachusetts Department of Public Health's Mass in Motion program, which were expanded to get a better understanding of what was happening in the community.

Secondary Sources

- Existing scholarly publications and reports
- US Census Data
- CDC Data
- Mapping databases, such as Policy Map
- Maps received from the Metropolitan Area Planning Council

Primary Sources

- A community food survey with 1,298 participants from the region
- 1 tree exercise with 14 participants
- 1 focus group with 14 participants
- 10 interviews with city officials, food distribution agencies, and representatives of organizations that serve low-income residents of Framingham

Existing Data and Reports

Data was collected from existing health assessments in the region in order to depict how socioeconomic status and health correlate with food insecurity. Among these assessments were the MetroWest Region 2016 Community Health Assessment, and the MetroWest Health Foundation's 2017 Community Profiles.

In addition, a significant amount of demographic, health, and economic data was gathered from online databases such as the U.S. Census Bureau, Bureau of Labor Statistics, and the CDC. In order to give spatial context to the data, several maps were created using Policy Map. This data connects how economic and social processes influence food insecurity.

Finally, the CFA cites scholarly journal articles that discuss the causes and impacts of food insecurity in the broader United States as a way to understand how the problem has manifested throughout the country.

Interviews

Ten (10) interviews were conducted with community members, city officials, and food distributions agencies. The interviews consisted of questions about the major triggers of food insecurity and lack of ability to access healthy food, what specifically could be done to address those triggers, how to improve upon existing efforts, and who would be involved in these processes.

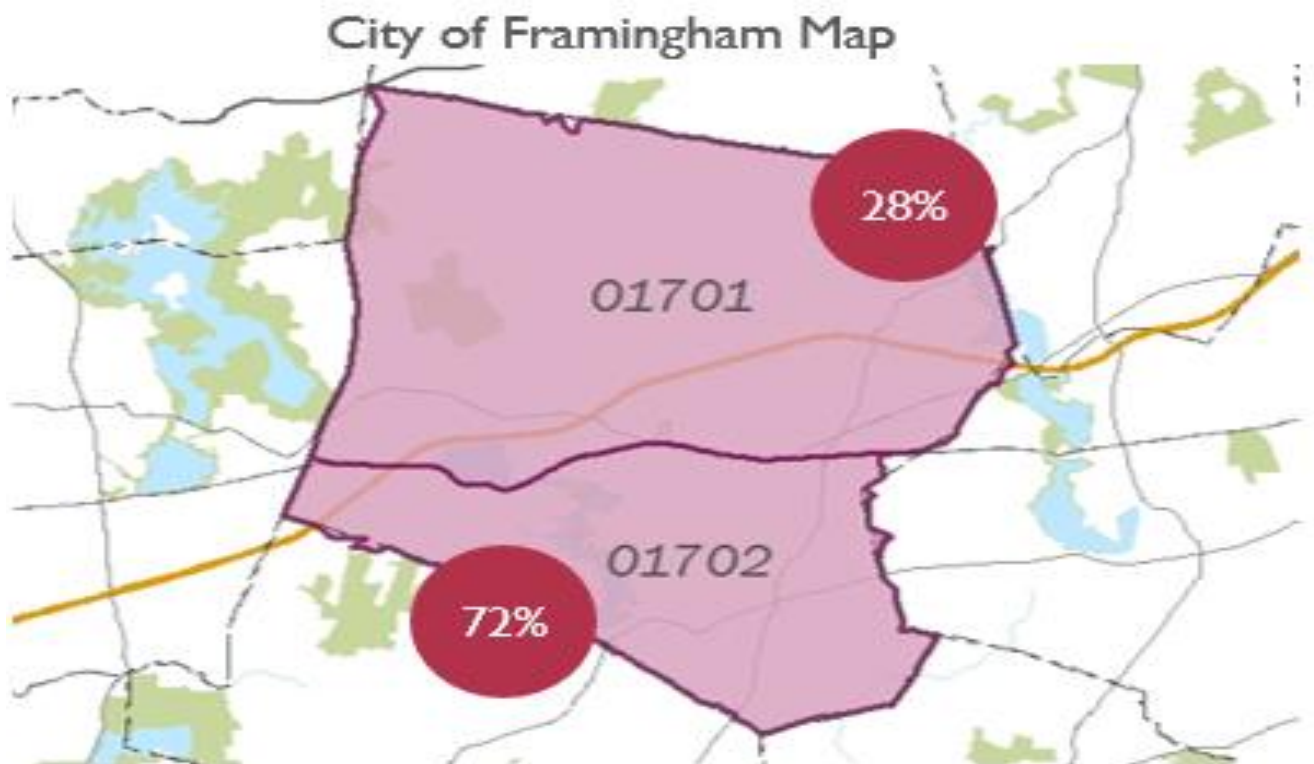
Focus Group and Tree Exercise

A focus group and tree exercise helped gain the perspective of people in Framingham who are struggling to get the food they need on a day-to-day basis. These exercises clarified the barriers to healthy food access and the opportunities to reduce food insecurity that are specific to Framingham.

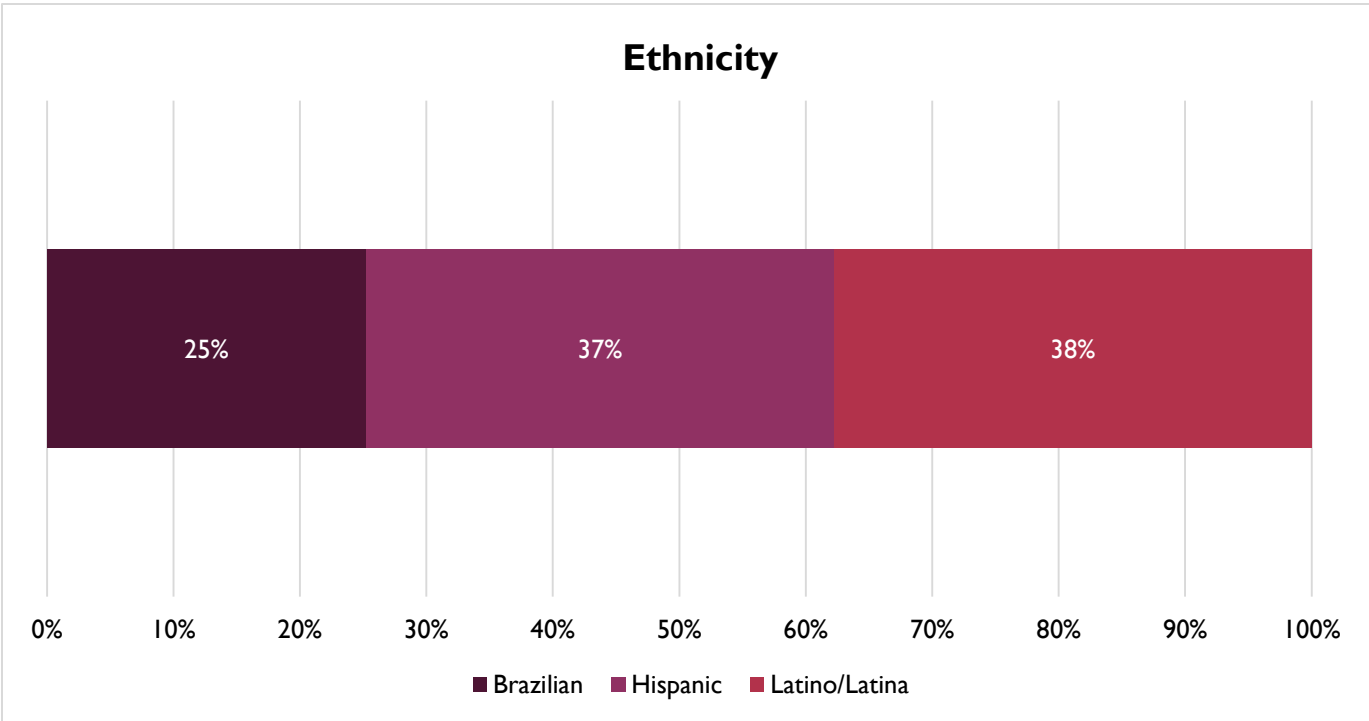
Community Food Assessment Survey

The most significant data collected came from the Community Food Assessment Survey, which was distributed to residents of Framingham with the help of several food distribution and social service organizations in the city. 945 responses were collected from people living in Framingham alone. Many of the respondents were low-income and/or non-white residents of South Framingham. This was significant because the goal of the CFA was to capture the needs of the most food insecure people, and the needs of this demographic have not been properly represented by previous assessments. The data from this survey was then analyzed with the help of the Metropolitan Area Planning Council (MAPC).

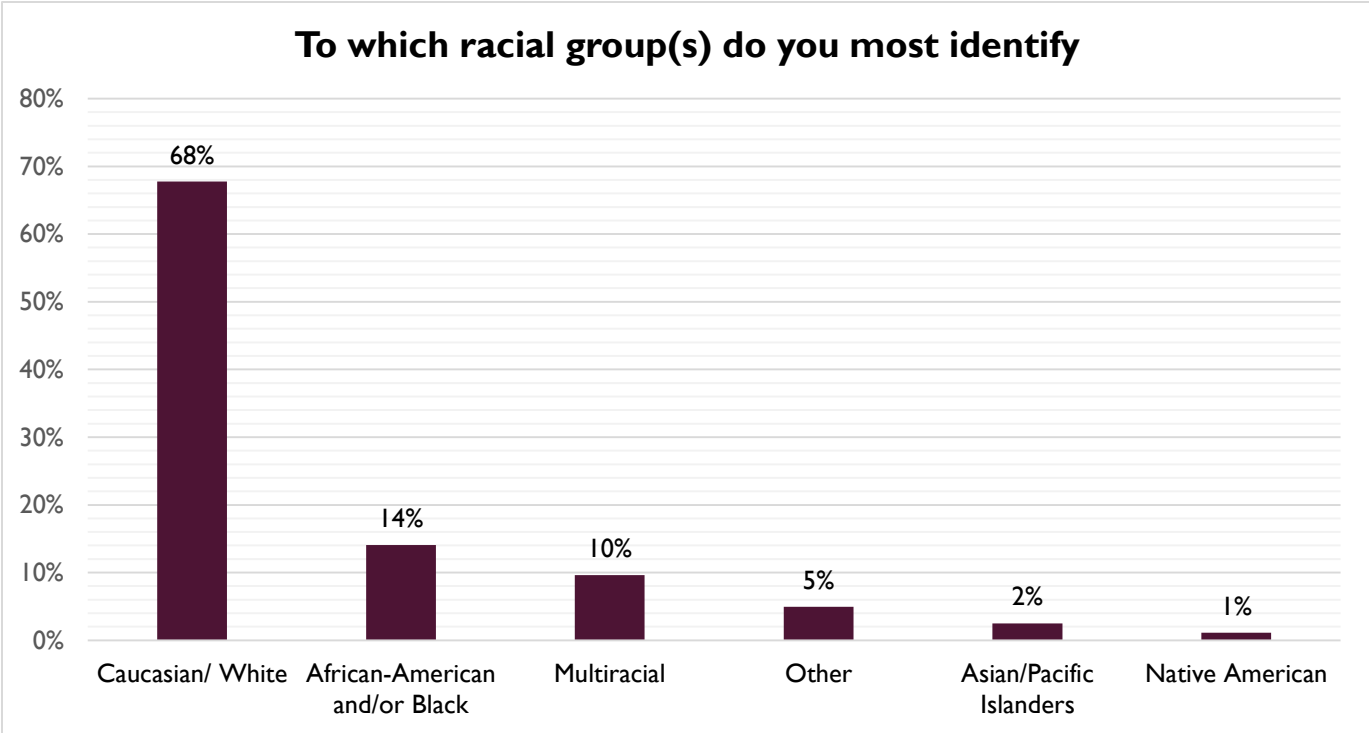
Who responded to the survey?



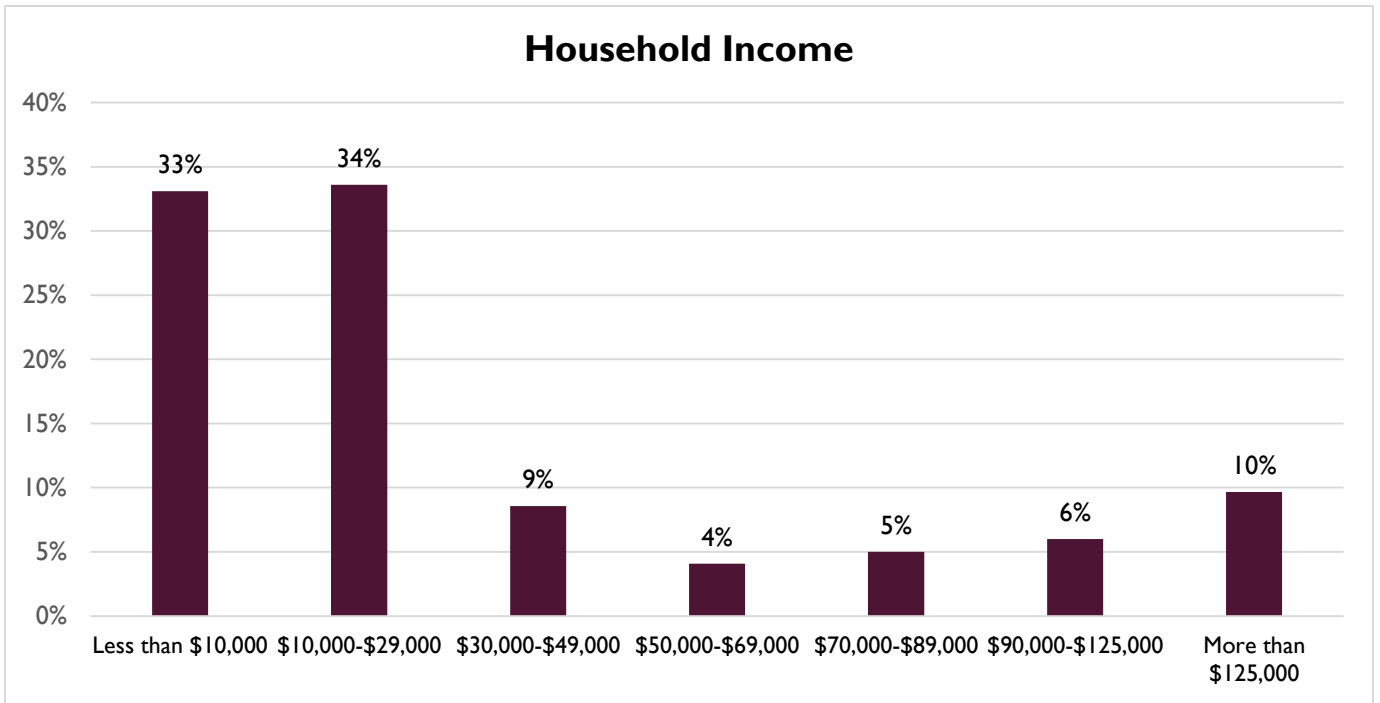
Most of the respondents were from the southern zip code of the city, which is generally lower-income, and more food insecure than the northern portion of the city.



Framingham is home to a large population of Brazilian, Hispanic, and Latino(a) residents. This is reflected in the demographics of survey respondents, with 43% of people who took the survey identifying as one of these three ethnicities. This number reflects the fact that a disproportionate amount of non-white residents utilize social and food distribution services due to disparities in wealth.



The racial makeup of the survey respondents roughly reflects that of the City of Framingham’s racial demographics.



Strengths and Weaknesses of the Methodology

A major strength of this assessment was that it identified needs and challenges that hundreds of low-income, non-white individuals in South Framingham face in getting the food they need. The efforts to hear from this demographic provided a clear picture of why people are food insecure, what processes keep them food insecure, and the subsequent impacts on their purchasing habits. South Framingham is where the majority of the poverty in the city is located, and it is extremely important to engage lower-income people in data collection and decision-making processes in order to adequately meet their needs.

With that being said, only one focus group and one tree exercise was conducted due to a lack of interest in participation. The assessment would have benefited to hear from more people struggling with food insecurity directly.

To make up for this lack of direct engagement, the CFA consists of ten interviews of people in the community who are service providers, government officials, and representatives of organizations who work with food insecure individuals on a daily basis. This helped to understand the perspective of the service providers who have a wealth of knowledge regarding the struggles their clients face in accessing healthy foods on a consistent basis.

The ability to gauge the experience of low-income individuals in the city was certainly a strength of the research, and undoubtedly its' most important element.

However, the CFA did not adequately capture a broad range of opinions on why higher income people struggle to eat healthy food. As a result, data representations in this assessment for higher income people and people in North Framingham will have a higher percentage of error simply because there weren't as many responses from this demographic.

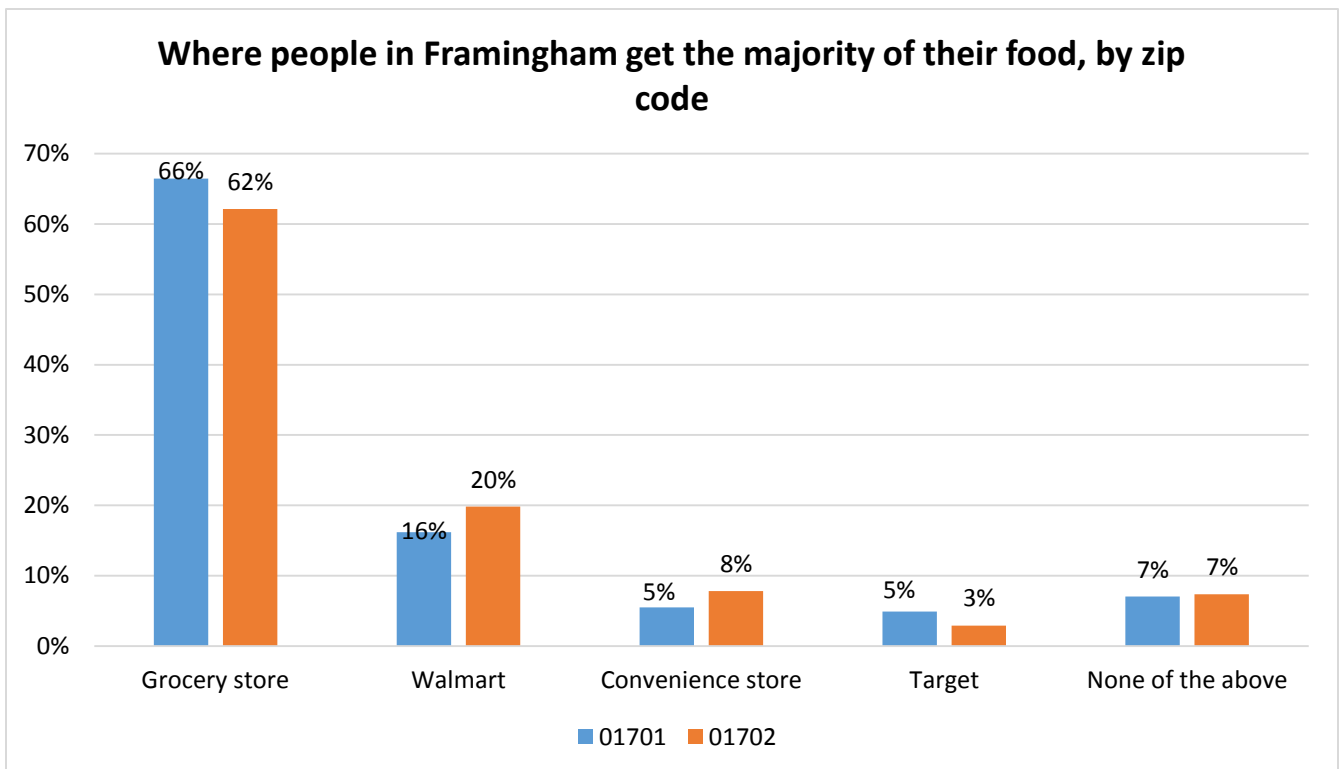
Finally, it is important to note that the responses from the survey may dilute the disparities that exist in food access among different races and ethnicities, as the primary survey respondents were low-income people from a variety of backgrounds. The inequities of wealth that exists between white residents and non-white residents are lost in the data when primarily surveying people of low income. This is compensated for by the fact that the CFA discusses the difference in economic mobility by lines of race, ethnicity, and class by exploring data relating to educational attainment, employment opportunities, and inequality extensively.

Food Access Points in Framingham

Residents of Framingham get their food from a variety of sources, with income being the primary determinant of where people get their food.

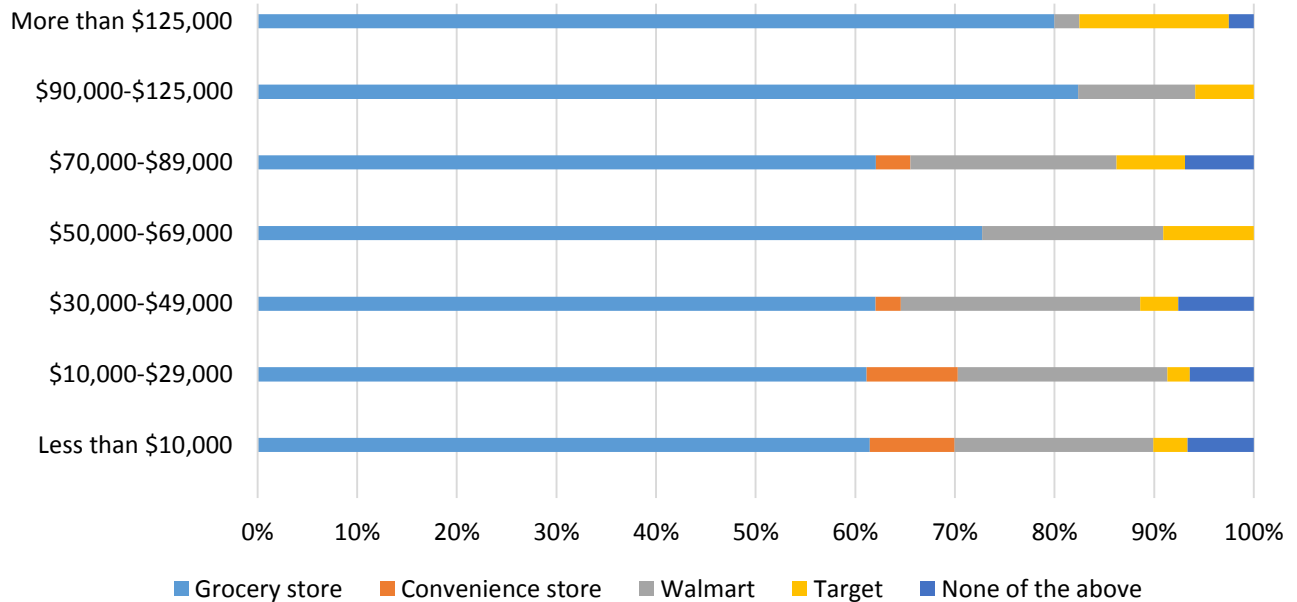
In the survey of 945 Framingham residents, we were able to understand where people get their food from and why. This section will highlight what the existing points of food access are for people in different areas of the city, across boundaries of race, ethnicity, and class.

Where do people in Framingham get the majority of their food?



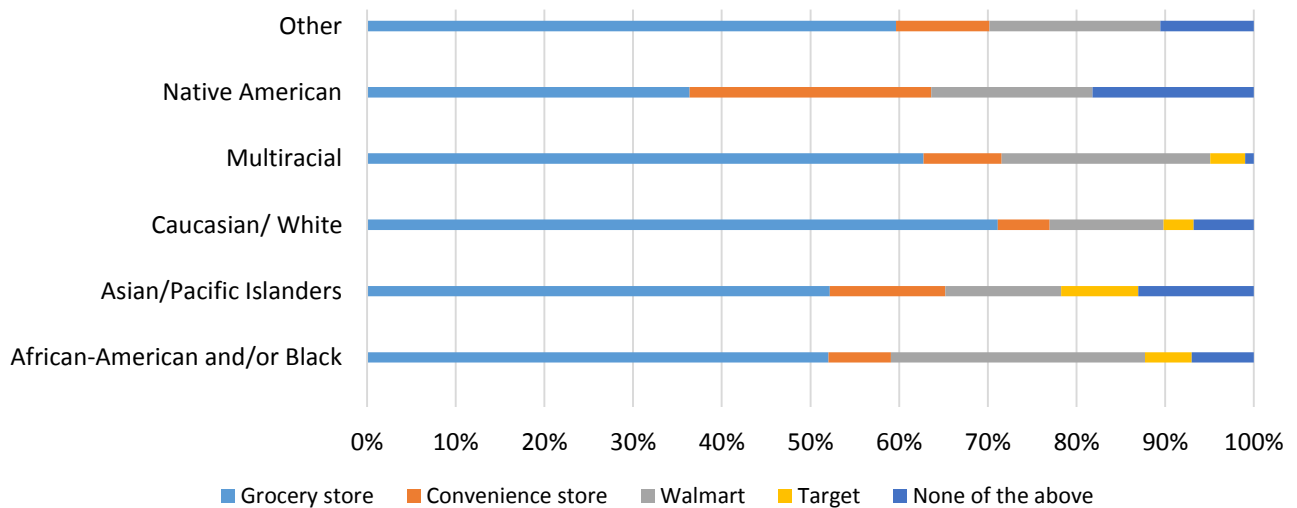
The majority of people in North and South Framingham get most of their food from grocery stores. While there is little difference in where people in the two zip codes of the city got their food from, there are notable correlations between where people of certain incomes and races get the majority of their food.

Where people in Framingham get the majority of their food, by income



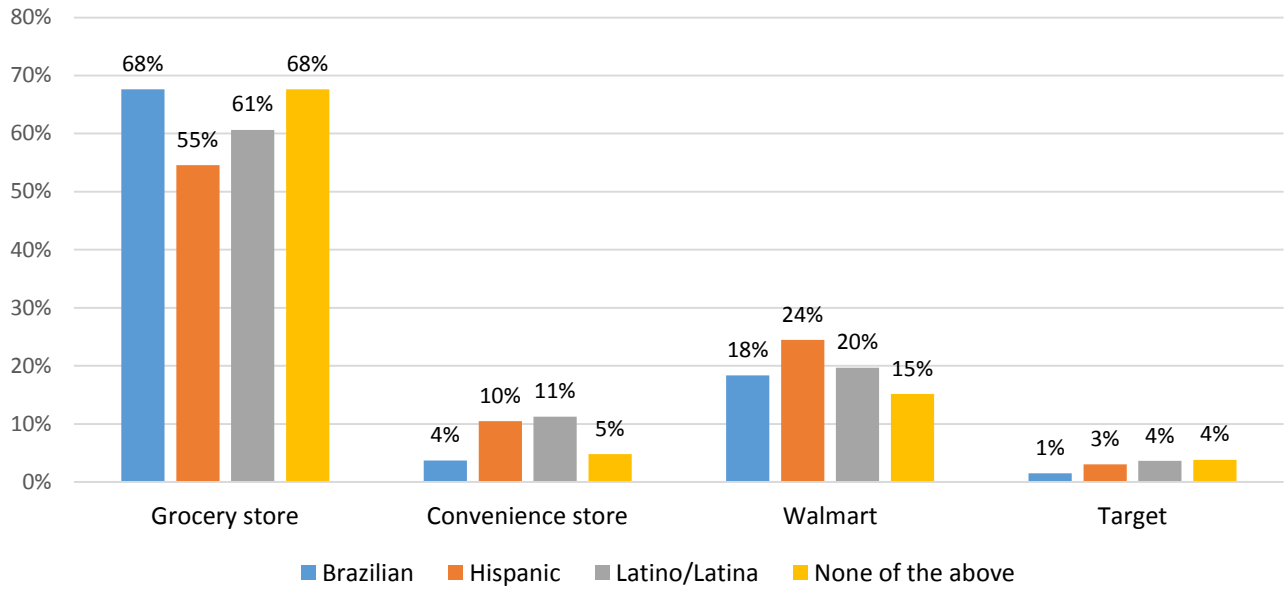
People of lower incomes are less likely to go to a traditional grocery store, and more likely to go to a convenience store or Walmart for the majority of their groceries.

