



# SmallPLATES

*Five Personal Stories of Food  
Insecurity in Metropolitan Detroit*

**AN EDUCATION AND AWARENESS PROJECT FROM THE FAIR FOOD NETWORK  
AND GLEANERS COMMUNITY FOOD BANK OF SOUTHEASTERN MICHIGAN**



**Fair Food Network** is a national nonprofit founded on the belief that vibrant local food systems can create health and economic opportunity. Headquartered in Michigan, we work with a diverse network of partners and pioneer solutions that increase access to healthy food for all, support farmers, and stimulate economic activity. As part of Fair Food Network's policy efforts, the **Strengthening Detroit Voices** project is bringing together community leaders to inform public policy by elevating the real-world issues impacting healthy food access. Detroit Voices' priorities are to diversify champions in the city's good food movement, convene and connect advocates with available resources, and lift up the voices of those most impacted by these issues. Dig deeper at [www.fairfoodnetwork.org](http://www.fairfoodnetwork.org).

Founded in 1977, **Gleaners Community Food Bank of Southeastern Michigan** exists to "feed hungry people and nourish our communities." Gleaners distributes more than 30 million pounds of emergency food annually to a network of more than 550 partner schools, soup kitchens, shelters and food pantries in Wayne, Oakland, Macomb, Livingston and Monroe counties. Gleaners also supports other local, state, and national organizations in their efforts to address hunger through programs, education, and policy initiatives. Learn more at [www.gcfb.org](http://www.gcfb.org).

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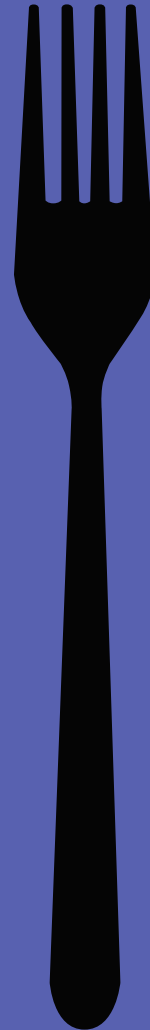
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# About SMALL PLATES...

**Small Plates** was created to give voice to the thousands of people in southeastern Michigan who live not knowing if they'll consistently have healthy, nourishing food available to them. It focuses on the real struggles that people have around food.

This project was designed and implemented by Gleaners Community Food Bank of Southeastern Michigan and funded by Fair Food Network's Strengthening Detroit Voices Project.



## Process

We tracked five individuals for six months, conducting in-depth interviews around various food issues: access, affordability, culinary capability, shopping, living on a shoestring, and other factors that impacted their ability to eat healthfully. We visited their homes, went shopping with them, and asked them to reflect on their own struggles, which were sometimes painful to share.

## Demographics

- 1 male, 4 females
- 4 single, 1 married with minor children
- 2 urban Detroiters, 3 living in outlying suburbs
- 3 SNAP recipients, 2 receiving no government food assistance
- 4 living with other family members, 1 living alone
- 2 senior citizens, 3 under age 55

## Sharing our Findings

We will share these stories with legislators, community decision-makers, the media, and others who might gain from understanding how difficult it can be for individuals with limited resources to eat healthy.

## New Advocates

All of the participants of this project have agreed to extend their participation and lend their voice to further the cause, learning more about advocating for food issues and helping in other ways. Our intent is that by disseminating this document and sharing the stories of those who are affected by food insecurity, we will help to support the work of the Fair Food Network and other concerned individuals and organizations.

*On a summer afternoon, looking across the street from Willie Smith's third floor apartment, which is cramped and with poor ventilation, construction workers are building an elaborate block-long set for a Transformers movie. It will be used, dismantled, and then returned to a parking lot within a matter of months; tons of money will be spent.*

*At the same time, Willie, 74, is exhausted, stressed and in poor health, living on a fixed income that barely covers her health care expenses, food, housing, and transportation – expenses that rack up quickly leaving little, if nothing, for incidentals. Willie recently started paying a premium for prescription coverage, an unexpected cost that means she must cut elsewhere in her budget. "I used to be able to treat myself to a movie once a month, but not any more."*

*So when the new Transformers movie comes out, Willie likely will not be attending.*

# Willie SMITH





**W**hen you're physically handicapped and have no car in Detroit, things can be rough. Such is the case for Willie, who lives alone in an apartment in the heart of downtown Detroit. Using a power chair, it's a struggle to get to a grocer.

