



D.C. Hunger Solutions

Ending hunger in the nation's capital

Still Minding the **Grocery Gap** in D.C.

*10th Anniversary
Grocery Store Report*



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Executive Summary

In Washington, D.C., an often-untold story is that 1 in 10 residents cannot afford enough to eat, and nearly one-quarter are children.¹ The majority of these residents are Black and live in Wards 7 and 8, which are low-income areas. They also grapple with starkly different economic realities when compared to other wards, with higher concentrations of poverty, health disparities, and food insecurity.

Food insecurity, as defined by the U.S. Department of Agriculture, is when the availability of nutritionally adequate and safe food, or the ability to acquire such food, is limited or uncertain for a household. A severe lack of full-service

grocery stores is one of the contributing factors for food insecurity in Wards 7 and 8. This disparity in access to healthy and affordable food has taken a toll on the health and well-being of those who have been negatively impacted by increasing food insecurity and decreasing positive health outcomes, and this burden has been growing in breadth and depth for years.

D.C. Hunger Solutions published two previous reports that reviewed grocery store access across D.C.'s eight wards: the original was released in 2010 and there was an update in 2017. Both reports found “a paucity of full-service grocery stores” in Wards 7 and 8, and insufficiency in Ward 5, albeit less severe.²

For the 10th anniversary of the original grocery store report, D.C. Hunger Solutions conducted another review of accessibility to full-service grocery stores in the District. The purpose of this report is to evaluate the current status of grocery store access and the resulting impacts of grocery store disparity.



1 Food Research & Action Center. (n.d.). State of the States: Profiles of Hunger, Poverty, and Federal Nutrition Programs (District of Columbia). Available at: https://frac.org/research/resource-library/state-of-the-states-profiles?post_type=resource&p=4483&state=District%20of%20Columbia. Accessed on October 1, 2020.

2 D.C. Hunger Solutions. (2017). *Closing the Grocery Store Gap in the Nation's Capital*. Available at: <https://www.dchunger.org/wp-content/uploads/2018/11/dchs-closing-grocery-store-gap-report.pdf>. Accessed on October 1, 2020.

Five major findings resulted from D.C. Hunger Solutions' research:

1. there are significantly fewer full-service grocery stores in Wards 5, 7, and 8 than in the other wards;
2. transportation is more difficult in Wards 5, 7, and 8, which exacerbates the challenges to accessing healthy food;
3. Wards 5, 7, and 8 do not have significant disparities in the number of community-based food programs, such as Healthy Corner stores, farmers' markets, and community gardens, when compared with the other wards, but still lack sufficient and reliable access to healthy and affordable food;
4. Wards 7 and 8 have significantly worse health outcomes than the other wards, and have suffered the worst impacts of COVID-19, including deaths per capita; and
5. the racial wealth gap is increasing in the District of Columbia.

These findings affirm that it is more challenging to access nutritious food in the Blackest and lowest-income neighborhoods in the city. This impact can be felt not just in the health outcomes, but also the economic outcomes of these wards. Despite community interventions, the grocery gap and food insecurity continue largely unchanged. It is time to challenge that status quo.

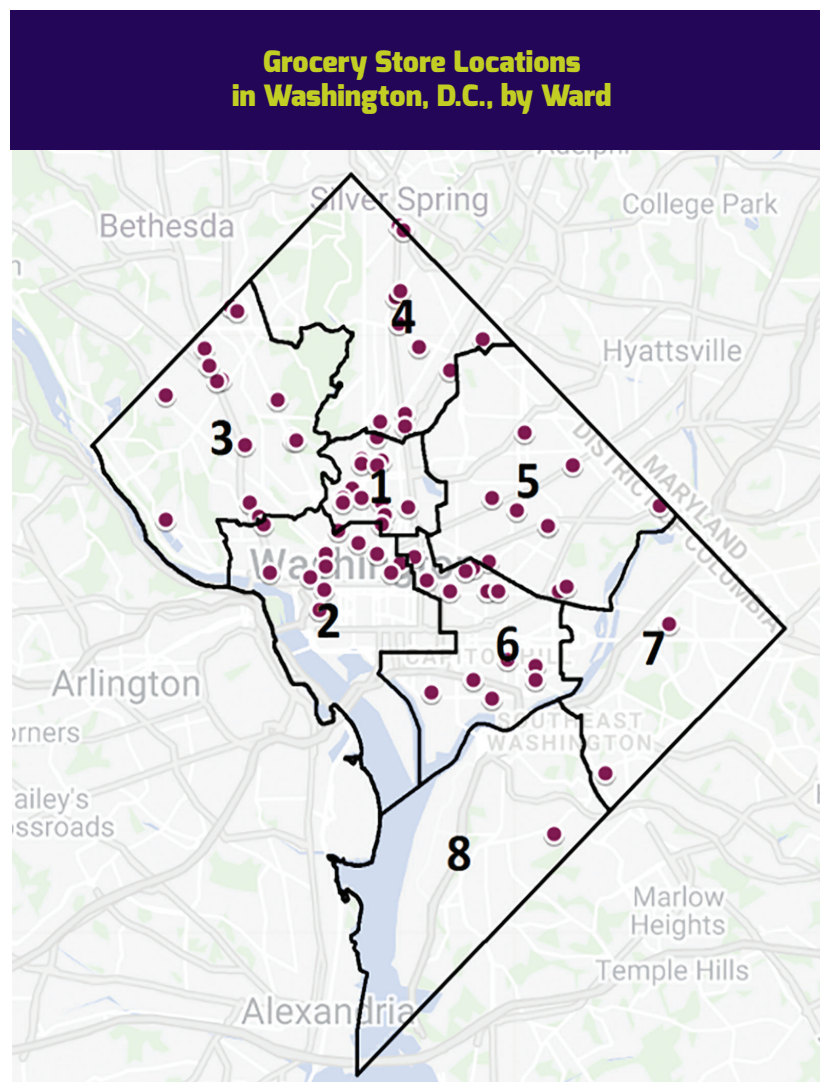


TABLE 1:
**Change in Number of Full-Service Grocery Stores in D.C.
 From 2010 to 2020, Population, Median Household Income, and Poverty Rates, by Ward**