Where people in Framingham get the majority of their food, by race



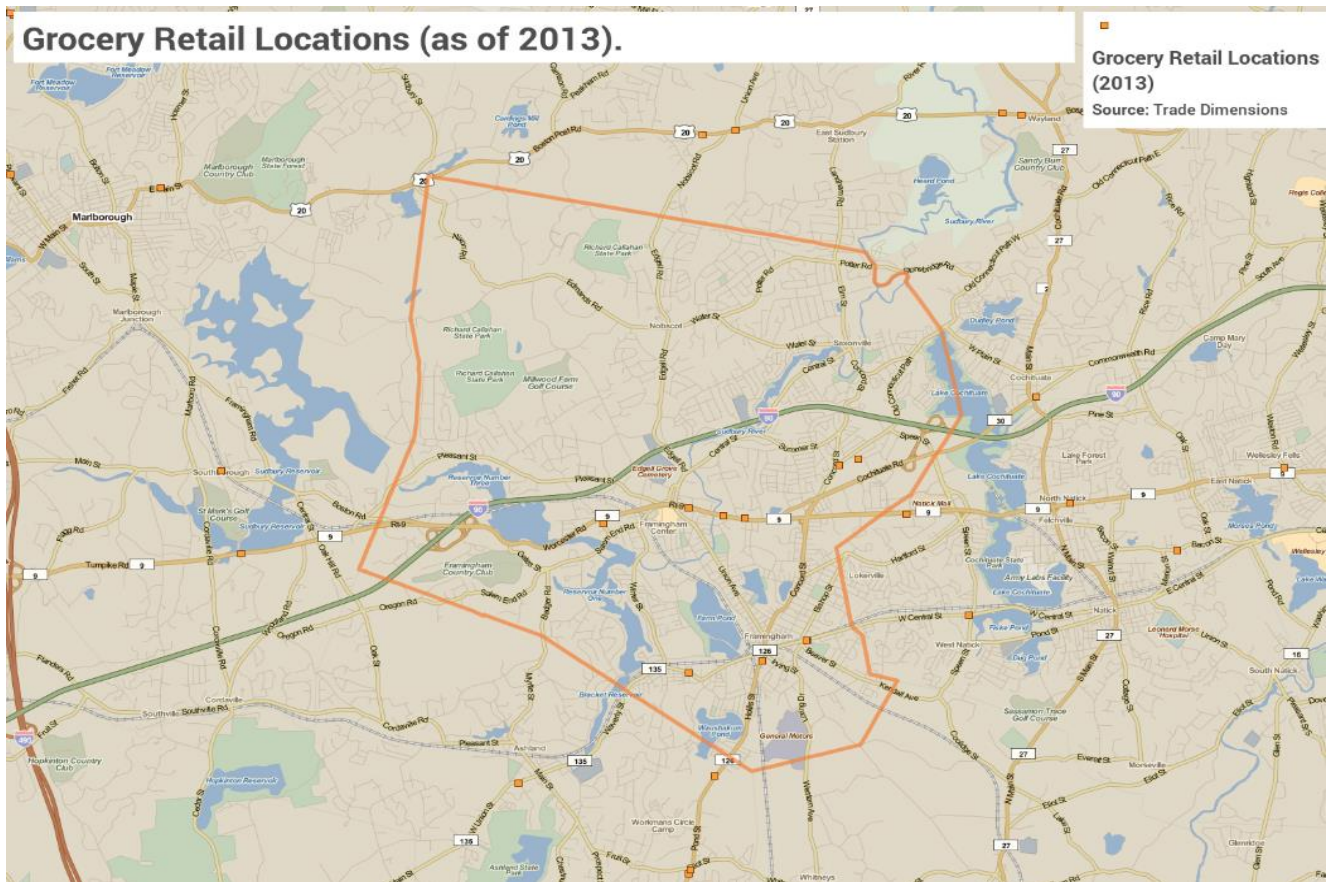
Non-white residents of Framingham were more likely to get most of their food from convenience stores or Walmart than white residents of the city. However, it is highly likely that this is a reflection of the income disparity between white and non-white people in Framingham as opposed to these places having better cultural-specific options than grocery stores.

Where people in Framingham get the majority of their food, by ethnicity



People who identify as Hispanic or Latina(o) are more likely to get a large portion of their food from convenience stores and from Walmart than other ethnicities who responded to our survey.

Grocery Retail Locations (as of 2013).



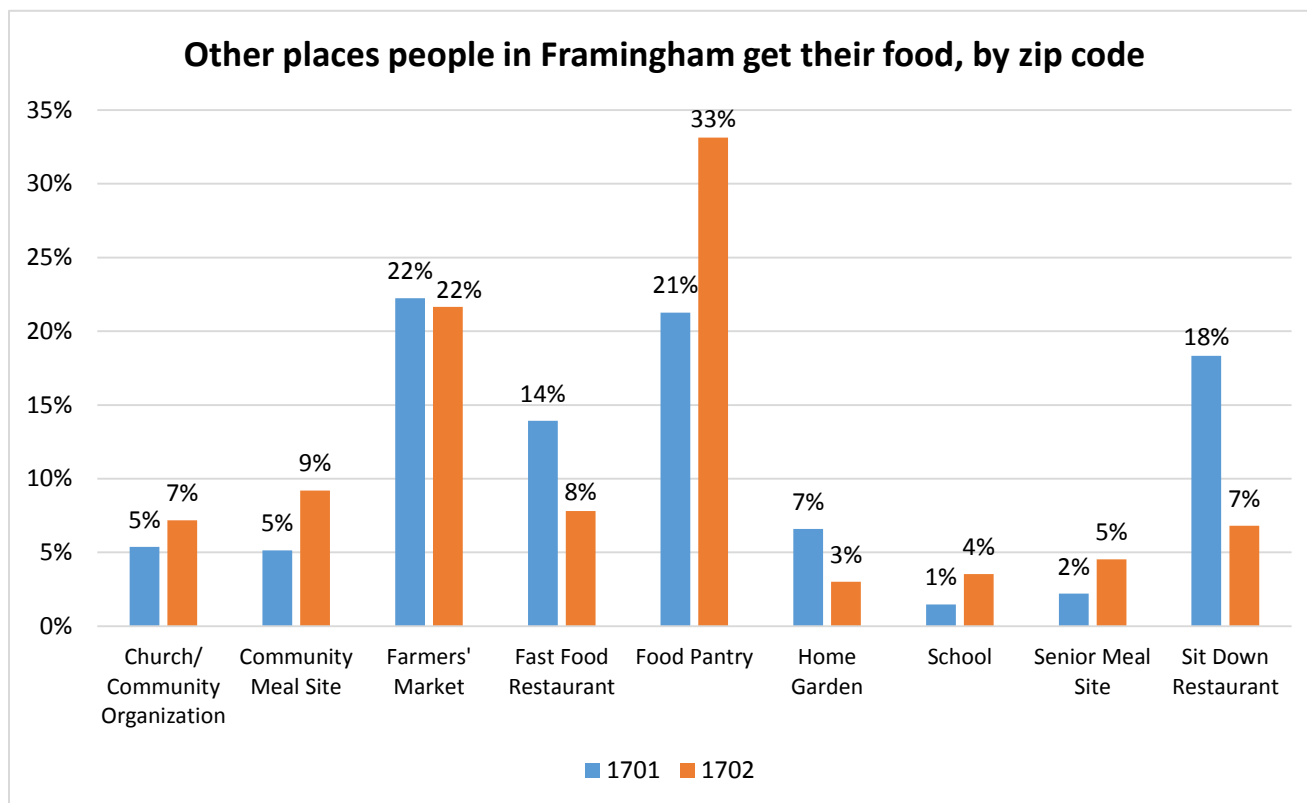
There are few major grocery retail options located in North Framingham.

According to interviews with service providers and focus groups participants, the Market Basket in Ashland is the most popular major grocery store for low-income people who tend to reside in South Framingham, primarily because of its' comparatively low prices and the fact that it is accessible by the MWRTA bus for those without a car.

Although the major grocery stores are located in South Framingham or on the border between North and South Framingham, it is telling that less people in the southern portion of the city choose to shop at these stores.

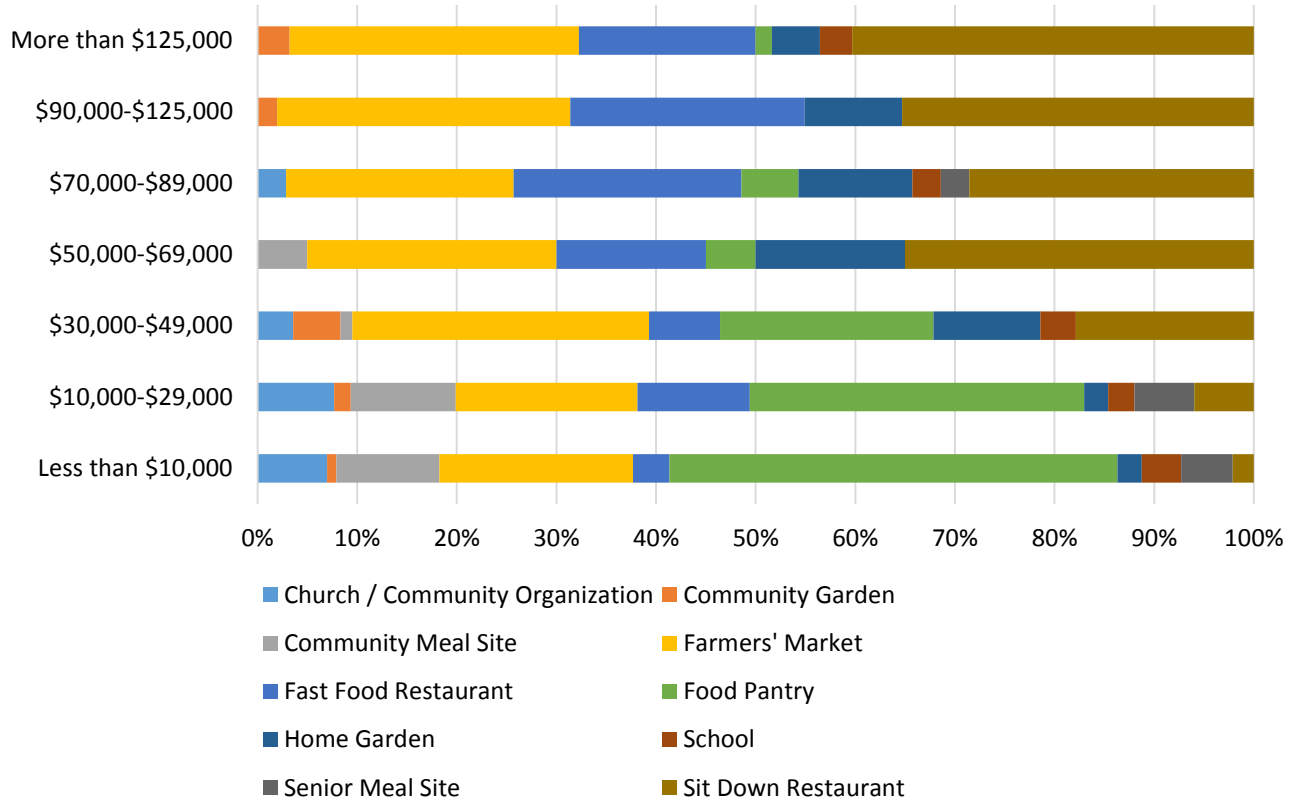
Other Food Access Points

Individuals in North Framingham and South Framingham get their food from alternative sources at similar rates overall, but there are notable differences when these responses are broken down by income and race.



People in South Framingham are more likely to utilize food distribution sites such as churches, community meal sites, and food pantries.

Other places people in Framingham get their food, by income



People who make \$29,000 or less are more likely to utilize food distribution services such as food pantries, schools, churches, and other community organizations. Almost none of the survey respondents who make \$50,000 a year or more utilize these services.

Individuals with higher incomes are more likely to utilize a home garden. The majority of lower income individuals live in South Framingham and rent apartments where it is difficult to find land to grow your own food. As one interview participant stated, "people who live in a sprawling community in North Framingham have the land to grow their own food, while people in South Framingham who could benefit greatly from growing their own produce are not able to in many cases."

Respondents with higher incomes were more likely to eat fast food than those with lower incomes. This is notable due to the stereotype of low-income people consuming more fast food than higher income people because it tends to cost less money.

Finally, there is a significant correlation with higher incomes and going to sit down restaurants, with almost no survey respondents who make less than \$29,000 a year

regularly going to one. Of course, eating at one of these establishments tends to be more expensive than getting food from a grocery store and cooking at home.

Food Access Point: Farmers' Markets

Farmers' markets are popping up all over the state. From 2004 to 2016, the amount of farmers' markets in Massachusetts nearly tripled, with almost 300 markets in the state in 2016. Winter markets are growing as well, increasing from zero in 2004, to 46 in 2016.

It was notable that farmers' market was a popular access point for respondents of all income ranges, as farmers' markets are traditionally thought of as attracting a homogenous crowd: patrons who are white and wealthy.

Despite this stereotype, many retailers at farmers' markets in the state accept SNAP, allowing for individuals to support the local food economy and eat fresh fruits and vegetables that otherwise they may not be able to afford. In 2007, only nine markets accepted SNAP, compared to 153 in 2016. The Healthy Incentives Program (HIP), launched in 2017, allowing SNAP recipients to receive a dollar-for-dollar match of fruits and vegetables at farmers' markets, farm stands, mobile markets, and community supported agriculture (CSA) farm share programs. Programs like this make farmers' markets more accessible to a wider variety of people.

One focus group participant started, "I love when they have the farmers' markets in the summer. It is so nice to be able to get up there and eat some fresh fruit".

Map of Farmers' Markets in the Framingham Area



There is one Farmers' Market in Framingham, as well as one in nearby Ashland and Natick.

Framingham Farmers' Market

Season: Beginning of June to the end of October

Where: Village Green at Framingham Center
Edgell Rd & Vernon St

When: Thursdays at 12:00 PM to 5:30 PM

Additional Information: The vendors at the Framingham Farmers' Markets accept SNAP and WIC. For more information, go to:

https://guide.farmfreshri.org/food/farmers'markets_details.php?market=80

Natick Farmers' Market

Season: Year-round

Where: Spring and Summer: Natick Common; Fall and Winter: Common Street Cultural Center 13 Common Street

When: Saturdays from 9:00 AM to 1:00 PM

Additional Information: Vendors at this market accept SNAP. For more information, go to: <http://www.natickfarmers'market.com/>

Ashland Farmers' Market

Season: Early June to early October

Where: Downtown Ashland, across from Ashland Public Library

When: Saturdays from 9:00 AM to 1:00 PM

Additional Information: The Ashland Farmers' Market accepts SNAP benefits, and matches them up to \$20 per week for as long as funds are available. Use your EBT card and SNAP account to buy fresh, local foods at the market every Saturday during the market season.

For more information, go to: <http://www.ashlandfarmers'market.org/>

Food Access Point: Community Supported Agriculture (CSA's)

There are several points of pickup where Framingham residents can access produce that is grown within the State of Massachusetts.

While CSA pickups may not be thought of as the most affordable or accessible options, they are increasing in number throughout the state as the local food economy expands, and acceptance of programs such as SNAP and HIP in certain CSA's make them increasingly affordable to lower-income individuals.

Here are some of the existing CSA locations in and around Framingham:



Map of CSA pickups in and within 5 miles of Framingham.

Stearns Farm CSA Pick-Up (Two Locations)

Location #1: Stearns Farm, 862 Edmands Road Framingham, MA 01701

Location #2: SMOC, 7 Bishop Street Framingham, MA 01702

Products offered: vegetables, berries, flowers

Website: <https://stearnsfarmcsa.org/>

Chestnut Hill Farm

Location: Chestnut Hill Farm, 280 Old Connecticut Path Framingham, MA 01701

Products offered: vegetables, fruits, meat, flowers, and more

Website: <http://www.thetrustees.org/places-to-visit/csa/chestnut-hill-farm-csa/>

Sunshine Farm

Location: Sunshine Farm, 280 Old Connecticut Path Framingham, MA 01701

Products offered: fruits and vegetables

Website: <http://sunshinefarmma.com/>

Natick Community Organic Farm

Location: Natick Community Organic Farm, 117 Eliot Street Natick, MA 01760

Products offered: fruits and vegetables

Website: <https://www.natickfarm.org/>

Silverwood Organic Farm

Location: Silverwood Organic Farm, 185 Western Avenue Sherborn, MA 01770

Products offered: vegetables

Website: <http://www.silverwoodorganicfarm.com/>

Food Access Point: Community Gardens

There is currently a community garden in South Framingham for resident use located at 48 Pratt Street.



Aerial image of the Pratt Street Community Garden. Source: Google Maps



The Pratt Street Community Garden. Source: MetroWest Daily News

According to interview participants, the community garden is a good place for people who do not have enough land to garden and want to garden as a hobby, as well as people who were born outside of the United States and want to grow food from a cuisine that may not be accessible in Framingham.

There are organizations in the city, such as Transition Framingham, who are currently looking for other areas in the city to start a community garden due to the high demand.

Food Access Point: Food Distribution Agencies

The Framingham area is home to several pantry locations that work hard to meet the needs of people who are struggling to get the food they need on a daily basis. The graphic below depicts where existing pantries are. Notably, all of the pantries are located in South Framingham.

Addresses & Locations / Endereço

- 1. A PLACE TO TURN**
99 Hartford St. Natick
508-655-8868
- 2. SALVATION ARMY**
59 Howard St. Framingham
508-875-3341
- 3. UNITED WAY OF TRI-COUNTY PEARL ST. CUPBOARD & CAFÉ**
46 Park St. Framingham
Food Pantry: 508-370-4921
(Despensa de comida)
Emergency Food Number 508-370-4824
(Número de comida de emergencia)
- 4. ST. BRIDGET'S**
15 Wheeler Ave. Framingham
508-875-5959
- 5. HOPE WORLDWIDE**
214 Concord St.
Framingham
617-899-5222

How to use / Como usar:

Individuals/Families may go to each food pantry once a month. Individuals/Families may go to A Place to Turn every 60 days and St. Bridget's once a week. Please bring the following to food pantries: a referral form (A Place to Turn and Pearl St.), picture ID, proof of address (such as mail). Individuals/Families may go to meals as often as needed.

Individuos/familias pueden asistir a cada despensa de comida una vez al mes. Individuos/familias pueden asistir a A Place to Turn cada 60 días y St. Bridget's es una vez a la semana. La documentación normalmente requerida para las despensas de comida incluye un papel de referido (A Place to Turn y Pearl St.), identificación fotográfica y una prueba de dirección como un correo. Individuos/familias pueden asistir a los comedores comunitarios con la frecuencia que desean.

Individuos/familias podem ir a cada banco alimentar uma vez por mês. Individuos/familias podem ir a A Place to Turn cada 60 dias y St. Bridget's una vez a la semana. A documentação normalmente obrigatória para os bancos alimentares inclui o papel de referência (A Place to Turn e Pearl St.), identificação com foto e prova de endereço como uma correspondência. Individuos/familias podem ir as refeições com a frequência que desejam.

FOOD PANTRY & MEAL SCHEDULE

FRAMINGHAM AREA

Horario Semanal de los Comedores Comunitarios y Despensas de Comida en el área de Framingham
Horário Semanal dos Bancos Alimentares e Refeições na área de Framingham

Source: Southern Middlesex Opportunity Council

There was some contention among the people interviewed about whether the existing pantries were enough to meet the needs of people in the city. Almost every person working on the service provider end was adamant that there were enough pantries to meet the needs of people who were hungry; it was just about getting the information out about where people can go and when. Some discussed the hours or the amount of times people could come a month to get food as the issues pantries face in the city, rather than the actual number of pantries being an issue.

On the contrary, several focus group members discussed their difficulties in getting to the pantries if they didn't have a car, or someone to give them a ride. While there are several pantries in South Framingham, they are not evenly dispersed, which could make them difficult to get to for people who do not have cars.

Daniel's Table

It is important to note the innovative work that Daniel's Table is doing in the city. At the time of this assessment, the organization installed freezers in accessible locations throughout Framingham in order to preserve and distribute meals as a way to improve food access for low-income residents. This work was funded by the MetroWest Health Foundation. As Daniel's Table states on their website, they aim to "create nutritionally dense foods that provide the nourishment needed while at the same time maintaining the flavor and quality expected from a restaurant-style meal". Freezing the meals allows for less food to be wasted and for more food to be consumed by people.

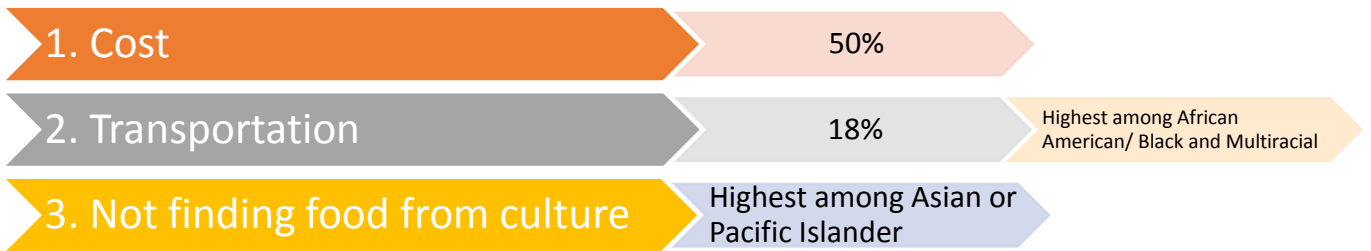
The Root Cause of Food Insecurity in Framingham

There is enough food in Framingham to adequately feed everyone who lives in the city.

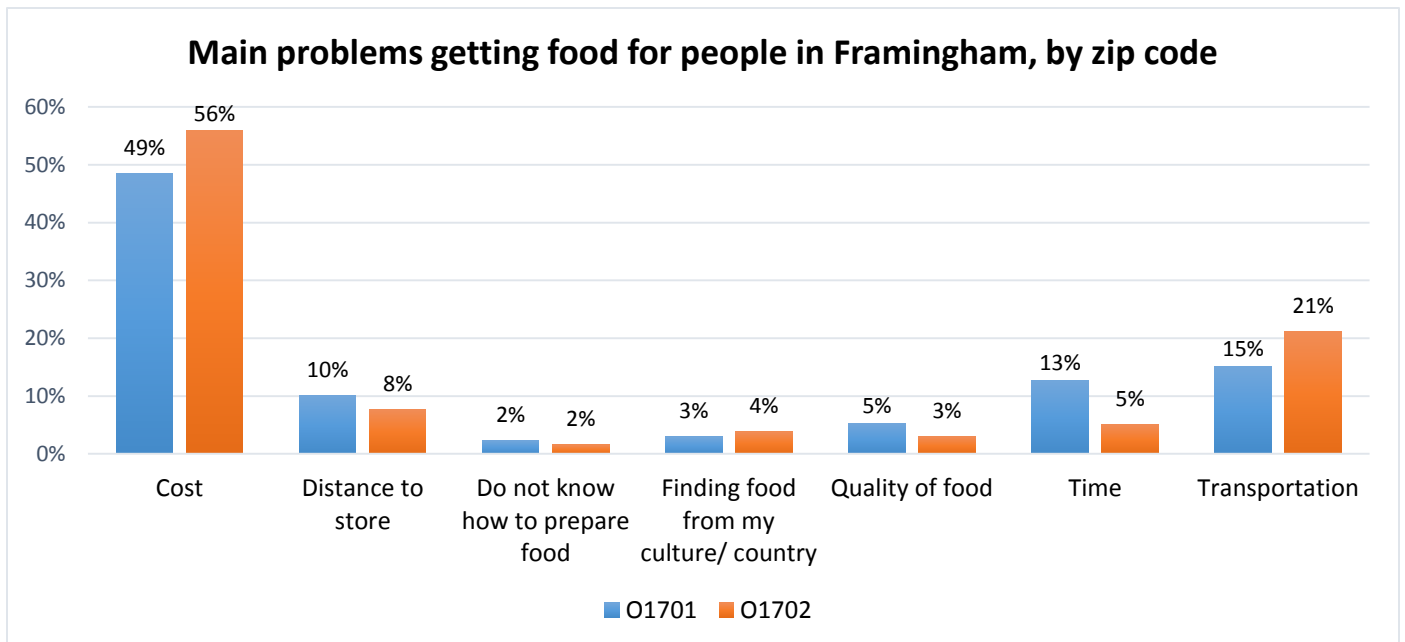
As continuously stressed in this assessment, food insecurity in Framingham is an issue of wealth and income. This section aims to depict the effects of inequality on peoples' food security in Framingham and the processes that keep people food insecure, highlighting the disparities between the North and South Framingham.

What are people's main problems getting food?

Notable Responses from our Community Food Survey



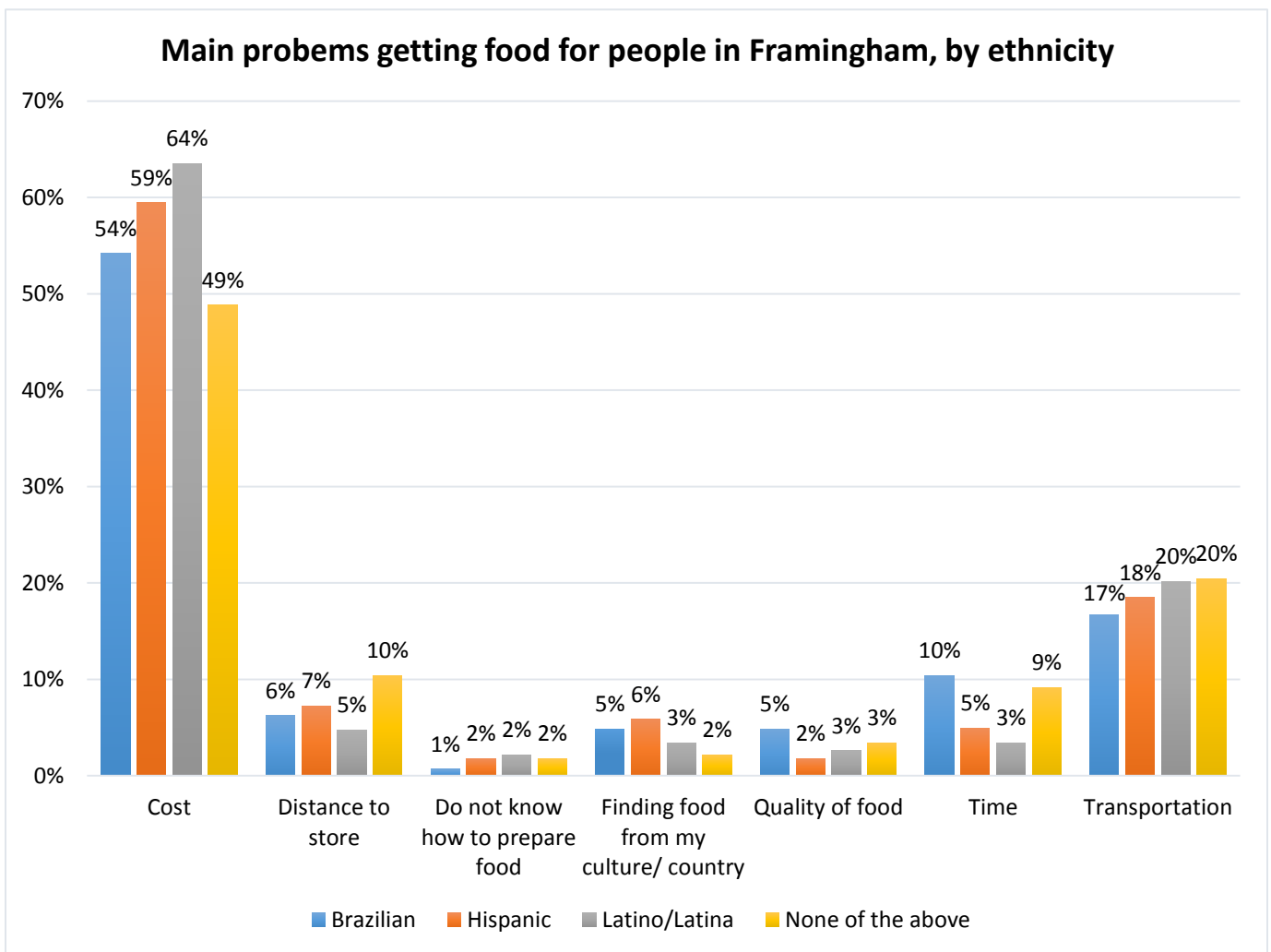
Unsurprisingly, the biggest challenge people have in getting food is having the ability to afford it, with 50% of people responding that cost was their biggest barrier.



