# HEALTHY KIDS, HEALTHY JACKSONVILLE CASE REPORT

JACKSONVILLE AND DUVAL COUNTY, FLORIDA

Evaluation of the Healthy Kids, Healthy Communities National Program

December 2009 to June 2014



#### **ACKNOWLEDGMENTS**

Support for this evaluation was provided by a grant from the Robert Wood Johnson Foundation (#67099). Transtria LLC led the evaluation and dissemination activities from April 2009 to March 2014. Representatives from Healthy Kids, Healthy Jacksonville partnership actively participated in the evaluation planning, implementation, and dissemination activities. This case report is a synthesis of information collected through multiple evaluation methods as part of a collaborative, community-based approach to evaluation.

We are grateful for the collaboration with and support from the Robert Wood Johnson Foundation (Laura Leviton, PhD and Tina Kauh, PhD), the Washington University Institute for Public Health (Ross Brownson, PhD), the Healthy Kids, Healthy Communities (HKHC) National Program Office (Casey Allred; Rich Bell, MCP; Phil Bors, MPH; Mark Dessauer, MA; Fay Gibson, MSW; Joanne Lee, LDN, RD, MPH; Mary Beth Powell, MPH; Tim Schwantes, MPH, MSW; Sarah Strunk, MHA; and Risa Wilkerson, MA), the HKHC Evaluation Advisory Group (Geni Eng, DrPH, MPH; Leah Ersoylu, PhD; Laura Kettel Khan, PhD; Vikki Lassiter, MS; Barbara Leonard, MPH; Amelie Ramirez, DrPH, MPH; James Sallis, PhD; and Mary Story, PhD), the Social System Design Lab at Washington University in St. Louis (Peter Hovmand, PhD), the University of Memphis (Daniel Gentry, PhD), and Innovative Graphic Services (Joseph Karolczak).

Special thanks to the many individuals who have contributed to these efforts from Transtria LLC, including Evaluation Officers (Tammy Behlmann, MPH; Kate Donaldson, MPH; Cheryl Carnoske, MPH; Carl Filler, MSW; Peter Holtgrave, MPH, MA; Christy Hoehner, PhD, MPH; Allison Kemner, MPH; Jessica Stachecki, MSW, MBA), Project Assistants (James Bernhardt; Rebecca Bradley; Ashley Crain, MPH; Emily Herrington, MPH; Ashley Farell, MPH; Amy Krieg; Brandye Mazdra, MPH; Kathy Mora, PhD; Jason Roche, MPH; Carrie Rogers, MPH; Shaina Sowles, MPH; Muniru Sumbeida, MPH, MSW; Caroline Swift, MPH; Gauri Wadhwa, MPH; Jocelyn Wagman, MPH), additional staff (Michele Bildner, MPH, CHES; Daedra Lohr, MS; Melissa Swank, MPH), Interns (Christine Beam, MPH; Skye Buckner-Petty, MPH; Maggie Fairchild, MPH; Mackenzie Ray, MPH; Lauren Spaeth, MS), Transcriptionists (Sheri Joyce; Chad Lyles; Robert Morales; Vanisa Verma, MPH), and Editors (Joanna Bender and Julie Claus, MPH).

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Cover photos: Transtria, LLC and HKHJ Facebook

#### Suggested citation:

Donaldson K, Kemner A, Brennan LK. *Healthy Kids, Healthy Jacksonville Case Report*. St. Louis, MO: Transtria LLC; 2014. http://www.transtria.com/hkhc. Accessed <Month Day, Year>.

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#### **BACKGROUND**

#### **Healthy Kids, Healthy Communities National Program**

With the goal of preventing childhood obesity, the Healthy Kids, Healthy Communities (HKHC) national program, funded by the Robert Wood Johnson Foundation (RWJF), provided grants to 49 community partnerships across the United States (Figure 1). Healthy eating and active living policy, system, and environmental changes were implemented to support healthier communities for children and families. The program placed special emphasis on reaching children at highest risk for obesity on the basis of race, ethnicity, income, or geographic location.<sup>1</sup>

Project Officers from the HKHC National Program Office assisted community partnerships in creating and implementing annual workplans organized by goals, tactics, activities, and benchmarks. Through site visits and monthly conference calls, community partnerships also received guidance on developing and maintaining local partnerships, conducting assessments, implementing strategies, and disseminating and sustaining their local initiatives. Additional opportunities supplemented the one-on-one guidance from Project Officers, including peer engagement through annual conferences and a program website, communications training and support, and specialized technical assistance (e.g., health law and policy).

For more about the national program and grantees, visit www.healthykidshealthycommunities.org.

Healthy Kids, Healthy Communities (49 Grantees)

| Rochester, NV | Flichturg, MA | Rochester, NV | Rochester,

Figure 1: Map of Healthy Kids, Healthy Communities Partnerships

#### **Evaluation of Healthy Kids, Healthy Communities**

Transtria LLC and Washington University Institute for Public Health received funding from the Robert Wood Johnson Foundation to evaluate the HKHC national program. They tracked plans, processes, strategies, and results related to active living and healthy eating policy, system, and environmental changes as well as

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influences associated with partnership and community capacity and broader social determinants of health. Reported "actions," or steps taken by community partnerships to advance their goals, tactics, activities, or benchmarks from their workplans, formed community progress reports tracked through the HKHC Community Dashboard program website. This website included various functions, such as social networking, progress reporting, and tools and resources to maintain a steady flow of users over time and increase peer engagement across communities.

In addition to action reporting, evaluators collaborated with community partners to conduct individual and group interviews with partners and community representatives, environmental audits and direct observations in specific project areas (where applicable), and group model building sessions. Data from an online survey, photos, community annual reports, and existing surveillance systems (e.g., U.S. census) supplemented information collected alongside the community partnerships.

For more about the evaluation, visit www.transtria.com/hkhc.

#### Healthy Kids, Healthy Jacksonville

The Healthy Jacksonville Childhood Obesity Prevention Coalition was established in 2001 as one of the Community Coalitions of Healthy Jacksonville, a Duval County Health Department initiative. Healthy Kids, Healthy Jacksonville (HKHJ) operated under the Healthy Jacksonville Childhood Obesity Coalition and focused its efforts on food access, joint use, and active transportation.

Duval County Health Department (DCHD) was the lead agency for the Healthy Kids, Healthy Jacksonville (HKHJ) partnership.

The partnership and capacity building strategies of partnership included:

Food Policy Council: HKHJ created a Duval County Food Policy Council to advocate for healthy food
policies in Duval County and across the state. The Food Policy Council hosted annual Food Policy
Summits to address food access and healthy eating policies.

See Appendix A: HKHJ Evaluation Logic Model and Appendix B: Partnership and Community Capacity Survey Results for additional information.

Along with partnership and capacity building strategies, Healthy Kids, Healthy Jacksonville incorporated assessment and community engagement activities to support the partnership and the healthy eating and active living strategies.

The healthy eating and active living strategies of Healthy Kids, Healthy Jacksonville included:

- Joint Use: HKHJ partnered with City of Jacksonville Parks and Recreation and the Duval County Public School System to increase school and community resident awareness and utilization of the existing Duval County Public School System joint use policy.
- Active Transportation: HKHJ, partners, and community residents provided recommendations and support for the City of Jacksonville's 2030 Mobility Plan and the implementation of Context Sensitive Streets guidelines throughout the city.
- Access to Healthy Food: HKHC partnered with Friends of Northeast Florida Gardens and community
  garden partners to support the implementation and expansion of gardens throughout Duval County. HKHJ
  partnered with area youth and the Jacksonville Farmers' Market to conduct a "So Fresh, So Clean" media
  campaign and recruit Health Zone 1 corner stores to sell fresh produce. The partnership worked to
  increase Supplemental Nutrition Assistance Program and Electronic Benefit Transfer (SNAP/EBT)
  payments at area farmers' markets. Farmers' market efforts are ongoing.

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#### **COMMUNITY DEMOGRAPHICS**

Jacksonville (pop. 864,263) is located in the northeast corner of Florida and shares a consolidated government with Duval County. Jacksonville covers a wide geographical area and is a mix of urban, suburban, and rural areas (Figure 2 and Table 1).

Jacksonville is divided into six geographically defined Health Zones (Figure 3). The Healthy Kids, Healthy Jacksonville partnership focused its efforts in Jacksonville's Health Zone 1 (HZ1). HZ1 is comprised of six zip codes and encompasses Jacksonville's urban core. Over 110,427 residents live in HZ1 and approximately 83% of HZ1 residents are, comprised of racial minorities.

Table 1: Jacksonville, Florida Demographics

	Population	African American	Hispanic/ Latino	White	Poverty Rate	Per Capita Income	Median Household Income
Duval County <sup>3,4</sup>	864,263	29.5%	7.6%	60.9%	14.9%	\$26,394	\$49,964
Jacksonville <sup>3,4</sup>	821,784	30.7%	7.7%	59.4%	15.2%	\$25,716	\$49,192
Health Zone 1 <sup>6</sup>	110,427	78%		18.9%	31.2%		\$27,759

Figure 2: Map of Jacksonville, Florida<sup>2</sup>





#### **INFLUENCE OF SOCIAL DETERMINANTS**

#### Health Zone 1

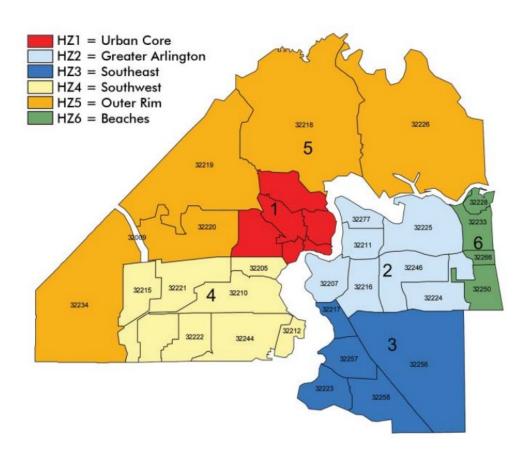
Jacksonville's HZ1 struggles from a multitude of challenges that influence healthy eating and active living within the community. Residents of HZ1 have higher rates of poverty, chronic disease, and crime compared to the other Health Zones and the City of Jacksonville.