| Ward | Number of Full Service Grocery Stores, 2010 | Number of Full Service Grocery Stores, 2016 | Number of Full Service Grocery Stores, 2020 | Number of Full Service Grocery Stores in Pipeline | Population, 2020 | Median Household Income, 2017 | Percent of Individuals Below the Poverty Line, 2020 |
|--------------|---|---|---|---|------------------|-------------------------------|---|
| Ward 1 | 6 | 8 | 10 | 1 | 91,498 | \$93,284 | 13.6% |
| Ward 2 | 8 | 7 | 11 | 0 | 92,509 | \$104,504 | 13.3% |
| Ward 3 | 11 | 9 | 16 | 1 | 84,869 | \$122,680 | 8.1% |
| Ward 4 | 2 | 5 | 11 | 1 | 86,660 | \$82,625 | 11.2% |
| Ward 5 | 3 | 7 | 9 | 1 | 90,479 | \$63,552 | 15.9% |
| Ward 6 | 4 | 10 | 14 | 0 | 103,316 | \$102,214 | 12.1% |
| Ward 7 | 4 | 2 | 2 | 1 | 80,951 | \$40,021 | 26.6% |
| Ward 8 | 3 | 1 | 1 | 1 | 80,552 | \$31,954 | 34.2% |
| D.C. Overall | 43 (avg. 4.5 per ward) | 49 (avg. 6.1 per ward) | 74 (avg. 9.3 per ward) | 5 | 710,834 | \$90,695 | 16.8% |

Methodology

This review, conducted by D.C. Hunger Solutions, looks at the number of full-service grocery stores across D.C. For purposes of this report, full-service grocery stores are defined as business establishments with a minimum of 50 percent of the store's total square footage, or 6,000 square feet, primarily engaged in retailing designated food products for home consumption and

preparation.³ D.C. Hunger Solutions also analyzed a number of indicators of food security, poverty, and health among D.C.'s residents, including median income, race and ethnicity, health outcomes, availability of transportation, education, and COVID-19 outcomes. Data were gathered from publicly available sources indicated throughout the report and verified where possible.

“These findings affirm that it is more challenging to access nutritious food in the Blackest and lowest-income neighborhoods in the city.”

3 D.C. Alcoholic Beverage Regulation Administration. (n.d.). Full-Service Grocery Stores. Available at: <https://abra.dc.gov/page/full-service-grocery-stores>. Accessed on October 9, 2020.

Definitions

D.C. wards: The District of Columbia is divided into eight wards, each with approximately 75,000 residents, and each represented by an elected member of the D.C. Council and local bodies of government called Advisory Neighborhood Commissions.⁴

Food access: Accessibility to sources of healthy food, as measured by distance to a store or by the number of stores in an area. Individual-level resources, such as family income or vehicle availability, and neighborhood-level indicators of resources, such as the average income of the neighborhood and the availability of public transportation, may affect accessibility.⁵

Food apartheid: This refers to the policies and systems that result in disproportionate access to food by different geographical areas, communities, races, and socioeconomic statuses, resulting in food deserts and food swamps.⁶

Food desert: Geographical area with limited access to affordable and nutritious food, particularly an area composed of predominantly lower-income neighborhoods and communities; a significant number (at least 500 people) or share (at least 33 percent) of the population is greater than 1.0 mile from the nearest supermarket, supercenter, or large grocery store for an urban area or greater than 10 miles for a rural area.⁷

Food insecurity: The condition assessed in the food security survey and represented in food security reports from the U.S. Department of Agriculture. It is a household-level economic and social condition of limited or uncertain availability of nutritionally adequate and safe foods or limited or uncertain ability to acquire acceptable foods in socially acceptable ways.⁸

Food swamp: A geographical area with an overabundance of exposure to affordable but less healthy food, including fast food, convenience stores, and liquor stores, even if adequate access to healthy food retail exists.⁹

Full-service grocery store: Self-service retail establishments that can be independently owned or part of a corporate chain and licensed as a grocery store. Full-service grocery stores must also sell food from at least six food categories, as determined by the D.C. government, and dedicate certain amounts of space to selling them.¹⁰

4 D.C. Council. (n.d.). Learn about Wards and ANCs. Available at: <https://dccouncil.us/learn-about-wards-and-ancs/#:~:text=The%20District%20of%20Columbia%20is,local%20government%20in%20Washington%2C%20DC.&text=The%20ANCs%20are%20the%20body,the%20people%20in%20a%20neighborhood>. Accessed on October 1, 2020.

5 U.S. Department of Agriculture. (2019). Food Access Research Atlas: Documentation. Available at: <https://www.ers.usda.gov/data-products/food-access-research-atlas/documentation/>. Accessed on October 1, 2020.

6 Brones, A. (2018). See Karen Washington: *It's Not a Food Desert, It's Food Apartheid*. (2018). Available at: <https://www.guerni-camag.com/karen-washington-its-not-a-food-desert-its-food-apartheid/>. Accessed on October 1, 2020.

7 Congress.gov. (2008). H.R.2419 — Food, Conservation, and Energy Act of 2008, Title VI, Sec. 7527. Available at: <https://www.congress.gov/110/plaws/publ234/PLAW-110publ234.pdf#page=355>. Accessed on October 1, 2020.

8 U.S. Department of Agriculture. (2019). Definitions of Food Security. Available at: <https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us/definitions-of-food-security.aspx>. Accessed on October 1, 2020.

9 National Collaborating Centre for Environmental Health. (2017). *Food Deserts and Food Swamps: A Primer*. Available at: https://www.nceh.ca/sites/default/files/Food_Deserts_Food_Swamps_Primer_Oct_2017.pdf. Accessed on October 1, 2020.

10 D.C. Alcoholic Beverage Regulation Administration. (n.d.). Full-Service Grocery Stores. Available at: <https://abra.dc.gov/page/full-service-grocery-stores#:~:text=ABRA%20issues%20licenses%20to%20full,Licensed%20as%20a%20grocery%20store>. Accessed on October 1, 2020.

Findings

The Grocery Gap

The main finding of this report is there are still significantly fewer full-service grocery stores in the lowest-income wards in the District of Columbia. The highest-income ward (Ward 3) has 16 full-service grocery stores, with one in the pipeline at the time of this publication. By contrast, the lowest-income ward (Ward 8) has one full-service grocery store with one in the pipeline.

