



Good Food Corner Store: Brief Project Summary

Introduction

Healthier corner store (CS) initiatives are gaining popularity as a population health strategy to improve access to nutritious food. The Ottawa Good Food Corner Store (GFCS) Initiative goal was to collaborate with multiple stakeholders and community partners to increase access to fresh vegetables and fruit and healthy staple foods in priority neighbourhoods. OPH completed a community assessment, worked with stakeholders to develop and test GFCS model with eight diverse corner stores in Ottawa. This report is a summary and evaluation of the experiences and recommendations for future programs and policies for the City of Ottawa.

Ottawa Food Retail Assessment

Ottawa has approximately 377 CS located in 108 neighbourhoods. There are more CS in 40 low socioeconomic status (SES) neighbourhoods and 23 neighbourhoods are classified as 'food deserts'. CS are generally closer to homes (1.5 km) than grocery stores (4 km). (Ottawa Neighbourhood Study, 2013)

Planning

Resident survey was conducted with 603 Ottawa residents. Respondents shop for food at a grocery store twice per week while in a CS once per month. More than half of respondents do not shop at CS for food. Younger adults shop at CS more often than older adults (60+ years). Proximity to home and convenience are top reasons to shop at CS. Almost half (48%) consider the availability of fresh produce at CS poor or very poor. Local produce and comparable prices were top ideas to encourage buying from CS.

OPH conducted outreach to 78 CS that included CS owner interviews and observational surveys to raise awareness of the initiative, to learn about business practices and barriers around stocking and selling fresh produce and to recruit CS for GFCS Pilot.

Implementation

OPH established a GFCS Steering Committee to inform the planning, implementation and evaluation of the GFCS Initiative. The committee helped establish branding, GFCS criteria and provided business, food security and community engagement expertise.

Eight CS participated in the 6-month GFCS Pilot. OPH provided branding, promotion, resources, and link to community support. Participating CS committed to offer a minimum inventory of fresh produce and healthy food staples. Observational surveys, interviews, sales data and experiential knowledge were collected before, during and at end-of-pilot. Continuous improvement of processes, tracking and resources occurred during the pilot.



Community engagement was important components of GFCS implementation. Social media and website content promoted GFCS pilot sites. Five community events were carried out in partnership with community groups and MarketMobile. Community partners assisted in promotion of the events and GFCS locations in their neighbourhoods.

Results

Seven CS completed the Pilot, one CS closed due to the owner's illness. Successes included increased inventory and prominence of vegetables and fruit, improved operators' skills and confidence around tracking sales, waste management and handling fresh vegetables and fruit. CS owners were satisfied with the GFCS branding and being affiliated with OPH. Finally, all CS that completed the pilot committed to selling vegetables and fruit after the pilot was completed. Key challenges included inconsistency in variety, quality and quantity of VF, procurement limitations for small businesses, limited refrigeration, waste, and low consumer demand. Sales data collection was inconsistent due to lack of point-of-sale tracking. Therefore, financial impact impossible to assess. Furthermore, poor transferability of 'GFCS model' since each Pilot site was unique in business practice, size, location, and customer base and therefore had its own unique challenges and opportunities.

Analysis

The current model has weaknesses that will make it difficult to sustain going forward. From a business perspective, an inefficient purchasing process; lack of POS systems to track activity; short shelf life; and narrow margins do not make carrying this line of products attractive. From a purchasing perspective, changing the purchasing habits of consumers takes time; consumers in low income neighbourhoods may be constrained by financial considerations; and finding the right mix of affordable and fresh produce may be challenging. Consumers do not typically expect to find healthy foods at corner stores, so there is a need for awareness building and changing of consumer expectations.

At the same time, CS in the pilot have shown that they are open to changing their product offering to incorporate more healthy food choices. Several sites have indicated a willingness to explore how the model could be enhanced to be more viable going forward. Consideration of model changes need to be made in the larger context of other food-based projects.

Recommendations

It is recommended not pursue expansion of the GFCS model yet to remain being engaged in sharing lessons learned through report dissemination, website update, CS resource sharing and research. At this time, the sustainability opportunities for current model are poor and social enterprise options equally challenging. However, OPH should remain open to future innovations and opportunities and as they may arise in the community.

Conclusions

Ottawa's GFCS initiative contributed evidence of consumers' food shopping habits and their perceptions of shopping for food in CS. The experience contributed knowledge of successes and challenges of engaging with community and small retail businesses to find viable options to improve healthy food access in neighbourhoods. Interventions to improve access to VF in CS may be viable as consumers occasionally shop for food in CS. Strategies, such as price matching and sourcing local food, should be considered to increase acceptance and demand for fresh produce in CS. An

innovative sustainable and transferable GFCS model is needed to strengthen consumer demand and procurement options for small businesses.

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