"There's no real stores around here. I have to go two miles on the bus to a store. That's not close," says Willie. "And the amount of time you have to wait, and they took up all the shelters at the bus stops."

Once she's at a market, budgeting is a challenge. She worries that she'll get in line and then have to put something back if she's short on money. Between May and October of 2013 her monthly SNAP benefits were cut from \$73 to \$68 to \$57.

Having overcome lymphoma and breast cancer, and struggling with diabetes, Willie is mindful of what she eats: a balanced breakfast, lunch



and dinner. She took the Share Our Strength's Cooking Matters™ six-week course, learning about portions and how to read Nutrition Facts labels. She works to include more fruits and vegetables in her diet, but "those things cost an arm and a leg," says Willie. "I bought two peaches. It was a dollar something."

While not a regular user of food pantries or meal programs, Willie

appreciates a periodic bag of canned goods from a local church in the winter. It's tough to both pay her bills and eat well. "If I didn't know how to do the things I do [making a little stretch far and using community resources], I'd be in trouble."

As for the most recent cuts in SNAP, it's discouraging for Willie. "There are faces that go with these cuts. With the economy what it is, why would you want to cut food benefits when the need is so great?"

**“There's no real stores  
AROUND HERE. I HAVE TO GO TWO  
MILES ON THE BUS TO A STORE.  
THAT'S NOT CLOSE.”**

**Willie Smith,  
Detroit,  
Single,  
Age 74**



*In the spring of 2011, Jeffrey Stevens' life changed drastically as he finalized the paperwork to receive permanent disability benefits. Middle-aged and single, he used to have steady work in chemical production. Today, he is limited on how long he can sit or stand and suffers from fibromyalgia, osteoarthritis, and degenerative joint disease. He's physically unable to do much of what he used to.*

*"Because I look all right doesn't mean I'm not severely depressed and in pain. You think about killing yourself and you feel useless," says Jeffrey. "I worked for 37 years. I could do stuff and help people. I don't feel helpful anymore."*

# Jeffrey STEVENS





**J**effrey is 52 years old and rents space in a ranch house owned by his nephew in Howell. Jeffrey keeps the kitchen spotless and does a lot of the cleaning up and chores around the house; he pays \$350 in rent.

Jeffrey receives disability and recently qualified for Medicare, which will cover 80 percent of his medical bills. He's postponing much-needed hip surgery because he's already paying on four medical bills. Medications are expensive, and refilling prescriptions sometimes means he has to skimp on food.

It's a struggle for Jeffrey to pay his bills: "I'm on the edge." Yet unlike many folks who struggle with food issues, Jeffrey

has a reliable car – but it comes with a price. He bought the 2010 Chevy when he was working, but the car note is too high (almost one-third of his monthly income). He pays rent first, then his car loan, and then a debt consolidation company.

During really tight months, he gets food from Gleaners' Shared Harvest Pantry in Howell. From time to time, he also picks up food at a church pantry. But for the most part, he budgets judiciously and buys his own food.

Jeffrey cooks from scratch and makes blended drinks that are densely nutritious. He constantly reads about foods that might help with his ailments, adjusting his diet to include items with

health and healing components. Jeffrey's biggest challenge around cooking is standing up for a long time, which causes discomfort.

When he gets food, he uses it. A friend gave him a bunch of zucchini, and he made 13 loaves of zucchini bread. Canned goods from Shared Harvest Pantry turn into stew. "In the winter, I take two cans of everything and make food for a week: goulash."

A message Jeffrey would share with policymakers: "I would tell them how hard it is to afford to eat healthy. The healthier you want to eat, the more it costs."