This continues the same trends found in D.C. Hunger Solutions' previous two grocery store reports. In 2010, Ward 3 had 11 full-service grocery stores while Ward 8 had three; in 2017 those numbers had decreased to nine full-service grocery stores in Ward 3 and one in Ward 8.¹¹ While the number of full-service grocery stores has changed, the trend has remained constant.

Both of the lowest-income wards, 7 and 8, currently have new full-service grocery stores in the pipeline. However, so do most of the other wards (the only exceptions are Wards 2 and 6). These singular additions in Wards 7 and 8 will not reverse the overall trend.

It should be noted that while Wards 7 and 8 are considered food deserts due to the lack of full-service grocery stores, this does not mean there are no food retail businesses. Fast food restaurants, convenience stores, dollar stores, and liquor stores are all very common in these wards to fill the food gap created by the near-absence of grocery stores. However, most of these establishments do not provide adequate nutritious options or the variety that is available at a full-service grocery store. It may be more accurate to classify Wards 7 and 8 as food swamps because food is

TABLE 2:
**Change in Number of Full-Service Grocery Stores in D.C., Race,
and Median Household Income, by Ward**

| Ward | Number of Full Service Grocery Stores, 2016 | Number of Full Service Grocery Stores, 2020 | Number of Full Service Grocery Stores in Pipeline | Median Household Income, 2017 | Percentage Black, 2020 | Percentage Latinx, 2020 | Percentage White, 2020 |
|--------------|---|---|---|-------------------------------|------------------------|-------------------------|------------------------|
| Ward 1 | 8 | 10 | 1 | \$93,284 | 21.7% | 21.0% | 58.0% |
| Ward 2 | 7 | 11 | 0 | \$104,504 | 13.6% | 12.3% | 69.0% |
| Ward 3 | 9 | 16 | 1 | \$122,680 | 5.4% | 9.6% | 81.5% |
| Ward 4 | 5 | 11 | 1 | \$82,625 | 47.0% | 25.2% | 31.0% |
| Ward 5 | 7 | 9 | 1 | \$63,552 | 56.5% | 11.4% | 30.5% |
| Ward 6 | 10 | 14 | 0 | \$102,214 | 39.7% | 8.2% | 48.9% |
| Ward 7 | 2 | 2 | 1 | \$40,021 | 92.0% | 4.0% | 3.0% |
| Ward 8 | 1 | 1 | 1 | \$31,954 | 92.0% | 3.0% | 4.2% |
| D.C. Overall | 49 (avg 6.1 per ward) | 74 (avg. 9.3 per ward) | 5 | \$90,695 | 44.5% | 12.0% | 42.0% |

11 D.C. Hunger Solutions. (2017). *Closing the Grocery Store Gap in the Nation's Capital*. Available at: <https://www.dchunger.org/wp-content/uploads/2018/11/dchs-closing-grocery-store-gap-report.pdf>. Accessed on October 1, 2020.

TABLE 3:

**Number of Full Service Grocery Stores in D.C. and Transportation Indicators
(Median Walk, Bike, and Transit Scores, and Percentage of Car Ownership), by Ward**

| Ward | Number of Full Service Grocery Stores, 2020 | Median Household Income, 2017 | Median Walk Score | Median Bike Score | Median Transit Score | Percentage Car Ownership, 2020 |
|--------------|---|-------------------------------|-------------------|-------------------|----------------------|--------------------------------|
| Ward 1 | 10 | \$93,284 | 93.0 | 79.0 | 88.0 | 54.4% |
| Ward 2 | 11 | \$104,504 | 97.0 | 89.0 | 92.0 | 53.5% |
| Ward 3 | 16 | \$122,680 | 73.0 | 54.0 | 60.0 | 77.6% |
| Ward 4 | 11 | \$82,625 | 67.0 | 66.0 | 58.0 | 76.1% |
| Ward 5 | 9 | \$63,552 | 71.0 | 63.0 | 58.0 | 70.0% |
| Ward 6 | 14 | \$102,214 | 92.0 | 78.0 | 91.0 | 67.3% |
| Ward 7 | 2 | \$40,021 | 57.0 | 63.0 | 48.5 | 58.1% |
| Ward 8 | 1 | \$31,954 | 48.5 | 63.0 | 43.0 | 57.8% |
| D.C. Overall | 74 (avg. 9.3 per ward) | \$90,695 | 76.0 | 71.0 | 69.0 | 64.1% |

readily available for purchase but there is still inequality and inequity in the nutritional value of that food.

Transportation

Transportation plays an important role in grocery store access. Along with the scarcity of full-service grocery stores, transportation is more difficult in lower-income wards, intensifying the issue of store proximity for residents.

The median Walk Scores¹² for Wards 5, 7, and 8 are significantly lower than in the other wards. **D.C. is ranked as the seventh most walkable large city in the U.S.** and overall has a walk score of 76, meaning most

errands can be accomplished on foot. By contrast, Wards 5, 7, and 8 all have scores that designate them as being only “somewhat walkable,” meaning only some errands can be accomplished on foot because amenities are too far for walking. Because the lowest-income neighborhoods are less walkable, this prevents a key — and free — method of transportation used by many other city residents, forcing residents in Wards 5, 7, and 8 to rely more on other methods, such as public transportation, which can cost more and put greater strain on already-stretched resources.

Unfortunately, Wards 5, 7, and 8 (along with Ward 4, which tied with Wards 5 and 8) also

¹² Walk Score measures the walkability to any address in the U.S. using a patented system. For each address, Walk Score analyzes hundreds of walking routes to nearby amenities. Points are awarded based on the distance to amenities in each category. Amenities within a five-minute walk (0.25 miles) are given maximum points. A decay function is used to give points to more distant amenities, with no points given after a 30-minute walk. More information can be found at <https://www.walkscore.com/methodology.shtml>.

have the lowest median transit scores.¹³ Ward 8 only has two stations on the Washington Metropolitan Area Transit Authority (WMATA) Metrorail lines, and Ward 7 has three. In recent years, WMATA has proposed cuts to bus lines and to the number of trains running in Wards 7 and 8, both located in southeast D.C.¹⁴ While the number of metro stations and bus stops by ward are not currently available, stations and stops have a much higher concentration in the center of the District and high-income areas in the northwest.