The region is considered a food desert, with fewer grocery stores and more fast food restaurants and convenience stores per capita than the rest of Duval County. High crime rates keep children indoors as their parents are afraid for their safety when outdoors.<sup>5</sup>

#### Active Transportation

Jacksonville government officials and partners use the term Context Sensitive Streets as an alternative to Complete Streets because of the geographical spread (over 800 square miles) and different types of geographic areas within the city. Residents in non-urban environments do not perceive the need for as comprehensive of an active transportation infrastructure as residents in urban areas. Urban residents want the ability to walk or bike to the grocery store, school, or library whereas some rural and suburban residents can only get to a store by car.

Figure 3: Jacksonville Health Zones<sup>7</sup>



#### HEALTHY KIDS, HEALTHY JACKSONVILLE PARTNERSHIP

#### **Lead Agency and Leadership Teams**

The Healthy Jacksonville Childhood Obesity Prevention Coalition was established in 2001 as one of the Community Coalitions of Healthy Jacksonville, a Duval County Health Department initiative. Healthy Kids, Healthy Jacksonville (HKHJ) operated under the Healthy Jacksonville Childhood Obesity Coalition, whose reputation established a strong foundation for credibility and partner involvement for HKHJ.



Duval County Health Department (DCHD) was the lead agency for the Healthy Kids, Healthy Jacksonville (HKHJ) partnership. DCHD experienced significant turnover of administrative staff (i.e., new director and new assistant directors) during the project. The turnover slowed the progress of the partnership as staff adjusted to the transition.

The Project Director was an employee of Duval County Health Department (DCHD) and was the Director of Healthy Jacksonville, DCHD's initiative to bring together key stakeholders to impact Jacksonville. Healthy Jacksonville Childhood Obesity Prevention Coalition, along with several other coalitions were a part of the Healthy Jacksonville initiative. The Project Director oversaw the HKHJ workplan and led the various coalitions under Healthy Jacksonville. There were three Project Directors over the course of the project. There were two Project Coordinators for the HKHC project. The original Project Coordinator was an employee of DCHD. The subsequent Project Coordinator started in October 2013. Both Project Coordinators facilitated partnership meetings, recruited partners, and coordinated community events.

#### **Organization and Collaboration**

The partnership established a steering committee to prioritize workplan strategies and provide direction to the overall partnership. The partnership met regularly and organized into workgroups for each major goal of the HKHJ workplan (i.e., Food Policy Council Workgroup, Built Environment Workgroup, Joint Use Workgroup, Communications Workgroup).

The quarterly partnership meetings had an average of 50-60 people in attendance (see Appendix C for a list of partners). Partnership membership and involvement was consistent throughout the project by organizations and community residents. There was strong community support and participation in HKHJ. The Food Policy Council and Context Sensitive Streets efforts were led entirely by partners and key stakeholders. The HKHJ staff provided support for meetings and communication.

#### **Funding**

As part of HKHC, grantees were expected to secure a cash and/or in-kind match to equal at least 50% of the RWJF funds over the entire grant period. HKHJ received matching funds from the City of Jacksonville which had to be re-approved after political transitions. The partnership received the majority of its funds from the Blue Cross, Blue Shield of Florida Foundation. RWJF funding was not used for direct service and environmental implementation; instead, partnership staff assisted partner organizations with grant proposals for strategy-related work.

For additional funding information, see Appendix D: Sources and Amounts of Funding Leveraged.

#### **COMMUNITY ASSESSMENT**

In 2010, HKHJ conducted several assessments to gather input from key stakeholders and shape its workplan. The partnership surveyed HKHJ Steering Committee invitees to assess their knowledge of Jacksonville childhood obesity efforts and existing political and organization support. Fifteen stakeholders responded and provided a list of current programs and initiatives for healthy eating and active living and perceived barriers to successful implementation for the initiatives. Participants provided suggestions on the what initiatives should be pursued by HKHJ based on current initiatives and the political climate. The steering committee compiled and mapped a list of existing healthy eating and active living policy and environmental assets in Health Zone 1 (Figure 4). The asset mapping exercise provided guidance for the partnership in prioritizing strategies for its workplan and served as a resource for community members.

HKHJ conducted a focus group with residents of a low-income community. Ten community residents,

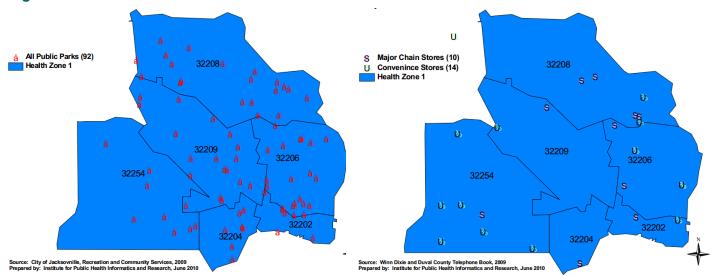


Figure 4: Public Parks and Food Stores in Health Zone 1. Source: HKHC Dashboard

including parents of children who were overweight, participated in the focus group.

#### Joint Use

HKHJ conducted a survey with physical education teachers, parent teacher associations, and principles to determine why schools did not utilize the joint use policy. There was minimal response to the survey. HKHJ partners conducted a letter campaign to area schools to gather community stories on existing collaborations and to increase awareness of how schools could benefit from the joint use policy. A partnership meeting was held at Biltmore Elementary to showcase its joint use program and the success of its gardening program.

#### Farmers' Market Environmental Audit

HKHJ conducted farmers' market environmental audits at the Jacksonville Farmers' Market and Riverside Arts Market in 2012 (see Appendix E: Jacksonville Farmers' Market Environmental Audit Report). The following are selected results:

- The Jacksonville Farmers' Market was open daily, year-round. The Riverside Arts Market was open Saturdays, April through December. Only the Jacksonville Farmers' Market accepted Women, Infant, and Children (WIC), Supplemental Nutrition Acceptance Program (SNAP), and Electronic Benefit Transfer (EBT) payments.
- High-fiber, whole grain foods, lean meats, fish, poultry, nuts, seeds, dry beans, and other healthy foods were available at both markets.
- Foods with minimal nutritional value were available at both markets, including salty foods, ice cream/ frozen desserts, sweet foods, candy/chocolate, and regular to high-fat prepared meals.

#### PLANNING AND ADVOCACY EFFORTS

#### **Community Engagement**

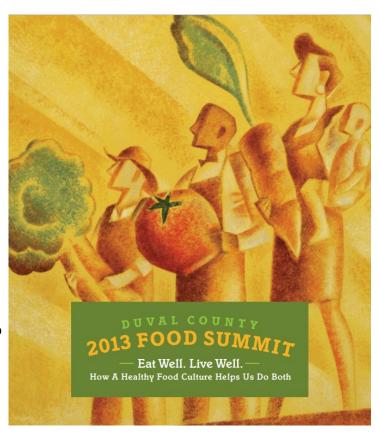
Community residents were instrumental in the success of the partnership. Residents served on HKHJ's workgroups and played a key role with the Context Sensitive Streets efforts and Food Policy Council. The partnership also specifically engaged Jacksonville youth in partnership activities. Elementary, middle, and high school students participated in assessment activities (i.e., farmers' market audits, mapping) and led the initiative to increase access to healthy food at two HZ1 corner stores.

#### **Planning and Advocacy**

#### Food Policy Council

HKHJ created a Duval County Food Policy Council to advocate for healthy food policies in Duval County and across the state in 2011. The council was comprised of community residents and volunteers, including AmeriCorps members, health services partners, and academic partners.

The Food Policy Council focused on three goals: food access, children's nutrition, and policy/advocacy. A strategic plan was developed and subcommittees were formed for each of the goals.



2013 Food Summit. Photo source: HKHC Dashboard

The Food Policy Council hosted annual Food Policy Summits to inform the public of the Council's goals and present a call to action to interested stakeholders. The Food Policy Council used the summits to encourage and stimulate policy and advocacy work. Policy and advocacy work was not a major strength of the Healthy Jacksonville Childhood Obesity Prevention Council, so HKHJ worked to fill this gap with the Food Policy Council.

Food Policy Council members identified a lack of formalized structure for the Council as a barrier to progress on stated goals. Volunteer members provided the Council a diverse membership but hindered progress because of multiple interests and priorities. The sustainability of the Food Policy Council after HKHC funding is unknown. As an informal council, its ability to leverage funding was limited and partner organizations had to balance restrictions on advocacy versus lobbying.

Food Policy Council partners specifically advocated for statewide legislation on sugar-sweetened beverages in child care settings and EBT acceptance at farmers' markets. The bill made it out of the subcommittee but was tabled before a final vote because of the end of the session. The legislation would approve EBT access for all famers' markets and flea markets across Florida. There were no costs associated with the legislation, because federal funds were designated for equipment and technical assistance at markets.

#### Farmers' Markets

Informal assessments of area farmers' markets found minimal vendor acceptance of SNAP/EBT. HKHJ explored options for a kiosk to process EBT payments at farmers' markets. Farmers' market management was unwilling to absorb the cost of opening a kiosk. HKHJ explored alternative options to increase access to EBT/SNAP payment and started a double bucks program designed to double the money available for SNAP participants at the farmers' markets. The double bucks program is in place at one farmers' market and other markets in the county are exploring the possibility of utilizing the program.