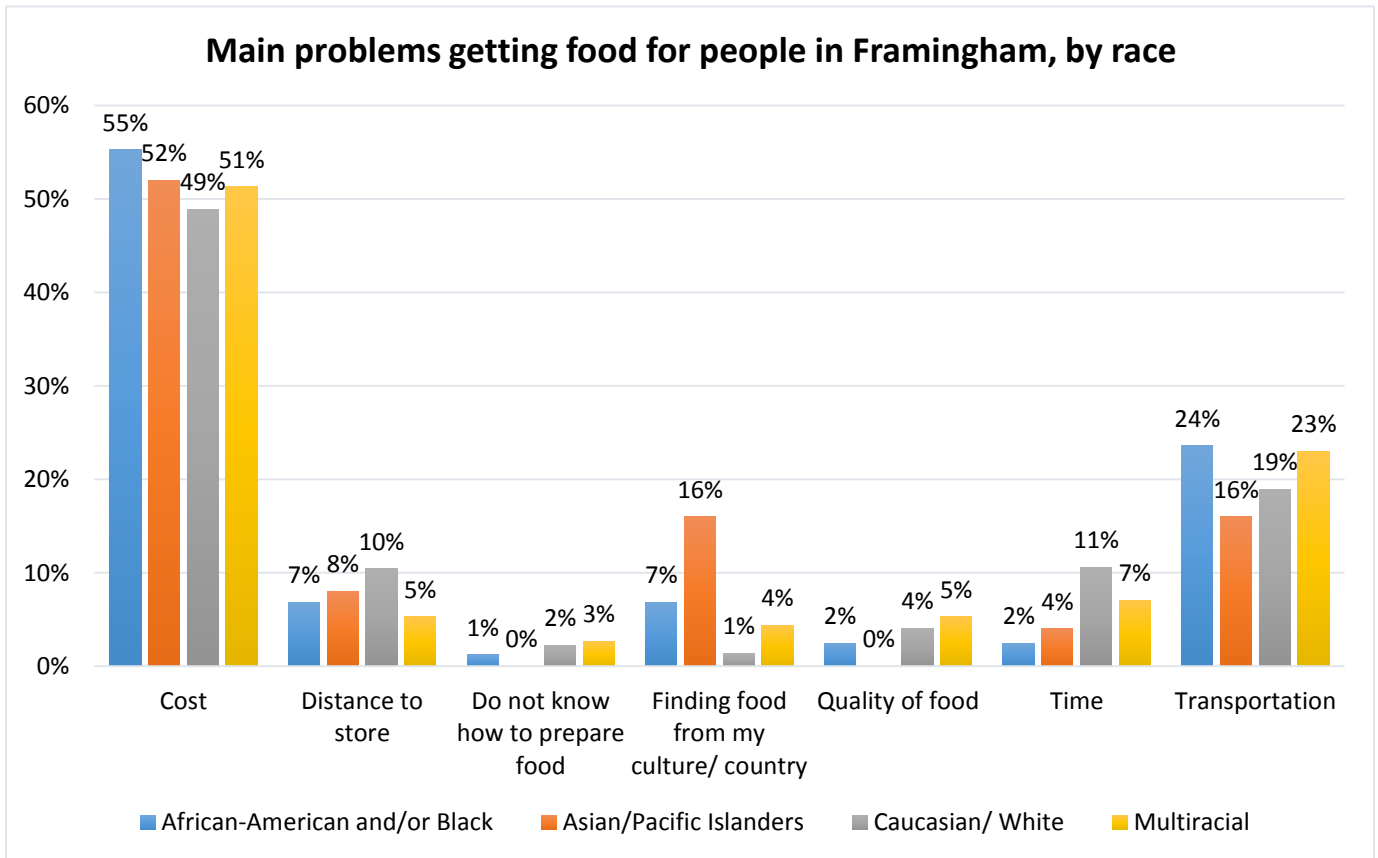
Transportation came up as the second highest barrier, with 18% of people saying that it was their biggest challenge in getting food. A large portion of the 18% that responded that transportation was the main issue in getting food are likely cost burdened by all of their expenses, and therefore cannot afford adequate transportation and/or food.

Transportation is a larger barrier to food access for people in South Framingham than in North Framingham. This is notable, as the majority of the grocery stores in the city are located in South Framingham, which theoretically, would make them easier to get to for people who live in that area.

Interestingly, 'distance to store' and 'time' were prominent barriers to people getting the food that they need in North Framingham. The influence of time and convenience as a barrier to healthy food access, and understanding how to break down that barrier, is important to investigate moving forward.



Survey respondents who identified as Latina(o) reported being more cost burdened by the price of food than those of other ethnicities, while respondents who identified as Hispanic reported having a harder time accessing culturally appropriate food.



While cost was the most significant barrier to healthy food access for every race, it disproportionately impacts some more than others. Non-white residents of Framingham have lower incomes than white residents of the city, therefore cost is a larger barrier to food access for them. The same is true in the broader United States due to historical processes that are discussed throughout this assessment.

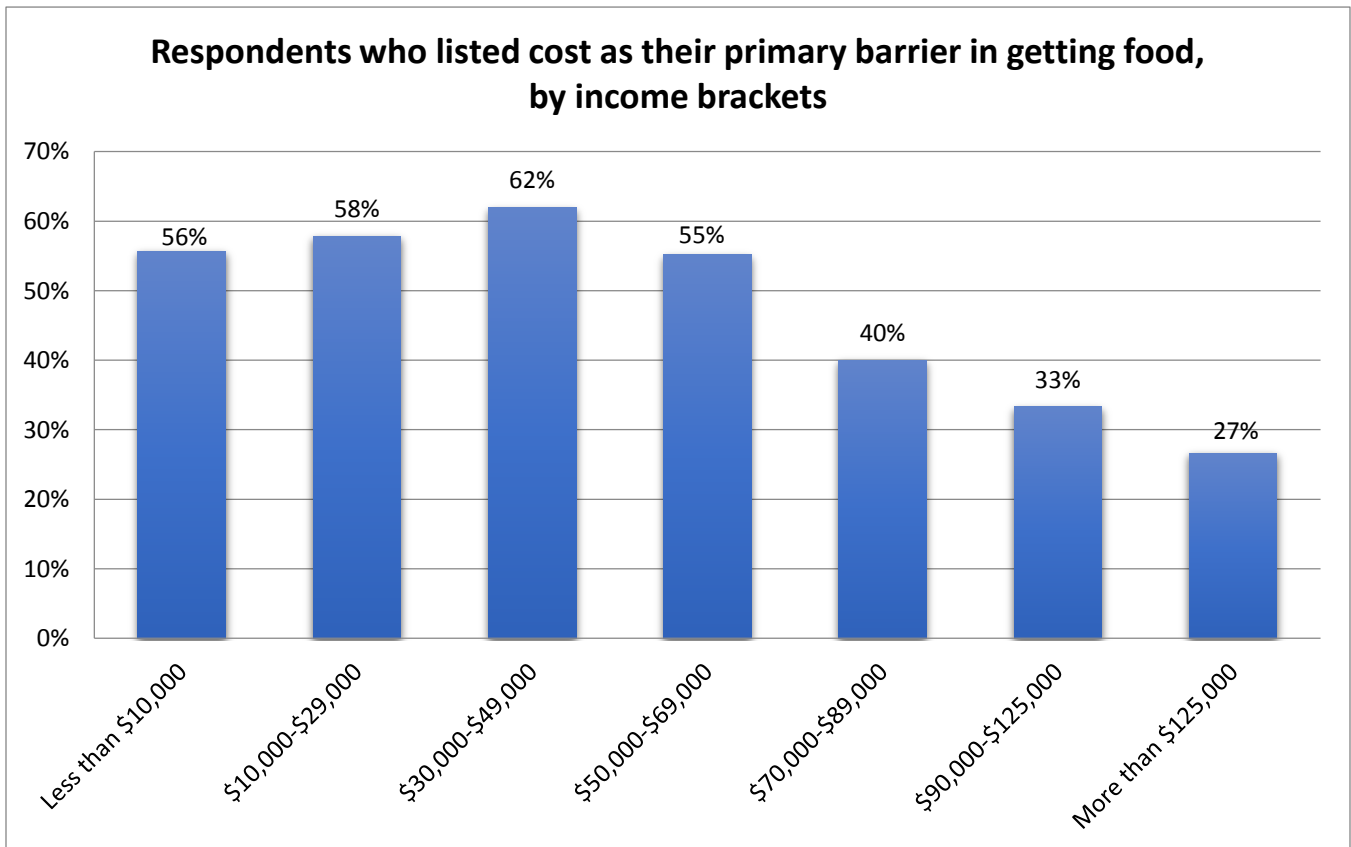
Another big takeaway from the above graph is the large number of black residents (24% of our survey respondents) who struggle with transportation as a barrier to receiving the food that they need.

Finally, it is notable that 16% of respondents who identified as Asian or Pacific Islander said that finding culturally appropriate food was a struggle for them.

The statistical difference between white and non-white respondents in our survey who attribute cost as their biggest barrier isn't very large. The primary reason for this is that the majority of the participants in this survey were lower-income. As a result,

the disparity between whites and non-whites in wealth is not accounted for, since there weren't as many middle and high-income participants. The biggest takeaway is that the amount of money someone has is the biggest leverage point for their ability to access healthy foods on a consistent basis.

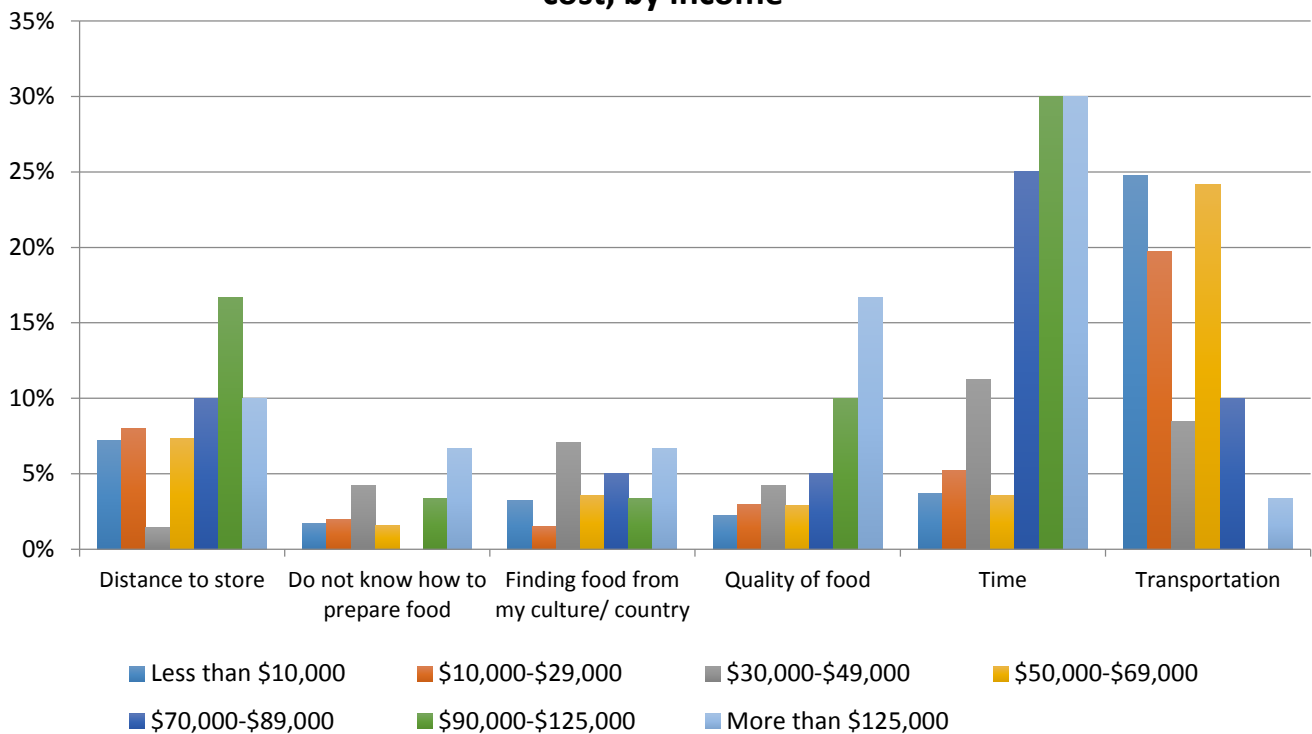
Cost as the Primary Barrier to Food Access



There is a strong correlation with viewing cost as a barrier to getting food and the amount of money our respondents make.

Cost was stated as a significant barrier to all respondents, regardless of their income. Individuals who seem to make enough money to eat a healthy and balanced diet still report cost as a barrier.

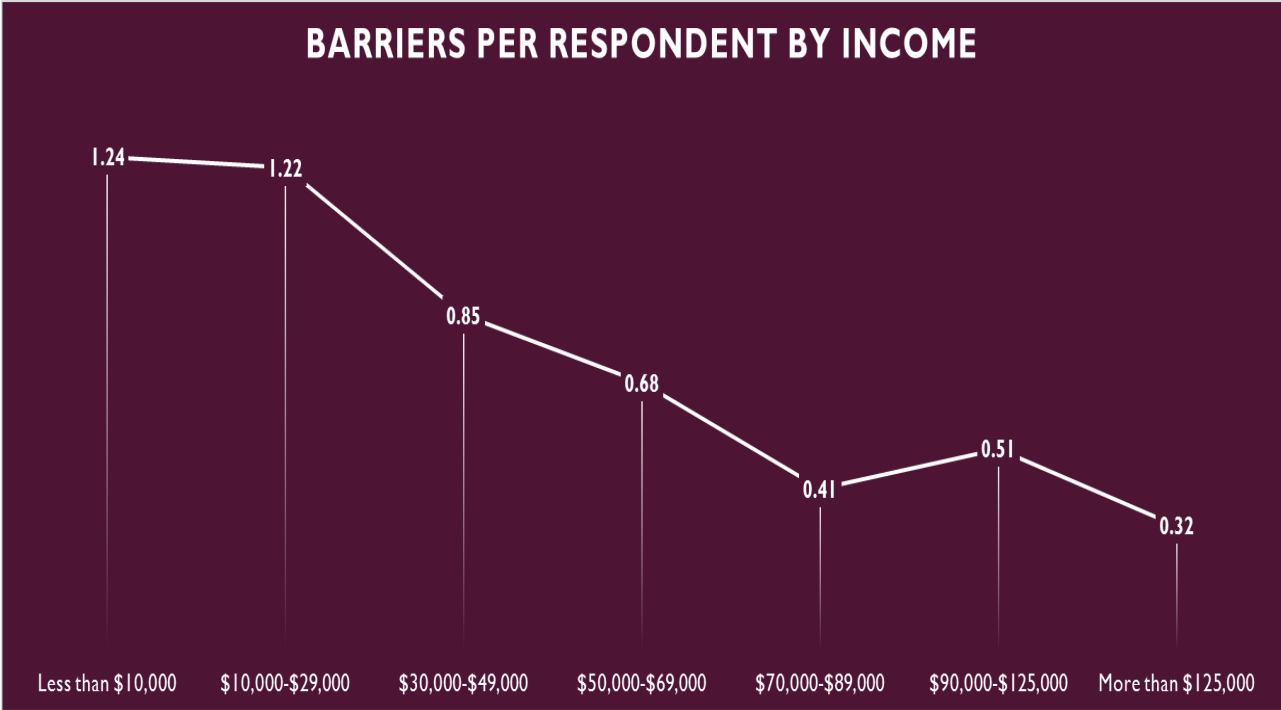
Main problems getting food for people in Framingham excluding cost, by income



An interesting storyline in this data is that the group that reports cost as the biggest barrier in accessing food is those who make between \$30,000 and \$49,000. This could be a perceived barrier; but, it is more likely that these people could be making just enough that they do not qualify for assistance programs such as SNAP, but don't make enough that all of their expenses are easily covered.

Another interesting observation is that 'distance to the store' and 'time' are notable barriers to getting food for people of higher incomes. This may be because other barriers, such as cost, aren't as present so distance and time are more pronounced. Another consideration is the lack of time due to the demands of a full time job. The quality of food as a barrier tends to go up with incomes as well.

Furthermore, transportation as a barrier is very clearly tied to how much people make. The demographic that stands out as an outlier here are the people who make between \$50,000 and \$69,000, and report transportation as a major barrier. Otherwise, transportation as a barrier to food access is a disproportionately an issue for lower-income people.



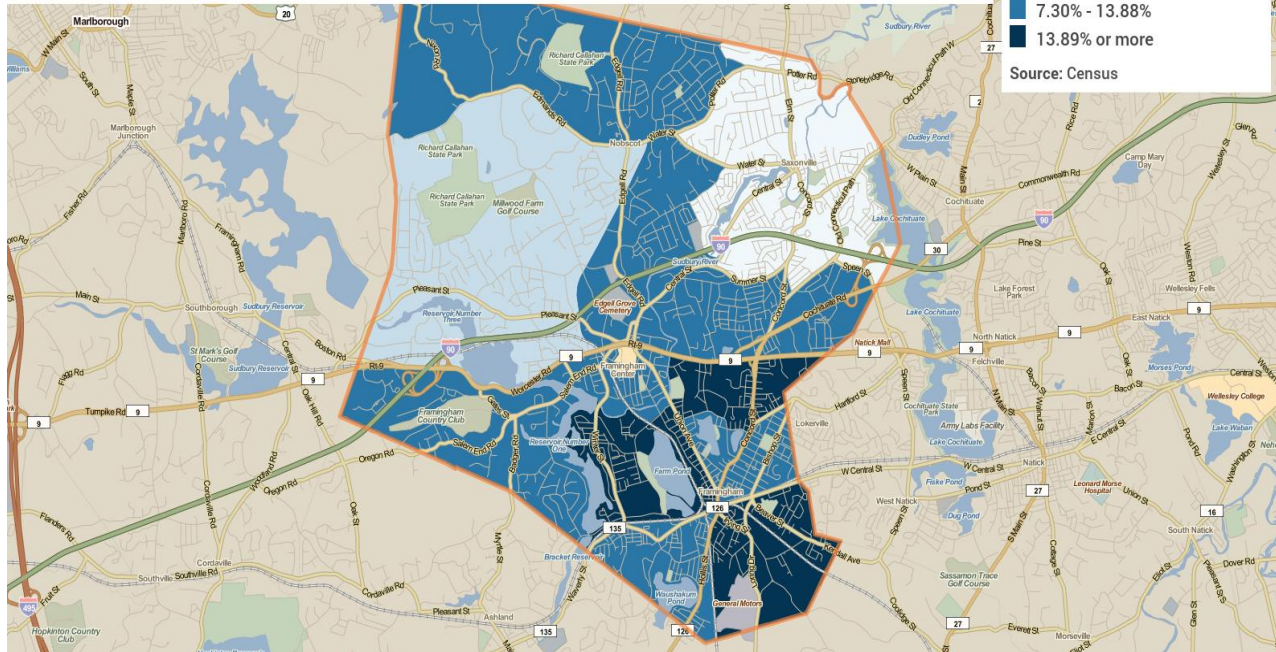
The graphic above represents the amount of barriers that participants reported by income. It is abundantly clear that the amount of money someone has dictates their ability to purchase healthy food. Going forward, the CFA will explore where low-income individuals and food insecurity are in the region, and how low-income impacts peoples' eating habits and health outcomes.

Transportation Inaccessibility for Low-Income Individuals

Several supermarkets and a variety of other options are accessible to people in the Framingham area if they have a car. However, there are many people in the city who do not have a car and do not live in walking distance to a large grocery store where there are more options and lower prices. Low rates of car ownership correlate with areas of lower income.

Estimated percent of housing units for which no vehicles are available in 2012-2016.

Estimated percent of occupied housing units for which no vehicles are available in 2012-2016. Percentage calculations are suppressed in cases where the denominator of the calculation was less than 10 of the unit that is being described (e.g., households, people, householders, etc). Such areas are represented as having 'Insufficient Data' in the map. Denominators for percentage calculations were created by summing all of the component data items in a particular dataset.



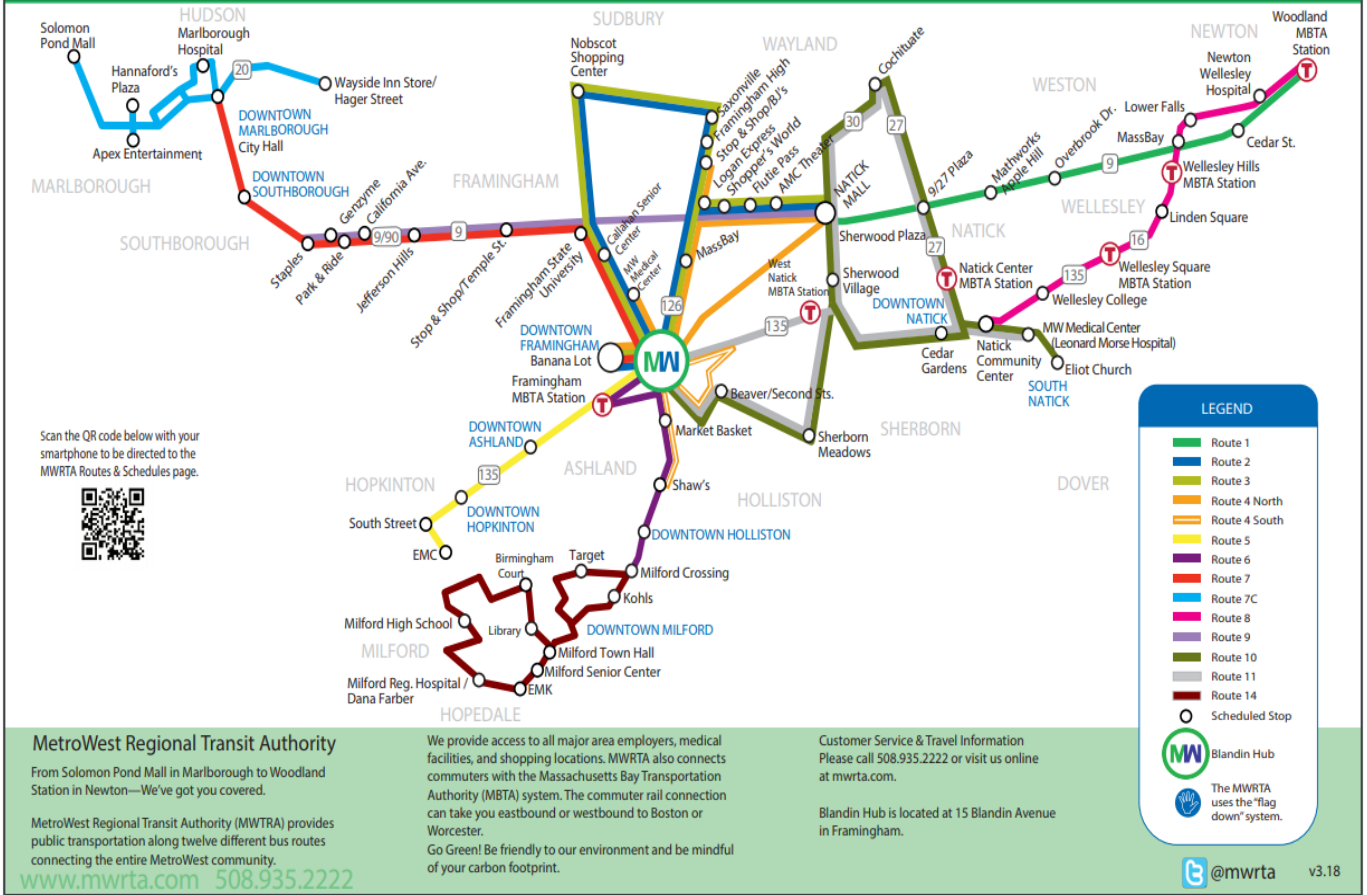
In parts of South Framingham, nearly 14% or more of households do not have access to a personal vehicle.

For many individuals not having a vehicle is due to a lack of money, not because walking and public transit are the most convenient transportation options for them. This lack of physical mobility causes people to resort to smaller grocery stores or convenience stores where there tend to be less nutritious, more expensive options. A focus group participant stated, "a lot of times I am hungry and can't get to the grocery store, so I run to the closest store and grab a Snickers bar or something because it is filling at the moment. Or, I need milk so I end up paying \$5 for it at a convenience store."



METROWEST REGIONAL TRANSIT AUTHORITY

Public Transportation System



The routes of the MWRTA as of May 2018. Source: MetroWest Regional Transit Authority website.

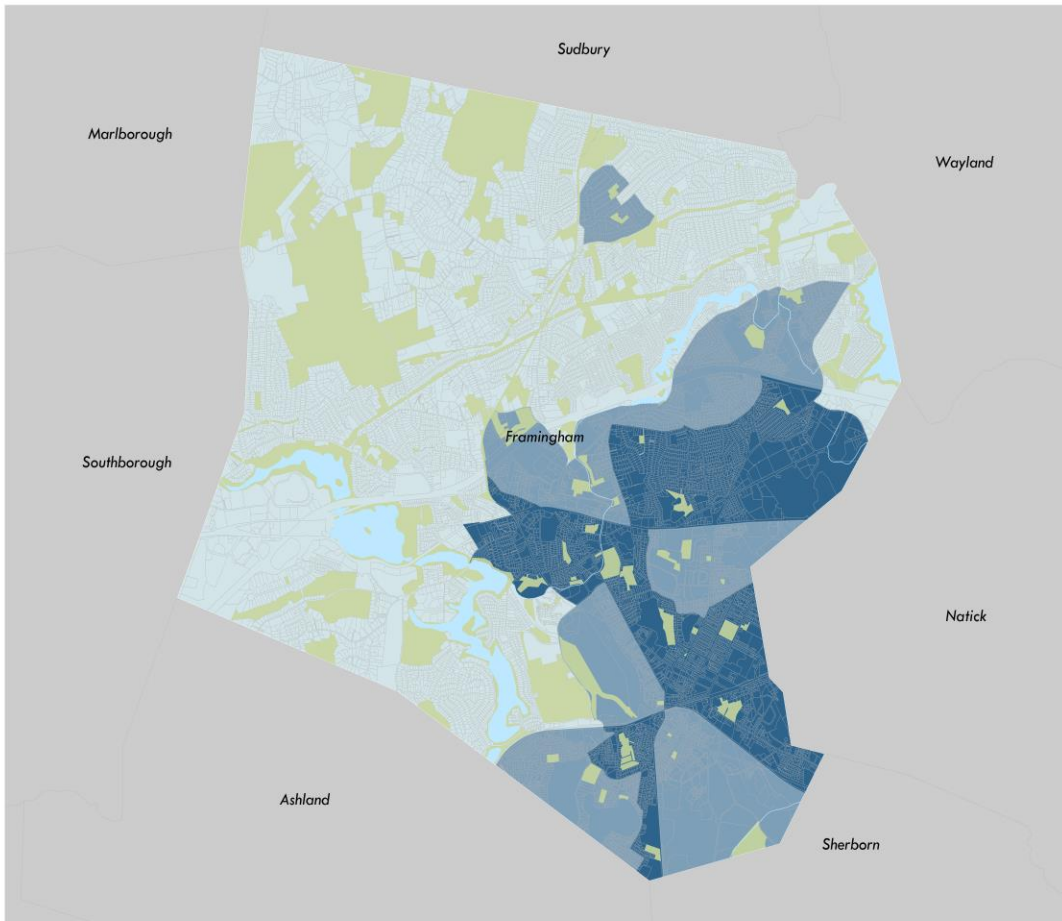
Individuals who don't have a car but live near the downtown have the option of taking the bus to a supermarket such as Market Basket, or Stop & Shop. However, taking the bus can be a strain for people with busy work schedules and children, who have to take their kids with them on the bus and carry several grocery bags at one time. This was a sentiment echoed by several focus group participants, as well as the service providers interviewed who work with low-income clients.

With that being said, transportation issues are not the root cause of the problem. These issues are merely a symptom of the root cause, which is a lack of money. That is not to say that the symptom shouldn't be addressed while addressing the root cause, but merely addressing the symptom will not result in significantly improved access to healthy foods. Stores that sell a variety of nutritious foods can be right next door to someone, but they still won't have adequate access to those foods if they cannot afford them.

While there are many retail sites that sell healthy food in South Framingham, there are very few in North Framingham. Despite this, South Framingham is more food insecure because people are less likely to be able to afford adequate transportation. A notable area that lacks healthy food sites is the southeast corner of the city, where incomes and car ownership are the lowest.



