FOOD ACCESS IN DC

A Focus on Retail Grocery Access
FOOD DESERTS IN DC

Areas that
• are located more than half a mile from a grocery store or supermarket,
• have low rates of car access, and
• have a high poverty rate.

Source: D.C. Policy Center
MORE THAN HALF IN WARD 8

Food deserts

• Make up about 11 percent of D.C.’s total area (6.5 square miles), and

• Are concentrated in the neighborhoods of Anacostia, Barry Farms, Mayfair, and Ivy City.

• Ward 3 has no areas considered a food desert. Ward 2 does contain a food desert, but it is quite small—only 0.13 square miles.

Half of D.C. food deserts are in Ward 8

Areas with limited food access in the District (based on grocery or supermarket proximity, household income, and car access), by ward

Source: D.C. Policy Center
Updated March 16, 2017
**DISTRIBUTION OF FOOD RETAIL**

- **West of Park:** lots of full service supermarkets
- **East of the River:** lots of corner stores
The Food Policy Council and the DC Office of Planning are working with ICF International on a report on the supply-side landscape of D.C.'s food economy.

Legislative and budget initiatives to help increase supply

When policy conversations focus exclusively on grocery store gaps, we implicitly ask grocery stores to accomplish many things: improve nutrition, solve hunger, prevent obesity and chronic diseases, and improve the overall health of thousands of residents.
DEMAND SIDE

• **High income households stronger preference for healthy options.** Households with income below $25,000 are willing to pay an average of $0.62 per day to consume the U.S. recommended daily intake of healthy nutrients instead of the maximum daily intake of unhealthy nutrients, whereas households with income above $70,000 are willing to pay almost twice that amount.

• **Even households in zip codes with no supermarkets still buy almost 90 percent of their groceries from supermarkets.**

Hunt Allcott, Rebecca Diamond, Jean-Pierre Dubé, *The Geography of Poverty and Nutrition: Food Deserts and Food Choices Across the United States*, NBER, 2018
DEMAND SIDE

• Differential local access to supermarkets explain no more than about five percent of the nutrition-income relationship.
• When households move from one place to one with more healthy eating options, the move doesn’t have much of an effect on nutritional habits in the medium term (~3 years).

Hunt Allcott, Rebecca Diamond, Jean-Pierre Dubé, The Geography of Poverty and Nutrition: Food Deserts and Food Choices Across the United States, NBER, 2018
INCOMES TOO LOW TO SUPPORT?
## Economic Wellbeing Indicators

<table>
<thead>
<tr>
<th>Location</th>
<th>Families on TANF</th>
<th>Families receiving SNAP</th>
<th>Number of people below the poverty rate</th>
<th>Number of people unemployed</th>
<th>Number of renter occupied homes and no vehicle access</th>
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<tr>
<td>Ward 1</td>
<td>829</td>
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<td>10,454</td>
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<td>17,658</td>
<td>29,716</td>
<td>7,503</td>
<td>13,189</td>
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</tbody>
</table>

Source: ACS
DEMAND SIDE

• Educational differences explain about twenty percent of the relationship between income and healthy grocery demand, while about seven percent is explained by … nutrition knowledge scores. …

• While these findings are only correlational, they may suggest an opportunity for policies focusing on demand-side factors, such as education and health knowledge, to reduce nutritional inequality
DEMAND SIDE INTERVENTIONS

- **Expand WIC and SNAP and reduce restrictions on grocery stores that can accept WIC**: Only half of DC’s full-service grocery stores accept WIC, according to FRAC, and DC has stricter retailer requirements than federal requirements for which stores are eligible to accept WIC.

- **Increased access to free and affordable healthy options in convenient locations** (schools, neighborhoods, workplaces; corner store efforts), which DC is already doing; work with non-profit partners to invest in a grocery co-op.
DEMAND SIDE INTERVENTIONS

- Incorporate more nutritional information and even lessons into home visiting; more accessible nutritional information provided by medical providers (when appropriate)

- Targeted community education around nutrition, cooking, and fitness
Advancing policies for a strong and vibrant economy in the District of Columbia