#### Joint Use Agreements

HKHJ convened the joint use subcommittee to pursue a joint use policy for the Duval County Public School System. The workgroup found that there was an existing and comprehensive Duval County Public Schools Joint Use Policy, but the policy was underutilized by Duval County schools. The policy was created in 1997 to allow joint use between Jacksonville Parks and Recreation and the Duval County Public School System.

Approximately 45 schools were covered

under the policy.

HKHJ partnered with City of Jacksonville Parks and Recreation and the Duval County Public School System to inventory existing joint use agreements. There were 41 private/public schools in Health Zone 1, 10 of which had physical activity facilities on-site, and 6 that were covered by the joint use policy. HKHJ worked to increase awareness and utilization of the joint use policy.

The HKHJ partnership will continue to work on utilization of the existing joint use agreements through trying to create a centralized unit that would approve organizational use rather than relying on individual principals to handle the agreements.



Biltmore Elementary Tour. Photo source: HKHJ Facebook

#### **ACTIVE TRANSPORTATION**

HKHJ, partners, and community residents provided recommendations and support for the City of Jacksonville's 2030 Mobility Plan and the implementation of Context Sensitive Streets guidelines throughout the city.

#### Policy, Practice, and Environmental Changes

Active transportation policy, practice, and environmental changes included:

- The 2030 Mobility Plan which prioritized walking, bicycling and public transportation for community planning efforts was adopted by the City of Jacksonville in 2011.
- An ordinance was adopted to create a Context Sensitive Streets Standards Committee to review, revise, and recommend Context Sensitive Streets Guidelines for transportation, traffic engineering, and roadway design (e.g., parking, sidewalks, bicycle and pedestrian use, transit).
- HKHJ and partners advocated to end a citywide moratorium on development fees levied to fund the 2030 Mobility Plan.
- An ordinance was adopted to establish the City of Jacksonville's first Bicycle and Pedestrian Coordinator and Bicycle and Pedestrian Action Committee.

#### Implementation

In 2009, the City of Jacksonville was designated a Transportation Concurrency Exception Area as part of Florida State Senate Bill 360. The legislation required all municipalities designated as a Transportation Concurrency Exception Area to amend its local comprehensive plan to include alternative modes of transportation with its land use and transportation strategies. HKHJ reviewed the proposed update to Jacksonville's comprehensive plan, the 2030 Mobility Plan. The Context Sensitive Streets workgroup supported the language of the 2030 Mobility Plan and presented a resolution to City Council as a letter of support. The 2030 Mobility Plan included a Mobility Fee to raise funds for the infrastructure changes recommended in the plan. Under pressure from developers, the City of Jacksonville imposed a moratorium on the Mobility Fee to encourage development. HKHJ, partners, and community residents advocated to end the moratorium on the Mobility Fee. In summer 2013, a compromise was reached to end the moratorium but with changes to the fee structure. The Mobility Fee was structured so that a developer's first project would be levied at 25% of the original fee, 50% of the second project, 75% of a third project, and 100% of the fee for any additional projects.

# 2030 Mobility Plan Where Florida Begins. City of Jacksonville Planning and Development Department May 2011

#### 2030 Mobility Plan. Photo source: City of Jacksonville<sup>8</sup>

#### Sustainability

As a result of the 2030 Mobility Plan, the City of Jacksonville developed a Context Sensitive Streets special

subcommittee to direct implementation and integration of the Context Sensitive Streets Guidelines for new and existing roads, and a Bicycle and Pedestrian Coordinator position was created and staffed for the City of Jacksonville. The Context Sensitive Streets Standards Committee was comprised of 13 City Council-appointed stakeholder members and staff members from the Jacksonville Transportation Authority, Planning and Development Department, Public Works Department, and Disabled Services Department.

#### **ACCESS TO HEALTHY FOOD**

HKHC partnered with community garden stakeholders and the Jacksonville Farmers' Market to support community gardens and a corner store fresh produce initiative.

#### Policy, Practice, and Environmental Changes

Access to healthy food environmental change included:

- HKHJ partnered with Northeast Florida Community Gardens to support over 94 community gardens throughout the Duval County/Jacksonville area. The partnership provided funds to partners to develop and expand gardens.
- Two corner stores in Health Zone 1 (i.e. Quick Way Food Store, Good Neighbor Food Mart) added fresh fruits and vegetables to their stores.

See Figure 5: Access to Healthy Food Infographic for additional information.



Special Education Garden. Photo source: Transtria LLC

#### **Implementation**

#### **Corner Stores**

Jacksonville youth conducted a media campaign, "So Fresh, So Clean," to increase food access in Jacksonville. The middle school and high school youth approached two corner stores in Health Zone 1 to recruit them to sell fresh produce from the Jacksonville Farmers' Market. Prior to their involvement, the stores occasionally stocked produce that was in poor condition. The youth conducted site visits and provided feedback to the owners and managers on produce placement. The Jacksonville Farmers' Market Director also provided feedback to the stores on produce placement and storage because the stores lacked refrigeration space for the produce.





Corner Store Displays. Photo source: HKHJ

Figure 5: Access to Healthy Food Infographic





Local Government

Community Organizations

Youth

Local Business



Farmers' Market Environmental **Audit** 

Asset Mapping

Grocery Stores Convenience Stores



\$30,000 Revenue Generated-Portion of funds used for Food Policy Council

Source: Revenue Generated Actions, HKHC Dashboard





Radio coverage of the Food Policy Council

Source: Media Outcome Actions, HKHC

# PROGRAMS PROMOTIONS

So Fresh So Clean

middle and high school youth led a corner store fresh produce campaign



**Duval County Food Policy** Council advocated for

statewide legislation on sugar sweetened beverages in child care settings

EBT acceptance at farmers' markets

# POLICY&PRACTICE

corner stores FRESH





Support for 95 community gardens in **Duval County** 

3730 sq. ft. & 8,736 annual hours 864,263 residents

#### SUSTAINABILITY OF THE PARTNERSHIP AND THE INITIATIVE

HKHJ received a no-cost extension from RWJF to continue its efforts through June 2014. During the no-cost extension, HKHJ redesigned three taskforces to align with future project goals: Comprehensive Planning, Children Nutrition, and Urban Agriculture. A job description was created to identify two co-chairs for each taskforce. HKHJ interviewed and hired applicants for the leadership positions within the taskforce and strategically hired individuals from diverse organizations (e.g., university partner and city partner).

The HKHJ partnership developed a strategic plan designed to serve as a framework for the three taskforces in sustaining and continuing to work toward healthy eating and active living policy and environmental changes including Electronic Benefit Transfer (EBT) acceptance at farmers' markets and the formalization and utilization of existing joint use agreements. Additionally, HKHJ prepared a "Stories from the Field" document that highlights the history of the partnership, major accomplishments, and lessons learned from the work throughout HKHC. The two documents can provide some institutional memory for the work along with a plan for next steps as the new leaders of the taskforces set forth to continue creating changes in Jacksonville and Duval County.

The Healthy Jacksonville Childhood Obesity Prevention Coalition will continue its work to prevent and reduce obesity for Duval County youth with its focus on nutrition, active living, advocacy, and youth empowerment. HKHJ strategies were encompassed by the coalition's three taskforces. HKHJ staff continued to work for DCHD and support the Healthy Jacksonville Childhood Obesity Prevention Coalition after the HKHC project, while the newly redesigned taskforces and leadership teams will be directly responsible for moving these efforts forward.

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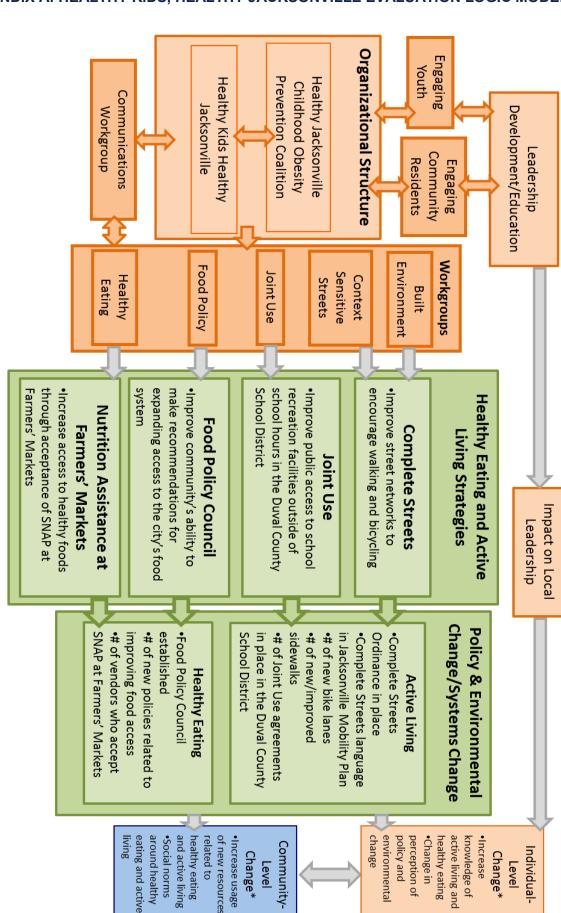
#### APPENDIX A: HEALTHY KIDS, HEALTHY JACKSONVILLE EVALUATION LOGIC MODEL

In the first year of the grant, this evaluation logic model identified healthy eating and active living strategies with associated short-term, intermediate, and long-term community and system changes for a comprehensive evaluation to demonstrate the impact of the strategies to be implemented in the community. This model provided a basis for the evaluation team to collaborate with HKHJ to understand and prioritize opportunities for the evaluation. Because the logic model was created at the outset, it does not necessarily reflect the four years of activities implemented by the partnership (i.e., the workplans were revised on at least an annual basis).

