SOME EARTHLY IDEA

Food and the health of our society are inextricably linked. One sociologist goes back to his roots to find out how we can solve where those disconnect.

By Ken Kolb
Photography by Jeremy Fleming
I was in Paraguay, I was barefoot, and I was frustrated. So was Epifanio, my 13-year-old neighbor. To him, planting beans shouldn't be this hard. He took a deep breath and told me to watch his feet.

Epifanio straddled the freshly tilled row of red dirt and slowly (for my benefit) picked up his right foot. He then knifed his toe into the center of the mounded soil, creating a one-inch depression. Returning to his wide stance, he plucked a seed from the makeshift T-shirt basket folded against his abdomen. He dropped the seed in the hole and picked up his left foot. With a sweeping motion, he covered the seed and patted it down. He looked over his shoulder as if to say, "Got it?"

I responded with a half-hearted iporã—Guaraní for "good" or "okay"—and watched him as he picked up the pace. I tried to memorize the sequence: right foot, toe punch, seed drop; left foot, sweep, pat; repeat. Sounds simple, right?

This was one food-related puzzle I never solved. Fifteen years later, it still bugs me.

That afternoon in 2001, Epifanio finished three rows before I was halfway through my first. Later, I learned that his older brother went back that evening and replanted my row altogether. I left Paraguay two years later after finishing my stint in the Peace Corps. When I returned to the United States, I shelved my interest in food and agriculture.

Between then and now, I became a sociologist. My job is to teach students how to analyze social phenomena. Like Epifanio, I try to teach by example: showing them how a sociologist conducts research in the field.

One of those research projects was a 10-year study of workers who help victims of domestic violence. Why do people choose to do such emotionally draining work, I wondered? By 2014, I had answered that question—and the questions it provoked—as best I could, culminating in my book, *Moral Wages: The Emotional Dilemmas of Victim Advocacy and Counseling*. When 2014 became 2015, I realized it was time to formulate a new question that could lead to a different quest.

I'm not sure if it was the nagging sensation that I could have—should have—learned more in Paraguay. Maybe it was the desire to research something more simple and basic. Maybe it was memories of Epifanio. Whatever the reason, I felt drawn back to the issue that had been the sole focus of my life in South America and a lingering one in my life beyond it: food.
On fertile ground: Kalb’s time at Greenbrier Farms in Dacusville, SC, helped him unearth the causes and effects of America’s problem with food deserts.
Americans have a paradoxical relationship with food. Food insecurity is real, but few people in this country die from not having enough. Instead, the opposite is true: The health of many people suffers as a result of consuming too much food, or more accurately, too much unhealthy food. We have come to a strange point in our history: Those who have the least weigh the most. According to James Levine of the Mayo Clinic, Americans living in the 100 poorest counties are 34 percent more likely to be obese—and 60 percent more likely to have diabetes—than those living in the 100 wealthiest counties.

How did it come to this? What is the relationship between poverty, food access, and health? And would getting at the foundation of these problems prove foundational in solving the many societal challenges an unhealthy diet influences? I may not have been able to plant beans with my bare feet, but answering these questions was something I was trained to do.

I am not the first to tackle this subject, of course. For the past 25 years, researchers have produced an entire subfield of scholarship on what are called “food deserts.” Coined in the 1990s, the term “food desert” refers to neighborhoods with high rates of poverty, low rates of access to transportation, and few grocery stores. The USDA has very precise definitions for urban and rural settings, but the basic concept is clear: Poor people—often without cars—are having trouble getting healthy food because none is being sold near them. What these areas have instead are the cheaper and unhealthier alternatives we know we should avoid: fast-food outlets and convenience stores.

Over the years, as the scholarship has evolved, it has become conventional wisdom among public health scholars that a lack of access to good food is a significant contributor to the poor health of impoverished neighborhoods. To fix the problem, a number of initiatives have been put in motion.

First, there was a movement to subsidize grocery store construction in underserved areas. Then, public health programs began teaching convenience stores to feature fresher items. Soon after, nonprofits started educating consumers on how to purchase and prepare healthier items. More recently, community leaders have cut out the middleman and gotten farmers to sell directly to neighborhoods via mobile farmer’s markets and urban farms.