**“In the winter, I TAKE TWO CANS OF EVERYTHING AND MAKE FOOD FOR A WEEK: GOULASH.”**

**Jeffrey Stevens,  
Howell,  
Single,  
Age 52**



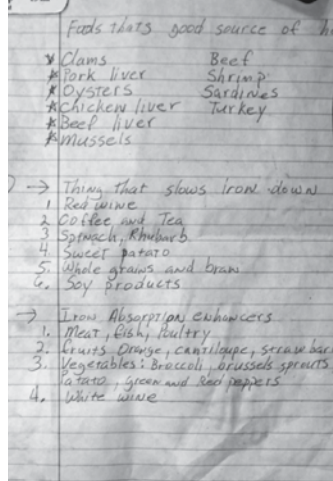
*On a cool fall morning, a semi-trailer arrives at Welcome Missionary Baptist in southwest Pontiac. As volunteers unload the truck for a free food distribution, hundreds of people mill around, including Neidra Dowe, a smart, savvy 35-year-old mother of three, who arrived at 8:00 a.m. to sign up and receive her line number.*

*Four hours later, she is pulling out of the parking lot with bananas, Gatorade, Gerber spaghetti rings, squash, tomatoes, and chicken legs. It was a long time to wait for six items, but Neidra is appreciative of the bounty, no matter how small its size or how quickly it will be consumed once she brings it home to her family.*

# Neidra Dowe







job as a supervisor at the YMCA after a five-year stint without work.

Neidra has been unemployed for three years because Multiple Sclerosis affected her ability to work as a customer service trainer. While she can no longer work for pay, she volunteers many hours at her children's schools.

Neidra has been through a Cooking Matters course and understands the components of eating healthy. The Dowe family generally eats a healthy diet low in fat with sufficient protein. But lack of energy and poor health mean that Neidra is not always able to cook meals for her children, Samiya, 12; Raphael, 4; and Kahlil, 2.

Neidra takes advantage of other food supports, like free food distributions and emergency food pantries, but still heavily relies on SNAP. "Food stamps come on the third, and within a week, they are gone." Part of that is

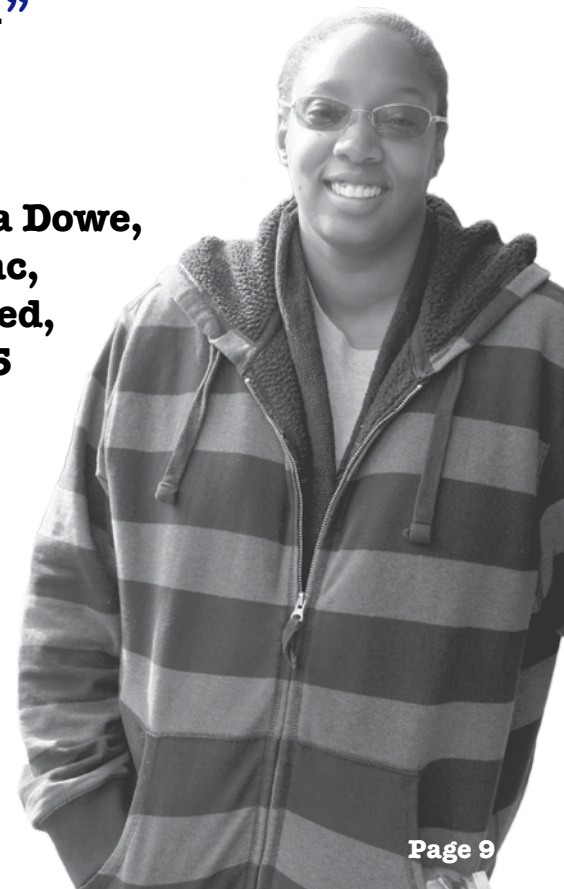
trying to stock up on good deals, but still there are weeks where they run out of flour and milk and have no money to buy more.

She sometimes holds back on portions for herself to make sure her kids and husband have enough. "I can nibble on some cereal later," she says. She refuses to let her children go to bed hungry, unless they've refused good food earlier in the evening. "I will always let them eat before I eat."

Often toward the end of the month, she is forced to stock more belly-fillers and less produce, so money is left for other crucial expenses. "We may not be able to get everything we need because we have to put gas in the car."

**“Food stamps come ON THE THIRD, AND WITHIN A WEEK, THEY ARE GONE.”**

**Neidra Dowe,  
Pontiac,  
Married,  
Age 35**



*In July at Detroit's Eastern Market, most shoppers are buying armfuls of fresh produce as growing season is at its peak. Not so for J.B. Hillman-Rushell, 63, who has carefully cashed in \$4 of SNAP benefits from her Michigan Bridge Card, which was matched by an additional \$4 in Double Up Food Bucks tokens to spend at the market. Her monthly SNAP benefits total just \$16, and that's to buy groceries for both herself and her mother.*

*With her tokens, J.B. purchases bok choy, blackberries, cherry tomatoes, and a jar of honey, all Michigan grown or produced. She picks up a printed chart from the MSU Extension booth that lists what is grown in Michigan during what month so she can shop year round for what's seasonable and fresh.*

# J.B. HILLMAN-RUSHELL





**J**.B. moved to Detroit from Georgia three years ago to take care of her mother, Mary, who is 83 and suffering from late-stage dementia. J.B. is healthy and fit, and sees to it that her mother is physically healthy too. Mary receives Medicare; J.B. has no health insurance. “I just try to take care of myself,” she says, by eating right and staying active.