The healthy eating and active living strategies of HKHJ included:

- Joint Use: HKHJ partnered with City of Jacksonville Parks and Recreation and the Duval County Public School System to increase school and community resident awareness and utilization of the existing Duval County Public School System joint use policy.
- Active Transportation: HKHJ, partners, and community residents provided recommendations and support for the City of Jacksonville's 2030 Mobility Plan and the implementation of Context Sensitive Streets guidelines throughout the city.
- Access to Healthy Food: HKHC partnered with Friends of Northeast Florida Gardens and community
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#### APPENDIX A: HEALTHY KIDS, HEALTHY JACKSONVILLE EVALUATION LOGIC MODEL, cont.



\*Not responsibility of community partner to measure.

Duval County/Jacksonville, FL, HKHC Logic Model

**Duval County Health Department** 

Revised February 3, 2012

#### APPENDIX B: PARTNERSHIP AND COMMUNITY CAPACITY SURVEY RESULTS

#### **Partnership and Community Capacity Survey**

To enhance understanding of the capacity of each community partnership, an online survey was conducted with project staff and key partners involved with the Healthy Kids, Health Jacksonville partnership during the final year of the grant. Partnership capacity involves the ability of communities to identify, mobilize, and address social and public health problems.<sup>1-3</sup>

#### Methods

Modeled after earlier work from the Prevention Research Centers and the Evaluation of Active Living by Design,<sup>4</sup> an 82-item partnership capacity survey solicited perspectives of the members of the Healthy Kids, Health Jacksonville partnership on the structure and function of the partnership. The survey questions assisted evaluators in identifying characteristics of the partnership, its leadership, and its relationship to the broader community.

Questions addressed respondents' understanding of Healthy Kids, Health Jacksonville in the following areas: structure and function of the partnership, leadership, partnership structure, relationship with partners, partner capacity, political influence of partnership, and perceptions of community members. Participants completed the survey online and rated each item using a 4-point Likert-type scale (strongly agree to strongly disagree). Responses were used to reflect partnership structure (e.g., new partners, committees) and function (e.g., processes for decision making, leadership in the community). The partnership survey topics included the following: the partnership's goals are clearly defined, partners have input into decisions made by the partnership, the leadership thinks it is important to involve the community, the partnership has access to enough space to conduct daily tasks, and the partnership faces opposition in the community it serves. The survey was open between September 2013 and December 2013 and was translated into Spanish to increase respondent participation in predominantly Hispanic/Latino communities.

To assess validity of the survey, evaluators used SPSS to perform factor analysis, using principal component analysis with Varimax with Kaiser Normalization (Eigenvalue >1). Evaluators identified 15 components or factors with a range of 1-11 items loading onto each factor, using a value of 0.4 as a minimum threshold for factor loadings for each latent construct (i.e., component or factor) in the rotated component matrix.

Survey data were imported into a database, where items were queried and grouped into the constructs identified through factor analysis. Responses to statements within each construct were summarized using weighted averages. Evaluators excluded sites with ten or fewer respondents from individual site analyses but included them in the final cross-site analysis.

#### **Findings**

#### Structure and Function of the Partnership (n=5 items)

A total of 12 individuals responded from Healthy Kids, Health Jacksonville partnership. Of the sample, 9 were female (75%) and 2 were male (17%). One respondent (8%) did not respond. Respondents were between the ages of 26-45 (4, or 34%), 46-65 (7, or 58%), or 66 or over (1, or 8%). Survey participants were also asked to provide information about race and ethnicity. Respondents identified with one or more from the following race and ethnicity categories: African American, American Indian/Alaskan Native, Asian, Native Hawaiian/Pacific Islander, White, Other race, Hispanic or Latino, Not Hispanic or Latino, Ethnicity unknown/ unsure, or Refuse to provide information about race or ethnicity. Of the 12 responses, 50% were African American, and 42% were White. No other races or ethnicities were identified.

Respondents were asked to identify their role(s) in the partnership or community. Of the 14 identified roles, five were representative of the Community Partnership Lead (36%) and seven were Community Partnership Partners (50%). One respondent self-identified as a Community Partnership Leader (7%), and one as a Community Member (7%). Individuals participating in the survey also identified their organizational affiliation. Thirty-three percent of respondents (n=4) indicated affiliation to a health care organization, while two (17%) claimed affiliation to neighborhood organizations. Three respondents (25%) self-identified with other types of organizations not listed as response options. The remaining three respondents affiliated to schools/school district (1, or 8%), local government (1, or 8%), and a university or research/evaluation organization (1, or

#### APPENDIX B: PARTNERSHIP AND COMMUNITY CAPACITY SURVEY RESULTS, cont.

8%). No respondents associated to neighborhood associations, faith- or community-based organizations, or child care or afterschool organizations.

#### Leadership (n=8 items)

All responses showed agreement or strong agreement (100% total) to statements suggesting that the partnership had an established group of core leaders who had the skills to help the partnership achieve its goals. Responses also indicated that participants in the survey felt the core leadership is organized and retains the skills to help the partnership and its initiatives succeed. Most respondents strongly agreed or agreed (92%) that leaders worked to motivate others, worked with diverse groups, showed compassion, and strived to follow through on initiative promises. Responses to the survey showed at least one member of the leadership team lived in the community (66% agree/strongly agree), but 25% of respondents were not sure. When asked if they agreed with statements suggesting that at least one member of the leadership team retained a respected role in the community, 92% of respondents agreed or strongly agreed, while 8% strongly disagreed.

#### Partnership Structure (n=24 items)

Half of the respondents generally felt that the partnership adequately provided the necessary in-kind space, equipment and supplies for partners to conduct business and meetings related to partnership initiatives (50% agree/strongly agree). Yet, almost half (43%) felt unsure provision of space and equipment was sufficient and 6% disagreed. Most (84%) also agreed that the partnership has processes in place for dealing with conflict, organizing meetings, and structuring goals, although 8% responded "I don't know", indicating a lack of familiarity in this area, and 8% felt these processes were not established. Partnership members (leadership and partners) were generally perceived by respondents to be involved in other communities and with various community groups, bridging the gaps between neighboring areas and helping communities work together (90%), though 6% did not know and 4% did not agree.

Though the majority (77%) of respondents indicated agreement with statements about the partnership's effectiveness in seeking learning opportunities, developing the partnership, and planning for sustainability, 15% of responses disagreed, and 8% were not aware of partnership activities specific to development and sustainability.

#### Relationship with Partners (n=4 items)

Eighty-seven percent of responses to statements about leadership and partner relationships were positive (agree/strongly agree), indicating that the majority of respondents felt the partners and leadership trusted and worked to support each other.

#### Partner Capacity (n=18 items)

Nearly all responses (95% agree/strongly agree) indicated that respondents felt partners possess the skills and abilities to communicate with diverse groups of people and engage decision makers (e.g., public officials, community leaders). Furthermore, 91% of individuals responding to the survey felt that partners were dedicated to the initiative, interested in enhancing a sense of community, and motivated to create change.

#### Political Influence of Partnership (n=2 items)

Respondents felt that the leadership is visible within the community, with 83% of responses supporting statements that the leadership is known by community members and works directly with public officials to promote partnership initiatives. Seventeen percent of respondents disagreed about the leadership's role with community members and public officials.

#### Perceptions of Community and Community Members (n=22 items)

Statements suggesting that the community was a good place to live, with community members who share the same goals and values, help each other, and are trustworthy were supported by 94% of survey responses, while 2% of respondents disagreed and 4% indicated a lack of knowledge about these community attributes. Respondents also strongly supported suggestions that community members help their neighbors, but may

#### APPENDIX B: PARTNERSHIP AND COMMUNITY CAPACITY SURVEY RESULTS, cont.

take advantage of others if given the opportunity (92% agree/strongly agree). In contrast, respondents were less convinced that community members would intervene on behalf of another individual in their community in cases of disrespect, disruptive behavior, or harmful behavior. While 61% agreed or strongly agreed, 28% disagreed/strongly disagreed. Eleven percent of responses indicated that some respondents did not know how community members would act in these situations.

Most survey participants (83%) felt community members were aware of the partnership's initiatives and activities. Though the majority of respondents (75%) agreed that the partnership equally divides resources among different community groups in need (e.g., racial/ethnic minorities, lower-income), 25% percent disagreed.

Overall, respondents agreed or strongly agreed that partners and members of the community maintained active involvement in partnership decisions and activities (95%), and also agreed that partners and residents have the opportunity to function in leadership roles and participate in the group decision-making process (89%).

#### References

- 1. Goodman RM, Speers MA, McLeroy K, et al. *Identifying and defining the dimensions of community capacity to provide a basis for measurement.* Health Educ Behav. Jun 1998;25(3):258-278.
- 2. Israel BA, Schulz AJ, Parker EA, Becker AB. *Review of community-based research: assessing partnership approaches to improve public health.* Annu Rev Public Health. 1998;19:173-202.
- 3. Roussos ST, Fawcett SB. A review of collaborative partnerships as a strategy for improving community health. Annu Rev Public Health. 2000;21:369-402.
- 4. Baker E, Motton F. *Is there a relationship between capacity and coalition activity: The road we've traveled.* American Public Health Association 131st Annual Meeting. San Francisco, CA; 2003.

