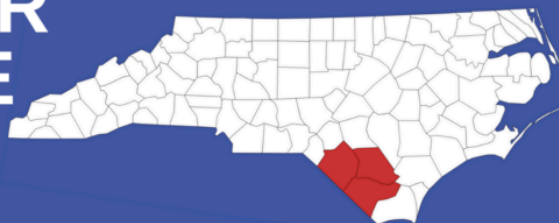


# VISIONING OUR FOOD FUTURE

FOOD SYSTEM DEVELOPMENT FOR  
BLADEN, COLUMBUS, & ROBESON  
COUNTIES



**NC STATE**  
UNIVERSITY



**Consumer Survey Fall 2023**  
**Research Brief**

**NC STATE**  
EXTENSION



**KATE B. REYNOLDS**  
CHARITABLE TRUST

## Overview

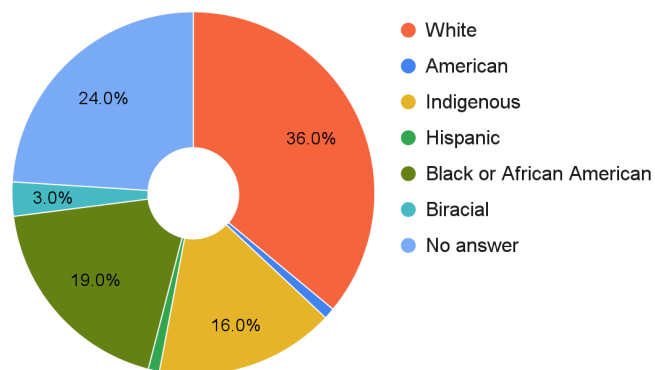
During the summer and fall of 2023, the Visioning Our Food Future (VOFF) team conducted an assessment of residents' perspectives about accessing healthy food. We collected survey data between August and December of 2023 in 5 locations distributed across the 3 project counties (i.e., Bladen, Columbus and Robeson). Recruitment and data collection methods were selected to achieve consumer input from across the three counties with varying involvement from local leaders to help engage residents. We recruited survey participants at University of North Carolina at Pembroke, Cape Fear Farmers Market in Elizabethtown, Southern Family Violence Center in Lumberton, and food assistance events in Tabor City and Whiteville. This level of participation was achievable due to the high involvement from leaders particularly in Robeson and Columbus counties. We thank Daisy Brooks, Emily Locklear, and Becky Spearman for helping us plan data collection and recruit participants.

Participants took the survey on the spot at each location, and to help reduce constraints to participation in the survey, participants were given oral and written, and English and Spanish response options. In addition, we hung fliers with a QR code to recruit participants for an identical online version of the survey. We collected 87 surveys from the in-person survey process and 14 from the online survey process for a total sample size of 101 responses.

### Participant Demographics

Almost 30 percent of total responses were collected at emergency food assistance events, in which participants were collecting food assistance for themselves and for neighboring families. Age of participants was equally distributed among age groups ranging from 18 to 65 and older. We assessed race and ethnicity by asking the open-ended question "What is your racial or ethnic identity?", and categorized the data based on pre-existing US Census categories and input from the community advisory committee. As illustrated in Figure 1, 24% of participants did not respond to this question. Overall, 36% of participants identified as white, 19% as Black or African American, 16% as indigenous, 3% as biracial, 1% as hispanic, and 1% as American. In terms of participants' residence, 40% were from Robeson County, 16% were from Bladen County, 35% were from Columbus County, and 9% were from neighboring counties.

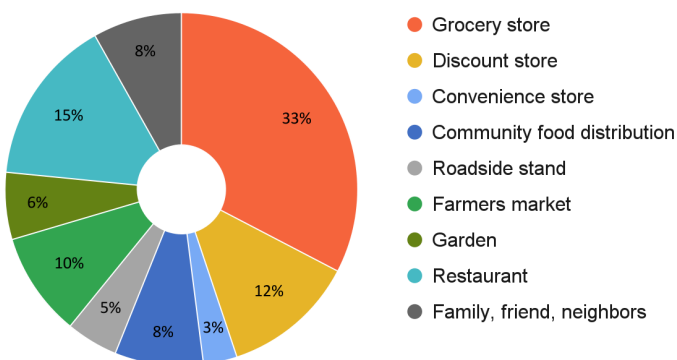
Figure 1. Participants' race or ethnicity



### Locations for Food Access

When participants were asked to indicate where they regularly access food (Figure 2), 33%, the largest percentage, indicated grocery stores (e.g., Food Lion). Restaurants and discount stores (e.g., Dollar General) were also reported often (15% and 12% respectively). Other regular food

Figure 2. Food access locations

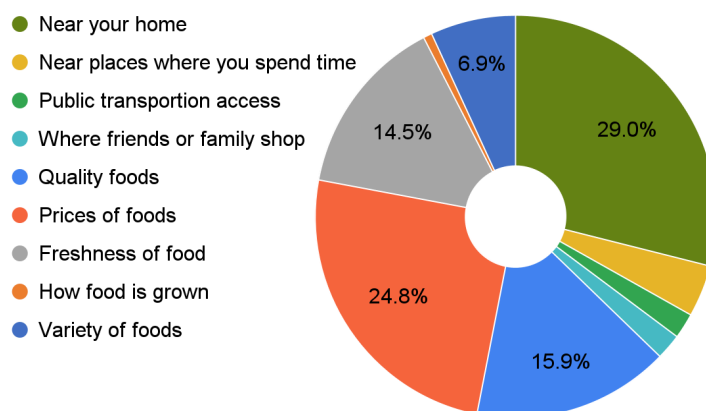


access locations included farmers markets (9.5%), community food distribution programs (8.2%), family, friends and neighbors (8.2%), and gardens (6.1%). Roadside stands and convenience stores were selected the least often (4.8% and 3.1% respectively) as part of regular food access.