Car ownership is not significantly different than the rest of D.C, which may help residents with transportation. It should be noted, however, that D.C. is not a driver-friendly city, with high traffic and limited, expensive parking.

These transportation issues compound the difficulties of grocery store access in a food desert or food swamp. A dearth of grocery

stores increases the need for accessible transportation and improved traffic and parking conditions for those with cars. Inadequate transportation options increase the cost and time to acquire nutritious foods, which can disincentivize shopping at a full-service grocery store, or encourage purchasing processed foods with a longer shelf life but often lacking the same nutrition as healthier and more perishable foods. Residents living in areas of low food access end up paying more for their groceries either through frequent, costly trips via public or private transit or at corner stores where items cost more. Restaurants, even fast food, are also often more expensive than buying groceries from a full-service grocery store. Additionally, residents are at the whim of public transportation agencies. For example, scheduled or unscheduled maintenance can shut down bus and train routes that communities rely on, leaving them scrambling to get to a grocery store.

Lessons Learned: T2R

Due to a general deficiency of transportation, D.C. Mayor Muriel Bowser launched a short-term pilot program in June 2019 called Taxi-to-Rail (T2R) in Wards 7 and 8.¹⁵ T2R provided rides to specific Metro Rail stations, grocery stores, pharmacies, medical appointments, and public facilities. These rides were reimbursed up to \$15. After being initially expanded during the pandemic, T2R discontinued all services on October 1, 2020, after the pilot ended.

Despite the need, T2R had trouble attracting riders from the outset, and consumer complaints were frequent. For example, calling a taxi often required the use of a cell phone, some of the \$15 reimbursement was eaten up by taxi fees, and some riders were left stranded after their reimbursement was exhausted.

While this innovation is commendable, it goes to show that such programs cannot substitute for investments in transportation infrastructure.

13 Transit Score is a patented measure of how well a location is served by public transit. Transit Score is based on data released in a standard format by public transit agencies. To calculate a Transit Score, a “usefulness” value is assigned to nearby transit routes based on the frequency, type of route (rail, bus, etc.), and distance to the nearest stop on the route. The “usefulness” of all nearby routes is summed and normalized to a score between 0 to 100. See <https://www.walkscore.com/methodology.shtml>.

14 Menas, A. (2020). *Council members urge against ‘downward spiral’ of Metro’s proposed bus cuts*. Available at: <https://thedcline.org/2020/03/16/council-members-urge-against-downward-spiral-of-metros-proposed-bus-cuts/>. Accessed on October 1, 2020.

15 D.C. Department of For-Hire Vehicles. (n.d.). Taxi-to-Rail (T2R). Available at: <https://dfhv.dc.gov/release/dc-expands-taxi-rail-program-help-residents-travel-essential-services>. Accessed on October 1, 2020.

Community-Based Food Programs

One encouraging finding was that lower-income neighborhoods had higher numbers of community-based programs focused on increasing healthy food access in an attempt to fill the grocery store gap compared to high-income wards. These include farmers' markets, community gardens, stores participating in the Healthy Corners program, and others.

Wards 5, 7, and 8 have some of the highest numbers of farmers' markets and stands in the District. This gives residents the opportunity to buy fresh produce not otherwise available. Many of these markets

increase residents' buying power by accepting payments through the Supplemental Nutrition Assistance Program (SNAP), the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), Produce Plus, and the Senior and WIC Farmers' Market Nutrition Program.

The prevalence of community gardens does not seem to be linked to median income, and they are especially widespread in Ward 7. Research shows that adults with a household member who participates in a community garden are significantly more likely to eat more fruits and vegetables.¹⁶ In addition to health benefits, neighborhoods

TABLE 4:
Number of Food Retailers and Food Access Programs, by Ward

| Ward | Number of Full Service Grocery Stores, 2020 | Median Household Income, 2017 | Number of Full Service Grocery Stores That Accept Supplemental Nutrition Assistance Program (SNAP) Benefits, 2020 | Number of Full Service Grocery Stores That Accept Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) Benefits, 2020 | Number of Healthy Corner Stores, 2020 | Number of Healthy Corner Stores That Accept SNAP and/or WIC, 2020 | Number of Farmers' Markets, 2020 | Number of Farmers' Markets that Accept SNAP, WIC CVC, and/or Senior/WIC FMNP 2020 |
|--------------|---|-------------------------------|---|--|---------------------------------------|---|----------------------------------|---|
| Ward 1 | 10 | \$93,284 | 9 | 4 | 3 | 2 | 6 | 5 |
| Ward 2 | 11 | \$104,504 | 11 | 3 | 0 | 0 | 15 | 14 |
| Ward 3 | 16 | \$122,680 | 12 | 3 | 0 | 0 | 6 | 5 |
| Ward 4 | 11 | \$82,625 | 8 | 4 | 4 | 2 | 3 | 3 |
| Ward 5 | 9 | \$63,552 | 9 | 3 | 16 | 13 | 10 | 4 |
| Ward 6 | 14 | \$102,214 | 12 | 8 | 2 | 1 | 10 | 6 |
| Ward 7 | 2 | \$40,021 | 2 | 1 | 8 | 8 | 18 | 9 |
| Ward 8 | 1 | \$31,954 | 2 | 1 | 15 | 12 | 12 | 5 |
| D.C. Overall | 74 (avg. 9.3 per ward) | \$90,695 | 65 | 27 | 48 | 38 | 80 | 51 |

16 Dibsall, L. A., Lambert, N., Bobbin, R. F., & Frewer, L. J. (2002). *Low-income consumers' attitudes and behavior towards access availability and motivation to eat fruit and vegetables*. Available at: <https://nccommunitygardens.ces.ncsu.edu/wp-content/uploads/2014/02/researchDibsallLambertBobbinFrewerAccessToProduce.pdf?fw=0>. Accessed on October 1, 2020.

with community gardens see other rewards: more social interaction, civic engagement, organizing, and lower crime rates.¹⁷ It is unknown how many low-income residents participate in these community gardens, and while they cannot fully bridge the nutrition gap in low-income neighborhoods, their growing presence is promising.