#### APPENDIX B: PARTNERSHIP AND COMMUNITY CAPACITY SURVEY RESULTS, cont.

# Partnership and Community Capacity Survey

#### Respondent Summary

Community Partnership

Gender

Jacksonville Respondents (n= 12 )

#### Respondent Characteristics

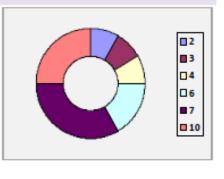
Female	9
Male	2
No response	1
Age Rang	ge
18-25	0
26-45	4
46-65	7
66+	1
No response	0

Indentified Race/Ethnicity						
American Indian	0	Hispanic or Latino	0			
or Alaskan Native		Not Hispanic or	0			
Asian	0	Latino				
White	5	Don't know/ Unsure ethnicity	0			
African American/	6	Refused to identify	1			
Black		ethnicity				
Pacific Islander/	0	Other ethnicity	0			
Native Hawaiian	U					

Identified Role	
Community Partnership Lead	5
Community Partnership Partner	7
Community Leader	1
Community Member	1
Public Official	0
Other role	0

#### Type of Affiliated Organization

		_
Based Organization 0	Faith- or Community Based Organization	0.0% (1)
ary, middle, high) 1	School (district, elementary, middle, high)	8.3% (2)
ency (city, county) 1	Local Government Agency (city, county)	8.3% (3)
ation Organization 1	University or Research/Evaluation Organization	8.3% (4)
hood Organization 0	Neighborhood Organization	0.0% (5)
ocacy Organization 2	Advocacy Organization	16.7% (6)
Care Organization 4	Health Care Organization	33.3% (7)
chool Organization 0	Child Care or Afterschool Organization	0.0% (8)
Other 3	Other	25.0% (10)
No response 0	No response	0.0% (999)



#### Partnership and Community Capacity Data

#### Provision of required space and equipment

Participants provided level of agreement to statements indicating the community partnership provided adequate space, equipment, and supplies to conduct business and meetings.

Strongly agree	18.52%	Strongly disagree	0.00%
Agree	31.48%	I don't know	43.52%
Disagree	5.56%	No response	0.93%

#### Partner skills and communication

Participants provided level of agreement to statements supporting partner skills and ability to communicate with and engage multiple types of people (e.g., public officials, community leaders).

Strongly agree	40.91%	Strongly disagree	0.00%
Agree	53.79%	I don't know	2.27%
Disagree	3.03%	No response	0.00%

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#### APPENDIX B: PARTNERSHIP AND COMMUNITY CAPACITY SURVEY RESULTS, cont.

#### **Community Partnership**

Participants provided level of agreement to statements suggesting the communities are good places to live, and that community members are helpful, can be trusted, and share the same goals or values.

Strongly agree	24.24%	Strongly disagree	0.00%
Agree	69.70%	I don't know	3.79%
Disagree	2.27%	No response	0.00%

#### Partner and community involvement

Participants provided level of agreement to statements indicating partners and the community were actively involved in partnership activities, meetings, and decisions.

Strongly agree	48.33%	Strongly disagree	0.00%
Agree	46.67%	I don't know	0.00%
Disagree	5.00%	No response	0.00%

#### Partner and partnership development

Participants provided level of agreement to statements suggesting the partnership and its partners seek ways learn, develop, and enhance sustainability.

Strongly agree	6.67%	Strongly disagree	6.67%
Agree	70.00%	I don't know	8.33%
Disagree	8.33%	No response	0.00%

#### Partnership structure, organization, and goals

Participants provided level of agreement to statements suggesting partnership has processes in place related to structure, meeting organization, and goals.

Strongly agree	47.22%	Strongly disagree	0.00%
Agree	36.11%	I don't know	8.33%
Disagree	8.33%	No response	0.00%

#### Relationship between partners and leadership

Participants provided level of agreement to statements indicating the leadership and partners trust and support each other.

Strongly agree	58.33%	Strongly disagree	4.17%
Agree	29.17%	I don't know	6.25%
Disagree	2.08%	No response	0.00%

#### Community members intervene

Participants provided level of agreement to statements indicating that community members can be counted on intervene in instances where someone is disrespectful, disruptive, or harmful to another community member.

Strongly agree	22.22%	Strongly disagree	5.56%
Agree	38.89%	I don't know	11.11%
Disagree	22.22%	No response	0.00%

#### Leadership motivation

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#### APPENDIX B: PARTNERSHIP AND COMMUNITY CAPACITY SURVEY RESULTS, cont.

#### Community Partnership

Participants provided level of agreement to statements suggesting the leadership is motivated to help others, work with diverse groups, shows compassion, and follows through.

Strongly agree	62.50%	Strongly disagree	6.25%
Agree	29.17%	I don't know	0.00%
Disagree	0.00%	No response	2.08%

#### Community member and partner participation

Participants provided level of agreement to statements indicating that community members and partners have opportunities to serve in leadership roles and participate in group decision-making.

Strongly agree	50.00%	Strongly disagree	5.56%
Agree	38.89%	I don't know	2.78%
Disagree	2.78%	No response	0.00%

#### Involvement in other communities

Participants provided level of agreement to statements suggesting leadership and partners are involved in other communities and various community groups, and help communities work together.

Strongly agree	37.50%	Strongly disagree	0.00%
Agree	52.08%	l don't know	6.25%
Disagree	4.17%	No response	0.00%

#### Community member willingness to assist

Participants provided level of agreement to statements suggesting most community members help neighbors and solve community problems. It also suggested some community members may take advantage of others.

Strongly agree	52.08%	Strongly disagree	0.00%
Agree	39.58%	I don't know	6.25%
Disagree	2.08%	No response	0.00%

#### Core leadership and leadership skills

Participants provided level of agreement to statements suggesting the community partnership has a core leadership group organizing efforts, and that leaders have the skills to help the partnership achieve its goals.

Strongly agree	70.83%	Strongly disagree	0.00%
Agree	29.17%	I don't know	0.00%
Disagree	0.00%	No response	0.00%

#### Partner motivation

Participants provided level of agreement to statements indicating that partners won't give up in their efforts to create change and increase sense of community through the partnership.

Strongly agree	19.44%	Strongly disagree	2.78%
Agree	72.22%	I don't know	2.78%
Disagree	2.78%	No response	0.00%

#### Visibility of leadership

Participants provided level of agreement to statements suggesting the leadership is known in the community and works with public officials.

Strongly agree	41.67%	Strongly disagree	0.00%
Agree	41.67%	I don't know	0.00%
Disagree	16.67%	No response	0.00%

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## APPENDIX B: PARTNERSHIP AND COMMUNITY CAPACITY SURVEY RESULTS, cont.

#### Community Partnership

Community Partnership				
Leadership lives in the community				
Participants provided level of agreement to a statement indicating that at least one member of the leadership resides within the community.				
	Strongly agree Agree Disagree	58.33% 8.33% 0.00%	Strongly disagree I don't know No response	8.33% 25.00% 0.00%
Leadership has a res	pected role in th	ne communit	у	
Participants provided lev has a respected role in th	_	a statement tha	t suggests at least one	member of the leadership team
	Strongly agree Agree Disagree	66.67% 25.00% 0.00%	Strongly disagree I don't know No response	8.33% 0.00% 0.00%
Community partners	hip initiatives a	re known		
Participants provided lev partnership's initiatives a	_	a statement sug	gesting that communit	y members are aware of the
	Strongly agree Agree Disagree	33.33% 50.00% 16.67%	Strongly disagree I don't know No response	0.00% 0.00% 0.00%
Division of resources	;			
Participants provided lev different community gro				are equally divided among
	Agree	66.67%	I don't know	0.00%

25.00%

Disagree

0.00%

No response

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#### **APPENDIX C: PARTNER LIST**

Healthy Kids, Healthy Jacksonville			
Organization/Institution	Partner		
Business/Industry/ Commercial	Jacksonville Farmers' Market Memorial Hospital United Healthcare Whole Foods		
Civic Organizations	Jacksonville Community Council Inc. War on Poverty – Florida		
Colleges/Universities	University of Florida College of Medicine – Jacksonville Department of Pediatrics University of North Florida – Department of Nutrition and Dietetics		
Foundations	American Culinary Federation The Blue Foundation The Jaguar Foundation		
Government Organizations	City of Jacksonville Mayor's Council of Fitness and Well-Being Parks and Recreation Department Planning and Development Department Duval County Health Department Northeast Florida Regional Council		
Other Community-Based Organizations	Feeding North Florida Second Harvest Local Initiative Support Corporation – Jacksonville Slow Food First Coast Suwannee River Health Education Center Wolfson Children's Hospital		
Other Research/ Evaluation Organization	The Health Planning Council of Northeast Florida		
Policy/Advocacy Organization	Jacksonville Kids Coalition Safe and Healthy Duval Coalition		
Schools	Duval County Public Schools		

#### APPENDIX D: SOURCES AND AMOUNTS OF FUNDING LEVERAGED

Sources of Revenue				
Community Partnership Jackson	ville			
Resource source		Amount	Status	
Business	Year			
Matching funds				
	2009		Annual total \$25,000.00	
		\$25,000.00	Accrued	
	2011		Annual total \$79,225.00	
		\$79,225.00	Accrued	
Sum of revenue generated by resou	rce source	\$104,225.00		
Local government	Year			
Matching funds				
	2009		Annual total \$19,775.00	
		\$2,500.00	Accrued	
		\$17,275.00	Accrued	
	2010		Annual total \$47,275.00	
		\$17,275.00	Accrued	
		\$30,000.00	Accrued	
	2011		Annual total \$47,275.00	
		\$17,275.00	Accrued	
		\$30,000.00	Accrued	
	2012		Annual total \$30,000.00	
		\$30,000.00	Accrued	
	5012		Annual total \$17,275.00	
		\$17,275.00	Accrued	
Other		<b>4</b> -1, <b>-</b> 1-1-1-1		
other	2010		Annual total \$20,000.00	
		\$20,000.00	Accrued	
Sum of revenue generated by resour	rea course			
Foundation	Year	\$181,600.00		
HKHC funds				
			Annual total \$8,824.00	
		\$8,824.00	Accrued	
	2009	- *	Annual total \$89,905.00	
	2005		711111111 101111   000,000.00	

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#### APPENDIX D: SOURCES AND AMOUNTS OF FUNDING LEVERAGED, cont.