At \$447/month, their two-bedroom apartment in a subsidized housing complex accommodates them, but would be considered substandard for a typical renter. It has poor ventilation, and both public and private areas of the complex are poorly maintained.

With only \$16 a month in SNAP benefits, J.B. supplements purchased food with free food, going to four different church food pantries in Southfield, Highland Park, and Detroit for nearly all of their food. “Without all the supplemental places,

we couldn’t afford to eat healthy,” says J.B. “We could never afford to buy our staples.”

Driving an unreliable 2001 Jeep, which is financed and needs repairs, J.B. says that many folks drive old cars like hers, but the difference is that she can’t afford to fix hers and make it safer to drive on major roadways, which she avoids.

J.B. is determined to eat healthy, even given the limited choice at food pantries. “I’m always juggling to get the foods and items that we want and like and that are good for us.” Last summer, she took home eight plantains because no one else wanted them or knew how to cook them. Not one went to waste.

The challenges of eating well in an urban area are real for J.B. High gas prices or car troubles create obstacles to accessing good food. Also, some nearby markets are dirty, some carry food past their “best by” dates, and others take advantage of shoppers, advertising sales prices at the counter and not honoring them at the checkout. She’s been told to shop at Trader Joe’s in Royal Oak. “People in my neighborhood can’t afford to get up to that store. There is a disconnect,” says J.B.

**“I’m always juggling TO GET THE FOODS AND ITEMS THAT WE WANT AND LIKE AND THAT ARE GOOD FOR US.”**

**J.B. Hillman-Rushell,  
Detroit,  
Single,  
Age 63**



*Over the past year, chaos and stressors have been the norm for Sandra Davis, 53. The Harper Woods home she moved into last year – after being evicted along with hundreds of other residents from Alden Park Towers in Detroit – had gas leaks and the water heater went out regularly.*

*Sandra runs herself haggard between two part time jobs, with neither providing health benefits. Last year, her boyfriend was shot in the femur waiting at a bus stop to go to work, and she helped him rehabilitate. And recently, her 17-year-old grandson moved in; his mother (Sandra's former daughter-in-law) kicked him out because her benefits were cut when he started earning income from a part-time job. Sandra assists him in getting to and from school and work and is helping him with his senior dues.*

*Life has gotten more hectic, and more vulnerable. Activities like shopping for food and eating healthy are low priorities. Sandra is stressed out and depressed: "It affects my social life, affects me physically, emotionally, financially." She makes too much to qualify for food benefits or health coverage, but not nearly enough to make ends meet.*

# Sandra DAVIS



**S**weet, soft spoken and reflective, Sandra lives in a brick home in Harper Woods with her three adult children (18, 25 and 31) and grandson. The older children moved in with her to help with rent and utilities. Sandra also has a 34-year-old son, who is mentally ill and homeless; she regularly brings him food and money.

Sandra works two part-time jobs: an overnight job as a direct care worker in a group home and a day job as an employment coach for Services To Enhance Potential (STEP). Neither job offers health benefits, so she is uninsured; she applied for medical insurance through the state, but was denied. She struggles with chronic obstructive pulmonary disease.

Sandra is not sure where she is financially. “I’m unstable now, even though I’m working two jobs.” Her savings were wiped out by the move, paying security deposits, and

buying appliances. She still needs a lawn mower; there is no furniture in the kitchen or living room.

Sandra and her children do not eat meals together because of their staggered schedules. She skips lunch because of her hours. Nobody cooks. They buy fast food and eat on the run between jobs. “I don’t think any of us are eating balanced meals.”



She currently receives no SNAP benefits and does not use food pantries or soup kitchens. Yet, she is far from feeling stable, and even farther from getting ahead. “I feel like I’m working for nothing

because I don’t have anything to show. I don’t even have a kitchen table.”