Healthy Corners stores are also more prevalent in Wards 5, 7, and 8 than in the rest of D.C. Healthy Corners is a program operated by D.C. Central Kitchen that aims

to sustainably expand healthy food access by offering produce and other healthy options to convenience stores in low-income communities at wholesale prices and in smaller quantities than a conventional distributor. This allows participating stores to offer the healthier options at below-market prices to make them more appealing to consumers. Most of these Healthy Corners convenience stores accept benefits from SNAP and some are beginning to accept WIC as well.¹⁸ In addition, some stores can provide

SPOTLIGHT: Community-Owned Retail Developments

New community-owned food retail businesses are being created to fill the grocery gap, often supported by the city. One such community-based business is the **Fresh Food Factory (FFF) Market**, owned by Ward 8 resident Amanda Stephenson. FFF Market is a retail incubator market that helps develop food business, thus increasing food access and wealth in Ward 8. **Market 7**, currently operating as a community marketplace, is set to open a food hall in late 2020 (this timeline may change due to COVID-19) that will feature Black-owned community grocers and prepared food incubations. It was founded by Mary Blackford, a Ward 7 resident. **Good Food Markets**, currently based in Ward 5, is a small footprint grocery store that will also open a new store in Ward 8 in late 2020 (this timeline may change due to COVID-19) to provide fresh produce and groceries. It is run by Philip Sambol, a resident of Ward 5, and the D.C.-based nonprofit Oasis Community Partners. These innovative businesses are especially noteworthy because they are owned by community members and they build wealth and economic opportunity in Wards 7 and 8.

On October 6, 2020, Mayor Muriel Bowser and the Office of the Deputy Mayor for Planning and Economic Development (DMPED) announced four Neighborhood Prosperity Fund (NPF) **grants** for projects that would support access to food, dining, and amenities in Wards 7 and 8. Two projects of especial note are Muki's Market in Ward 7, which received a grant to create a food market that includes indoor and outdoor space, and a new mixed-use project in Ward 8 that will include a fresh food grocer, along with affordable housing units and commercial space for community businesses. When awarding the NPF grants for 2020, the Mayor and DMPED prioritized access to fresh foods and the communities that had been hardest hit by COVID-19. Many of these community programs and food retail businesses have rapidly expanded, and provide key assistance for residents to bridge the grocery gap. The 2020 NPF grants are a promising step in the right direction. While D.C.'s government is finding solutions to the grocery gap, massive disparities still exist, as is evidenced by the food insecurity rates of low-income wards, illustrating the need for additional intervention.

17 Teig, E., Amulya, J., Bardwell, L., Buchenau, M., Marshall, J. A., & Litt, J. S. (2009). *Collective efficacy in Denver, Colorado: Strengthening neighborhoods and health through community gardens*. Available at: https://nccommunitygardens.ces.ncsu.edu/wp-content/uploads/2014/02/researchTeigetel_neighborhoods-health-Gardens.pdf?fwf=no. Accessed on October 1, 2020.

18 Many convenience stores in D.C. were prevented from accepting benefits from the Special Supplemental Nutrition Program for Women, Infants, and Children until 2019 due to local legislation.

a “SNAP Match.” Offered through a program run by the U.S. Department of Agriculture, SNAP participants receive a \$5 coupon for free fruits and vegetables every time they spend \$5 or more using their SNAP benefits.¹⁹

Health Outcomes

An important consequence of healthy food access is corresponding health outcomes. An extensive body of research over the past decade has demonstrated a relationship between food insecurity and diet-related diseases, such as diabetes, hypertension, heart disease, and obesity.²⁰ D.C. Hunger Solutions’ data similarly reveals that for Wards 7 and 8, higher percentages of their populations suffer from diet-related diseases and self-reported poor health.

Research shows food insecurity and poverty are associated with costly health conditions and have direct and indirect impacts on health and well-being.²¹ Wards 7 and 8 have significantly higher rates of diet-related diseases: obesity, diabetes, high blood pressure, and high cholesterol. Nearly three-fourths of the populations are considered either overweight or obese. This contributes to Wards 7 and 8 also having the lowest life expectancy for D.C. A person living in Ward 3 can expect to live to 88 while a person living in Ward 8 can expect to live to 72. Rates of asthma are also well above average, over 15 percent for both wards.

Food-insecure individuals living in areas of low healthy food access forces residents to rely on low quality foods resulting in malnutrition and disease. Additionally, the toll of grocery shopping and budgeting

TABLE 5:
Number of Grocery Stores, Median Household Income, and Health Outcomes, by Ward

| Ward | Number of Full Service Grocery Stores, 2020 | Median Household Income, 2017 | Percent of Population Classified as Overweight or Obese, 2017 | Percent of Population with Diabetes, 2017 | Percent of Population With High Blood Pressure, 2017 | Percent of Population With High Cholesterol, 2017 | Percent of Residents Who Couldn't See a Doctor Due to Cost, 2017 | Life Expectancy (Years), 2015 | Percent of Residents With Self-Reported Fair to Poor Health, 2017 |
|--------------|---|-------------------------------|---|---|--|---|--|-------------------------------|---|
| Ward 1 | 10 | \$93,284 | 50.0% | 9.3% | 22.8% | 32.3% | 7.7% | 80.9 | 11.8% |
| Ward 2 | 11 | \$104,504 | 41.6% | 5.8% | 19.3% | 27.9% | 0.0% | 85.3 | 5.9% |
| Ward 3 | 16 | \$122,680 | 45.3% | 4.7% | 26.6% | 39.0% | 5.2% | 87.6 | 2.7% |
| Ward 4 | 11 | \$82,625 | 54.0% | 8.0% | 28.1% | 26.9% | 10.3% | 81.0 | 8.8% |
| Ward 5 | 9 | \$63,552 | 52.4% | 11.3% | 34.4% | 29.0% | 13.9% | 76.4 | 11.7% |
| Ward 6 | 14 | \$102,214 | 56.5% | 6.3% | 31.2% | 33.1% | 8.2% | 79.1 | 8.0% |
| Ward 7 | 2 | \$40,021 | 71.1% | 12.8% | 36.4% | 27.4% | 11.4% | 74.7 | 15.1% |
| Ward 8 | 1 | \$31,954 | 73.3% | 13.8% | 37.2% | 28.3% | 17.3% | 72.0 | 16.5% |
| D.C. Overall | 74 (avg. 9.3 per ward) | \$90,695 | 54.1% | 7.5% | 26.4% | 27.9% | 10.8% | 79.0 | 10.8% |

19 D.C. Central Kitchen. (n.d.). SNAP Match. Available at: <https://dcentralkitchen.org/snapmatch/>. Accessed on October 1, 2020.