Community Partnership	Jacksonville			
Resource source		Amount	Status	
		\$50.00	Accrued	
		\$9,633.00	Accrued	
		\$60,080.00	Accrued	
		\$1,094.00	Accrued	
		\$448.00	Accrued	
		\$18,600.00	Accrued	
	2010	<b>V20,000.00</b>	Annual total \$67,402.00	
	2010	\$50,494.00	Accrued	
		\$1,525.00	Accrued	
		\$78.00	Accrued	
		\$200.00	Accrued	
		\$9,513.00	Accrued	
		\$5,592.00	Accrued	
	2011		Annual total \$90,444.00	
		\$77,635.00	Accrued	
		\$204.00	Accrued	
		\$2,939.00	Accrued	
		\$8,961.00	Accrued	
		\$705.00	Accrued	
	2013		Annual total \$101,549.00	
		\$4,000.00	Accrued	
		\$3,871.00	Accrued	
		\$1,750.00	Accrued	
		\$11,900.00	Accrued	
		\$68,148.00	Accrued	
		\$10,880.00	Accrued	
		\$1,000.00	Accrued	
Matching fo	unds	-		
	2011		Annual total \$3,000.00	
		\$3,000.00	Accrued	
Other		-		
[	2009		Annual total \$95,720.00	

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#### APPENDIX D: SOURCES AND AMOUNTS OF FUNDING LEVERAGED

Community Partnership Jack	csonville		
Resource source		Amount	Status
		\$95,720.00	Accrued
	2010		Annual total \$115,720.00
		\$115,720.00	Accrued
	2011		Annual total \$172,000.00
		\$172,000.00	Accrued
Sum of revenue generated by re	source source	\$744,564.00	
Non-profit organization	Year		
Matching funds			
	2009		Annual total \$1,200.00
		\$1,200.00	Accrued
	2011		Annual total \$17,475.00
		\$1,200.00	Accrued
		\$16,275.00	Accrued
	2012		Annual total \$1,200.00
		\$1,200.00	Accrued
Sum of revenue generated by re	source source	\$19,875.00	
School	Year		
Matching funds			
	2009		Annual total \$2,500.00
		\$2,500.00	Accrued
Sum of revenue generated by re	source source	\$2,500.00	
Grand Total			\$1,052,764.00

APPENDIX E: FARMERS' MARKET ENVIRONMENTAL AUDIT SUMMARY REPORT

# Healthy Kids, Healthy Jacksonville

# Farmers' Markets Environmental Audit Method

# **Summary Report**

Prepared by Transtria LLC



# **Table of Contents**

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Results	
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#### **Background**

Healthy Kids, Healthy Communities (HKHC) is a national program of the Robert Wood Johnson Foundation (RWJF) whose primary goal is to implement healthy eating and active living policy, system, and environmental change initiatives that can support healthier communities for children and families across the United States. HKHC places special emphasis on reaching children who are at highest risk for obesity on the basis of race/ethnicity, income, and/or geographic location. For more information about HKHC, please visit www.healthykidshealthycommunities.org.

Located in Jacksonville, FL the Duval County Health Department was selected to lead the local HKHC partnership, Healthy Kids, Healthy Jacksonville, focused on creating a food policy council, farmers' markets, and context sensitive streets initiatives.

Transtria LLC, a public health evaluation and research consulting firm located in St. Louis, Missouri, is funded by the Robert Wood Johnson Foundation to lead the evaluation and dissemination activities from April 2010 to March 2014. For more information about the evaluation, please visit www.transtria.com/hkhc. A supplementary enhanced evaluation component focuses on six cross-site HKHC strategies, including: parks and plays spaces, street design, farmers' markets, corner stores, physical activity standards in childcare settings, and nutrition standards in childcare settings. Communities are trained to use two main methods as part of the enhanced evaluation, direct observation and environmental audits. Tools and training are provided by Transtria staff (see www.transtria.com/hkhc).

In order to better understand the impact of their work in farmers' markets, representatives of Healthy Kids, Healthy Jacksonville partnership chose to participate in the enhanced evaluation data collection activities for farmers' markets using the environmental audit method.

#### **Methods**

The Farmers' Market Environmental Audit Tool was modified from three existing environmental audit tools including the Farmers' Market Vendor Evaluation (created by Monika Roth), Farmers' Market Evaluation, Mystery Shopping-Farmers' Market (created by marketumbrella.org), and Nutrition Environment Measurement Survey-NEMS (created by Glanz et al.). Environmental audits assess the presence or absence of different features as well as the quality or condition of the physical environment. The tool captures overall market operations (e.g., months, days and hours of operation, accessibility, government nutrition assistance programs), vendor display areas (e.g., space and equipment), product signage and pricing (e.g., clear signs, unit and price labeled, discounts for larger sales), frozen/canned fruits and vegetables (e.g., quantity and variety of frozen or canned fruits and vegetables), other foods (e.g., availability of healthier options and foods with minimal nutritional value) and the availability, pricing, quality, and quantity of fresh fruits and vegetables.

Each audit tool was completed for one farmers' market. Two markets, Jacksonville Farmers' Market and Riverside Arts Market, were selected within Jacksonville for data collection. An Evaluation Officer from Transtria LLC trained community members and

partnership staff on proper data collection methods using the tool and data collection was completed on December 14, 2012. Transtria staff performed data entry and validation, including double data entry to ensure accuracy of the data. Agreement of data entry was 99.9% and all errors were fixed.

#### **Results**

#### **Operations**

The Jacksonville Farmers' Market is open 7:00AM to 7:00PM, seven days a week, year-round. It has an accessible entrance and ample room to maneuver around the market. There is an ATM on site, public transit, and parking nearby. The market accepts WIC/SNAP/EBT and has signage for SNAP and EBT. There are 33 vendors who sell only produce, 33 who sell produce and other products, and seven vendors who sell no produce (total of 73 vendors). Most vendors have a sufficient amount of produce for their space, visible signs displaying their names, and clean and well organized displays. All vendors have power cords taped down to prevent tripping. Some vendors have products identified by name, documented product price with clear signs, units appropriately labeled, and offer discounts available for larger sales.

The Riverside Arts Market is open Saturdays, April through December. It has an accessible entrance, room to maneuver, security, an on-site market manager, legible signs to identify the market, seating, events/activities, an ATM, an information booth/table, and market maps. There is a parking lot adjacent to the market and a public transit stop visible from the market. The market does not accept WIC/SNAP/EBT, but does offer other discounts. There are six vendors at the Riverside Arts Market who sell only produce, one who sells produce and other products, and 143 vendors who do not sell any produce (total of 150 vendors). All vendors have a sufficient amount of produce for their space, visible signs with their names, clean and well-organized displays, and power cords taped down to prevent tripping. Most vendors have products identified by name and units are appropriately labeled. All vendors have clear signs documenting the price and have discounts for larger sales.

#### Availability of nutrient-dense and minimally nutritious food

Neither market had canned or frozen fruits or vegetables available. High-fiber, whole grain foods, lean meats, fish, poultry, nuts, seeds, and dry beans were available at both markets. Eggs and whole or vitamin D milk were available at the Riverside Arts Market, while the Jacksonville Farmers' Market offered an assortment of olives, peanuts, and eggs. Foods with minimal nutritional value were also available at both markets including salty foods, ice cream/frozen desserts, sweet foods, candy/chocolate, and regular to high-fat prepared meals. Pizza, hamburgers, fries, and Icees were also for sale at the Riverside Arts Market.

#### Availability and quality of fresh produce

At both the Jacksonville Farmers' Market and the Riverside Arts Market there was a variety of produce available. There were 20 types of fruits available at both markets including apples, bananas, blueberries, cantaloupes, grapefruit, grapes, honeydew, kiwi, mangos, oranges,

papaya, peaches, pears, pineapples, plums, strawberries, tangerines, watermelon, limes, and lemons (see table 2 for more details about the fruits). In addition, nectarines were available at the Jacksonville Farmers' Market and blackberries were available at the Riverside Arts Market. The majority of the fruits sold at both markets were of good quality, with the exception of the mangoes at the Jacksonville Farmers' Market.

Both markets had 21 vegetables available including asparagus, avocados, broccoli, Brussels sprouts, cabbages, carrots, cauliflower, celery, collard greens, corn, green beans, green peppers, kale, lentils, romaine lettuce, onions, radishes, red peppers, summer squash, sweet potatoes, and tomatoes (see table 2 for more details about the vegetables). The Jacksonville Farmers' Market offered artichokes, mushrooms, spinach, cucumber, mint, and basil while the Riverside Arts Market offered kohlrabi, arugula, and bok choy. The majority of the vegetables were of good quality at both markets, with the exception of the cabbages, cauliflower, and green beans at the Jacksonville Farmers' Market.

#### Cost of produce

Prices varied greatly at the Jacksonville Farmers' Market. Produce was mostly sold by the bag or box, or in bunches, and ranged in price from \$1.00-\$6.00 (see table 2 for more details about produce pricing). The least expensive fruits were bananas (\$1.00 per bag/box), grapes (\$1.50 per bag), mangoes (\$1.00 per bag), oranges (3 for \$1.00), strawberries (\$1.50 per box), limes (3 for \$1.00), and lemons (3 for \$1.00). The most expensive fruits were pineapples (\$3.00 each) and tangerines (\$5.00 per bag/box). The least expensive vegetables were carrots (\$1.00 per bag), green beans (\$1.00 per bag), and radishes (\$1.00 per bag/box). The most expensive vegetables were cauliflower (\$3.00 each) and kale (\$3.00 per bunch).