**“I’m unstable now, even though I’m working two jobs.”**

**Sandra Davis,  
Harper Woods,  
Single,  
Age 53**





# WHAT Impacts HEALTHY EATING

The issues and challenges of living with a limited food budget are many. Below are seven factors that impacted the success or failure of eating healthy for the people profiled in this report.

## Nutrition Education

Michiganders fight a number of health issues, including high rates of obesity (fifth highest rate of adult obesity in U.S.) and other food-related illnesses like diabetes, hypertension, and high cholesterol. Stories from the Small Plates participants illustrate the need for and benefits of education on how to prepare and eat healthy meals.

For Sandra, the lack of nutrition education, along with other factors, has created an impediment to healthy eating. She makes poor food choices and admittedly has an unhealthy diet. She and her three adult children that all live

together mostly eat food from restaurants and fast food places; the refrigerator is filled with Styrofoam take-out containers.

What Sandra knows about a balanced diet she learned reading nutrition pamphlets and posters. While the literature has given Sandra a better understanding of what's healthy, she lacks the time and energy to prepare meals (and research indicates that eating healthy is best done when you cook for yourself). But it's a high-level skill to be able to cook well and cook quickly – and you need an adequately provisioned kitchen. Sandra is not quite there.

Self-learners and those who seek out education fare better. Jeffrey has sought out information on diet as a means to address his joint pain and subsequent weight gain.

Neidra, Willie, and J.B. have participated in Cooking Matters courses and say they gained new knowledge and skills around reading food labels, reducing fat and sugar intake, serving

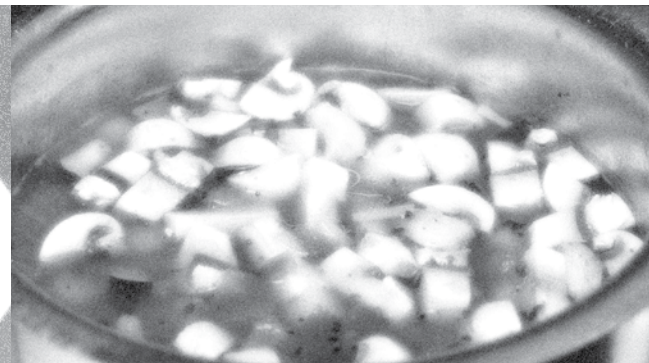
appropriate portions, cooking with vegetables, and shopping on a budget. J.B. also participates in cooking workshops, watches cooking demos at farmers' markets, and takes other classes.

## Food Access

Lack of transportation has posed obstacles for those interviewed for this project to access healthy food. Old, unreliable vehicles, are just that: unreliable. When they break down, something else in an individual's already tight budget must give.

For Neidra, until last fall, the family car, a 2001 PT Cruiser, was shared. When her husband got a job, he drove that vehicle to his job site, leaving Neidra without transportation much of the day. The family has since purchased a used van, but with a car note of \$339 a month, it will be difficult to keep.





For J.B., her 2001 Jeep broke down over the summer, and it took weeks to be repaired. She missed some free food distributions she planned to attend. “I walked a few places and ate what was on the shelf.” The car needs new tires and other repairs, and she still makes payments on the loan.

And yet J.B. is one of the more privileged older adults who actually owns a car. One-quarter of Detroit seniors lack access to an automobile, and the public bus system and its schedule are challenging and unreliable.

Willie Smith, who no longer drives and has no family members with a car, is very frustrated with public transportation in Detroit; the fact that she has physical limitations and uses a mobility scooter complicate her situation further:

“I take the bus. It’s not easy to get there [Central Market]; I sometimes wait three hours to get back to my house, and it’s only two miles

away. By the time the bus gets to me, they already have two [disabled people] on, and they can only take two. You’re supposed to be able to call to get a ride, but it never happens.”

## Food Availability

Beyond access, many of the neighborhoods where the folks interviewed for this project live have availability issues, where good, fresh food is not easy to come by, taking a greater outlay of energy, time, gas, or bus fare to find. In some pockets of Detroit and Pontiac, it’s easier to eat poorly than to eat well. Coney joints, fast food options, and gas station marts packed with chips, candy, and soda are plentiful.

A lack of accessibility to healthy food is one reason why hunger and obesity can coexist in the same household – and why obesity, diabetes and other health issues are higher in areas without access to fresh food.