20 Food Research & Action Center. (n.d.). Obesity & Health webpage. Available at: <https://frac.org/obesity-health>. Accessed on October 1, 2020.

21 Food Research & Action Center. (2017). *The Impact of Poverty, Food Insecurity, and Poor Nutrition on Health and Well-Being*. Available at: <https://frac.org/wp-content/uploads/hunger-health-impact-poverty-food-insecurity-health-well-being.pdf>. Accessed on October 9, 2020.

for rent, utility bills, and groceries results in higher rates of mental health issues.²² Proximity to grocery stores is not just a matter of convenience, but a matter of health and well-being.

Impacts of the COVID-19 Pandemic

In March 2020, the District of Columbia reported its first cases of COVID-19. The Mayor quickly declared a state of emergency and put social distancing measures in place, including closing many restaurants, schools, senior wellness centers, government service centers, some farmers' markets and stores (including those that did and did not sell food), and banning large gatherings.

This profoundly affected the D.C. food system. Emergency food providers and District agencies running the federal nutrition programs acted swiftly. The Office of the State Superintendent of Education and the Department of Aging and Community Living pivoted to different food delivery models with congregate school and senior meals no longer allowed. The Department of Human Services closed service centers and quickly rolled out an online application for applying to receive Supplemental Nutrition Assistance Program (SNAP) benefits, as well as a mobile SNAP app. Food banks and other emergency food providers expanded operations and saw demand quadruple.

The COVID-19 emergency has highlighted the disparities among wards when it comes to grocery store access. Grocery shopping has become a fraught experience even in the highest-income wards, as stores have taken extra safety precautions, such as requiring masks or limiting the number of shoppers who can shop at the same time. Many customers

have avoided in-store shopping altogether, and instead use grocery delivery services, either directly from the store or from a third-party app.

For low-income residents, grocery shopping has become especially problematic. At first, federal benefits, such as SNAP or the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), could not be used for online purchases, forcing many people to shop in person. Eventually, the U.S. Department of Agriculture allowed Amazon.com to accept SNAP benefits for groceries. However, SNAP benefits still cannot be used to cover delivery fees or gratuities and WIC benefits must be purchased in person. Food prices also have increased as much as 4.5 percent from March 2020 to June 2020, compounded by the increased demand and online grocery and restaurant purchases.²³ Additionally, benefits are often inadequate for households to purchase in large quantities, leading to frequent store visits. As a result, low-income residents have increased possible exposure to the novel coronavirus. As mentioned earlier, transportation is also an issue for many low-income residents; many residents of Wards 7 and 8 still use the bus to get to the grocery store, while higher-income residents avoid public transportation. This has put low-income residents more at risk for possible infection, and health disparities put them more at risk of disease complication and death.

This is particularly borne out when the COVID-19 health outcomes are broken down by income. While Wards 7 and 8 did not have the highest rate of virus infection, they had dramatically higher death rates. As of October 18, 2020, Ward 4 led the District with 3,073 COVID-19 diagnoses, while Ward 7 had 2,344 and Ward 8 had 2,349.²⁴ However, Wards 7 and

22 International Journal of Environmental Research and Public Health. (2018). *Food Insecurity and Mental Health among Females in High-Income Countries*. Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6068629/pdf/ijerph-15-01424.pdf>. Accessed on October 9, 2020.

23 Suneson, G., & Stebbins, S. (2020). *Coronavirus crisis: These 19 groceries have driven up your bill the most during pandemic*. Available at: <https://www.usatoday.com/story/money/2020/08/15/19-groceries-driving-up-your-bill-the-most-during-pandemic-ic/42206031/>. Accessed on October 20, 2020.

24 Government of the District of Columbia, D.C. Mayor Muriel Bowser. (2020). COVID-19 Surveillance. Available at: <https://coronavirus.dc.gov/data>. Accessed on October 20, 2020.

8 led the deaths in the District, with 100 and 127 respectively, compared to 91 in Ward 5, and 34 in Ward 3. Food insecurity and related health outcomes could be compounding factors in this higher death rate.

Race also factored into the virus's most devastating effects. Black residents made up a total of 49.9 percent of positive tests, and 74.7 percent of deaths.²⁵ This is keeping with national trends that Black Americans have higher infection and death rates of COVID-19. While limited research has been able to look into this racial discrepancy, pre-existing health outcomes, higher rates of food insecurity, medical bias, and other structural conditions are almost certainly at play here.²⁶

The pandemic lay bare the disparities between District residents. The aforementioned prevalence of diet-related diseases exists among low-income ward residents, making them at higher risk for negative health effects and death from COVID-19. A continued reliance on public transportation and in-person grocery shopping demonstrates how socio-economic factors can compound these pre-existing conditions, resulting in disproportionately higher deaths. The lack of access to nutritious food makes lower-income residents more vulnerable to exposure, illness, and death.

The Racial Wealth Gap

Like the grocery gap, the racial wealth gap in the District is also growing. This gap can be defined as the disparity between White and Black Americans to build and maintain

wealth.²⁷ Historically, racist policies and laws prevented Black Americans from acquiring wealth to the same degree as White Americans, including redlining in housing, being denied loans and credit, and being kept out of higher education and white-collar jobs.²⁸ While these laws may no longer exist, their effects are still present. In 2016, the median net worth of a White family (\$171,000) was nearly 10 times greater than that of a Black family (\$17,150).²⁹ In the District, this disparity is even worse: A 2016 Urban Institute report found that White households had a net worth (\$284,000) 81 times that of Black households (\$3,500).³⁰

Since 2014, D.C. has seen vast economic growth, however this growth has not been felt equally. Wards 5, 7, and 8 are the only wards in D.C. with Black-majority populations (57, 92, and 92 percent, respectively). They also have the highest percentage of unemployment, lowest median incomes, smallest growth in income, and highest rates of poverty. Meanwhile the wards with the highest White populations, Wards 1, 2, and 3, have the highest median incomes and have seen more substantial growth.