Weighted rankings of where healthy food is available in Framingham.



Framingham

Food Access Score
Along 1 Mile Travel Network

- Rivers and Streams
- Lakes and Ponds
- Open Space

Food Access Score (2016): 1 mile

- Low Healthy Food Access
- Moderate Healthy Food Access
- High Healthy Food Access



The information depicted on this map is for planning purposes only. It is not adequate for legal boundary definition, regulatory interpretation, or parcel-level analyses.

Produced by:
Metropolitan Area Planning Council
60 Temple Place, Boston, MA 02111 | (617) 933-0700

Data Sources:
Metropolitan Area Planning Council (MAPC)
Massachusetts Geographic Information System (MassGIS)
Massachusetts Department of Transportation (MassDOT)

April 2018



Document Path: K:\GIS\GIS\Projects\Current_Projects\GIS\Health_Food_Access\Project\HealthFoodAccessHealthFood_MapMktg.mxd

Estimated typical (median) income of a household between 2012-2016.

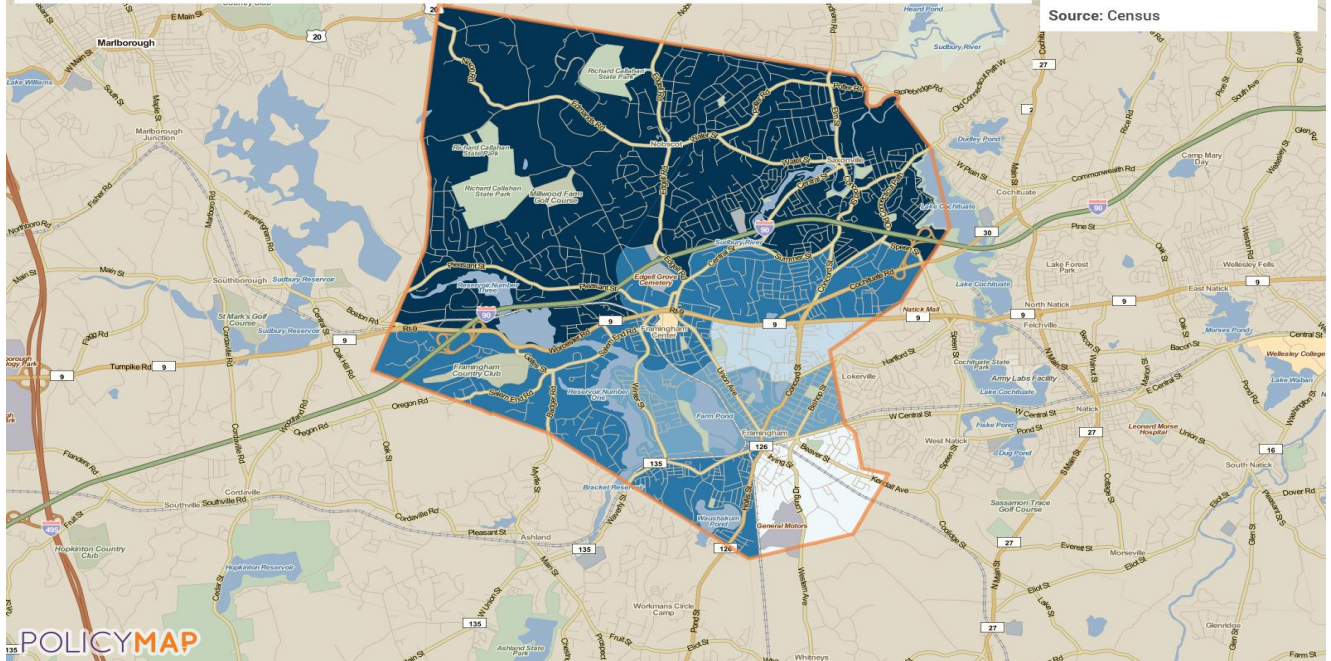
Estimated median household income in the past 12 months, as reported between 2012-2016. A household includes all the people who occupy a housing unit as their usual place of residence. Medians were suppressed in cases where the sample of the average was less than 10 of the unit that is being described (eg, households, people, householders, etc). Such areas are represented as having 'Insufficient Data' in the map. ACS employs values to indicate top and bottom ranges of income. A value of 250,001 indicates a value of 250,000 or greater, whereas a value of 2,499 indicates a value of 2,500 or less.

Median Household Income

Year: 2012-2016
Shaded by: Census Tract, 2010

- Insufficient Data
- \$35,813 or less
- \$35,814 - \$46,842
- \$46,843 - \$58,835
- \$58,836 - \$78,210
- \$78,211 or more

Source: Census



Estimated percent of all families that live in poverty between 2012-2016.

Estimated percent of families that are below poverty level between 2012-2016. A family is defined by the US Census Bureau as a group of two or more people who reside together and who are related by birth, marriage, or adoption. Percentage calculations were suppressed in cases where the denominator of the calculation was less than 10 of the unit that is being described (eg, households, people, householders, etc). Such areas are represented as having 'Insufficient Data' in the map. Denominators for percentage calculations were created by summing all of the component data items in a particular dataset.

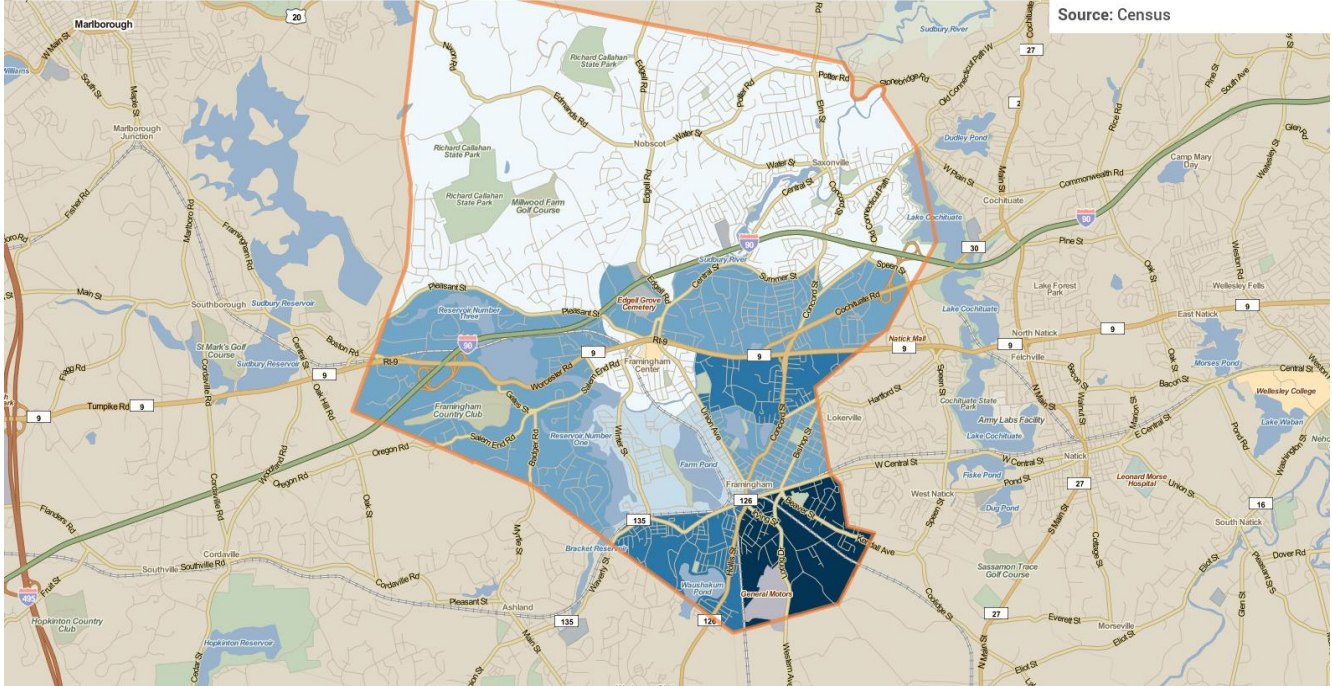
Percent Families in Poverty

Year: 2012-2016

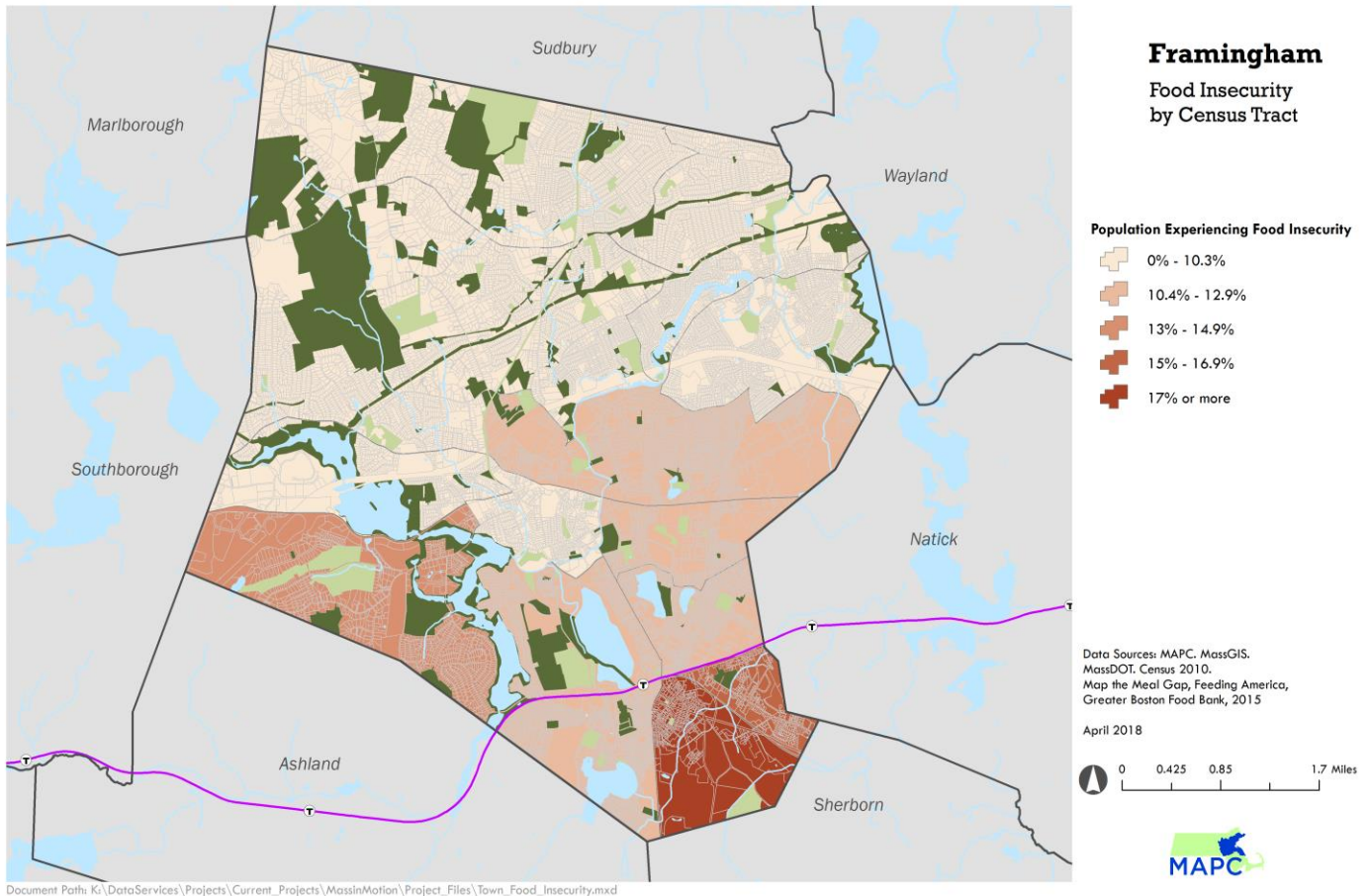
Shaded by: Census Tract, 2010

- Insufficient Data
- 3.50% or less
- 3.51% - 7.00%
- 7.01% - 11.85%
- 11.86% - 20.66%
- 20.67% or more

Source: Census



The areas of the city where there's the highest concentration of poverty, where people have the lowest access to a personal vehicle, and where people self-reported the highest amount of food insecurity are deemed as having moderate or high access to healthy food. Despite the proximity to grocery stores, these areas are actually where the lowest access to healthy food exists due to low incomes and the cost burden of food and other necessities.



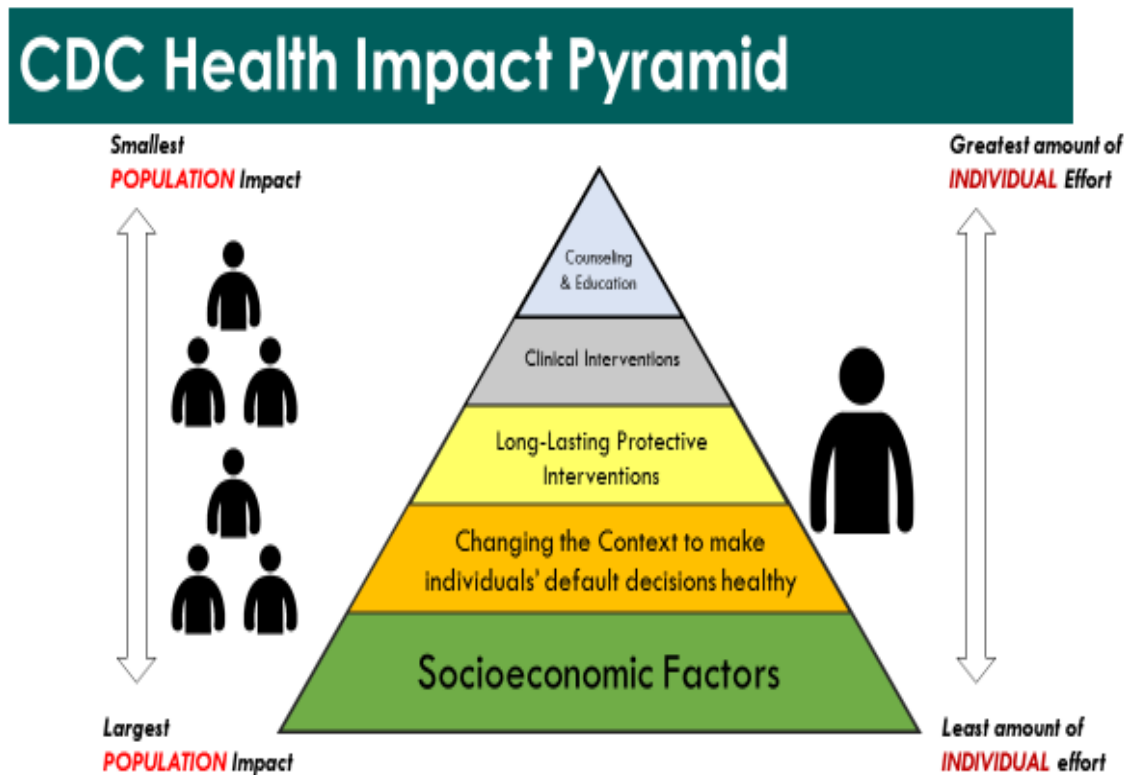
This map of food insecurity gives a much more accurate depiction of where people are food insecure, as it accounts for the barrier that low-income and cost of food creates for people in getting the food they need.

Though this map depicts food insecurity rather than healthy food access, it is likely representative of those who are not able to consistently access healthy foods. People who struggle to get enough food on a daily basis aren't able to prioritize eating a nutritious and well-balanced diet, and therefore eat a significantly less healthy diet that leads to long-term health issues.

Food scarcity is not a significant barrier to food access in most areas of Massachusetts. There is plenty of food that sits in stores in the state and in Framingham to feed everyone. Lower-income individuals simply don't have enough money to purchase this food. Economic inequality, rooted in decades of policy, is at the root of food insecurity and other socioeconomic disparities in the United States.

Impacts of Food Insecurity and Concurrent Issues

The root of food insecurity, as with most major public health issues in the United States, is inequality and lack of economic mobility. Food insecurity is inevitably one of many concurrent issues that result from inequality.



As the CDC recognizes, socioeconomic factors are the most significant predictors of public health issues. Individuals with low-incomes are more likely to be food insecure, eat a poor diet, be obese, report worse health and quality of life, and suffer from chronic conditions such as diabetes, heart disease, and depression (Rose, 1999; Walker, Keane, Burke, 2010; Adams, Grummer-Strawn, & Chavez, 2003). Low-income individuals in South Framingham are not an exception to this trend.

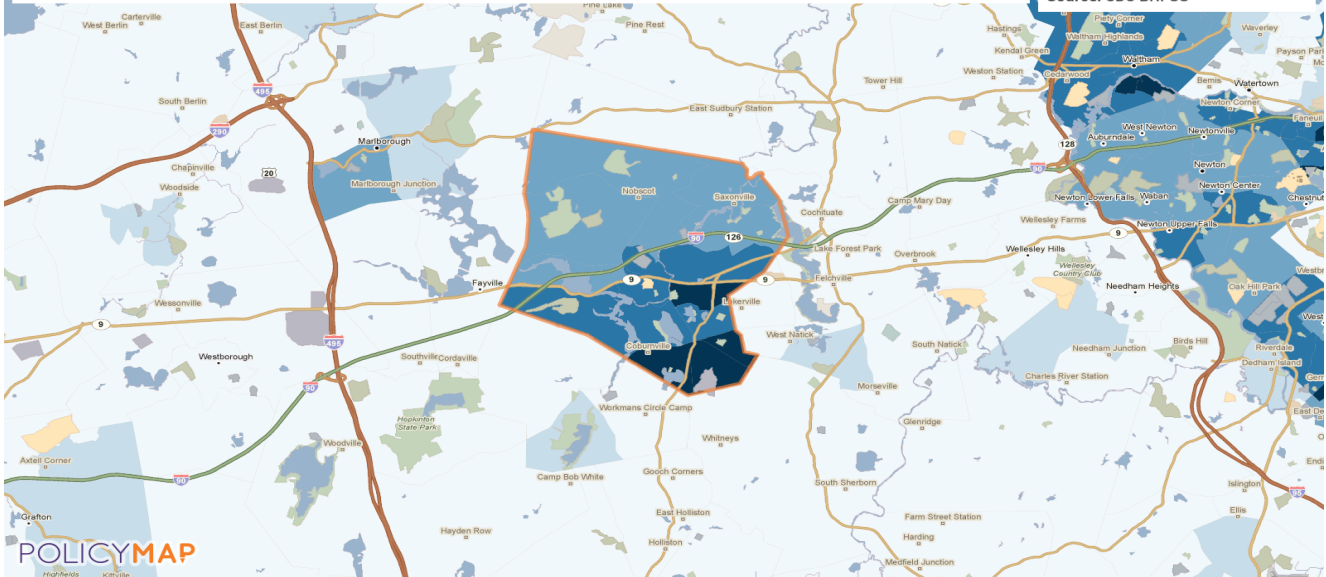
Estimated percent of adults reporting to eat less than 1 serving of fruit/vegetables per day in 2013.

Estimated percent of adults reporting to eat less than 1 serving of fruit/vegetables per day in 2013. Respondents were asked how many times per day, week, or month they consumed fruit and vegetables, including 100 percent pure fruit juices, fresh fruit, frozen fruit, canned fruit, cooked or canned beans, dark green vegetables, orange-colored vegetables, and other vegetables not including fried potatoes. Estimates are population-weighted averages based on data from the CDC Behavioral Risk Factor Surveillance System survey, Census Metropolitan delineation files, and 2009-2013 Census American Community Survey 5-year estimates for adult population and household income by age and race. Estimates are suppressed in areas where the population for which ACS income by age and race data are available is less than 20; these areas are displayed as having "Insufficient Data" on the map.

Pct. of Adults Reporting to Eat < 1 Serving of Fruit/Vegetables per Day
 Year: 2013
 Shaded by: Census Tract, 2010

- Insufficient Data
- 6.35% or less
- 6.36% - 7.04%
- 7.05% - 7.90%
- 7.91% - 9.62%
- 9.63% or more

Source: CDC BRFFS



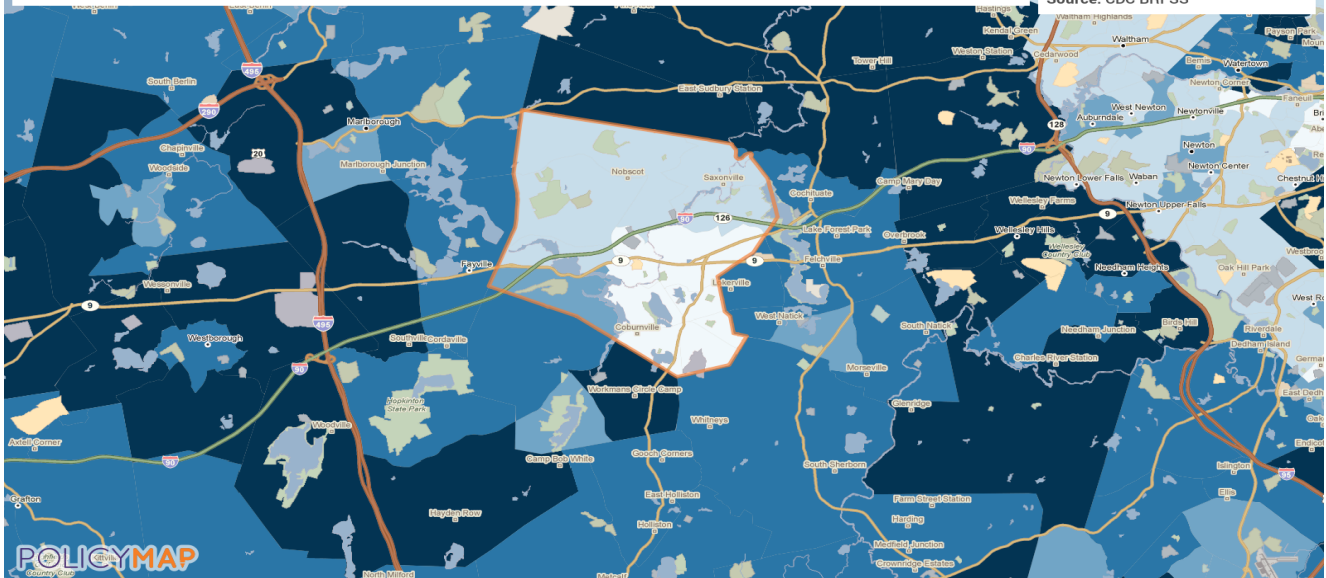
Estimated percent of adults reporting to eat five or more servings of fruit/vegetables per day in 2013.

Estimated percent of adults reporting to eat five or more servings of fruit/vegetables per day in 2013. Respondents were asked how many times per day, week, or month they consumed fruit and vegetables, including 100 percent pure fruit juices, fresh fruit, frozen fruit, canned fruit, cooked or canned beans, dark green vegetables, orange-colored vegetables, and other vegetables not including fried potatoes. Estimates are population-weighted averages based on data from the CDC Behavioral Risk Factor Surveillance System survey, Census Metropolitan delineation files, and 2009-2013 Census American Community Survey 5-year estimates for adult population and household income by age and race. Estimates are suppressed in areas where the population for which ACS income by age and race data are available is less than 20; these areas are displayed as having "Insufficient Data" on the map.

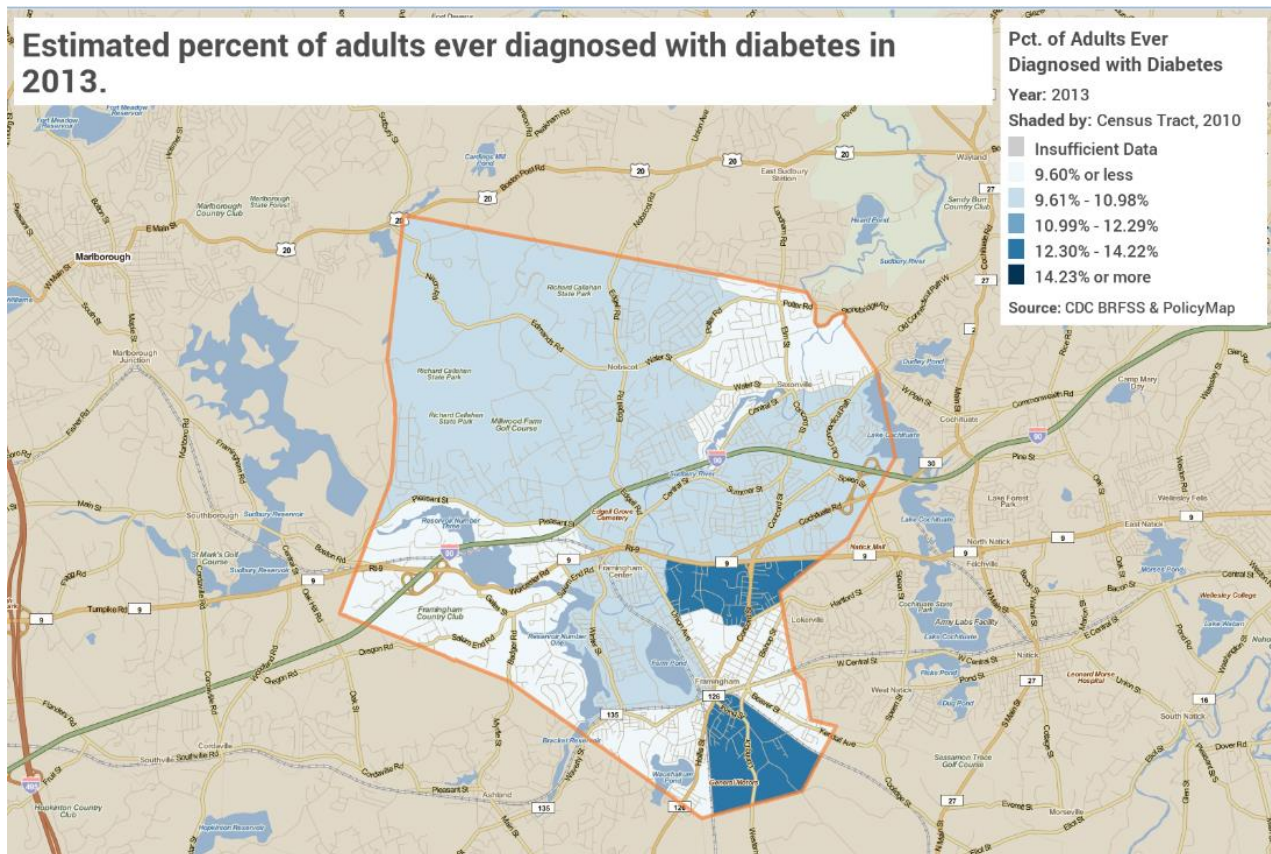
Pct. of Adults Reporting to Eat Five or More Servings of Fruit/Vegetables per Day
 Year: 2013
 Shaded by: Census Tract, 2010

- Insufficient Data
- 15.20% or less
- 15.21% - 15.92%
- 15.93% - 16.55%
- 16.56% - 17.21%
- 17.22% or more

Source: CDC BRFFS



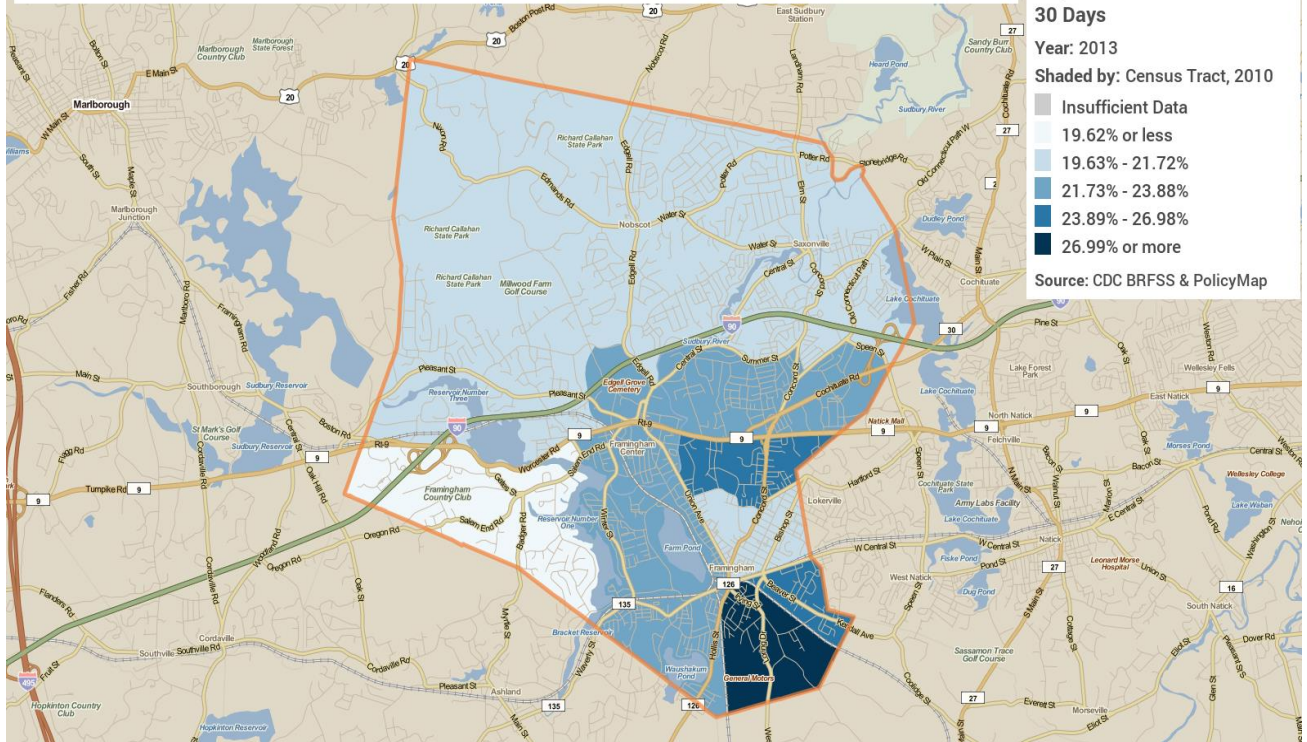
The contrast between the amount of fruits and vegetables that people in Framingham (particularly South Framingham) and municipalities in the surrounding communities eat is significant. It is incredibly apparent that this is an income discrepancy more than a lifestyle choice, as the surrounding towns in Middlesex and Norfolk County are generally some of the wealthiest in the state, and therefore are able to afford to eat more fruits and vegetables. This lack of consumption of healthy food impacts the likelihood of chronic disease, and cognitive difficulties (Jyoti, Frongillo, & Jones, 2005; Seligman, Laraia & Kushel, 2010).



