



Executive Summary



Listening to Local Voices in Community Assessment

Access to Food and Physical Activity in Wisconsin's Black, Hmong, Latinx, and Somali Communities

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BACKGROUND

To deepen FoodWise's understanding of the local context(s) in which SNAP-Ed work is implemented, the UW Population Health Institute conducted twelve small-group community conversations during the summer/fall of 2022 to understand food access among Hmong, Somali, Latinx, and Black/African American communities in Wisconsin.

Findings will inform the 2024 SNAP-Ed plan and assure that delivered programming is culturally responsive and relevant to local contexts.



Project Goals



Understand community factors that facilitate / create barriers to food security and access to healthy foods and physical activity.



Elicit community-based suggestions for improving food security and increasing access to healthy foods and physical activity.



Engage local partners and coalitions and increase their involvement with SNAP-Ed planning and programming at a local level.



Identify potential opportunities for coordinated work among community partners to make healthy food choices physical activity practical and available to all community members.



Key Findings

The conversations highlighted many barriers to healthy food access and physical activity. Yet, even within the constraints of low incomes and often circumscribed choices, people revealed the many creative strategies by which they try to keep their families well fed and healthy. Solutions that extend or support these strategies should be centered and prioritized as they are based in community strengths and rooted in local practices.

Time acquiring food	People engage in a careful decision making process when shopping that balances convenience, cost, and quality. Typical time traveled is 30-40 minutes to shop, and further distances for special-occasion foods. Comparison shopping for price and favored foods also takes a lot of time.
Ethnic stores play an important role in communities	Price and limited selection prevent them from serving as a major source of food, but they are critical as a source of culturally traditional foods, especially for special occasions, and provide an important sense of community identity.
Desired access to fresh and natural foods	This is especially true for immigrants who were accustomed to year-round access in their countries of origin. • Farmers markets or direct-from-farm shopping is used in some areas, but are not easily accessible in all, including rural areas. • Gardening is central in both the diet and culture of Hmong participants, but community gardens are too small for the scale at which they wish to farm, and they find the communal obligations challenging.
Numerous barriers to public food pantries	Barriers include: • Lack of signage for people who primarily speak languages other than English. • Lack of preferred foods; quality and quantity of the food provided. • Perceived disrespect by staff. • Demands for information or documentation. • Lack of knowledge about eligibility.

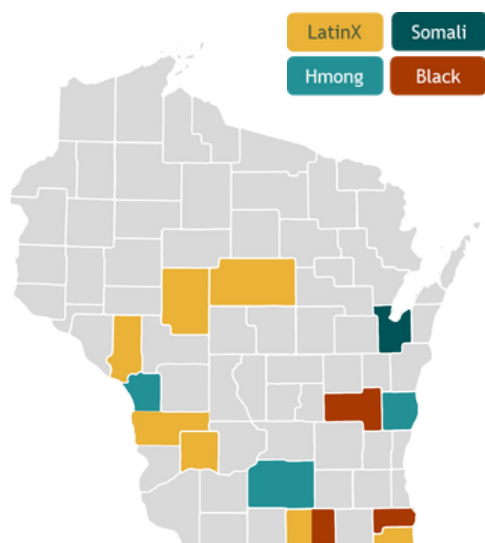
Key Findings

Immigrants miss the general taste of home	Even when traditional items are available, they taste so different or they are priced as “specialty” items, so that they are perceived as not available. Latinx participants especially express a sense of loss.
Barriers to healthy eating despite the fact that people are generally motivated to eat healthy and have a solid understanding of what this means	Barriers include: • Unhealthy food is more affordable than healthy whole foods. Affordability of fresh, natural (unprocessed) foods was a major theme across all groups. • Time and exhaustion after the workday are barriers to cooking from whole ingredients. • Latinx and Hmong immigrants are very vocal about their unhappiness with the ubiquity of heavily processed, unhealthy foods available in U.S. stores, and feel that American diets overall are less healthy than in their native lands.
Parents find it challenging to raise their children to eat healthy foods	Immigrant parents are especially concerned about their children assimilating to U.S. eating habits and sedentary patterns.
There is widespread understanding of the importance of exercise both for physical and mental health	Many also distinguished physical activity from exercise, pointing out that through keeping active in daily life they can maintain health even without a formal exercise routine. People were generally motivated to exercise, although many say this motivation is intermittent.
Major barriers to regular exercise are environmental	The most frequently cited barriers include lack of time, lack of energy after working, access to recreational facilities, and the long Wisconsin winters.

Community Selection Process

Locations were selected by the FoodWise staff based on significant racial and ethnic population shifts in Wisconsin that happened during the past decade.

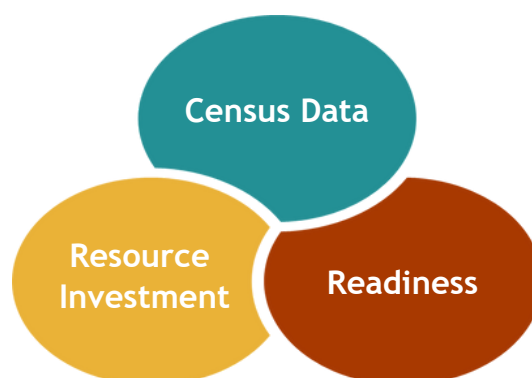
For each ethnic/cultural group, counties were identified based on the highest absolute number residing in the county, the highest percentage of total population, and the greatest percentage increase. Counties were then triangulated among these data sets.