While there are some great food options in Detroit – and more farmers’ markets and innovative programs like mobile produce markets emerging – there are not enough of these. As noted in some of the personal stories, the effort needed to shop for good food can hinder folks from eating healthy.

Some of the Small Plates participants struggled with the quality of neighborhood stores (dirty or with food items being sold past their “best by” dates) and have stories of being taken advantage of: “I don’t like the inner-city grocery stores because they have old meat,” says Willie.

“Markets around here are not good and people are nasty,” says J.B., who is gentle, soft-spoken, and complains about little. She opts for shopping at Kroger on the eastside, after going to a Highland Park market where they didn’t honor sale prices. “I feel voice-less trying to talk to people who are owners and sellers.”

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## Household/Life Chaos Caused by Poverty

For Small Plates participants, living on a shoestring can be very chaotic. One little roadblock – a broken down car, a sick child, a crucial benefit lowered, or a few days lost pay – can trigger a string of misfortune and disorder.

Sandra, already financially maxed out, has taken in a homeless, minor family member – on the heels of caring for her injured boyfriend who was shot while waiting on a bus to work.

Neidra, her husband, and three young children live in a small house in Pontiac. The frailty and chaos of their day-to-day life is evident in their home setting. With her own personal health struggles and a full schedule at her children's schools, housekeeping suffers and much of what they have, including their car, needs maintenance or replacement.

Neidra spends a lot of time keeping the family fed. While it would be easier to shop weekly at one grocery store, piecing together meals on a limited income takes a lot more work: making multiple trips to free food distribution sites, chasing sales, clipping coupons, and sifting through sales flyers takes a lot of Neidra's time.

## Limited Resources and Quality of Life

The stories from Small Plates participants illustrate the difficulty of not being able to take a break and do something nice for yourself, ever.

Willie used to be able to treat herself to a movie once a month, but since she now pays a monthly Medicare premium of \$104, she can't afford that movie or to buy pantyhose or nail polish. "I haven't had new shoes since my son came to visit a couple of years ago," says Willie.

Working two part-time jobs that pay poorly has not contributed to Sandra's quality of life. While she receives no government assistance, her income is still well below what she really needs to make ends meet – let alone do any small gesture for herself. "There are a lot of things I can't do for myself. Just expense-wise, it's very difficult," says Sandra. "I take from one bill and pay another."