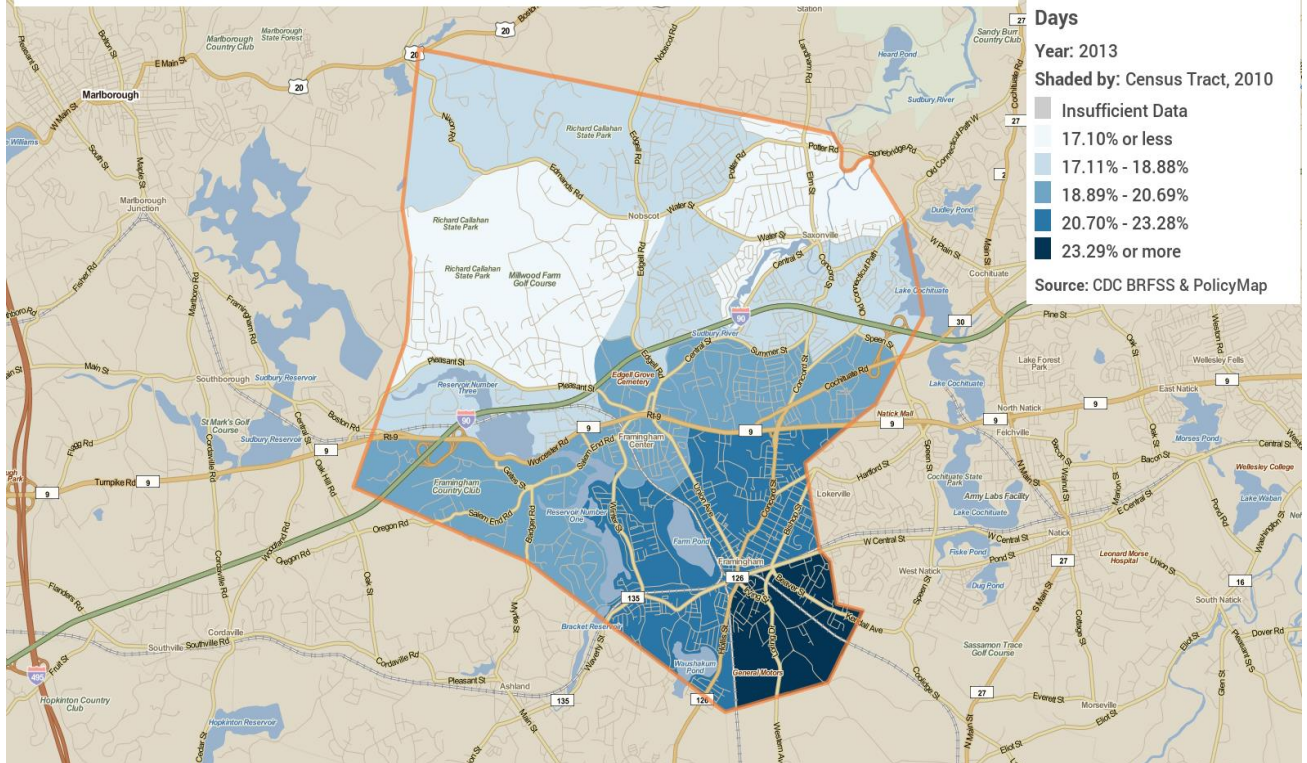
Diabetes is a major public health challenge for Massachusetts and for the United States.

Type two diabetes has a higher occurrence in older adults, and has a higher incidence in lower-income individuals (Seligman, Jacobs, Lopez, & Tschann, 2012). North Framingham has an average age of 44.7, while South Framingham has an average age of 34.3 (U.S. Census Bureau, 2010). Despite this age difference, there are still high concentrations of individuals with diabetes in the areas of the city with the lowest income. The trend of worse reported health outcomes in this area of the city, particularly in the southeast corner of the city, extends to several other issues as well.

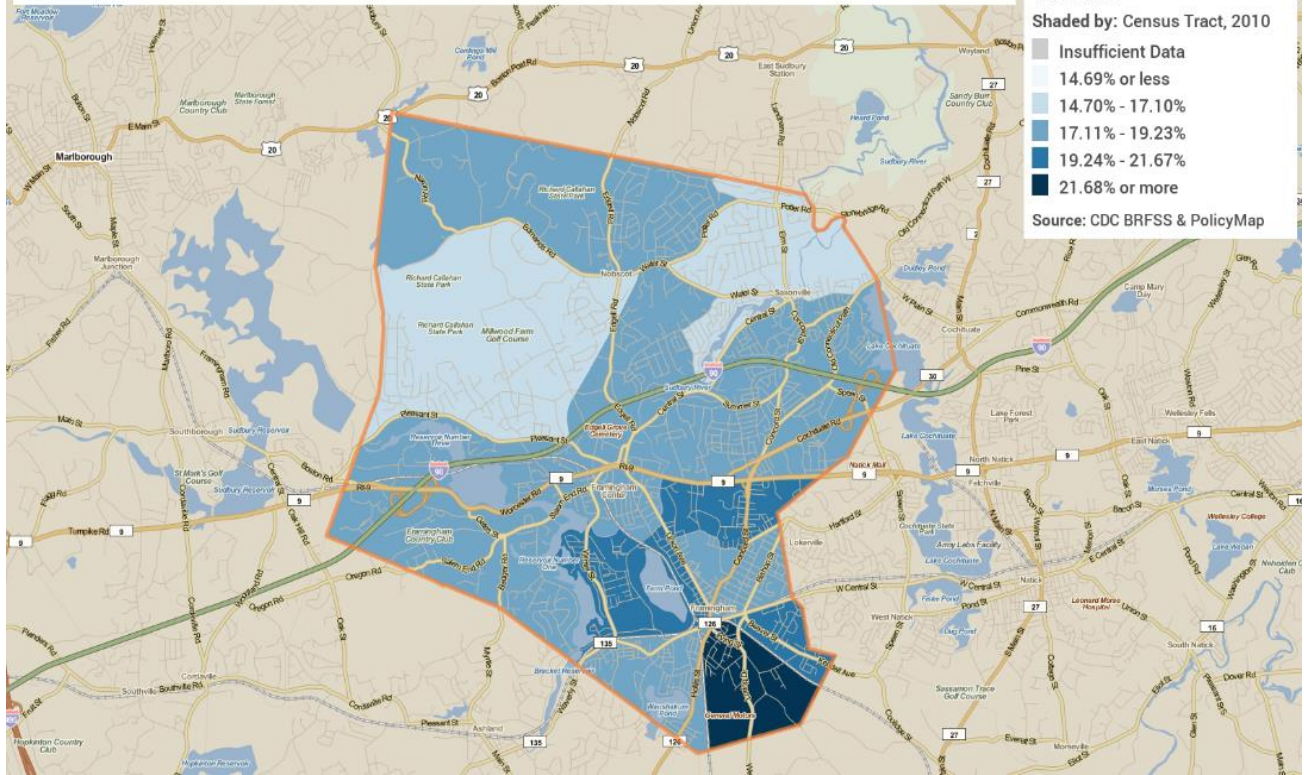
Estimated percent of adults reporting seven or more days of poor physical health in the past 30 days in 2013.



Estimated percent of adults reporting seven or more days of poor mental health in the past 30 days in 2013.

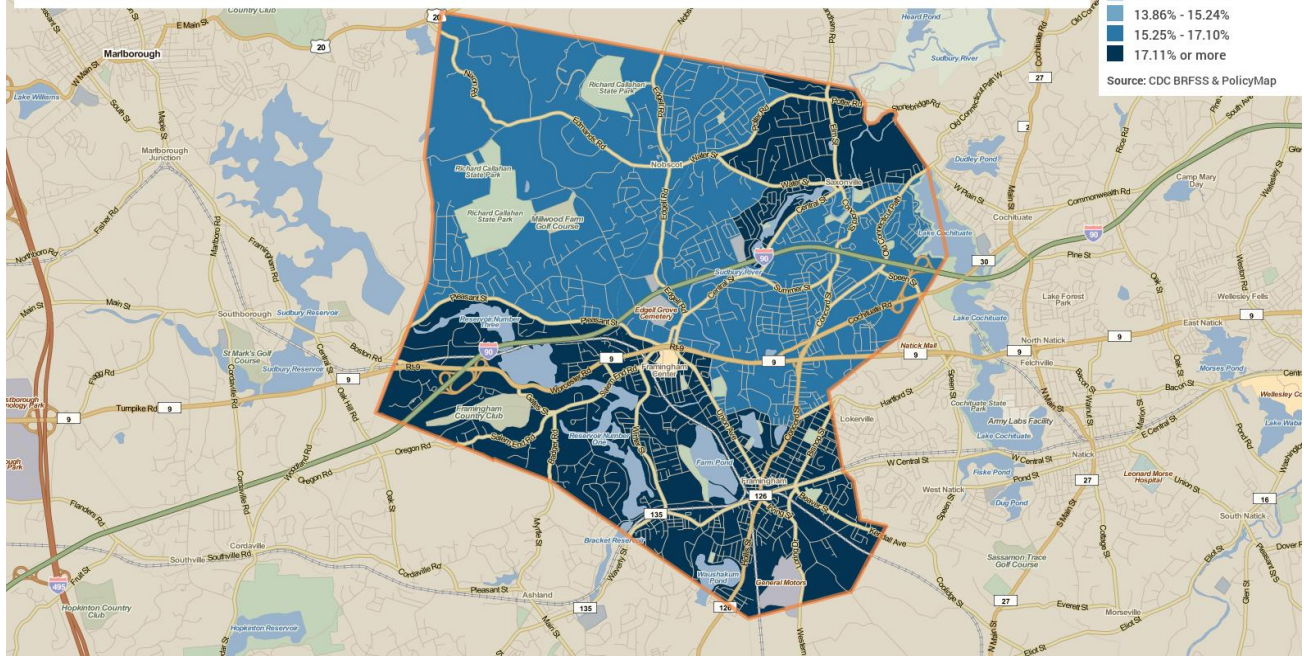


Estimated percent of adults ever diagnosed with depression in 2013.



Estimated percent of adults reporting to engage in binge drinking in 2013.

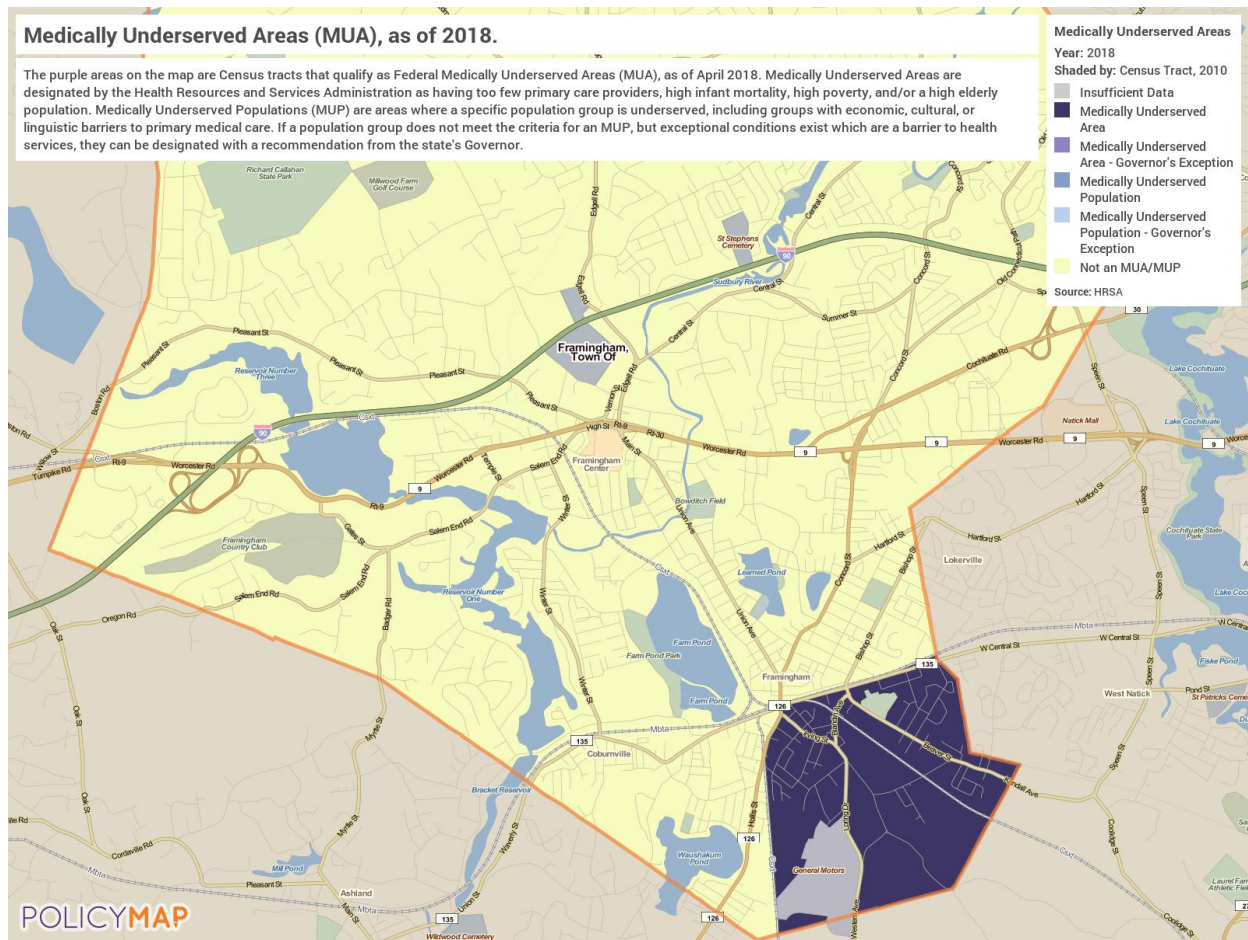
Estimated percent of adults reporting to engage in binge drinking in 2013. Binge drinking is defined as having 5 or more alcoholic drinks on an occasion for men, and 4 or more drinks on an occasion for women. Estimates are population-weighted averages based on data from the CDC Behavioral Risk Factor Surveillance System survey, Census Metropolitan delineation files, and 2009-2013 Census American Community Survey 5-year estimates for adult population and household income by age and race. Estimates are suppressed in areas where the population for which ACS income by age and race data are available is less than 20; these areas are displayed as having "Insufficient Data" on the map.



While binge drinking is occurring at high rates all over the city, it is no coincidence that binge drinking is highest in the poorest areas of the city.

The same areas where mental health issues are more prevalent are the same areas where physical health is reportedly worse, and incomes are the lowest. As with physical health, mental health outcomes are largely tied to social processes and environmental triggers (Goldberg & Huxley, 1992).

If someone develops a mental or physical health issue in South Framingham, they are less likely to be able to seek appropriate treatment, as they are less likely to be insured and/or have the money for treatments.



The area of Framingham that is federally designated to be medically underserved is also the poorest.

Estimated percent of all people with health insurance between 2012-2016.

Estimated percent of the population with health insurance coverage between 2012-2016. Percentage calculations were suppressed in cases where the denominator of the calculation was less than 10 of the unit that is being described (e.g., households, people, householders, etc). Such areas are represented as having 'Insufficient Data' in the map. Denominators for percentage calculations were created by summing all of the component data items in a particular dataset.

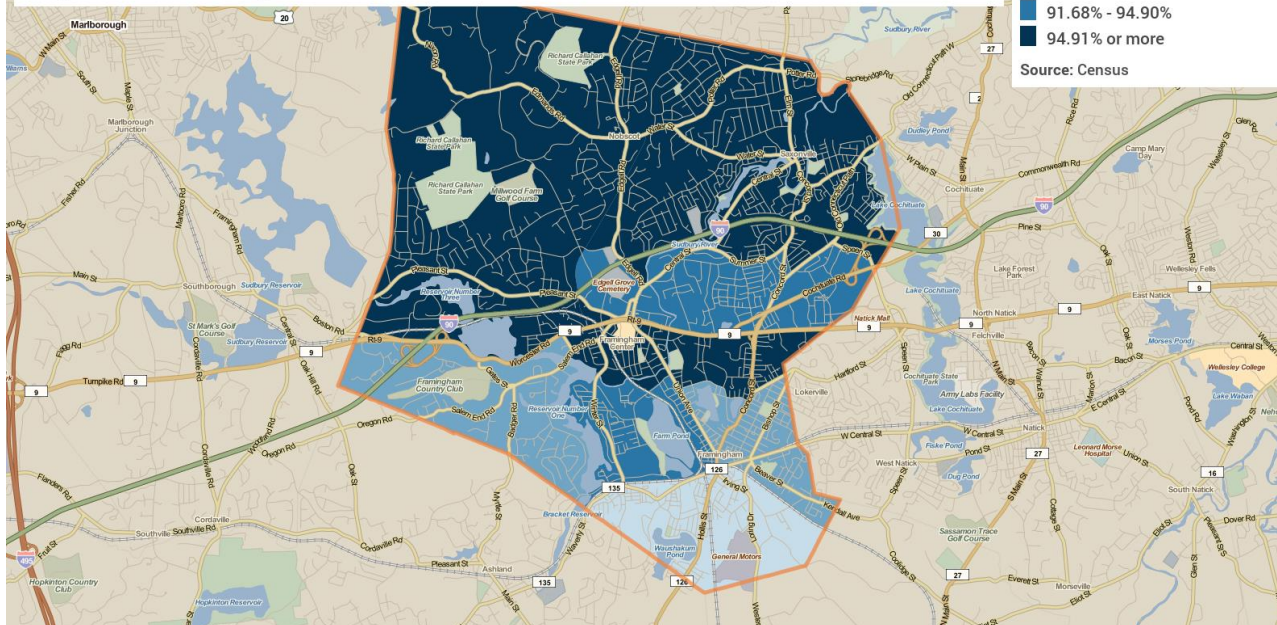
Percent People With Health Insurance

Year: 2012-2016

Shaded by: Census Tract, 2010

- Insufficient Data
- 82.62% or less
- 82.63% - 87.97%
- 87.98% - 91.67%
- 91.68% - 94.90%
- 94.91% or more

Source: Census



Lower insured rates in South Framingham mean that people aren't able to get the preventative care or treatment they may need, intensifying the impact that chronic conditions have on the community.

Estimated percent of adults reporting to have a personal doctor or health care provider in 2013.

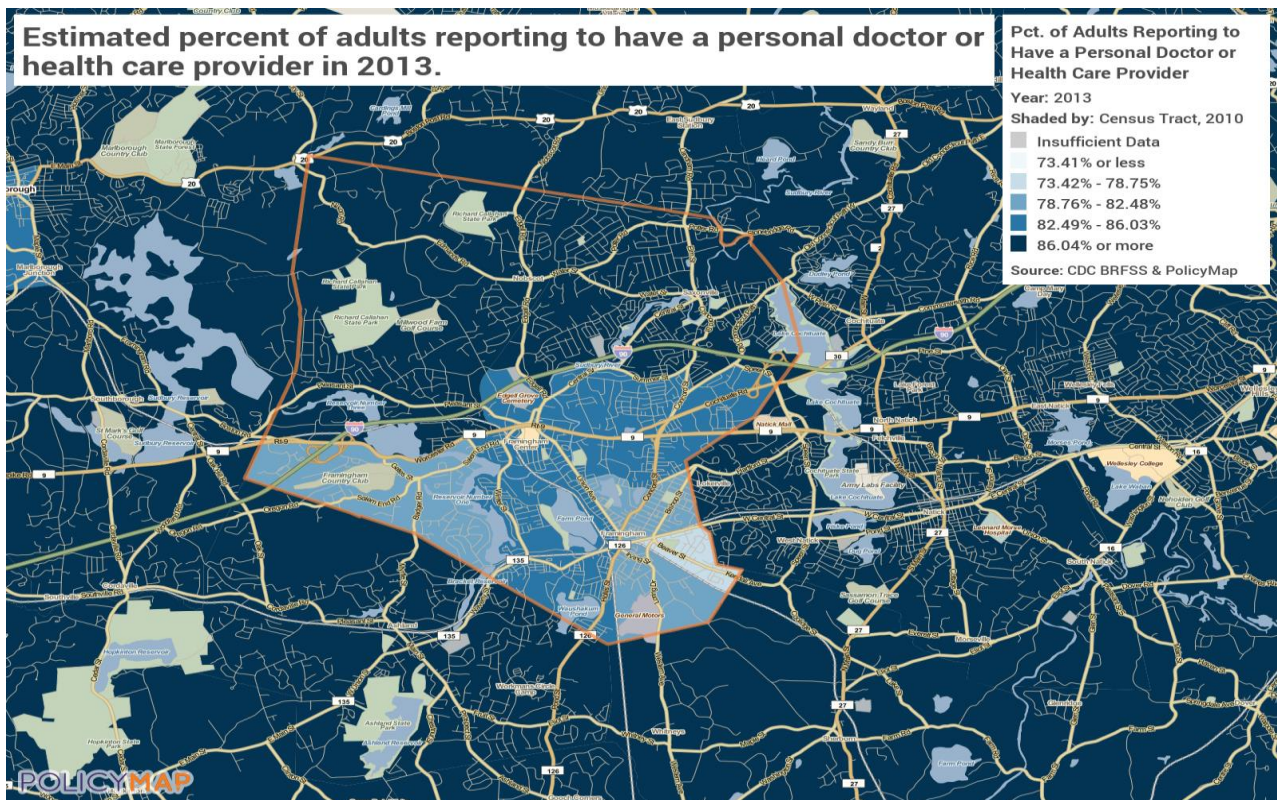
Pct. of Adults Reporting to Have a Personal Doctor or Health Care Provider

Year: 2013

Shaded by: Census Tract, 2010

- Insufficient Data
- 73.41% or less
- 73.42% - 78.75%
- 78.76% - 82.48%
- 82.49% - 86.03%
- 86.04% or more

Source: CDC BRFSS & PolicyMap



This is not an issue of spatial access, as all the bordering communities have significantly higher access to healthcare than people in South Framingham do.

When people in South Framingham develop a chronic condition, they are less likely to receive adequate treatment and care to prevent their conditions from worsening. People's inability to access the proper treatment is not an issue of spatial access. Downtown Framingham is home to a range of medical care options, including a variety of mental health treatment facilities and practices. It is clear that the issue is economic inaccessibility.

Inequality and the power relations that accompany it are at the root of every major public health problem: disproportionate amounts of environmental justice issues, cardiovascular disease, diabetes, mental health issues, crime, and more (Wilkinson & Pickett, 2006). Food insecurity is no exception to this rule.

South Framingham (particularly the south east corner of the city) seems to have the highest amount of concurrent issues in comparison to the rest of the city. In order to create appropriate solutions to food insecurity, it must be understood how food insecurity and the issues that run parallel to it are rooted in economic inequality.

Economic Mobility in Framingham and the United States

Earlier in the assessment, it was discussed how the two zip codes of Framingham are dramatically different communities. Included in these differences is that if you are a resident of South Framingham your wealth, and subsequently health and quality of life, are likely to be lower compared to the average resident of North Framingham. This is not a coincidence. Decades of policy created a situation where predominantly non-white people maintained a low socioeconomic status for generations, with little opportunity for upward mobility. People born on the wrong end of inequality are not given the social and economic tools to thrive in the modern United States.

Framingham does not exist as an isolated place. Framingham exists as a city within Massachusetts, within the United States, and within the world. The challenges that Framingham faces in making sure that all of its' citizens are able to attain a healthy lifestyle are not unique. These challenges are interconnected with and mirrored in other communities in Massachusetts and the United States. While every community is different in its' stakeholders, culture, and overall dynamics, society cannot responsibly ignore the common historical themes that have resulted in systemic economic inequality when looking to address food insecurity. This section will examine the broader economic processes in the United States and Framingham that have resulted in low economic mobility for people who are born into families of low socioeconomic status.

Economic Mobility in the United States

The influence of socioeconomic status on health outcomes has been documented for centuries in societies all over the world (Glymour, Avendano & Kawachi, 2014). Being poor is an impediment to living a long and healthy life. Given the extensive evidence of this fact, any country that wants to improve public health conditions would surely aim to reduce economic inequality.

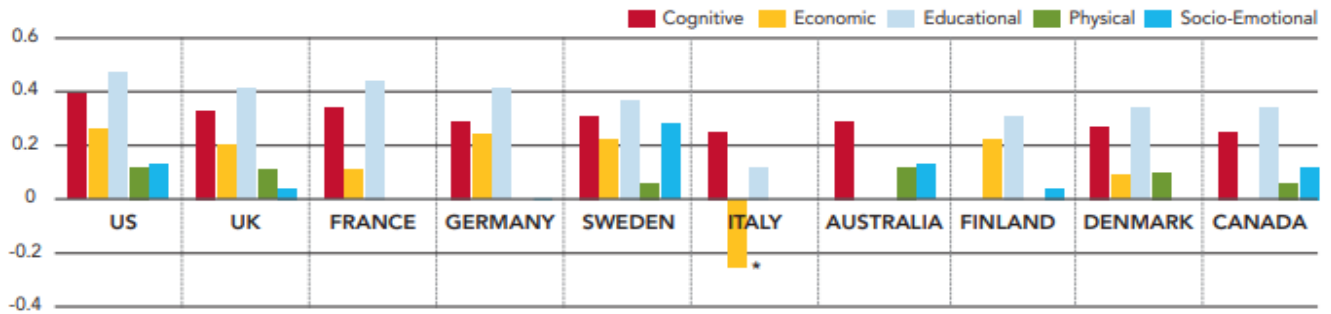
The United States has long been billed as “The Land of Opportunity,” a title that implies that people can attain any financial or social status as a result of their effort. While this certainly is possible, there are more barriers to attaining high socioeconomic status than “The Land of Opportunity” title suggests.

There is a stronger link between someone's parents' education, economic status, and social outcomes in the United States than in any other developed country, according to the Pew Economic Mobility Project. People who are born into low-

income families in the United States have a lesser chance of earning a middle or upper class income, despite the narrative of the United States as a place where people can get rich as long as they work hard.