County/Region	Group	% of County Population	% Increase 2010-2020
Trempealeau	Latinx	12.9%	137.4%
Fond du Lac	Black	2.2%	89.3%
Crawford	Latinx	1.6%	73.3%
Richland		3.0%	46.1%
Vernon		1.7%	17.8%
Clark	Latinx	6.1%	62.4%
Portage		3.7%	41.4%
Wood		3.2%	41.4%
Rock	Latinx	9.7%	30.3%
Kenosha	Latinx	14.5%	25.3%
Racine	Black	11.4%	6.2%
Rock	Black	4.9%	3.8%
Brown	Somali	0.1%	
Dane	Hmong	1.1%	
La Crosse	Hmong	3.0%	
Sheboygan	Hmong	3.4%	

2020 U.S. Census data was compared to 2010 Census data for Latinx, Black, Asian, American Indian/Alaska Native, and White populations. The American Community Survey 2015-2019 five-year estimates provided data on the ethnic subgroup and refugee populations. Hmong and Somali populations were identified using “language spoken at home” and “county of birth” as proxies.

Counties included also had local FoodWise staff with the readiness and resources to engage with local partners and to invest in future co-development of community programming that was in alignment with FoodWise local priorities and action plans.



Community Engagement

Centering the perspectives of people with limited income from multiple generations within immigrant and Black communities.



LOCAL FOODWISE COORDINATORS

- Provided input on development of questionnaire, final report, and dissemination products.
- Identified local partners to support recruitment.
- Identified location for discussions and organized childcare.

COMMUNITY ADVISORY COMMITTEE

- Five advisors from each of the cultural/linguistic groups
- Regular consultation to assure the cultural relevance, appropriateness, and accessibility of all focus-group questions, presentation practices, dissemination plans, and written materials.
- Compensated for each session.

FACILITATORS

- Native language speakers.
- Compensation for 2-hr training, conducting focus group, debrief, and analysis consultation.

LOCAL FOOD PARTNERS

- Recruited participants and provided language support.
- In some communities it was possible to solicit the perspectives of local food partners, which informed the findings.

FOCUS GROUP PARTICIPANTS

- Compensation for participating.
- Snacks and childcare provided.



Continuing the Conversation

The focus groups were not meant to be the last word about food access and food security, but rather were intended as conversation openers. We hope continued conversations at the local level will lead to increased involvement of local partners and coalitions in local SNAP-Ed planning and programming. It is also an opportunity to identify possibilities for coordinated work to make healthy food choices and physical activity practical and available to all community members.

QUESTIONS FOR COMMUNITY CONSIDERATION

1. What strategies are people already using to support healthy eating or physical activity?

How could we extend and support these activities?

2. What wishes/desires did people express?

3. What are some common problems or roadblocks mentioned?

What are potential solutions?

4. Who needs to be included in these conversations?



FOOD PANTRIES

- Have you considered ways to overcome barriers to access experienced by individuals with diverse cultural backgrounds?
- Do you strive to overcome the most common barriers such as language access, comfort level with sharing personal information/lack of trust, and diverse food preferences?
- Are your staff or volunteers representative of the communities you serve?
- Are the people you serve represented on any governing boards?
- Have you connected with cultural community organizations or partners serving similar participants?
- Do you have a food list based on cultural preferences? (An example can be found at the [Culturally Responsive Food Initiative of the Food Bank of the Rockies](#))



COMMUNITY GARDENS

- Do gardeners from culturally diverse backgrounds participate?
- Do you have culturally responsive outreach efforts?
- Can gardeners get help with language barriers?
- Are members of different cultural groups represented on decision-making bodies?



FARMERS MARKETS

- Do your markets accept SNAP?
- Do you have culturally responsive outreach efforts?
- Have you considered farm stands or mobile markets for those who are unable to go to the markets during the specific times?
- Have you considered expanded days/hours for markets or stands?

Lessons Learned

What went well

- Supportive community partners (and committed coordinators)
- Skilled, culturally appropriate facilitators
- Research team traveled with facilitators
- Helped jump start new relationships
- Set standard for compensating community experts for their contributions
- Elevated community members' voices

Challenges

- Narrowing down the right partner(s)
- Some partners & individuals are overlapped and were not able to support this effort
- Did not proactively build in compensating partners for their contributions
- Time of year - summer was a challenging time of year to organize
- Translation & interpretation: some focus groups had participants with a shared cultural identity, but not all spoke the same language

What we would do differently next time

- Explore compensating partners for their contributions (e.g. intensive recruitment efforts, language access support)
- Hold partner meetings at the beginning of the process: trust might have been built more quickly if researchers, facilitators, coordinators, and local partners could have met together to clarify the process and answer questions
- Lengthen the timeline for the process

Find the full report here:

<https://bit.ly/FoodWiseCommunityConversations>



Part of the School of Medicine and Public Health, UWPHI's mission is to accelerate capacity to create equitable conditions for everyone to be healthy by advancing knowledge, practice, policy, and system change across sectors. Institute staff works across the full spectrum of factors that contribute to health to advance health and well-being for all by developing and evaluating interventions and promoting evidence-based approaches to policy and practice at the local, state, and national levels.



The UW-Madison Division of Extension's Institute for Health & Well-Being works to catalyze positive change in Wisconsin families through evidence-based programs. The FoodWise program is federally funded by the Supplemental Nutrition Assistance Program-Education (SNAP-Ed) and the Expanded Food and Nutrition Education Program (EFNEP). The core of their programming is evidence-based nutrition education tailored to SNAP-eligible audiences and their families and policy, systems, and environmental change strategies that promote healthy food access and physical activity opportunities.