At the Riverside Arts Market, there were very few produce vendors. Almost all products had the lowest price of 2 items/bags for \$5.00, except watermelons (\$5.00 each), blackberries (\$5.00 per pound), honeydew melons (\$3.00 each), avocados (\$1.00 each), carrots (\$3.00 per bag), cauliflower (\$3.50 each), arugula (\$2.00 per bag), bok choy (\$2.00 per bag), and kohlrabi (\$1.00 each).

#### **Key Takeaways**

- Jacksonville Farmers' Market is open daily, all year round. Riverside Arts Market is open Saturdays, April through December. Only Jacksonville Farmers' Market accepts WIC/SNAP/EBT.
- High-fiber, whole grain foods, lean meats, fish, poultry, nuts, seeds, dry beans, and other healthier foods were available at both markets.
- Foods with minimal nutritional value were available at both markets, including salty foods, ice cream/frozen desserts, sweet foods, candy/chocolate, and regular to high-fat prepared meals.
- The Jacksonville Farmers' Market had a total of 21 types of fruit and 27 types of vegetables. The Riverside Arts market had 21 types of fruit and 24 types of vegetables.
- The majority of produce was of 'good' quality.

# Appendix A: Tables

#### **Table 1: Overall Market Information**

Vendor Characteristic	Jacksonville Farmers' Market	Riverside Arts Market			
Overall Market					
Months of operation: January	X				
Months of operation: February	X				
Months of operation: March	X				
Months of operation: April	X	X			
Months of operation: May	X	X			
Months of operation: June	x	X			
Months of operation: July	X	X			
Months of operation: August	X	X			
Months of operation: September	X	X			
Months of operation: October	X	X			
Months of operation: November	X	X			
Months of operation: December	X	X			
Days of operation: Sunday	X				
Days of operation: Monday	X				
Days of operation: Tuesday	X				
Days of operation: Wednesday	X				
Days of operation: Thursday	X				
Days of operation: Friday	X				
Days of operation: Saturday	X	X			
Hours of operation:	7am-7pm daily	None given			
Frequency of operation: Daily	X	-			
Frequency of operation: 1 day a week		X			
Features: Accessible entrance	X	X			
Features: Room to maneuver around market	X	X			
Features: Security		X			
Features: On-site market manager	X	X			
Features: Legible signs to identify market	X	X			
Features: Seating		X			
Features: Events/activities		X			
Features: ATM	X	X			
Features: Information booth/table		X			
Features: Market maps		X			
Features: Public transit stop visible from the market	x	X			
Features: Parking lot adjacent to market	x	X			
Features: Other	x				
Market accepts WIC/SNAP/EBT	x				
Sign for SNAP/Food stamps	x				
Other discount		X			
Number of vendors who sell only produce	33	6			

**Table 1 Continued: Overall Market Information** 

		D: 11 4 4 M 1 4
Vendor Characteristics: Individual  Number of vendors who sell produce and other products	Jacksonville Farmers' Market	Riverside Arts Market
Number of vendors who sell no produce	7	143
•		143
Amount of produce sufficient for vendor space: Most vendors	X	
Amount of produce sufficient for vendor space: All vendors		X
Visible signs with farmers'/businesses' name: Most vendors	X	
Visible signs with farmers'/businesses' name: All vendors		X
Clean and well-organized displays: Most vendors	x	
Clean and well-organized displays: All vendors		X
Power cords taped down to prevent tripping: All vendors	X	X
Product signage and pricing (for fresh fruits/vegetables only)		
Products are identified by name: Some vendors	X	
Products are identified by name: Most vendors		X
Clear signs document the price: Some vendors	x	
Clear signs document the price: All vendors		X
Units are appropriately labeled: Some vendors	X	
Units are appropriately labeled: Most vendors		X
Discounts for larger sales: All vendors		X
Canned/frozen fruits/vegetables		
No canned fruits available	X	X
No canned vegetables available	X	X
No frozen fruits available	X	X
No frozen vegetables available	x	X
Other foods		
High-fiber, whole grain foods	X	X
Healthier foods: Lean meats, fish, poultry	X	X
Healthier foods: Nuts, seeds, or dry beans	X	X
Healthier foods: Other	X	X
Foods with minimal nutritional value: Salty foods	X	X
Foods with minimal nutritional value: Ice cream/frozen desserts	X	X
Foods with minimal nutritional value: Sweet foods	X	X
Foods with minimal nutritional value: Candy/chocolate	X	X
Foods with minimal nutritional value: Regular to high-fat prepared meals		X
Foods with minimal nutritional value: Other		X
Milk sold at market		X
Whole or Vitamin D milk		X

Table 2: Availability, Price, and Quality of Fresh Fruits and Vegetables

	Jacksonville Farmer's Market Riverside Arts I						Market	Market		
Produce Item	Price	Unit	Quality	Price	Unit	Quantity				
Fruits:				Quantity			Quality			
Apples	\$3.00	Per bag/box	Good	Some	2 for \$5.00	Per bag/box		Some		
Bananas	\$1.00	Per bag/box	Good	Some	2 for \$5.00	Per bag/box		Some		
Blackberries	Ψ1.00	1 cr oug/oon	0000	Bonne	\$5.00	Per Pound		A lot		
Blueberries	\$2.00	Per bag/box	Good	Some	2 for \$5.00	Per bag/box		A lot		
Cantaloupes	\$2.00	Each	Good	Few	\$2.50	Each		Few		
Grapefruit	\$3.00	Per bag/box	Good	Some	2 for \$5.00	Per bag/box		A lot		
Grapes	\$1.50	Per bag/box	Good		2 for \$5.00	Per bag/box		A lot		
Honeydews	\$3.00		Good		\$3.00	Each		Few		
Kiwis	\$2.00		Good		2 for \$5.00	Per bag/box		Some		
Mangos	\$1.00	Each	Poor		2 for \$5.00	Per bag/box				
Nectarines	\$3.00	Per bag/box	Good							
Oranges	3 for \$1.00	Bunch			2 for \$5.00			Some		
Papayas	3 for \$6.00				2 for \$5.00			Some		
Peaches	\$3.00	Per bag/box			2 for \$5.00			Some		
Pears	\$3.00	Per bag/box			2 for \$5.00			Some		
Pineapples	\$3.00	Each	Good		2 for \$5.00			Few		
Plum	\$3.00	Per bag/box	3004		2 for \$5.00			Some		
Strawberries	\$1.50	Per bag/box			2 for \$5.00			A lot		
Tangerines	\$5.00	Per bag/box			2 for \$5.00			Some		
Watermelons	\$4.00	Each			\$5.00	Each		Few		
Other: Limes	3 for \$1.00	Bunch	Good		2 for \$5.00	Lucii		Some		
Other: Lemons	3 for \$1.00	Bunch	Good	Some	2 for \$5.00			Some		
Vegetables:										
Artichokes	6 for \$5.00	Bunch	Good	Some						
Asparagus	\$2.50	Bunch	Good	Some	2 for \$5.00	Per bag/box	Good	Some		
Avocados	\$1.00	Each	Good	Few	\$1.00	Each	Good	Few		
Broccoli	\$2.50	Bunch	Good	Few	2 for \$5.00	Per bag/box	Good	Some		
Brussel sprouts	2 bags \$3.00	Per bag/box	Good	Some	2 for \$5.00	Per bag/box	Good	A lot		
Cabbages	\$1.00	Each	Poor	Few	2 for \$5.00	Per bag/box	Good	Some		
Carrots	\$1.00	Per bag/box	Good	Some	\$3.00	Per bag/box	Good	A lot		
Carlots  Cauliflower	\$3.00	Each	Poor	Few	\$3.50	Each	Good	Some		
Celery	\$1.50	Bunch	Good	Some	2 for \$5.00	Per bag/box	Good	A lot		
Collard Greens	\$3.00	Per bag/box	Good	Some	2 for \$5.00	Per bag/box	Good	A lot		
Corn	2 for \$1.00	Bunch	Good	Few	2 for \$5.00	Per bag/box	Good	Some		
Green beans	\$1.00	Per bag/box	Poor	Some	2 for \$5.00	Per bag/box	Good	A lot		
Green peppers	2 for \$1.00	Bunch	Good	Few	2 for \$5.00	Per bag/box	Good	Some		
Kale	\$3.00	Bunch	Good	Some	2 for \$5.00	Per bag/box	Good	Some		
Lentils	\$3.00	Per bag/box	Good	Few	2 for \$5.00	Per bag/box	Good	Some		
Lettuce - Romaine	\$1.00	Each	Good	Few	\$2.50	Each	Good	Few		
Mushrooms	\$1.50	Per bag/box	Good	Some						
Onions	\$2.00	Per bag/box	Good	Some	2 for \$5.00	Per bag/box	Good	A lot		
Radishes	\$1.00	Per bag/box	Good	Some	2 for \$5.00	Per bag/box	Good	A lot		
Red peppers	5 for \$2.00	Bunch	Good	Few	2 for \$5.00	Per bag/box	Good	Some		
Spinach	\$2.50	Per bag/box	Good	Some						
Summer squash	\$2.00	Bunch	Good	Some	2 for \$5.00	Per bag/box	Good	Some		

Table 2 Continued: Availability, Price, and Quality of Fresh Fruits and Vegetables