D.C.'s economic development resulted in a drastic reduction of the overall unemployment rate, from 14.1 percent in 2014, to 6.8 percent in 2020. Today, all D.C. wards have lower unemployment than the D.C. aggregate, except for Wards 5, 7, and 8. Ward 5 has 6.9 percent unemployment, and Wards 7 and 8 come out much higher at 15.3 percent and 17.4 percent, respectively.

25 Government of the District of Columbia, D.C. Mayor Muriel Bowser. (2020). COVID-19 Surveillance. Available at: <https://corona-virus.dc.gov/data>. Accessed on October 20, 2020.

26 Ray, R. (2020). *Why are Blacks dying at higher rates from COVID-19?* Available at: <https://www.brookings.edu/blog/fix-gov/2020/04/09/why-are-blacks-dying-at-higher-rates-from-covid-19/>. Accessed on October 20, 2020.

27 Hanks, A., Solomon, D., & Weller, C. (2018). *Systematic Inequality: How America's Structural Racism Helped Create the Black-White Wealth Gap*. Available at: <https://www.americanprogress.org/issues/race/reports/2018/02/21/447051/systematic-inequality/>. Accessed on October 1, 2020.

28 McIntosh, K., Moss, E., Nunn, R., & Shambaugh, J. (2020). *Examining the Black-white wealth gap*. Available at: <https://www.brookings.edu/blog/up-front/2020/02/27/examining-the-black-white-wealth-gap/>. Accessed on October 1, 2020.

29 McIntosh, K., Moss, E., Nunn, R., & Shambaugh, J. (2020). *Examining the Black-white wealth gap*. Available at: <https://www.brookings.edu/blog/up-front/2020/02/27/examining-the-black-white-wealth-gap/>. Accessed on October 1, 2020.

30 Kijakazi, K., Atkins, R. M. B., Paul, M., Price, A., Hamilton, D., & Darity, W. A. Jr. (2016). *The Color of Wealth in the Nation's Capital*. Available at: <https://www.urban.org/research/publication/color-wealth-nations-capital>. Accessed on October 1, 2020.

TABLE 6:

Number of Grocery Stores, Median Household Income, and Race, by Ward

| Ward | Number of Full Service Grocery Stores, 2016 | Number of Full Service Grocery Stores, 2020 | Median Household Income, 2014 | Median Household Income, 2017 | Percent Change in Median Household Income (2014 to 2017) | Percent Black, 2014 | Percent Latinx, 2014 | Percent White, 2014 | Percent Black, 2020 | Percent Latinx, 2020 | Percent White, 2020 |
|--------------|---|---|-------------------------------|-------------------------------|--|---------------------|----------------------|---------------------|---------------------|----------------------|---------------------|
| Ward 1 | 8 | 10 | \$80,794 | \$93,284 | 15.5% | 31.4% | 20.8% | 54.7% | 21.7% | 21.0% | 58.0% |
| Ward 2 | 7 | 11 | \$99,422 | \$104,504 | 5.1% | 9.0% | 9.8% | 74.7% | 13.6% | 12.3% | 69.0% |
| Ward 3 | 9 | 16 | \$109,909 | \$122,680 | 11.6% | 6.0% | 9.4% | 82.2% | 5.4% | 9.6% | 81.5% |
| Ward 4 | 5 | 11 | \$71,545 | \$82,625 | 15.5% | 58.6% | 19.3% | 26.1% | 47.0% | 25.2% | 31.0% |
| Ward 5 | 7 | 9 | \$55,063 | \$63,552 | 15.4% | 72.8% | 8.3% | 18.3% | 56.5% | 11.4% | 30.5% |
| Ward 6 | 10 | 14 | \$90,903 | \$102,214 | 12.4% | 36.7% | 6.0% | 54.1% | 39.7% | 8.2% | 48.9% |
| Ward 7 | 2 | 2 | \$39,828 | \$40,021 | 0.5% | 94.4% | 2.8% | 2.5% | 92.0% | 4.0% | 3.0% |
| Ward 8 | 1 | 1 | \$31,642 | \$31,954 | 1.0% | 93.7% | 1.4% | 4.3% | 92.0% | 3.0% | 4.2% |
| D.C. Overall | 49 (avg. 6.1 per ward) | 74 (avg. 9.3 per ward) | \$69,235 | \$90,695 | 31.0% | 49.6% | 9.9% | 40.2% | 44.5% | 12.0% | 42.0% |

By comparison, Wards 1, 2, and 3, which have the highest White populations, all have unemployment rates under 4 percent.

Wards 5, 7, and 8 also have significantly lower household median incomes than the other wards in the District. The overall median income for D.C. is \$90,695 annually. In Ward 3, the highest-income ward, the median is \$122,680, for Ward 8, the lowest-income ward, it is \$31,954. Ward 7 comes in next-to-last with \$40,021, and then Ward 5 at \$63,552, all three significantly below the Districtwide average.

These wards, however, don't just have lower median household incomes, they've also seen less growth. Overall, D.C. residents have seen a 31 percent increase in median household income in the last six years. The highest growth can be found in Wards 1, 4, and 5, which have all seen income growth of over 15 percent since 2014. While Ward 5 still has a Black majority, its Black population has decreased by nearly 20 percent in that same time period. By stark contrast, Ward 7 saw a

0.48 percent increase in median household income in the past six years and Ward 8 saw a 0.99 percent increase. Wards 7 and 8 have seen their Black populations decrease by less than 2 percent.

It is unsurprising that Wards 5, 7, and 8 experience the highest rates of poverty in the District. Ward 5 comes just under the District's overall poverty rate (16.8 percent) at 15.9 percent. Wards 7 and 8 stay on trend by doing much worse; more than one-quarter of Ward 7 residents and more than one-third of Ward 8 residents earn less than the cutoff for the national poverty rate.

These data unambiguously highlight that the income growth disparities fall across largely racial lines in the District. They also highlight how the grocery gap is an issue of racial justice. Building new grocery stores is important but not enough to provide adequate food access for D.C.'s lowest-income residents. More must be done to support Black residents' economic opportunities.

SPOTLIGHT: Food Apartheid

Hunger does not discriminate; however, systematic racism throughout the history of the U.S. and D.C. has resulted in a disproportionate number of people of color, particularly Black Americans, experiencing food insecurity.