Children's Outcomes on a Range of Measures are Related to their Parents' Education

The higher the bar above the x-axis, the stronger the relationship between parental education and children's mobility-related outcomes



NOTES: Examples of measurements include: Cognitive – IQ and other test scores; Economic – income and labor market position; Educational – grades and final attainment; Physical – health and birth weight; Socio-emotional – mental health and childhood behavior. Data limitations prevented researchers from investigating all five measures in each country studied, as reflected in the variation in number of outcome measures reported by country.

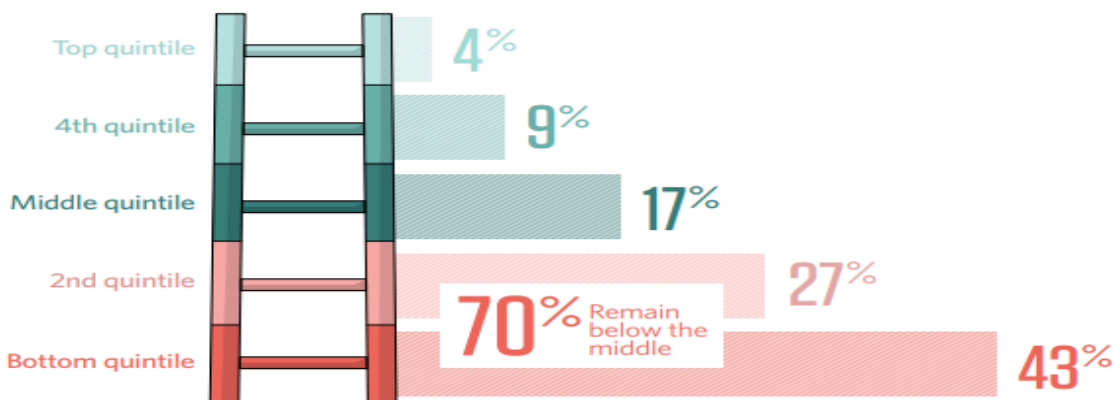
* Italy is an outlier with the only negative point estimate for the economic domain. This is driven by the timing of the labor market measurements (when children are in their early twenties) when children with high-educated parents are more likely to be in higher education themselves and residing with their parents rather than in the workforce.

SOURCE: Figure created with data from Chapter 2 in *From Parents to Children: The Intergenerational Transmission of Advantage*, forthcoming from Russell Sage Foundation Publications.

Children's economic mobility and educational attainment in the United States is significantly impacted by their parent's educational attainment.

Most Americans Born at the Bottom of the Income Ladder Never Reach the Middle Rung

Percent of Americans raised in the bottom income quintile who stay put or move up as adults

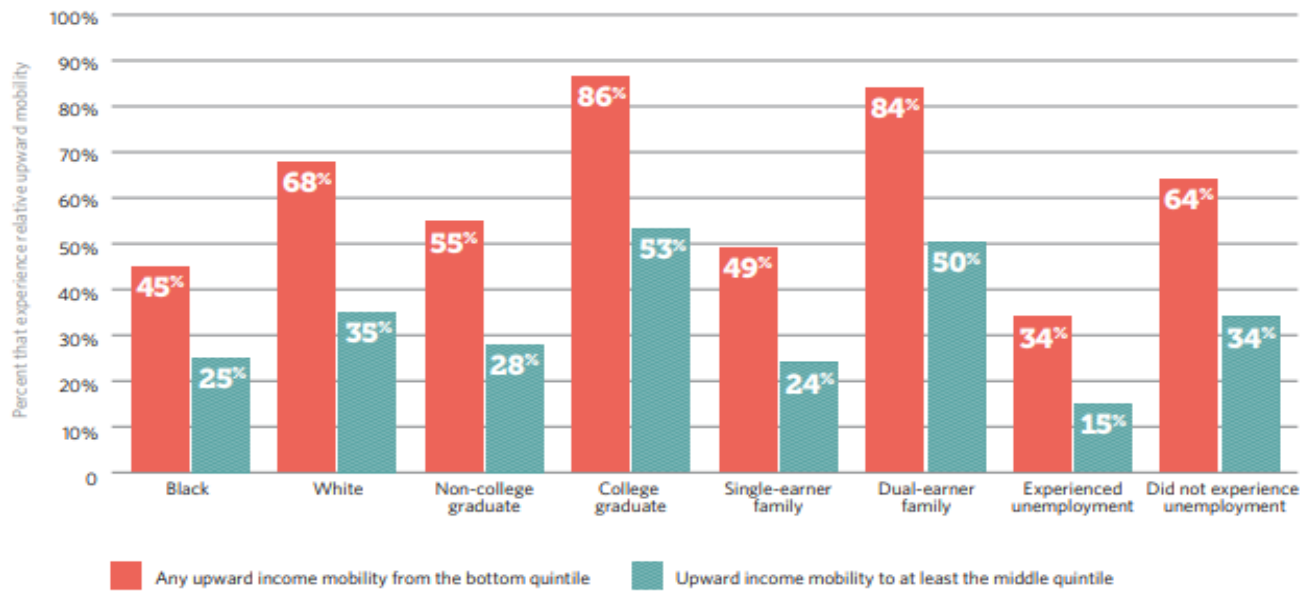


Source: The Pew Charitable Trusts, "Pursuing the American Dream," 2012
© 2013 The Pew Charitable Trusts

Statistics like this depict how challenging it is for children from low-income families to grow up to earn more money than their parents in 21st Century America.

Factors Such as Race, Education, and Number of Earners Influence Poor Americans' Movement Up the Income Ladder

Percentage of Americans who move up from the bottom quintile, by demographic characteristic



Source: Pew analysis of Panel Study of Income Dynamics
© 2013 The Pew Charitable Trusts

Race and educational attainment are notable predictors of who moves out of the bottom quintile of income.

Though legal segregation has long been over, the impacts of decades of economic, educational, housing and investment policies are still having lingering effects. Segregation, redlining and federal investment policies, and discriminatory housing policies in the early and mid-20th Century sustained and increased racial inequality in the United States. The effects of these policies are still rearing their ugly head in economic and social outcomes. Non-white people have lower upward income mobility than whites, as well as worse educational attainment. People born into low-income are faced with more obstacles and less opportunity to earn a decent living, and therefore less opportunity to achieve a high quality of life and good health. It is impossible to discuss inequality in Framingham and in the United States without understanding these processes. The rest of this section will focus on why upward income mobility is difficult for people in the present day in Framingham and the United States.

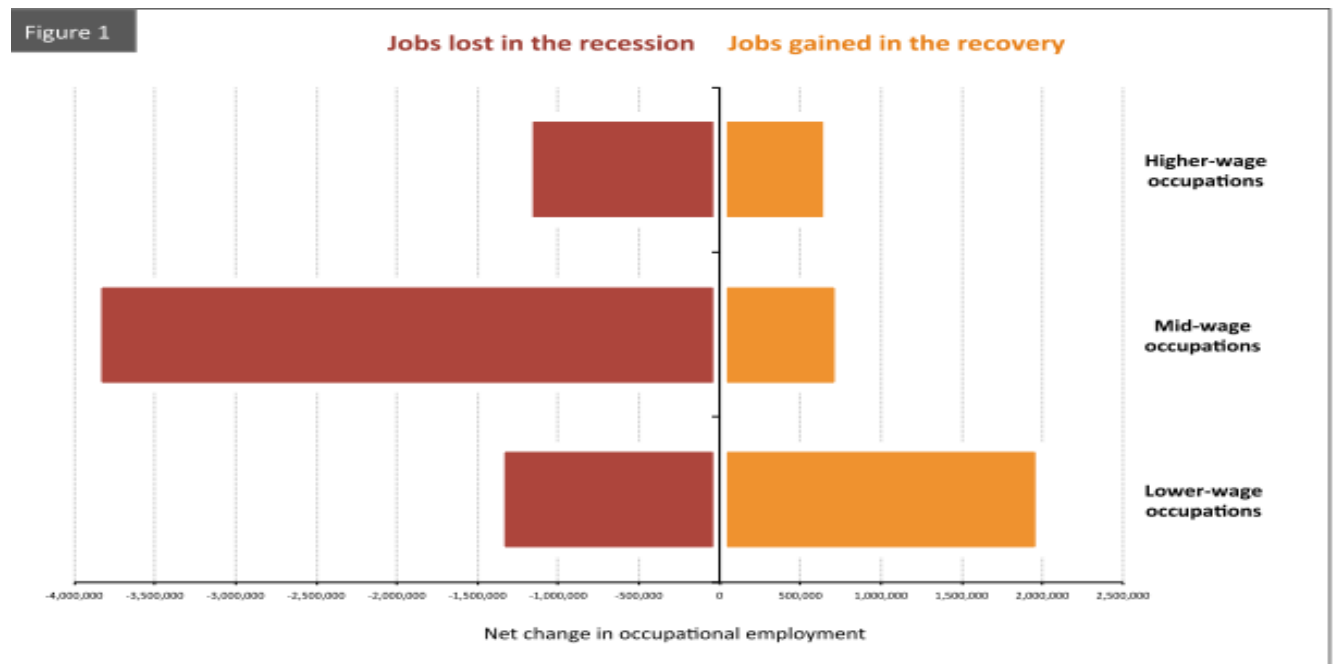
Society should not take for granted the massive amount of wealth that has been generated in the United States over the course of the last century or so. Instead, recognize the structural forces that have created disparities in who has access to

this wealth and aim to create a society where wealth and mobility are more accessible to people of all races and backgrounds.

Opportunities for Educational Attainment and Employment

According to the Bureau of Labor Statistics March 2018 Report, the unemployment rate in United States is 4.1%. At the height of the recession in 2009, it was 10% (Bureau of Labor Statistics). In Framingham, the unemployment rate is 3.2% as of the March 2018 BLS report. Though people are employed at a statistically healthy rate, many are either underemployed or don't make enough money in their position. According to a 2016 survey of over 900,000 Americans done by PayScale, 46% of people reported being underemployed.

One of the big issues with the post-recession economy is that the majority of the job recovery occurred in low-wage, service sector jobs. During the recovery, mid-wage occupations made up 60 percent of job loss, but only 22 percent of recovery growth. Meanwhile, low-wage jobs made up 21 percent of recession losses, but 58 percent of recovery growth (National Employment Law Project, 2012). In other words, most people have jobs, but not ones that pay them enough to live high quality lives.

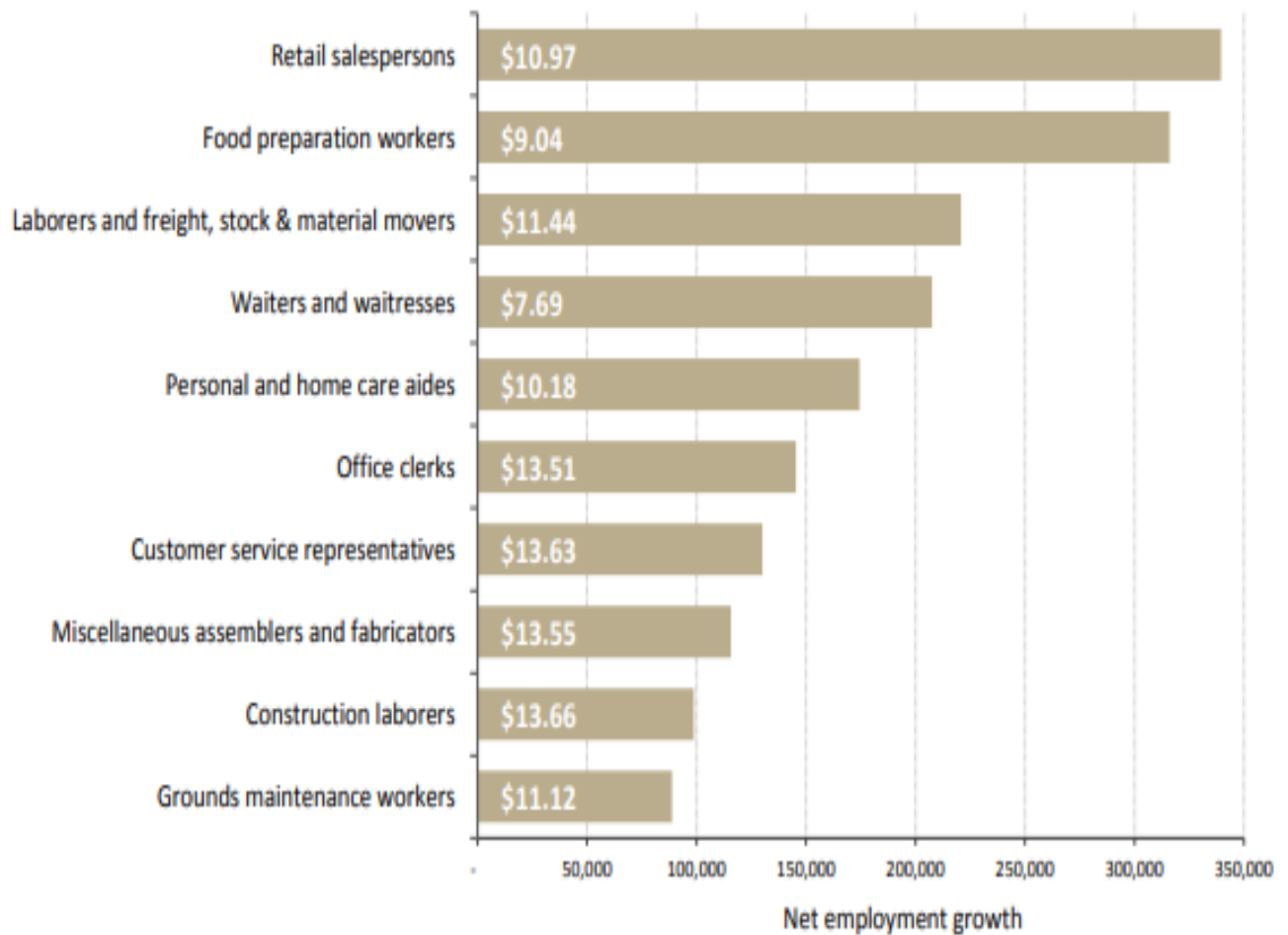


Source: NELP analysis of Current Population Survey. Recession is 2008 Q1 to 2010 Q1; recovery is 2010 Q1 to 2012 Q1.

Lower-wage occupations were defined as median hourly wages from \$7.69 to \$13.83, mid-wage occupations as median hourly wages from \$13.84 to \$21.13, and higher-wage occupations as median hourly wages from \$21.14 to \$54.55.

Figure 2

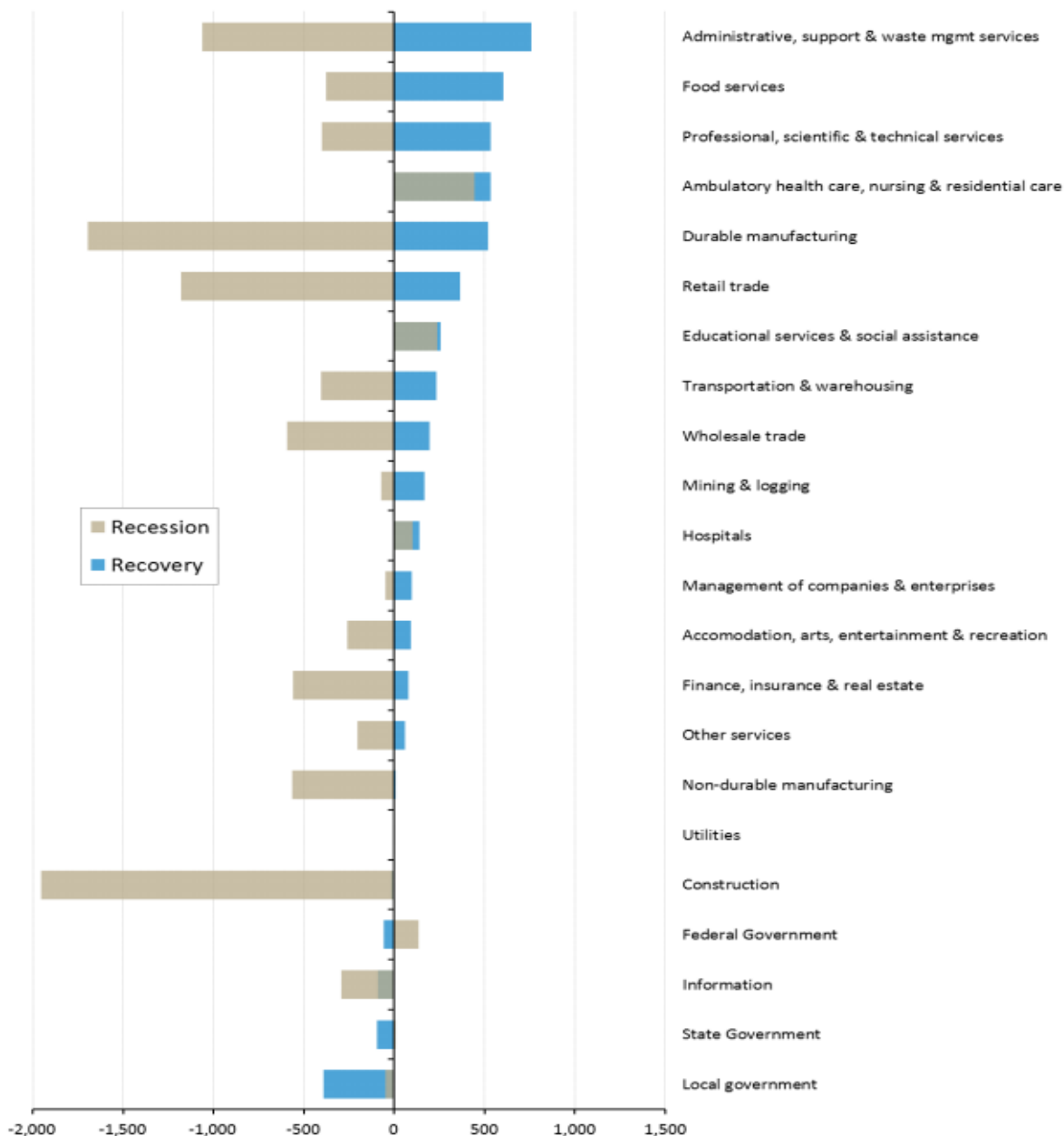
Lower-wage occupations with the biggest growth during the recovery (with median hourly wages)



Source: NELP analysis of Current Population Survey.
Recovery is 2010 Q1 to 2012 Q1; median wages in 2012 dollars.

Figure 4

Net change in industry employment (in thousands)

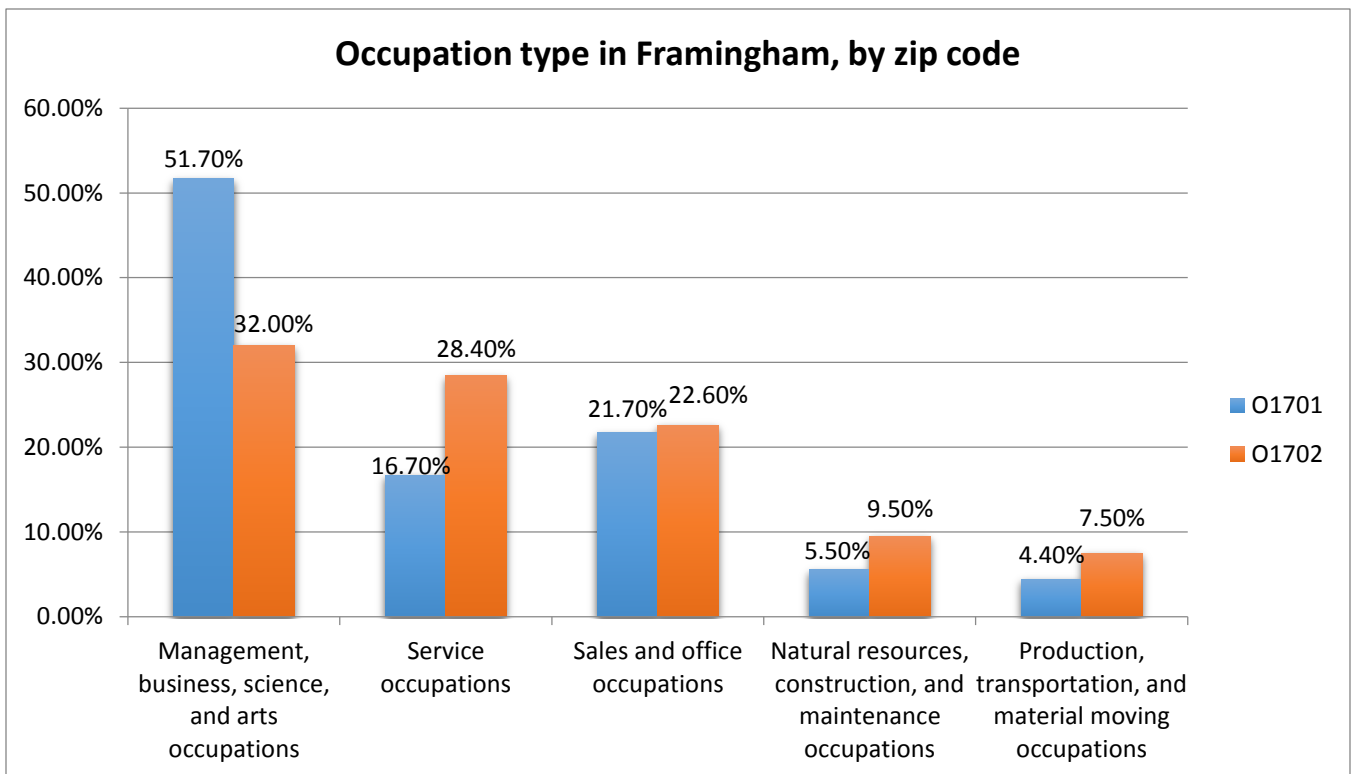


Source: NELP analysis of BLS Current Employment Statistics. Recession is 2008 Q1 to 2010 Q1; recovery is 2010 Q1 to 2012 Q1

Though the United States had been leaking manufacturing positions for several decades, these positions that historically allowed for a middle-class lifestyle took a major hit during the recession. Construction took a major hit as well, as the rapid pace of infrastructure developments of the early and mid-2000's halted during the recession.

Framingham is not immune to the broader trend that is the rise of service sector positions that do not pay people enough money to have a high quality of life. This growth in low-end service sector positions is absolutely reflected in Framingham's economy. As of 2016, 23.0% of people who were employed in Framingham were working in service occupations.

As with health disparities, incomes, food insecurity, and other issues, the amount of people working in low-end service sector jobs are not evenly distributed in North and South Framingham.



Along with the difference in who is serving in service sector positions, the biggest disparity is that the “management, business, science, and art” occupations employ 51.70% of people in North Framingham, as opposed to 32.00% of people in South Framingham. These positions are associated with higher educational attainment, and higher incomes.

While service occupations make up a large portion of the Framingham economy, this industry disproportionately dominates one area of the city over the other. The long-term earnings for someone in the service sector limits their economic mobility. This is represented by the disparity in income between people in North and South Framingham.

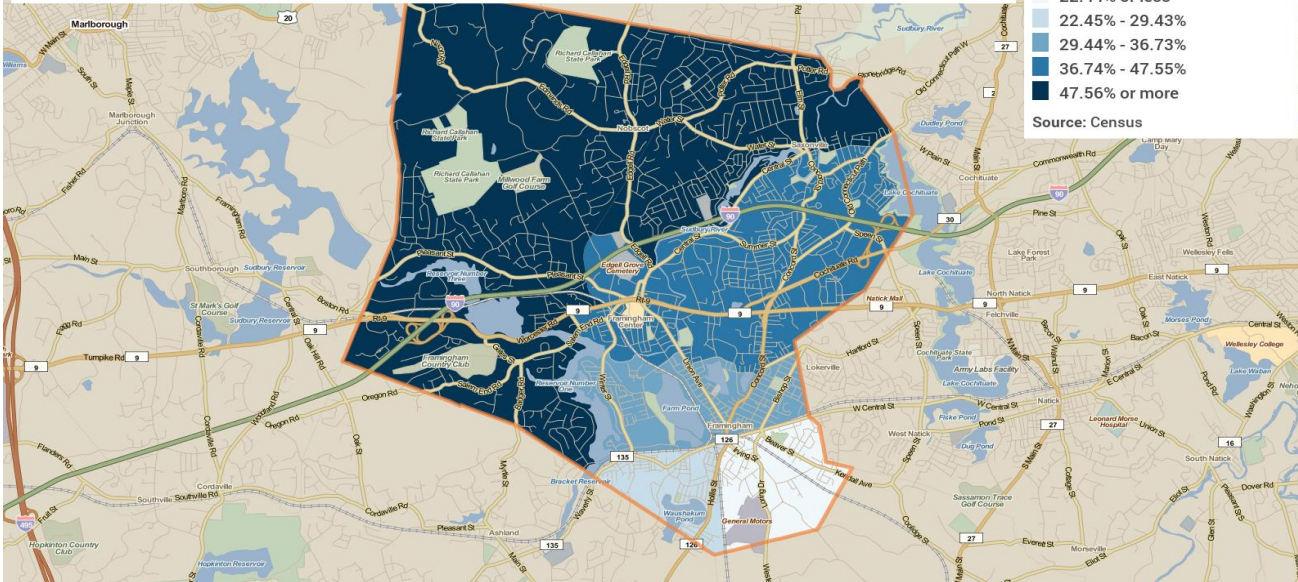
Estimated percent of employed people age 16 years or older who were in management, business, science, and arts occupations between 2012-2016.

Estimated percent of employed people age 16 years or older who were in management, business, science, and arts occupations between 2012-2016. For people with multiple jobs, this refers to the job where they worked the most hours.

Percent Employment in Management, Business, Science, and Arts Occupations
 Year: 2012-2016
 Shaded by: Census Tract, 2010

- Insufficient Data
- 22.44% or less
- 22.45% - 29.43%
- 29.44% - 36.73%
- 36.74% - 47.55%
- 47.56% or more

Source: Census



Careers in business, management, science, and arts are dominated by people with advanced degrees and technical training. This sector accounts for 41.0% of all occupations in Framingham, but dominates in the wealthier portion of the city.

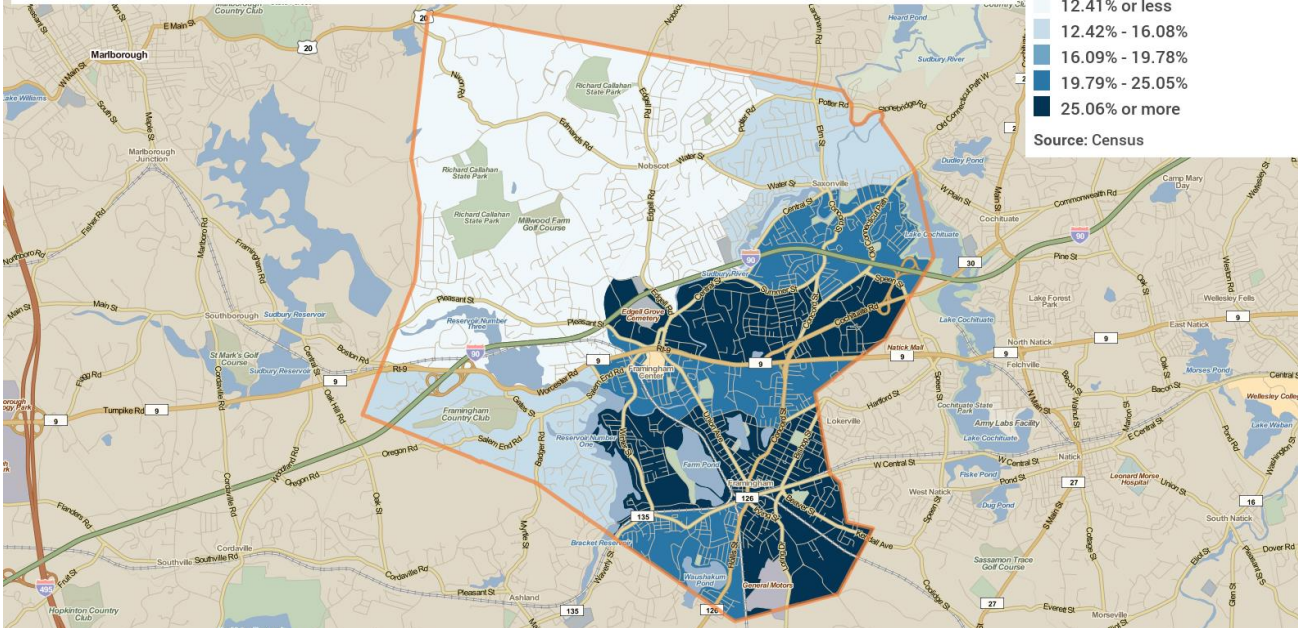
Estimated percent of employed people age 16 years or older who were in service occupations between 2012-2016.