	Jac	ksonville Farn	ners' Market	Riverside Arts Market					
Produce Item	Price	Unit	Quality	Quantity	Price	Unit	Quality	Quantity	
Sweet potatoes	\$2.00	Bunch	Good	Some	2 for \$5.00	Per bag/box	Good	Some	
Tomatoes	2 for \$5.00	Bunch	Good	Some	2 for \$5.00	Per bag/box	Good	Some	
Other: Cucumber	5 for \$2.00	Bunch	Good	Some					
Other: Arugula					\$2.00	Per bag/box	Good	Some	
Other: Mint	\$1.50	Bunch	Good	Some					
Other: Bok Choy					\$2.00	Per bag/box	Good	Some	
Other: Basil	\$1.50	Bunch	Good	Some					
Other: Kohlrabi					\$1.00	Each	Good		

#### **Evaluation of Healthy Kids, Healthy Communities**

Yes

#### Farmers' Market Environmental Audit Tool Farmers' market ID (for Transtria use only): Farmers' market name: Community partnership: Date: Address: Audit start time: \_\_\_: \_\_ O AM O PM Number of vendors: Audit end time: \_\_ : \_\_ O AM O PM Auditor 1: Auditor 2: Section A: Overall market Section A: Overall market (cont.) 4.c. Security features (security guard(s) 1. What are the market months of operation? and/or security camera(s)) Yes 1.g. July 4.d. On-site market manager 1.a. January Nο Yes Nο Yes No Yes 1.h. August 4.e. Legible signs to identify the market 1.b. February Yes No Yes No Yes 1.i. September 4.f. Seating (e.g., benches, tables/chairs) 1.c. March No Yes No Yes No Yes 1.i. October 4.g. Events/activities (e.g., yoga, live music) 1.d. April No Yes No Yes Yes 1.k. November 4.h. ATM 1.e. May Yes No Yes No No Yes 1.I. December 4.i. Information booth/table 1.f. June Yes Yes 4.j. Market maps (e.g., maps with directions 2. What are the market days and hours of operation? to market, site map with vendors) No Yes 4.k. Public transit stop visible from the 2.a. Sunday (Check yes or no.) Enter operating hours (open/close): Nο Yes farmers' market Nο Yes 2.b. Monday (Check yes or no.) 4.I. Parking lot adjacent to farmers' market Enter operating hours (open/close): No Yes No Yes 2.c. Tuesday (Check yes or no.) 4.m. On-street parking adjacent to farmers' market Enter operating hours (open/close): Nο Yes Yes 2.d. Wednesday (Check yes or no.) 4.n. Other, specify: Enter operating hours (open/close): No Yes Yes 2.e. Thursday (Check yes or no.) 5. Does the market accept WIC/SNAP/EBT? (If Enter operating hours (open/close): No Yes no, skip to Question 6) Yes 2.f. Friday (Check yes or no.) 5.a. Sign for WIC Enter operating hours (open/close): No Yes No Yes 2.g. Saturday (Check yes or no.) 5.b. Sign for SNAP/Food stamps Enter operating hours (open/close): Yes Yes 5.c. WIC/SNAP/EBT customers use tokens 3. What is the frequency of operation? (Circle one.) to make purchases at the market. No Yes 5.d. Other discount, specify: Daily 2-6 days a week

Comments?

1 day a week

strollers and wheelchairs

wheelchairs, strollers)

4. What features are present in the market?

4.a. Accessible entrance (allows entry for

4.b. Room to maneuver around market (e.g.,

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items.

**Section B: Vendor characteristics** 

6. How many vendors sell only produce?

8. How many vendors sell no produce?

Fill in the appropriate number of vendors for the next three

7 How many vendors sell produce and other products?

1-3 days a month

No

Yes

Yes

## **Evaluation of Healthy Kids, Healthy Communities**

Section B: Ven	dor character	istics (con	it.)		Section D: Frozen or canned fruits/vegetables (cont.)							
9. Circle the mos	st appropriate	response fo	or each	n item.	14. How many types of frozen vegetables are available? (Circle one.)							
Section D: Frozen or canned fruits/vegetables  11. How many types of canned fruits are available? (Circle one.)  None (0)  Limited (1-3 types)  Variety (4+ types)  12. How many types of canned vegetables are available?				pace	None (0)	Limited (1-3 types)	Variety	(4+ ty	pes)			
None	Some	Most		All	Section E: Other fo	oods						
9.b.Visible sign	ns with farmers	s'/ business	ses' na	mes	, ,	er, whole grain foods o pread or pasta, brown r		□ No	☐ Yes			
None	Some	Most		All		s of <u>healthier</u> foods are		?				
9.c. Clean and	l well-organize	d displays	•		16.a. Cottage che	ese or low-fat yogurt		□ No	Yes			
None	Some	Most		All	16.b. Lean meats,	fish, poultry		□ No	☐ Yes			
9.d. Power cord	ds taped down to	prevent trip	ping		16.c. Nuts, seeds,	or dry beans		□ No	☐ Yes			
None	Some	Most		All	16.d. Low-fat prep chicken)	16.d. Low-fat prepared meals (e.g., baked chicken)						
		pricing (fo	r fresi	h fruits and	16.e. Other, speci	fy:		□ No	☐ Yes			
		e response	for ead	ch item.	17. What other type: are offered?	s of foods with minima	l nutritio	nal val	lue			
10.a. Products	are identified	by name.			17.a. Salty foods (	e.g., potato chips, pop	corn)	□ No	Yes			
None	Some	Most		All	17.b. Ice cream/fro		No	Yes				
10.b. Clear sig	ns document	the price.			17.c. Sweet foods	(e.g., cookies, cakes)		□ No	Yes			
None	Some	Most		All	17.d. Candy/choco	□ No	Yes					
	appropriately	labeled (e.	g., wei	ight, box,	17.e. Regular to h fried chicken)	igh-fat prepared meals	s (e.g.,	□ No	☐ Yes			
None	Some	Most		All	17.f. Other, specif	y:		□ No	Yes			
10.d. Discount	s for larger sa	les			18. Is milk sold? (If n	oo, audit is complete.)		□ No	Yes			
None	Some	Most		All	18.a. Skim milk			□ No	Yes			
availability, price	e, quality, and q	quantity; and	d Fresi	h vegetables:	18.b. 1%			□ No	☐ Yes			
Section D: Froz	zen or canned	l fruits/veg	etable	es .	18.c. 2%			□ No	☐ Yes			
I .	ypes of canned	d fruits are a	availat	ole? (Circle	18.d. Whole or Vit	amin D milk		□ No	Yes			
None (0)	Limited (1-	3 types)	Varie	ety (4+ types)	18.e. Flavored wh	ole milk		□ No	Yes			
12. How many ty (Circle one.)	None Some Most All  ction C: Product signage and pricing (for fresh fruits and getables only)  Circle the most appropriate response for each item.  O.a. Products are identified by name.  None Some Most All  O.b. Clear signs document the price.  None Some Most All  O.c. Units are appropriately labeled (e.g., weight, box, nch).  None Some Most All  O.d. Discounts for larger sales  None Some Most All  to the Attachments for Section C: Fresh fruits: Fruit aliability, price, quality, and quantity; and Fresh vegetables: getable availability, price, quality, and quantity  ction D: Frozen or canned fruits/vegetables  How many types of canned fruits are available? (Circle e.)  None (0) Limited (1-3 types) Variety (4+ types)  How many types of frozen fruits are available? (Circle incle)  None (0) Limited (1-3 types) Variety (4+ types)				18.f. Flavored skir		□ No	☐ Yes				
None (0)	Limited (1-	3 types)	Varie	ety (4+ types)	18.g. Rice milk			□ No	☐ Yes			
13. How many ty one.)	ypes of frozen	fruits are av	vailabl	e? (Circle	18.h. Soy milk			□ No	Yes			
None (0)	Limited (1-	3 types)	Varie	ety (4+ types)	18.i. Lactaid	□ No	Yes					

Comments?

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## Attachment for Section C: Fresh fruit availability, price, quality, and quantity

				c. Unit/W	/eight		d. Qı	uality	•	e. Quant	ity	
Fruit	a. Not Available	b. Lowest price	Per pound (lb)	Per box/ bag	Each	Bunch	Avg./ Good	Poor	A lot   Some   3-9		Few <3	f. Comments
19. Apples												
20. Bananas												
21. Blackberries												
22. Blueberries												
23. Cantaloupes												
24. Cherries												
25. Cranberries												
26. Grapefruits												
27. Grapes												
28. Honeydew melons												
29. Kiwis												
30. Mangos												
31. Nectarines												
32. Oranges												
33. Papayas												
34. Peaches												
35. Pears												
36. Pineapples												
37. Plums												
38. Raspberries												
39. Strawberries												
40. Tangerines												
41. Watermelons												
42. Other:												
43. Other:												
44. Other:												

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#### Attachment for Section C: Fresh vegetable availability, price, quality, and quantity

				c. Unit/W	/eight		d. Qı	uality		e. Quant	ity	
Vegetable	a. Not Available	b. Lowest price	Per pound (lb)	Per box/ bag	Each	Bunch	Avg./ Good	Poor	A lot 10+			f. Comments
45. Artichokes												
46. Asparagus												
47. Avocados												
48. Broccoli												
49. Brussels sprouts												
50. Cabbages												
51. Carrots												
52. Cauliflower												
53. Celery												
54. Collard greens												
55. Corn												
56. Green beans												
57. Green peppers												
58. Kale												
59. Lentils												
60. Lettuce – Romaine												
61. Lima beans												
62. Mushrooms												
63. Okra												
64, Onions												
65. Radishes												
66. Red peppers												
67. Spinach												
68. Summer squash												
69. Sweet potatoes												
70. Tomatoes												
71. Other:												
72. Other:												
73. Other:												