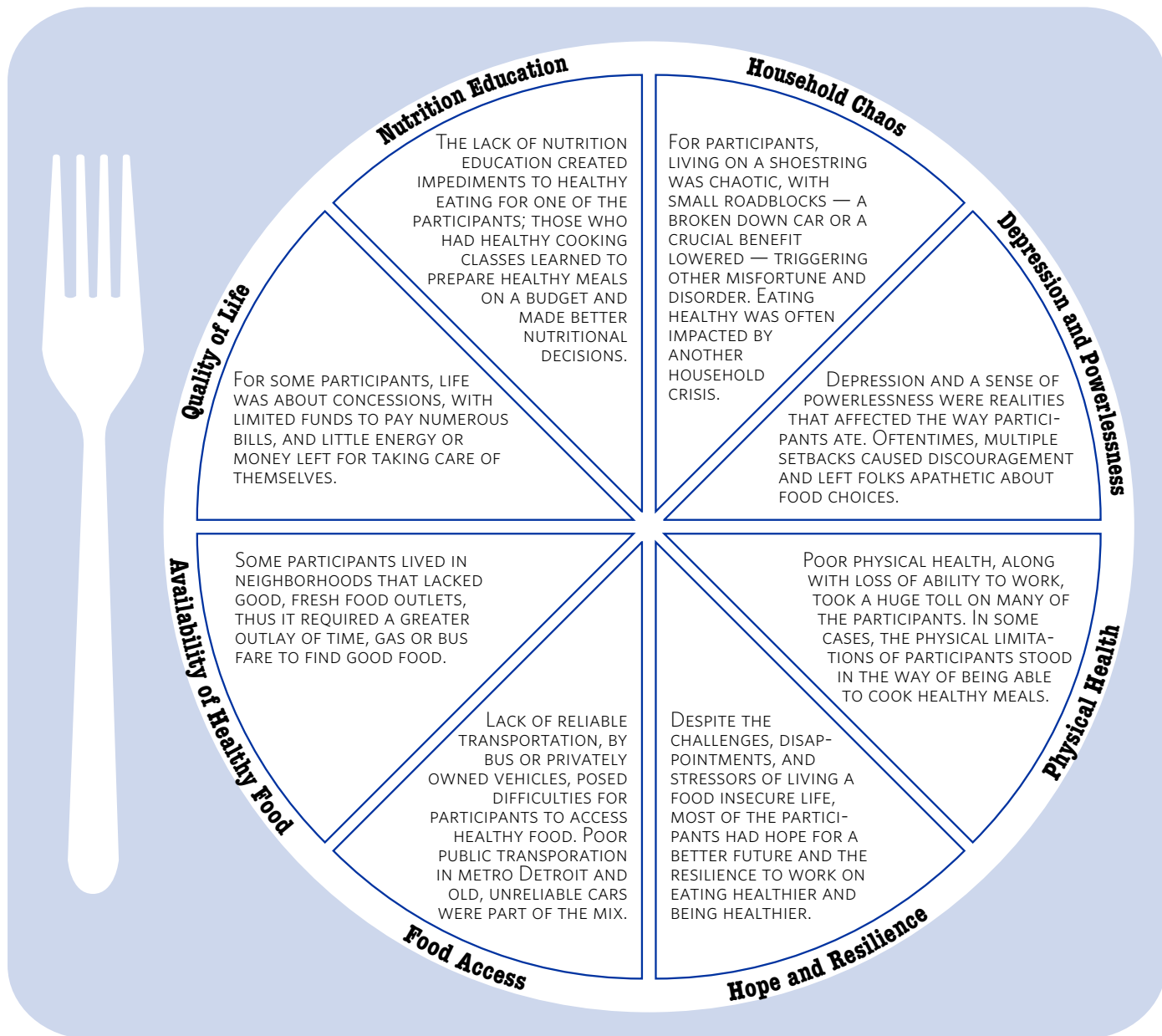
For Jeffrey, he'd love a vacation: "It's like I'm always here. I'm trapped. I can't just take off and go."

Neidra longs for a real date night with her husband Sam: dinner at a restaurant and a movie. They settle for something close every now and then when the kids are away, which is a rental movie and takeout Chinese.

"Eating well means concessions in other areas," says Neidra, whose MS keeps her from working. "I can't go pull overtime to have extra coming in."

# FACTORS THAT IMPACTED HEALTHY EATING HABITS

for  
Small Plates  
Participants



(continued from Page 16)

On the flip side, programs like Double Up Food Bucks, which J.B. uses to double her SNAP benefits at farmers' markets, extends the purchasing power of those living with limited resources, making a big difference in stocking the refrigerator with quality food.

## Physical Health

Poor physical health has taken a huge toll on Small Plates participants and their families in so many ways, including their ability to eat well. As their stories have shown, sometimes the physical limitations themselves stand in the way of being able to cook healthy.

For Jeffrey, who suffers with fibromyalgia, osteoarthritis, and degenerative joint disease, pain is a constant. Cooking and walking to the grocery store is challenging. Willie shares Jeffrey's challenges of cooking and getting to the store. As a cancer survivor and diabetic,

Willie uses an electric chair to get around and needs oxygen.

Neidra has MS. When she doesn't feel well, meal planning defaults to her husband Sam, and sometimes that means fast food for her children.

## Depression and Powerlessness

Powerlessness comes in different forms. Two months ago, Neidra and her husband Sam gave away their two dogs because they could no longer afford to keep them fed. "Over the last few weeks, we were trying to figure out what we were going to eat," says Neidra. "And then I thought, 'how are we going to feed the dogs?'"

She feels depressed about her living situation because she wants to own her own home, a

place she can fix up and invest in. But, she says, that's a long way off.

Willie has been trying to eat better and shop smarter, but it's taxing: "It's been up and down, and I really have a poor appetite. I'm a diabetic and I have to eat to sustain myself, but there's no real joy in it."

A couple of years ago, Sandra was treated for depression; she says it has affected her socially, physically, emotionally, and financially. "Whoever knew that stress could cause so many other problems in your life, in your body?"