Estimated percent of employed people age 16 years or older who were in service occupations between 2012-2016. For people with multiple jobs, this refers to the job where they worked the most hours.

Percent Employment in Service Occupations
 Year: 2012-2016
 Shaded by: Census Tract, 2010

- Insufficient Data
- 12.41% or less
- 12.42% - 16.08%
- 16.09% - 19.78%
- 19.79% - 25.05%
- 25.06% or more

Source: Census



The areas where people in Framingham make the least money are where the highest rates of people who work in service sector occupations live.

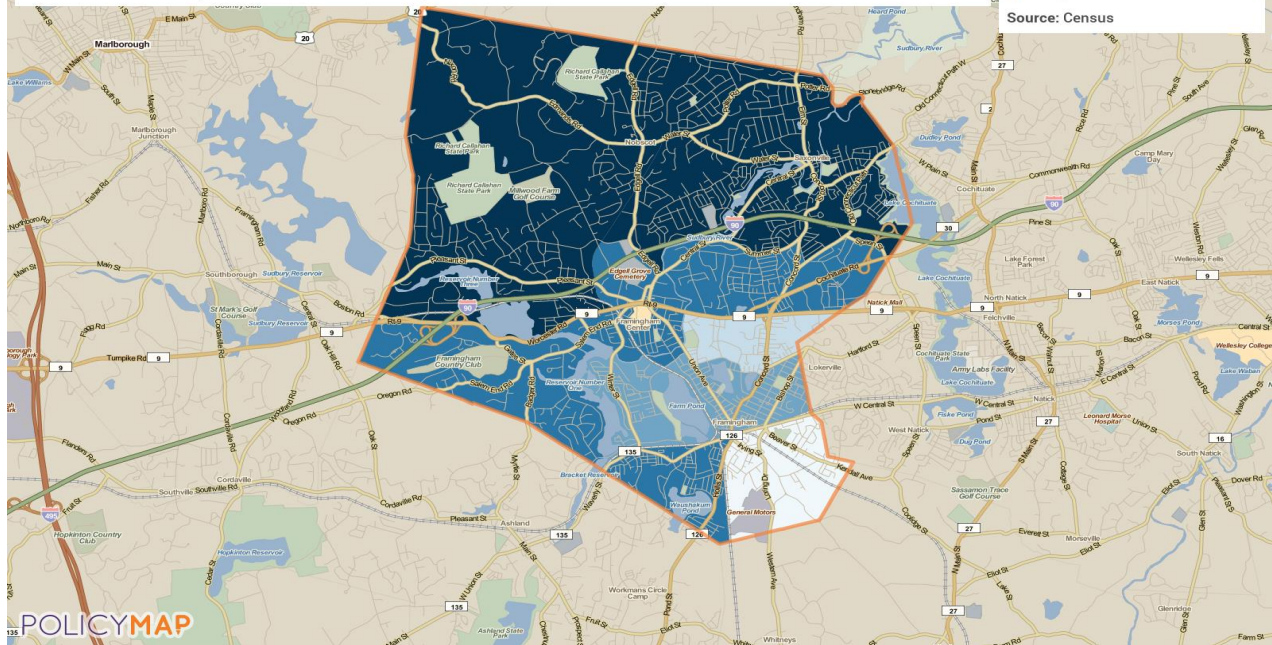
Estimated typical (median) income of a household between 2012-2016.

Estimated median household income in the past 12 months, as reported between 2012-2016. A household includes all the people who occupy a housing unit as their usual place of residence. Medians were suppressed in cases where the sample of the average was less than 10 of the unit that is being described (eg, households, people, householders, etc). Such areas are represented as having 'Insufficient Data' in the map. ACS employs values to indicate top and bottom ranges of income. A value of 250,001 indicates a value of 250,000 or greater, whereas a value of 2,499 indicates a value of 2,500 or less.

Median Household Income
 Year: 2012-2016
 Shaded by: Census Tract, 2010

- Insufficient Data
- \$35,813 or less
- \$35,814 - \$46,842
- \$46,843 - \$58,835
- \$58,836 - \$78,210
- \$78,211 or more

Source: Census



The disparity in employment opportunities in the city is reflected in the median household income.

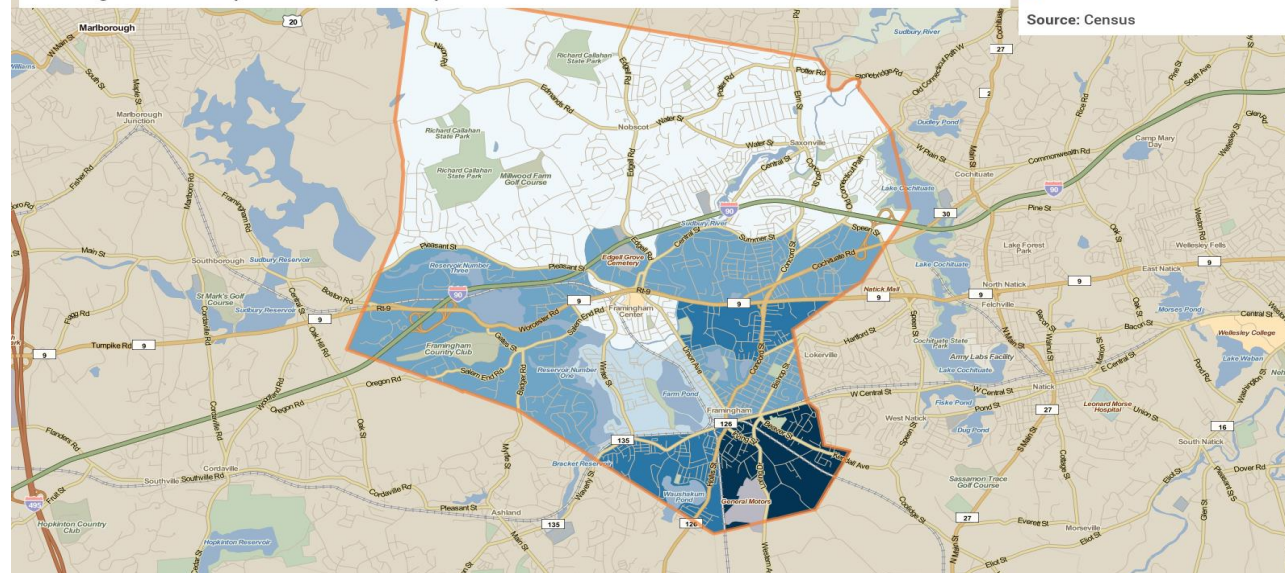
Estimated percent of all families that live in poverty between 2012-2016.

Estimated percent of families that are below poverty level between 2012-2016. A family is defined by the US Census Bureau as a group of two or more people who reside together and who are related by birth, marriage, or adoption. Percentage calculations were suppressed in cases where the denominator of the calculation was less than 10 of the unit that is being described (eg, households, people, householders, etc). Such areas are represented as having 'Insufficient Data' in the map. Denominators for percentage calculations were created by summing all of the component data items in a particular dataset.

Percent Families in Poverty
 Year: 2012-2016
 Shaded by: Census Tract, 2010

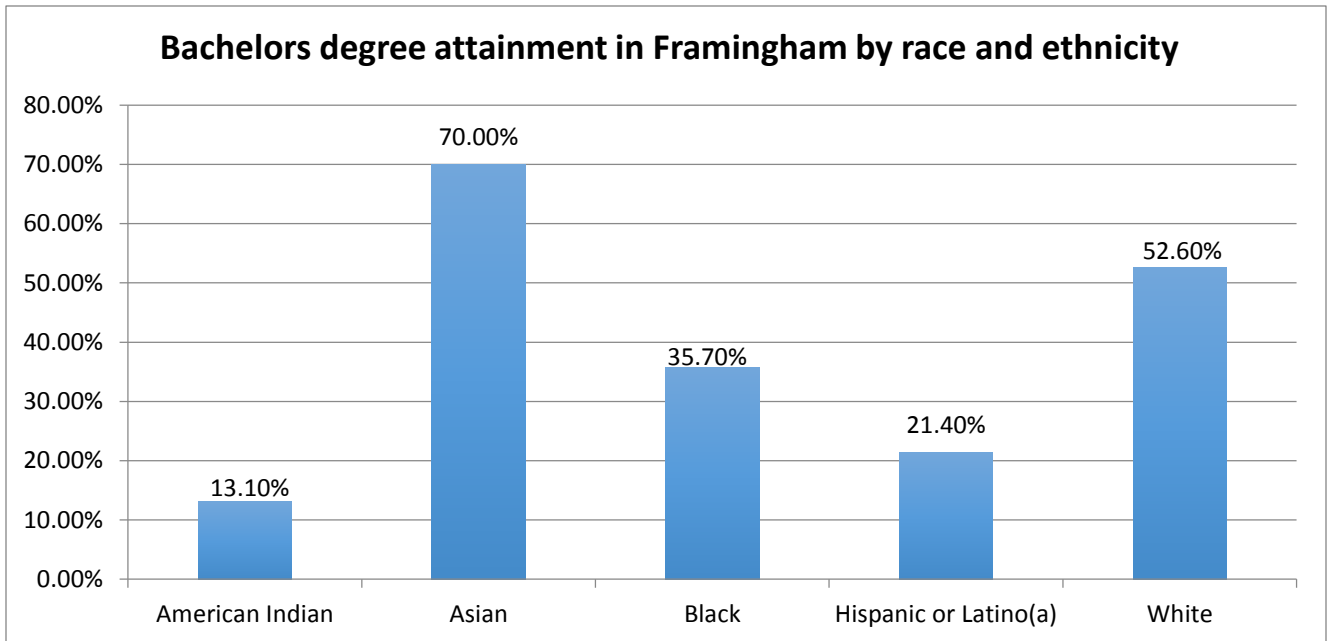
- Insufficient Data
- 3.50% or less
- 3.51% - 7.00%
- 7.01% - 11.85%
- 11.86% - 20.66%
- 20.67% or more

Source: Census

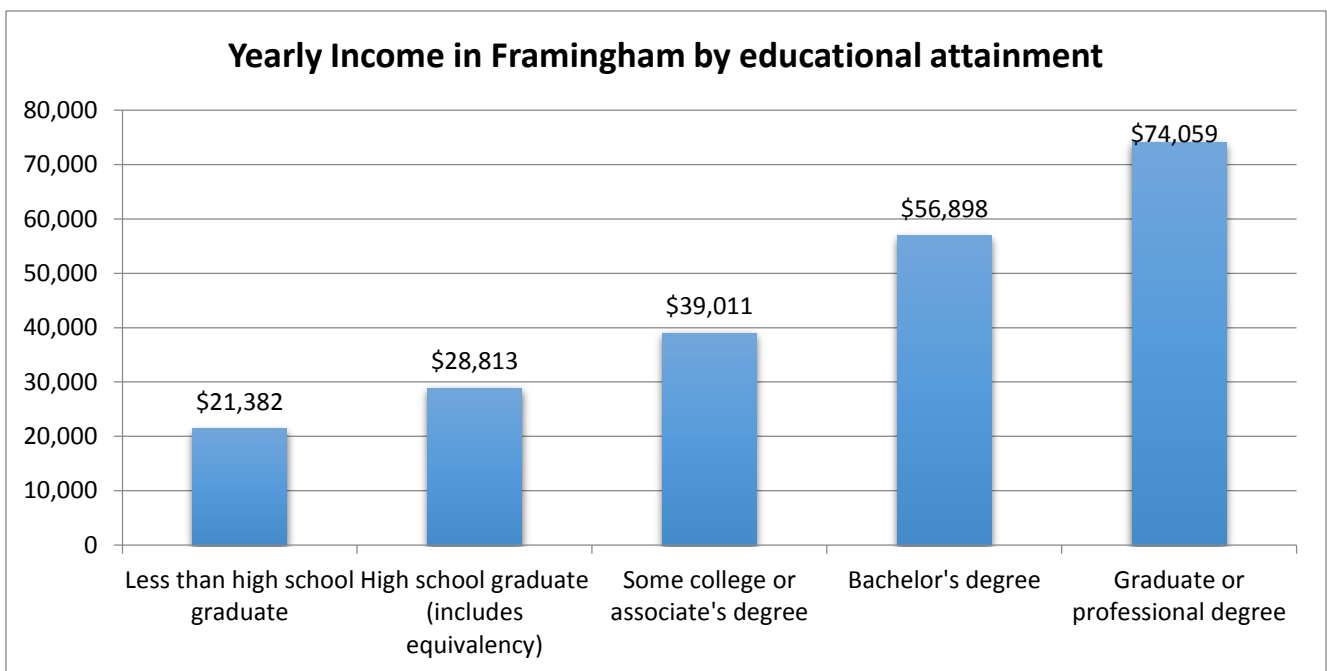


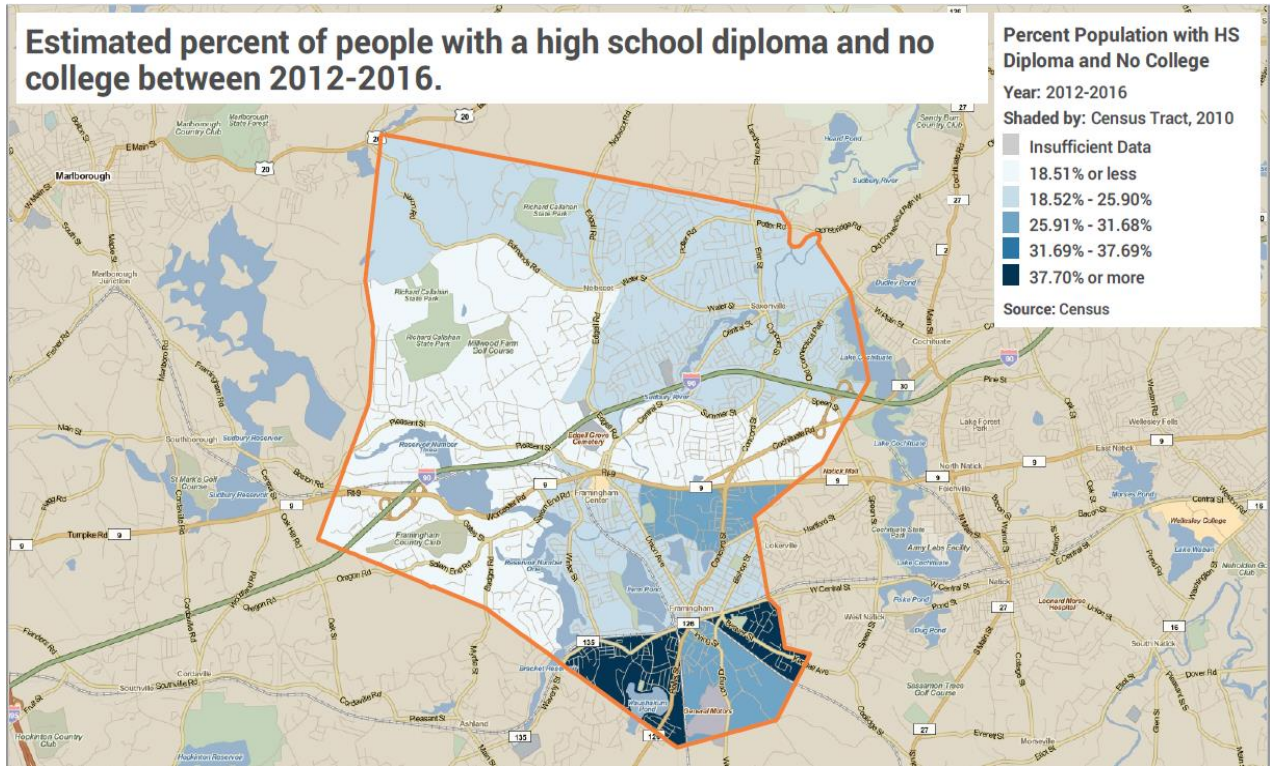
The concentrated poverty in Framingham is not a coincidence, and it is difficult to escape.

The biggest reason for this disparity in employment opportunity and income is that people do not have equal access to opportunities for appropriate educational attainment and training in Framingham and in the broader United States, and therefore are unable to develop skills and experiences that will allow them to be compensated well. For this reason, more racially and ethnically diverse areas of the city have lower educational attainment and incomes.

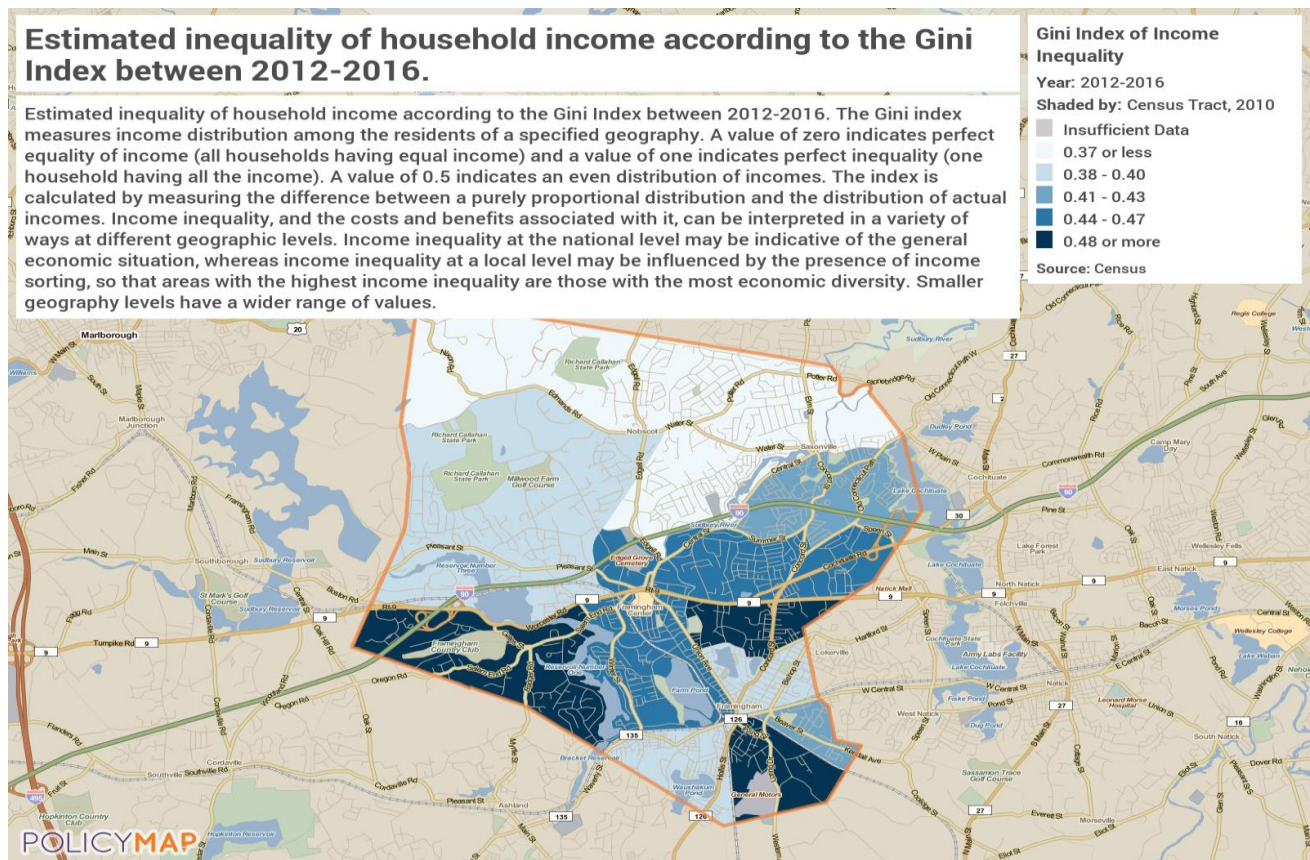


Due to decades of legal and social discrimination, there is an inequity in the attainment of bachelors' degrees among certain races and ethnicities.





The earning potential for people with a high school diploma or less is very low. Adequate opportunities for job training will be necessary in order to ensure that people can earn a decent living.

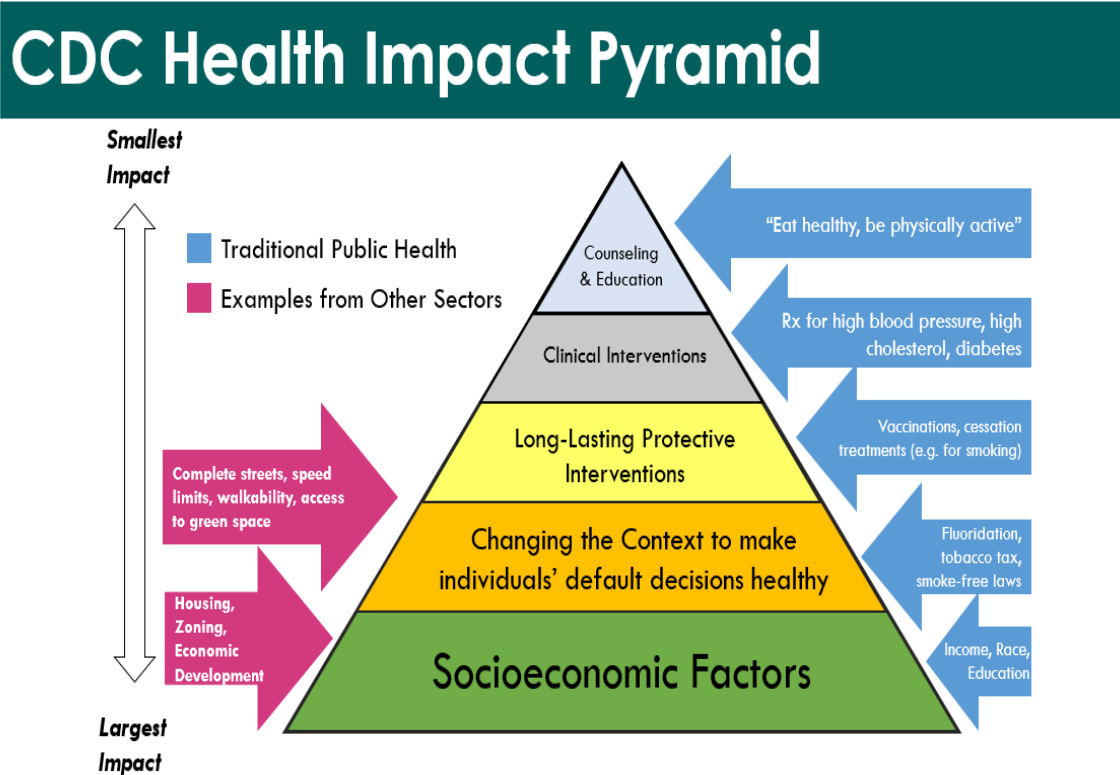


As a result of this education and opportunity gap, careers that require higher education and technical training are dominated by people in the northwestern region of the city, while people in South Framingham are more likely to work in positions that do not allow them to live a high quality, healthy lifestyle. This cycle reinforces the lack of opportunity for low-income people and minorities in South Framingham, and is a cycle that will allow inequality to exist in this area for generations. Though we are a decade removed from the start of the global financial crisis, people are still struggling to make enough money to afford basic needs.

People in South Framingham aren't born with as many tools to succeed. It is more likely that someone in this area will be born into a lower-income family, receive a worse education, not have the money for the higher education and/or more technical training, and subsequently won't be in the position to make a higher income. As a result, people become burdened with their expenses, and are not able to prioritize practicing healthy behaviors such as purchasing healthy foods. This exists everywhere in the United States, and makes it difficult to create a high quality life, leaving more people prone to chronic disease. In order to adequately address food insecurity in Framingham, decision-makers need to work collaboratively in addressing the lack of economic mobility that a large portion of their residents face.

Recommendations to Improve Food Access in Framingham

There are several factors that inhibit people from getting the food that they need on a daily basis. The good news is that Framingham has the resources to improve people’s access to healthy foods, and therefore their access to a higher quality of life. This section will describe actions that can be taken by the City of Framingham and its partners to work towards improving its residents’ access to healthy foods.



Source: Adapted from A Framework for Public Health Action: The Health Impact Pyramid, Thomas R. Frieden

Every action is evidence based, inclusive, and aims to address the socioeconomic factors that cause food insecurity. It is important that each recommendation combat the social and economic processes that have allowed food insecurity to become an issue, to benefit people who actually live in the community and experience these challenges, and to allow opportunities for these individuals to be involved in future decision-making processes surrounding economic development and issues of food insecurity.

Recommendation #1: Organize a coalition to work on improving food access

Action 1.1: Convene a Food Policy Council

A Food Policy Council should include representation from residents, food distribution organizations, farmers, local grocery stores, existing municipal departments and boards, and any other relevant groups.

Action 1.1-1: Create and implement a Food Plan

The Food Plan will detail the specific actions that stakeholders can take in order to reduce or eliminate all the barriers to food access outlined in the Community Food Assessment.

Action 1.1-2: Apply to funding opportunities

The Framingham Food Policy Council should pursue funding opportunities that support the goals of the Food Plan.

Action 1.1-3: Engage with the Greater Framingham Hunger Relief Network

Members of the Food Policy Council should attend the bi-monthly Greater Framingham Hunger Relief Network meetings in order to foster collaboration among service providers and members of the city government. This will allow the two groups to discuss how they can complement each other in their efforts to reduce food insecurity.

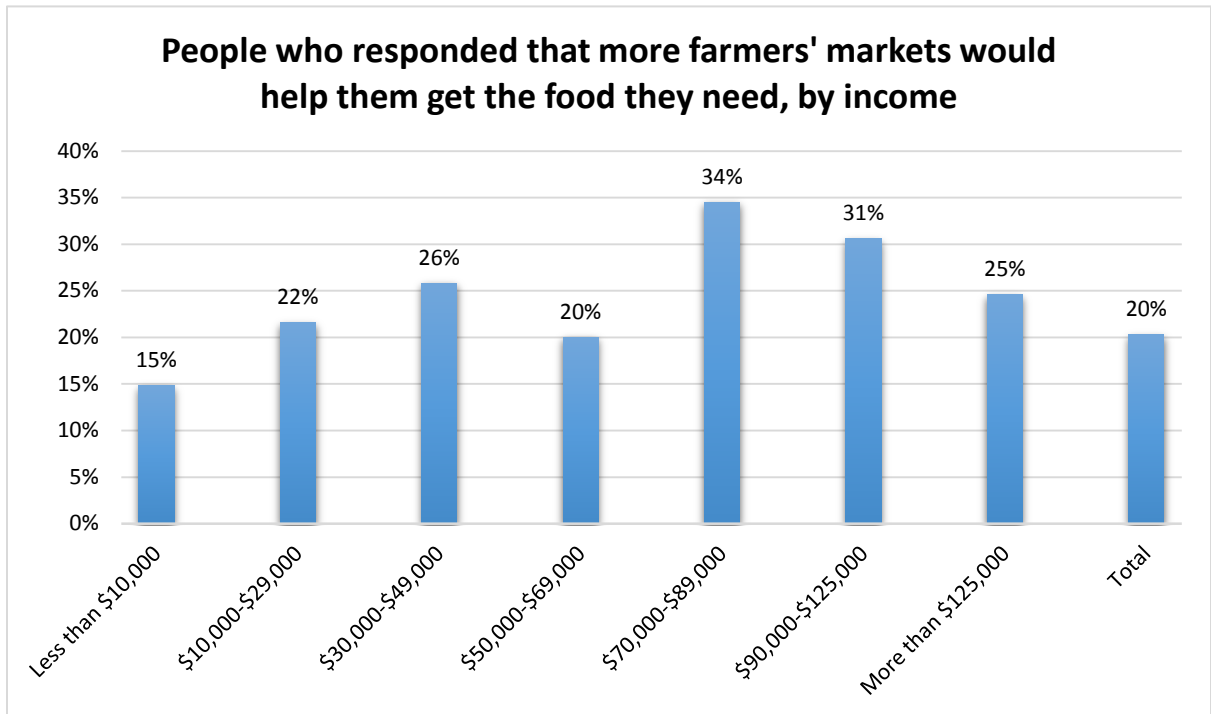
Recommendation #2: Increase the number of healthy food access points in South Framingham

Action 2.1: Move the Framingham Farmers' Market to South Framingham, and hold the market on a weekend day

The Framingham Farmers' Market is located in an area in North Framingham that is inconvenient for many residents of the city. Furthermore, the market is on Thursdays from 12:30-5:00 PM, during a time when many people are working and unable to attend. In order to allow more people to attend and make the market more profitable, the Framingham Farmers' Market should

seek a more convenient location to hold the market in South Framingham during the weekend.