### Factors influencing where to shop for food

The top factors for determining where to shop for food were the proximity to home (29%) and price (25%). The perceived quality (16%), freshness (15%), and to a lesser degree the variety (7%) of food available were also important factors influencing residents' decisions of where to shop for food. Figure 3 shows each factor as a pie piece.

Figure 3. Factors affecting shopping location



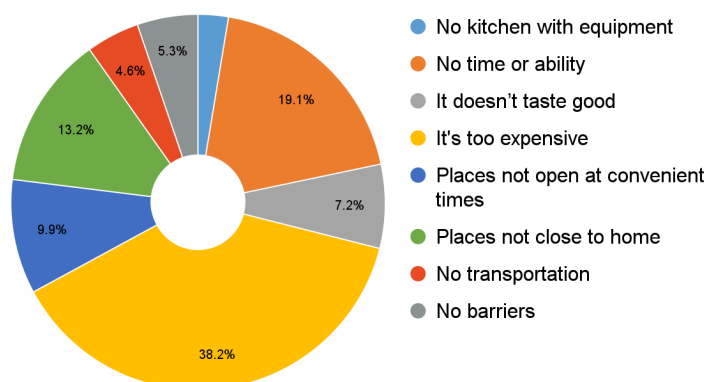
### Definitions of Healthy Food

We asked participants to define “healthy food” in one sentence or less. We combined their responses to analyze them and identify themes. The analysis suggests participants define healthy food based on a) the kind and amount of ingredients (e.g., fruits, vegetables), b) the way it is prepared (e.g., fresh), c) the kind and amount of nutrients it has (e.g., high protein), d) the way food makes their bodies feel (e.g., food supports function), and e) the way the food is grown (e.g., organic). Table 1 provides a summary of the meanings participants attributed to healthy food, which are listed and shaded based on their prominence. The darkest blue is the most prominent and the lightest blue is the least prominent theme to define healthy food. The themes are not mutually exclusive. Rather, some words used by participants to define healthy food have meanings that cut across several themes. For example, participants described salt as an ingredient and as a nutrient, because it is both. In some cases people used the word natural to describe healthy foods, which could mean “natural” growing or processing methods.

**Table 1** Themes in participants' definitions of healthy foods

Theme	Meaning
Ingredient	Most responses about the definition of healthy food were focused on the ingredients, specifically fruits and vegetables. Other cases included the amount of a specific ingredient, mostly low sugar or salt.
Cooking and processing method	Responses also included the method for how the food is cooked or processed in order for it to be considered healthy. In this category, most participants used the word “fresh” to describe healthy food. Within this code, responses also included how foods should not be processed and in few cases, how the food should not be cooked in contrast to how it should be processed or cooked. For example, healthy food was defined as “not processed” or “not fried” or “not frozen.”
Nutrients	Participants defined “healthy” based on the amount and type of nutrients in food. Within this theme, people referenced high protein, vitamins, minerals, and low fat and sodium. Sometimes participants defined healthy as “balanced” nutrients or the “right” or “good” kind.
Body	Participants defined “healthy” based on what the food does for your body. Most said the food needs to be “beneficial” “or ”nourishing” for themselves, children, and family. Healthy food helps the body function and provides energy. In a few cases, healthy food is defined based on what it doesn't do for the body, including making it feel bad or causing harm to it.
Grow methods	Growing methods and processes were in the definition of healthy food the least, but participants described a variety of methods that constitute healthy food. “Healthy” was defined as garden grown, local, organic, non-gmo and without pesticides.

**Figure 4.** Barriers to healthy food consumption



### Barriers to eating healthy food

In a multiple choice question, the barriers to consuming healthy food most frequently reported by participants were “Healthy food is too expensive” (38%), and “I don’t have the time or ability to prepare healthy food” (19%). Participants also indicated consumption is

constrained by healthy food not being close enough to home (13%) and the places that sell them are not open at convenient times (10%). Barriers related to the taste of healthy food, transportation, and kitchen equipment were the least reported (7%, 5%, and 4% respectively). There was not an option on the survey to report “no barriers;” however, 5 percent of participants told the survey facilitator they did not have barriers to consuming healthy food (Figure 4).

## **Overall lessons learned**

- The price of food was among the highest concerns for participants. The price of food was a top priority for shopping location selection, and price was the highest barrier to healthy food consumption.
- Participants faced barriers to consumption at the food preparation stage, in particular food preparation time and ability, more often than barriers typically associated with rural food access such as distance to access points.
- Participants identified transportation access as a barrier less frequently than expected (based on relevant studies and input from this project). They also assisted select others in obtaining food, suggesting they are willing and able to help each other with food transportation.
- Participants prioritized shopping at places near their homes and convenience stores such as Marathon Gas were among the least frequently indicated locations where participants regularly shopped for food. At the same time, participants indicated store operating hours for healthy food stores were not convenient enough.
- Participants defined healthy food in ways that align with most science-based dietary guidelines, and the taste of healthy food was among the lowest occurring barriers to consuming healthy food.

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