Since March of 2011, Jeffrey has been unable to work due to fibromyalgia, osteoarthritis, and degenerative joint disease. "It's an unseen illness. Because I look all right doesn't mean I'm not severely depressed and in pain," says Jeffrey. "You think about killing yourself. And you feel useless. I worked for 37 years. I could do stuff and help people, and now I don't feel helpful."





## Hope and Resilience

Despite the challenges, disappointments, and stressors of living a food insecure life, most of the Small plates participants still have hope for a better future and the resilience to keep plugging along.

Willie, who is in poor health and with limited mobility, has no intent on giving up. “Yes, it’s very challenging. Every time I think it’s safe, and I can breathe, something comes along to disturb my joy,” she says. “But you can’t just not want to continue... you just push through.”

“I don’t have family with a car,” says Willie. “What are you supposed to do, sit on your hands and wait for someone to ask for assistance? You’ll be a victim of your own circumstance if you don’t figure out a way to do it yourself.”

J.B. doesn’t let her mind wander toward depression. “I try not to get in that state. I just

figure out how to make adjustments. I got good skills from my family, and my Christian faith. I go to the dollar movies; I have hobbies.”

When J.B. eats a healthy meal at home with her mother she says that she feels wise. “I feel like I made good decisions, and did the right thing by cooking in batches and storing it up.” She likes to have items chopped or prepared and ready, and she finds joy in simple pleasures, like clear containers in the fridge so she can see what she’s working with and pretty sets of plates and glassware from which to eat.

“I try to make my home more like a restaurant. I like ambiance. We put on nice music,” says J.B. “We eat on the porch all summer.”

For Jeffrey, he’s mindful that others have it worse. “My life is better than some of the people. I have a car and a family to live with. I have a couple of friends.” [Note: Jeffrey will return his car to the lender in early 2014 because he can no longer afford payments.]

Neidra does what it takes to get food on the table: “It may not always be what we want to eat, but it’s there.” She feels most inspired around cooking creatively. Last summer she learned to prepare zucchini and kale received at a food distribution.

“We’re a bit more health conscious than most people are.” When the family eats healthy meals together at home, Neidra feels proud. “Eating well means making concessions in other areas. We all agree to that.”

**After following the lives** of five individuals struggling with food issues, it is clear that these individuals would benefit from improvements to the food system and food supports in general. These are areas for consideration.

## POINTS FOR CONSIDERATION: ASSISTING INDIVIDUALS WITH HEALTHY EATING

### **Access/Availability of Healthy Food**

A healthy market offers a variety of products, including fresh fruits and vegetables, culturally appropriate food items, and nutritious food items, like chicken breasts, apples, reduced-fat milk, and whole wheat bread. Increasing the quality and quantity of grocery stores, and having stores that accept SNAP benefits be more accountable, could help to improve fresh food access.

### **Supplemental Nutrition Assistance Program (SNAP)**

Preserving the SNAP program will help all who struggle with food insecurity, including the working poor and seniors on a fixed income. Efforts to allow creative access to SNAP spending – like seniors using SNAP benefits for Meals on Wheels or people with disabilities purchasing prepared foods at a supermarket – could greatly assist those struggling to put food on the table.

## **Cooking Literacy**

Programs like Cooking Matters teach food budgeting and healthy cooking to people working with limited resources. Graduates of Cooking Matters eat more fruits, vegetables and whole grains and learn how to make limited food dollars stretch further.

## **Transportation**

Metro Detroit is known for its poor public transportation system. It is the only large metropolitan area in the country without a regional system. Supports for improvements to public transportation in this region could improve access to healthier grocery stores and farmers' markets.

## **Supporting Healthy Eating**

Programs like Double Up Food Bucks and Senior Project FRESH promote healthy eating behaviors, making it easier for low-income residents to eat fresh fruits and vegetables, while supporting farmers and local economies.

## **Policy Considerations**

Policy changes informed by these stories and by other quantitative research could provide more opportunity for low-income people to eat well. The cost of not investing in an equitable food system is steep, estimated at around \$167 billion annually in the U.S. for lost worker productivity and increased health problems (Joel Berg, NYC Coalition Against Hunger).



For copies of this report, questions, or an opportunity to speak with the participants of Small Plates, please contact Rachelle Bonelli, vice president of programs at Gleaners Community Food Bank of Southeastern Michigan: 313-923-3535, ext 230; [rbonelli@gcfb.org](mailto:rbonelli@gcfb.org).

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