Bringing Produce to the People: Implementing a Social Marketing Food Access Intervention in Rural Food Deserts

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ABSTRACT
This study describes and evaluates the process of implementing a social marketing food access intervention for food desert communities in rural California. A case study approach used mixed-methods data from nationwide market comparisons, environmental assessment, and community informants. Lessons learned demonstrate room for improvement in implementing such strategies and underscore the importance of involving community in decision making; the strategic importance of operational decisions relating to intervention design, site and product selection, and distribution models; and the need to reconsider the problem of access in rural areas.

Key Words: community development, rural health, food access, social marketing (J Nutr Educ Behav. 2016;[ ]:1-9.)

INTRODUCTION
Rural food deserts (places located > 10 miles from a supermarket) often lack access to fresh produce; cluster in low-resource, low-income, ethnic minority communities; and are associated with disproportionate rates of poor health outcomes and chronic disease among residents.1 Interventions aimed at eliminating food deserts have included building permanent structures (eg, full-service supermarkets) and remodeling existing small stores to sell fresh produce,2,3 as well as temporary solutions (eg, farmers' markets).4,5 Such interventions have had mixed success and have been conducted mostly in urban areas. The nature of rural areas (sparsely populated, with minimal development and commercial areas) means that some of these interventions are not transferable to rural settings.3,6 For example, larger chain stores often select areas based on their potential for profitability and where insurance and security costs are low; rural areas typically do not meet those criteria.7 Innovative strategies are needed to increase access to nutritious foods in rural areas.8,9 One recent intervention that gained traction is the development of mobile farmers' markets that deliver produce for sale at a reasonable price. Although mobile farmers' markets first emerged in urban areas, public health and policy makers concerned about access to food in rural regions focused on whether this intervention might provide fresh produce to rural residents in low-resource areas. The purpose of this report was to describe and evaluate the process of implementation for 1 mobile farmers' market by a nonprofit organization that aimed to increase access to fresh produce in rural food deserts. Specifically, it details the social marketing–based intervention plan, its implementation, and lessons learned.

DESCRIPTION OF THE INTERVENTION
From November, 2013 through May, 2015, a nonprofit organization developed Produce on the Go (POTG), a mobile farmers' market, to improve food access in a rural central California county by providing locally grown fruit, vegetables, and nuts for purchase through weekly visits by a mobile grocery truck. Merced is a largely rural county in central California with high poverty (25.4%) and unemployment (17.5%), and where 1 in 6 households (15.6%) is food insecure.10 Despite its agricultural bounty, this county is home to many food deserts, defined as areas that are at least 10 miles from the nearest supermarket or chain grocery store, in predominately low-income Latino-majority communities.11 Disparities in access to fresh produce because of the...
lack of supermarkets and large grocery stores in food deserts are associated with residents' dietary intake and rates of obesity and chronic disease. 

Produce on the Go was developed by a nonprofit organization and funded by the Merced County Human Services Agency, California FreshWorks, and the US Department of Agriculture (USDA). The mobile food access intervention included 2 vehicles (a cargo van, purchased with funding provided by these organizations, and an 18-wheel refrigerated semi truck, donated by a drink distributor) to sell fresh produce at several Merced County sites on a weekly basis. Two vehicles allowed access to different types of locations. From 10 sites launched in November, 2013, the intervention expanded to 19 sites, mostly in Latino-majority, low-income communities.

Social marketing theory, which incorporates commercial marketing principles in the planning and execution of behavior change interventions, underpinned the POTG intervention design. Social marketing takes into account: (1) exchange theory: consumers must perceive a benefit in exchange for their participation/purchase/behavior change; (2) audience segmentation: subgroups similar in some way related to the target behavior or may respond similarly to intervention; (3) marketing mix: a combination of price, product, place, and promotion; (4) customer orientation; and (5) continuous monitoring.15-17 Exchange theory was fundamental to the intervention design: POTG sought to provide the benefit of food access to participants and customers. Audience segmentation was place-based, with each truck site serving distinct audiences. Promotion activities included postcard mailers, roadside signage, community festival participation, recipe cards and produce descriptions from the Supplemental Nutrition Assistance Program—Education, and the hiring of community liaisons to provide nutrition education and opportunities for physical activity at select sites. Other components of the marketing mix are further discussed under Lessons Learned, along with customer orientation and continuous monitoring. The Figure shows a logic model detailing the intervention components and expected outcomes.

DESCRIPTION OF THE EVALUATION

Process evaluation of the POTG intervention followed a parallel-convergent mixed-methods case study design consisting of 3 separate research activities (Table 1).18 The aim of the evaluation was to assess the implementation of the intervention as it was conceptualized, focused on the inputs, activities, and short- and mid-term outcomes: namely, residents' awareness of the mobile food vehicles and potential for sustainability (Figure), and to determine whether the intervention was...
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