This nation's first food systems were based off of Black chattel slavery; not only did enslaved people create a sustainable food economy for the young country, but many original American dishes were created by Black slaves based off of African dishes and techniques. When slavery was ended, it was largely replaced by sharecropping, a system that permanently indebted Black farmers to their former slave owners. This exploitation of enslaved and free Black people denied them land ownership and remuneration; today, Black Americans own disproportionately less land and fewer farms as a result, and Black communities still struggle to build wealth.³¹

In the 1950's, D.C. became the first Black-majority city in the U.S., earning the moniker "Chocolate City," and was a hotbed of Black politics, activism, and culture.³² Despite this, D.C. has long been a segregated city, even after official segregation was outlawed. This segregation remains to this day, with a Black/White race segregation index of 62.3 (highly segregated) after the 2010 Census.³³ This segregation has allowed for underfunding Black neighborhoods and programs, even in a city that often celebrates Blackness, which reflects most strongly in the economic disparities between Black-majority wards and White-majority wards.

Grocery store placement is also influenced by systemic racism. When large, national full-service store chains decide where to place new stores, they look at factors that may amplify the profitability of the store, such as median household incomes, education level, and home ownership. While this is not intended to discriminate against people of color, it is planned to exclude many lower-income communities, which tend to be largely Black and Latinx communities. This de facto discrimination results in food deserts being far more predominant in Black and Latinx neighborhoods.³⁴

The consequence of these historical and modern policies is food apartheid, a disproportionate access to food across race and socio-economic status. The very real result of food apartheid in the District of Columbia is shorter and less healthy lives for Black, Latinx, and low-income residents.

31 Holt-Gimenez, E., & Harper, B. (2016). *Food — System — Racism: From Mistreatment to Transformation*. Available at: <https://food-first.org/wp-content/uploads/2016/03/DR1Final.pdf>. Accessed on October 1, 2020.

32 D.C. Public Library. (2019). Making Chocolate City: The Black Power Movement in Washington, D.C. (summary of an event that was held on July 17, 2019). Available at: <https://www.dclibrary.org/node/64321#:~:text=From%20the%201960s%20to%20the,within%20little%20over%20a%20decade>. Accessed on October 1, 2020.

33 Michigan Population Studies Center Institute for Social Research. (n.d.). New Racial Segregation Measures for Large Metropolitan Areas: Analysis of the 1990-2010 Decennial Censuses. Available at: <https://www.psc.isr.umich.edu/dis/census/segregation2010.html>. Accessed on October 1, 2020.

34 Sherman, W. (2014). *Research Shows Food Deserts More Abundant in Minority Neighborhoods*. Available at: <https://hub.jhu.edu/magazine/2014/spring/racial-food-deserts/>. Accessed on October 1, 2020.

Recommendations

While the problems highlighted in this report have persisted over the past decade, they are not unsolvable. D.C. Hunger Solutions makes six recommendations to work towards equitable full-service grocery store access across all eight wards.

- Repeal the FEED-ACT, which has proven ineffectual at attracting new grocery retailers to low-income areas, and reinvest the money from ending the tax cut into community-based approaches. Community-based approaches should center residents and prioritize solutions that promote economic growth among residents of Wards 7 and 8. The financial gains of repealing the FEED-ACT can be made towards a DMV Good Food Fund (explained below) and other solutions identified by the multi-sector task force.
- Invest in the DMV Good Food Fund in the fiscal year 2022 budget to provide critical financial and technical support for food-related businesses owned and operated in Wards 7 and 8. Many jurisdictions outside of D.C. have successfully stood up programs to provide financial and technical support resulting in new food-related businesses, such as the [Michigan Good Food Fund](#) and Pennsylvania's Healthy Fresh Food Financing Initiative.³⁵ The recently formed DMV Good Food Fund is a private enterprise that has already begun funding local businesses. District officials should invest in this fund to make it a private/public partnership and to expand local food businesses.
- Convene a multi-sector task force that includes government officials, food-related business owners, and Wards 7 and 8 residents to examine grocery store development in those wards. This task force should submit a formal report to the Mayor and D.C. Council with ideas for identifying barriers and possible solutions, informing how to use regained funds from repealing the FEED-ACT, guiding investment in the DMV Good Food Fund, and proposing other innovative solutions.
- Invest more in public transportation infrastructure in Wards 7 and 8, including more routes for buses and rail. Planning should prioritize these wards for being the areas with the lowest access. Along with infrastructure, the frequency and reliability of public transportation must be reviewed and prioritized.
- Ensure the continued availability of healthy food by supporting other sources of food access, such as small footprint grocery stores, grocery co-ops, and community gardens. This includes budgetary investment as well as supporting expansion of such programs.
- Community input and outreach must accompany the development and implementation of any new program or retailer to ensure its acceptance and use by residents. Moreover, officials should study what unofficial community solutions have already been developed. An answer to food access in Wards 7 and 8 might already exist and just needs to be formalized and scaled. This also ensures any program is building power for residents.

35 Reinvestment Fund. (n.d.). *Success Story: Pennsylvania Fresh Food Financing Initiative*. Available at: <https://www.reinvestment.com/success-story/pennsylvania-fresh-food-financing-initiative/>. Accessed on October 1, 2020.

Conclusion

For 10 years, D.C. Hunger Solutions has been highlighting grocery store disparities among D.C. residents living in low-income neighborhoods, particularly in Wards 7 and 8. In that decade, there have not been significant changes in the number of full-service grocery stores serving low-income communities. The lack of meaningful action to address this problem is a moral failing on the part of the District of Columbia.

Access to nutritious, affordable food is a human right and should not depend

on profitability or convenience. Solving the grocery gap is possible by acting on the recommendations provided in this report. D.C. Hunger Solutions calls on D.C. government, agencies, organizations, and residents to rally around solving this problem once and for all, and to hold the appropriate authorities accountable until all eight wards have enough full-service grocery stores that are accessible by every resident. Hungry people in Wards 7 and 8 have waited far too long to receive food justice.



“While the problems highlighted in this report have persisted over the past decade, they are not unsolvable ... Access to nutritious affordable food is a human right and should not depend on profitability or convenience. Solving the grocery gap is possible by acting on the recommendations provided in this report.”



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