The stereotype of farmers' markets is that they are only for patrons who are wealthy and white. Despite this stereotype, "more farmers' markets" was the second most popular response people had when asked what would help them get the food they need.



The Framingham Farmers' Market also accepts SNAP, making it more affordable to lower-income individuals. Another program that increases the affordability of local food is the Healthy Incentives Program (HIP), launched in 2017. This program allows SNAP recipients to receive a dollar-for-dollar match for fruits and vegetables at farmers' markets, farm stands, mobile markets, and community supported agriculture (CSA) farm share programs. As a result of this program, sales among SNAP recipients at farmers' markets skyrocketed around the state. SNAP sales at farm retailers in Massachusetts went up by almost 600% from 2016-2017, while the East Boston Farmers' Market experienced an 800% growth in SNAP sales during their 2017 season (Mass Food Policy Council).

The socioeconomic status of people who are able to attend farmers' markets and afford food from local food vendors has expanded. The city should hold the market in South Framingham on a weekend day in order to allow the

vendors to make more money and improve lower-income residents access to healthy foods.

Action 2.2: Establish an indoor Winter Farmers' Market in South Framingham

Establishing indoor location and vendors for a winter market in South Framingham would be beneficial for the following reasons:

- Allows for individuals who receive assistance through HIP (Healthy Incentives Program) to utilize their benefits year-round
- Provides an additional location for people of all incomes to access healthy foods
- Increases profit for local vendors during a time of lower demand

Potential locations for a winter farmers' market include: churches, pantries, schools, as well as other conveniently located organizations in South Framingham.

Action 2.3: Increase the number of pick-up locations for Community Supported Agriculture shares in South Framingham

Creating more CSA pickups in South Framingham will be beneficial for the following reasons:

- Allows for individuals who receive assistance through HIP to have a place to utilize their benefits
- Provides an additional location for people of all incomes to access healthy foods
- Creates create a direct connection between farmers and consumers
- Allows for a sustainable income for farmers

In order to cover the staffing costs, vendors can look into a work-trade program where volunteers staff the CSA each week in exchange for a share. Potential locations for CSA drop-offs include: churches, pantries, schools, as well as other conveniently located organizations in South Framingham.

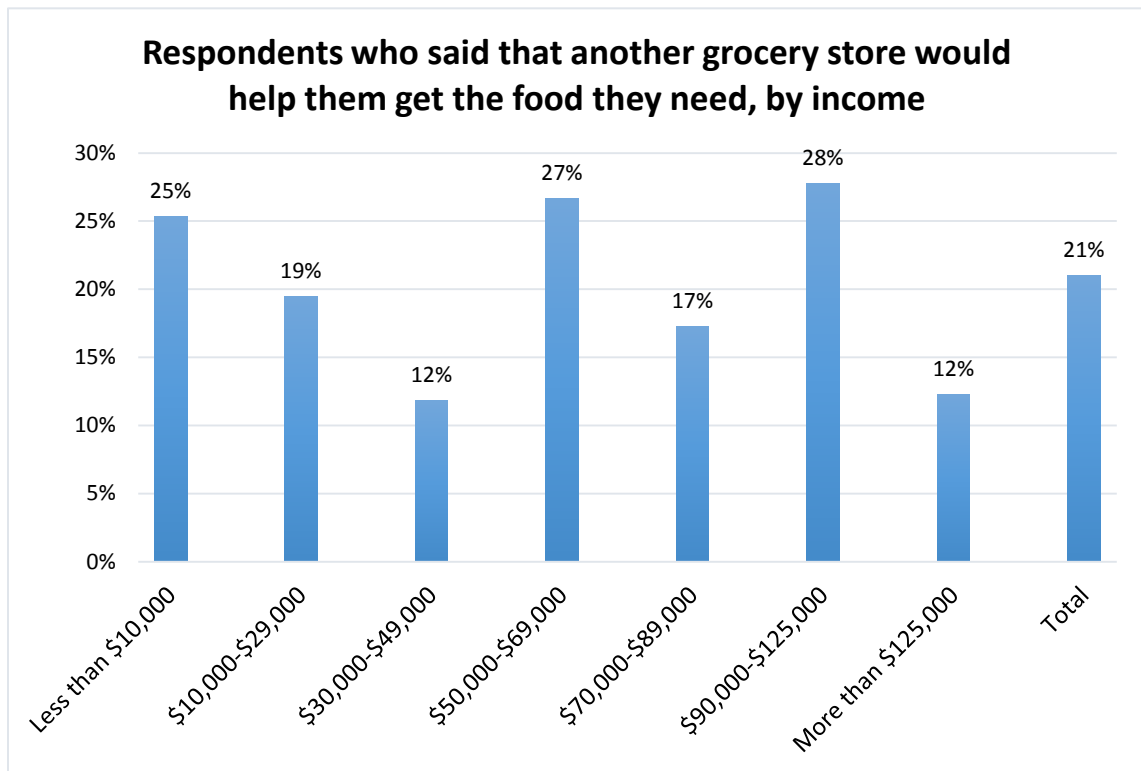
Action 2.4: Increase the availability of fresh fruit and vegetables in corner stores in South Framingham

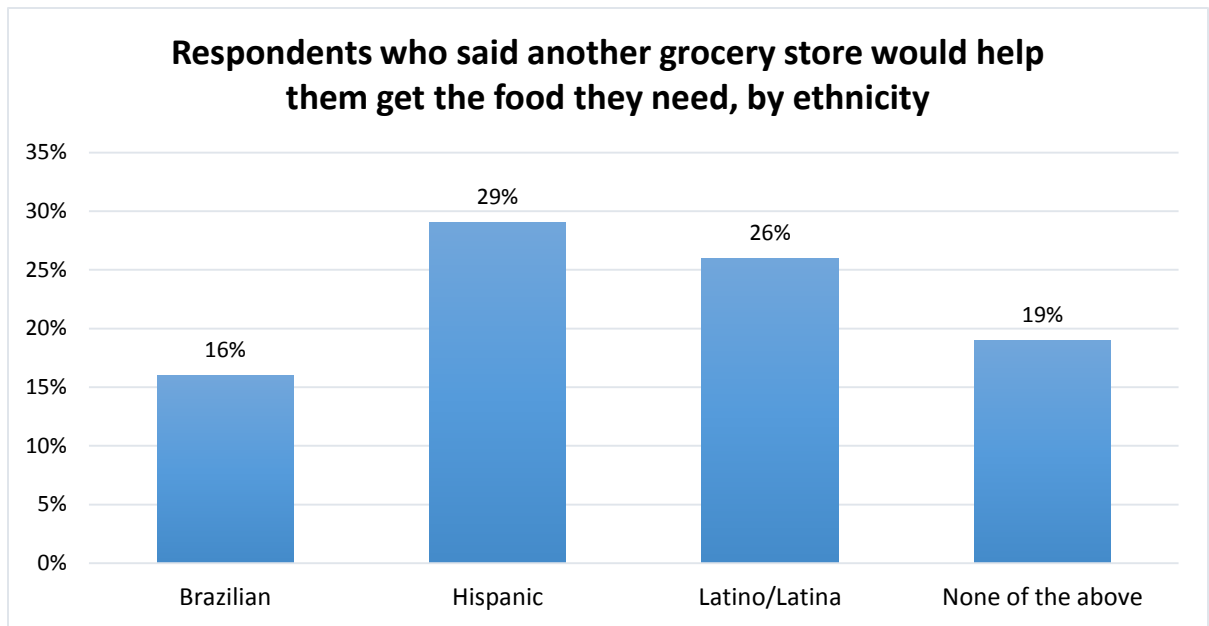
Identify convenience stores that would like to offer produce year-round. There is potential to apply for federal and state funding to increase the stores' capacity to offer these healthy foods, and help them set goals to

determine what percentage of the area of the store will be dedicated to produce. Offering more produce in convenience stores in South Framingham would reduce the transportation barrier that low-income individuals face in accessing healthy foods.

Action 2.5: Explore the feasibility of adding a grocery store in South Framingham

The most common response to the question of “which of the following would help you get the food you need” was “another grocery store,” with 21% of people from all income ranges in South Framingham selecting this response. This sentiment was shared strongly in interviews and focus groups as well.





Adding another grocery store in a strategic location in South Framingham would allow for more culturally appropriate food options for the wide variety of ethnicities in Framingham, and would reduce the barrier of transportation in getting groceries for lower-income people in the region.

Action 2.6: Allow SNAP recipients to apply their benefits to grocery delivery services

Other states have recently launched pilot programs that allow SNAP recipients to use their benefits for home deliveries from grocery stores. Giving SNAP recipients of Framingham the opportunity to have their groceries delivered would significantly reduce the barrier of transportation to healthy food access.

Action 2.7: Explore the possibility of extending pantry hours

Work with pantries and their clients in order to understand what operating hours would be most effective. If possible, adjust hours to match clients' preferences allowing for more people to benefit from pantry's services.

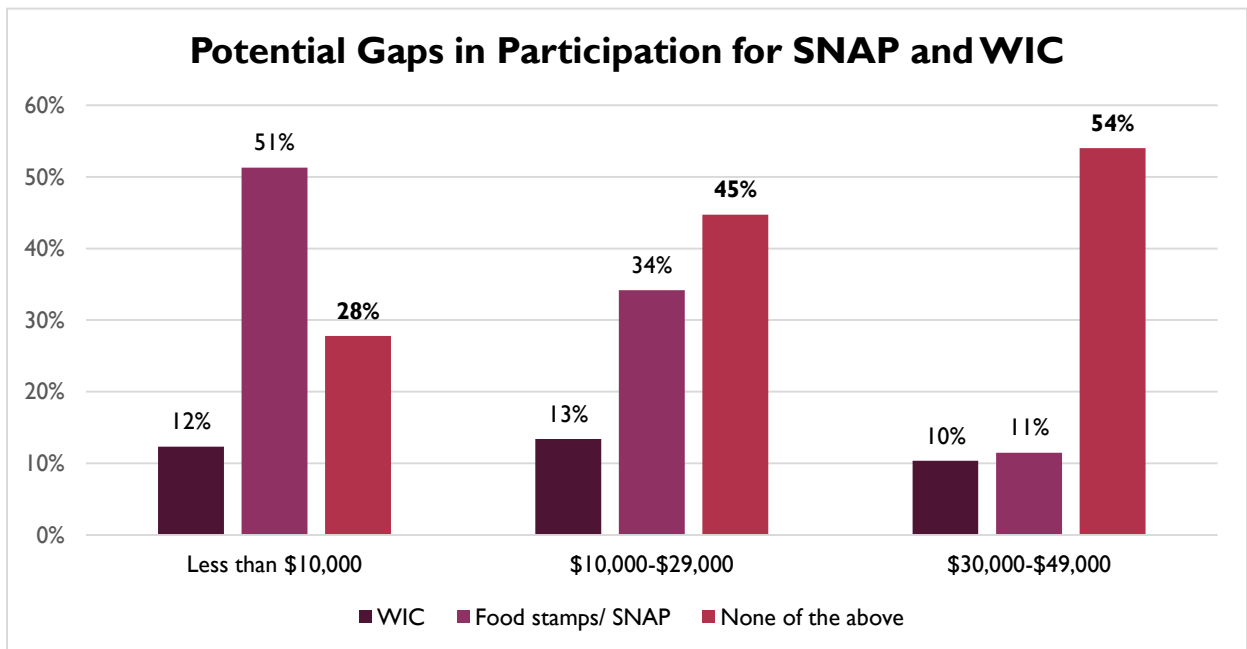
Recommendation #3: Reduce the SNAP gap by maximizing enrollment and increasing access points for recipients

Action 3.1: Connect with stores, CSA vendors, and other vendors in order to maximize the number of places where people can use their benefits

Conduct outreach to vendors who do not accept SNAP about the benefits of accepting it, and then provide guidance and support through the application process to become a certified SNAP retailer. Accepting SNAP allows for increased accessibility lower-income consumers and potentially more profit for the vendor.

Action 3.2: Maintain and expand existing efforts to ensure all individuals who are qualified to receive SNAP are doing so

There are likely many people who live in Framingham who are eligible to receive SNAP but are not doing so.



- **SNAP eligibility guidelines**
 - Family of 2: \$2,743 gross monthly (~\$33,000 annual)
 - Family of 4: \$4,183 gross monthly (~\$50,000 annual)
- **WIC eligibility guidelines**
 - Family of 2: \$2,470 gross monthly (~\$29,000 annual)
 - Family of 4: \$3,747 gross monthly (~\$45,000 annual)

In order to make sure that the most vulnerable people are getting the food they need, those who are eligible to receive SNAP need to be identified and assisted in applying to receive these benefits.

Recommendation #4: Improve transportation accessibility for low-income individuals

Action 4.1: Partner with ridesharing services and utilize Community Development Block Grants (CDBG) to develop vouchers for low-income residents

A significant number of residents in South Framingham are not able to afford a car. Meanwhile, public transportation does not adequately get them where they need to go. In order to meet their needs, the city should connect with the ridesharing services in the region to discuss a program that would offer rides at a reduced rate for low-income individuals. The cost of the vouchers could be jointly covered by CDBG and funds from the ridesharing company.

In the past, communities have collaborated with private taxi companies and used CDBG to launch taxi voucher programs for residents that meet the Housing and Urban Development low-income qualification. A modern version of this program could be feasible with cooperation between the City of Framingham and ridesharing services.

Action 4.2: Consider a bike share in Framingham

In order to allow for residents to get around by as many modes of transportation as possible, Framingham should consider the feasibility of getting a docked or dockless bike share system. Focus groups, surveys, and interviews with people across boundaries of race and income should be conducted to determine if it is something the community wants, and if ridership would support the costs of implementing it.

Action 4.3: Emphasize the impacts of transportation accessibility on low-income individuals in the Framingham Transportation Master Plan

The Framingham Transportation Master Plan should emphasize the need to improve transportation accessibility for traditionally disadvantaged populations in the city.

Action 4.4: Seek funding opportunities and technical assistance that will improve transportation accessibility for low-income individuals in South Framingham

Apply to funding opportunities to support transportation projects that will increase people's ability to get to places where they can purchase healthy foods. Technical assistance can be pursued from organizations such as the Boston Metropolitan Planning Organization, the Metropolitan Area Planning Council, and others as necessary.

Recommendation #5: Improve outreach and communication efforts to ensure that people know what food-related services exist in Framingham

Action 5.1: Create a food access resource guide for residents

Develop a website as a comprehensive resource guide for residents on food-related information such as advertising summer meal sites, information about food pantries services and donation needs, guidance on applying for SNAP and WIC, depicting the Community Food Assessment and any food-related initiatives, education about food waste, information about farmers' markets and CSAs, and any other news related to food access in the region. The goal of creating this resource guide is for there to be one source that residents can easily see all the resources that are available to them.

Action 5.2: Expand existing outreach efforts on what food-related services are available to people

One of the biggest takeaways from this assessment is that it is difficult for individuals to be aware of all the services, events, stores, and opportunities available to them. People frequently fall in and out of a state where they need the support of local agencies as a result of illness in the family, job loss, and other factors. As one interview participant pointed out, these people don't know where to go for services and do not know what is available to them, so they may suffer without benefiting from any of the support services in the city. Create an outreach campaign to educate all Framingham residents, particularly low-income individuals, about the services that are available to them.

Action 5.3: Develop a City of Framingham transportation resource guide

A comprehensive guide of all the transportation options and services in Framingham will help improve people's knowledge of what is available to them, and therefore allow residents to have increased physical mobility.

Recommendation #6: Reduce the barriers to community agriculture as a way to reduce Framingham residents' reliance on external food sources and allow them the freedom to grow what they want

Action 6.1: Establish additional community gardens in South Framingham

There is a demand for more community gardens in South Framingham. The majority of the housing in this area of the city is made up of rental units where people do not have property to grow food. Creating more communal spaces around the city where residents can grow food will improve their access to healthy food, and improve their connection to the community.

Action 6.2: Allow agricultural uses by-right in all residential and business zones in the city

Zoning changes such as this one reduces the unnecessary barriers that people face in growing their own food.

Action 6.3: Revisit the Board of Health animal regulations to allow more people to own animals as appropriate

Allowing residents to more easily own animals will reduce their reliance on external food sources.

Action 6.4: Allow rooftop gardening either by-right or by special permit in all zones

Making rooftop gardening more feasible for people in Framingham could make it easier for people to access healthy foods.

Recommendation #7: Create a coalition whose main goal is to improve the income mobility of low-income residents in Framingham

Allow 7.1: Develop an Economic Mobility Steering Committee

An Economic Mobility Steering Committee, made up of engaged residents, businesses, members from existing departments and boards, local schools, and the MetroWest Chamber of Commerce, should be established. The goal of this committee should be to improve low-income individuals' quality of life, access to necessary services, and health outcomes by reducing the barriers to upward mobility and wealth generation.

Action 7.1-1: Conduct an Economic Mobility Assessment

An assessment of the barriers and/or opportunities to improve income mobility will be necessary to improve the lives of people in the community. This assessment should aim to understand the forces that create generational poverty, the quality of employment opportunities for the population, and the leverage points for increasing the amount of money people make.

Action 7.1-2: Create and implement an Economic Mobility Action Plan

Based on this assessment, an Economic Mobility Action Plan should be created. The plan should draw on the findings of the assessment in order to reduce poverty and increase economic mobility among traditionally underserved populations. Potential focuses of the plan could include:

- Taking inventory of the business composition of the city
- Adequately preparing youth for 21st Century jobs
- Adding or reforming programs in the public and regional technical schools to focus on training students for burgeoning industries
- Launching entrepreneurship electives in schools that serve Framingham students
- Creating a mandatory personal finance course in Framingham schools
- Expanding programs that connect Framingham students with businesses

- Raising money for college grant programs for lower-income students
- Collaborating with other departments, committees, and organizations in the city on issues that relate to economic mobility
- Directing city funds to initiatives that reduce generational poverty
- Advocating for a higher minimum wage for adults
- Applying to funding opportunities that support the goals of the action-plan
- Other plans as deemed appropriate by the assessment

Recommendation #8: Maintain and expand redistribution efforts

Action 8.1: Maintain and expand existing connections between farmers and pantries to increase the amount of fruits and vegetables available to low-include individuals

Improving the connections between farmers and pantries could increase the amount of healthy foods that pantries are able to offer to their clients.

Action 8.2: Adopt commonplace use of an app or website that allows restaurants to sell food that would otherwise be thrown out at a reduced rate during designated pickup times

There are several apps that help consumers track restaurants that have excess food. Implementing this will reduce food waste and improve people's access to low-cost foods.

Action 8.3: Develop an app or website where people can see the inventory and needs of pantries

This makes it easy for potential donors to see the inventory and the needs of a pantry will improve the quality and array of foods that they are able to offer clients.

Action 8.4: Eliminate the sales tax exemption for soda and use the subsequent tax revenue on programs that increase access to healthy foods

Making an unhealthy item more expensive could be a way to subsidize efforts to make healthy foods more accessible.

Recommendation #9: Continue to conduct assessments in order to improve Framingham's food system

Forthcoming research on food access in Framingham could focus on the following:

- Determining more opportunities for food delivery or access points
- Identifying the food retailers that do not accept SNAP
- Surveying restaurants on their experience with food waste
- Where food waste occurs in the city and why
- The impacts of time and convenience on healthy food consumption for moderate-to-high income individuals
- Opportunities to increase food production in the city
- Improving weekend emergency food service among low-income individuals
- Increasing the amount of healthy and culturally appropriate foods in schools
- Understanding appropriate areas for community agriculture
- Ways to improve people's purchasing power
- Other studies as necessary

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Appendix A: MetroWest Moves Community Food Survey Questions

This survey was distributed in English, Spanish, and Portuguese.

1. What is your zip code?

- | | | |
|--------------------------------|--------------------------------|---------------------------------------|
| <input type="checkbox"/> 01532 | <input type="checkbox"/> 01703 | <input type="checkbox"/> 01749 |
| <input type="checkbox"/> 01701 | <input type="checkbox"/> 01704 | <input type="checkbox"/> 01752 |
| <input type="checkbox"/> 01702 | <input type="checkbox"/> 01705 | <input type="checkbox"/> Other: _____ |

2. a. Do you identify as any of the following:

- | | |
|--|--|
| <input type="checkbox"/> Latino/Latina | <input type="checkbox"/> Brazilian |
| <input type="checkbox"/> Hispanic | <input type="checkbox"/> None of the above |

b. To which racial group(s) do you most identify?

- | | |
|--|--|
| <input type="checkbox"/> African-American and/or Black | <input type="checkbox"/> Native American |
| <input type="checkbox"/> Asian/Pacific Islanders | <input type="checkbox"/> Multiracial |
| <input type="checkbox"/> Caucasian/ White | <input type="checkbox"/> Other: _____ |

3. What is your annual household income?

- | | |
|---|---|
| <input type="checkbox"/> Less than \$10,000 | <input type="checkbox"/> \$90,000-\$125,000 |
| <input type="checkbox"/> \$10,000-\$29,000 | <input type="checkbox"/> more than \$125,000 |
| <input type="checkbox"/> \$30,000-\$49,000 | <input type="checkbox"/> I prefer not to answer |
| <input type="checkbox"/> \$50,000-\$69,000 | <input type="checkbox"/> I don't know |
| <input type="checkbox"/> \$70,000-\$89,000 | |

4. Do you use any of the following?

- | | |
|------------------------------|--|
| <input type="checkbox"/> WIC | <input type="checkbox"/> Food stamps/ SNAP |
|------------------------------|--|

5. How many seniors (65 years and older) do you shop for, including yourself?

- | | | | | |
|----------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 1 | <input type="checkbox"/> 2-3 | <input type="checkbox"/> 4-5 | <input type="checkbox"/> 6-7 | <input type="checkbox"/> 8+ |
|----------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|

6. How many adults (18-65 years) do you grocery shop for, including yourself?

- | | | | | |
|----------------------------|------------------------------|------------------------------|------------------------------|----------------------------|
| <input type="checkbox"/> 1 | <input type="checkbox"/> 2-3 | <input type="checkbox"/> 4-5 | <input type="checkbox"/> 6-7 | <input type="checkbox"/> 8 |
|----------------------------|------------------------------|------------------------------|------------------------------|----------------------------|

7. How many children (17 years and younger) do you grocery shop for?

- 1
- 2-3
- 4-5
- 6-7
- 8+

8. Where do you shop for the majority of your groceries?

- Grocery store
- Walmart
- None of the above
- Convenience Store
- Target

9. Where else do you get your food?

- Farmers' Market
- Home Garden
- Community Garden
- School
- Food Pantry
- Senior Meal Site
- Community Meal Site
- Fast Food Restaurant
- Sit Down Restaurant
- Church/ Community Organization
- Home-delivered Meals
- Other: _____

10. What are the main problems getting your food? *Choose all that apply.*

- Cost
- Transportation
- Time
- Distance to store
- Finding food from my culture/country
- Safety
- Do not know how to prepare food
- No kitchen equipment to prepare food
- No place to store food
- Quality of food
- Other (please specify): _____

11. Which of the following would help you get the food you need? *Choose all that apply.*

- Another grocery store
- More farmers' markets
- More food distribution agencies (for example: food pantries, soup kitchens, shelters, meals on wheels, senior centers)
- Public transportation
- More stores accepting food stamps/ SNAP vouchers
- More stores accepting WIC cards
- Better quality and variety of produce at grocery stores
- More community gardens
- Classes on cooking/ food preparation
- Classes on canning/ preserving food
- Workshops on gardening
- Other (please specify): _____

Appendix B: Key Informant Interview Sample Questions

1. What do you see as the primary barriers to people accessing the food they need in Framingham?
2. How does transportation impact the ability of people you work to accessing food? What is the biggest barrier to people getting to the places that they need to go to, such as the grocery store?
3. On the survey we did with MAPC that got almost 1300 responses, many people responded that more food distribution agencies would help them get the food they need. Do you believe this is perception or reality? Is the problem is actual number of distribution agencies, poor spatial distribution, or scheduling issues? Or is it just a lack of communication and/or awareness of what is available?
4. If the need for this is perception more than reality, how do we communicate this effectively and make sure people can get there?
5. What actions can be taken to improve communication and knowledge of existing resources? Do you think an all-encompassing website for residents that lays out a comprehensive amount of resources and services available would be useful?
6. What can be done in the community to increase SNAP enrollment among those who qualify that isn't already being done? Who would be involved in this process?
7. To your knowledge, how helpful was HIP (Healthy Incentives Program) in allowing people of high need to access healthy food in Framingham?
8. Do you think a farmers' market in South Framingham could improve people's access to healthy foods? Do you think it could be profitable?
9. Do you think that an indoor farmers' markets in South Framingham in the winter would help people get the food they need? Where would be a good location for an indoor farmers' market in the winter?
10. Do you think that an increase in the amount of CSA drop offs in South Framingham would improve people's access to healthy foods? If so, where would be a good place for CSA drop offs in South Framingham?

11. Where do you think the people who utilize your organization get the majority of their food from?
12. According to the survey and focus groups, a lot of people in Framingham get their food from either convenience stores or neighborhood grocery stores. It could be wise to try to pursue funding to increase the amount of produce sold at smaller grocers. Do you think that this could help people get the food they need, and are the specific stores that you are aware of that would be open to pursuing opportunities such as these?
13. Based on the survey, another grocery store in South Framingham was highly desirable across boundaries of income, race, and ethnicity. Do you believe another grocery store would actually help people receive the food they need, or is this perception more than reality?
14. Do you think that having more community gardens would be a helpful step towards improving food security for residents of South Framingham? Is it something that you believe is desirable in the community?
15. Are there any zoning changes that the city could make to improve Framingham residents' access to healthy foods?
16. If you were helping the city develop a food plan, what would be some specific actions you would advise they take in the short and long term (this could relate to any and all portions of the food system)? What is the city not doing that you think they should be doing to help address food insecurity?
17. Are there any other strategies that you believe would help people get the food they need in the short and long term that we didn't discuss?

Appendix C: Tree Exercise Summary

MetroWest Moves and SMOC conducted this exercise at Shadows Shelter.

Causes of Individuals in Framingham (or in the area) having trouble accessing foods that they desire, food that meets their daily needs, and/or feel like they have enough food daily.

- Living pay check to pay check
- Not having a secure job
- No place to cook food
- One pay check away
- Lack of transportation
- Money
- No car
- Food pantries provide meat, but cannot pick food up
- Single mom with multiple children cannot bring all of the kids on the bus to food pantry
- Too tired to take the bus and travel a long distance to food pantries
- Can't get to food pantry
- Lack of knowledge of resources
- Embarrassed to ask for help
- Need to put pride aside to access pantry

Effects of Individuals in Framingham (or in the area) having trouble accessing foods that they desire, food that meets their daily needs, and/or feel like they have enough food daily.

- Living outside without any gas or way to cook food
- Diabetes, High cholesterol, Heart disease
- Malnutrition
- Loss of teeth
- Starvation
- Moms feeding kids before self
- Feeding others before self
- Not having food that you prefer
- Not knowing how to prepare food you get

Appendix D: Focus Group Summary

MetroWest Moves and SMOC conducted this exercise at Shadows Shelter.

Question: What prevents you from purchasing the food that you need to feed yourself on a regular basis?

Responses:

- Money
- Transportation
- Lack of time

Question: What are some of the foods that you want that you don't have access to?

- Healthy foods
- Fruits/vegetables
- Organic fruits/vegetables
- Fish
- Fresh fruit and vegetables
- Chicken

Question: What would improve your ability to access food?

Responses:

- Gardens (community and at house)
- Corner stores with fresh fruit and vegetables
- Corner stores that are more affordable
- Affordable farmers markets
- Lower food costs
- Put food in low-income housing
- Put up info about food resource in low-income housing
- More public transportation options to grocery stores
- More pantries

Question: Where do you typically get your food from?

Responses: Grocery store, Depend on house/shelter food

BROUGHT TO YOU BY:



JEREMY

ROMANUL

MASS IN MOTION
COORDINATOR