In the past decade, hundreds of millions of dollars in the form of governmental tax credits, grants, loans, and guarantees have been put toward solving the food desert problem. New grocery stores have broken ground. Bodega owners have put bananas by the register. Crisp lettuce is being trucked to street corners, where it hasn’t been sold in decades.

These initiatives haven’t all come from taxpayer money. The private sector has played a significant role. Major retailers like Walgreens and Wal-Mart have pledged to increase offerings of healthier items at existing stores and build new locations in less affluent areas.

Together, academics, politicians, and policymakers have put together solid proposals, and through public and private campaigns, educational programs, and alternative distribution models, success looked like it was right around the corner. It all seemed so obvious: If we made affordable, culturally appropriate, healthy food available in these neighborhoods, people would change the way they eat.

But it hasn’t worked out that way. As it turns out, getting people to eat better involves more than just building grocery stores near them.

The first hint of this was made clear in a Philadelphia study after a new supermarket had been built in a food desert. The supermarket was lauded as improving access to fresh fruits and vegetables to an estimated 500,000 children and adults. The only problem was that making something available to someone didn’t guarantee that they would use it.

To measure the effectiveness of putting the Philadelphia store in the middle of a food desert, Steven Cummins, a public health scholar who has studied food deserts for 15 years, surveyed residents before and after the grocery store opened to see if any changes occurred. The first indications were positive. More than half the residents in the area reported shopping at the store after it opened, and those living near the store also reported feeling like they had more choice when it came to fruits and vegetables. These changes in perception did not lead to changes in diet, however. In his report, Cummins found that “few residents adopted the new supermarket as their main food store, and exposure to it had no statistically significant impact on [body mass index] or daily fruit and vegetable intake.”

In 2012, a study of schoolchildren’s diets in California found a similar pattern. In that investigation, parents were asked to report all the different kinds of food their children had eaten the day before. The questions were relatively simple, like, “How many glasses of milk did your child drink yesterday?” The researchers also knew where these families lived, so they could count how many supermarkets and fast food outlets were within a 10- or 20-minute walk of their houses. What they found was that kids who lived closer to grocery stores were not fed significantly healthier foods than kids who lived farther way. Similarly, kids who lived closer to fast-food chains did not eat more fast food, either.

Both these studies called into question one of the central premises of the food desert debate—the notion that geography determines diet. Unfortunately, when it comes to food, we aren’t always rational beings.

This point was made clear in a 2015 study by public health investigators in Pittsburgh about how and where food desert residents shopped. They found that only 24 percent of neighborhood residents shopped at their nearest full-service grocery store. The rest traveled nearly twice as far to shop at other grocery stores or specialty shops.

What began to dawn on me were two things: One, when it comes to distance and quality food, we may need to rethink our assumptions; and two, that rethinking should start where my interest in the subject had begun in the first place.
fifteen years and more than 4,000 miles after my barefoot failure in Paraguay, I found myself back on dirt.

Greenbrier Farms is located in Dacusville, SC, about 20 minutes from Furman. It is expansive, but the rolling topography keeps much of it from view. Just when you think you’ve seen all of it, you crest a hill and a new landscape spreads out before you. On a warm morning last spring, I laced up my work boots and started looking for answers.

One thing I had noticed when I began my journey to figure out the food desert problem was a missing voice in the conversation: farmers. Nutritional scholars have gone to great lengths to measure what people eat, where, and how, but what about the people who do the planting, pruning, and picking? Surely, they would be able to provide critical insights. To find those out, I knew I would have to gain their trust, and the best way I knew how to do that was to work alongside them (for free). It was only fitting that my first job was to plant beans.

The Hatfield Transplanter is an impressive—yet simple—piece of mechanical ingenuity. A V-shaped device, it is operated by two, waist-high, bicycle-grip handles. The user drives it into the ground to cut a perfectly square divot. This was Steve’s job. A 20-year-old intern at Greenbrier, he found working on a farm much more rewarding than his previous landscaping job, where he spent 10 hours a day on the vibrating end of a Weedwacker or with a four-gallon sprayer filled with Roundup strapped to his back.

My job was to follow Steve with a bucket of fishy-smelling chemical-free fertilizer. Inside the transplanter is a long funnel, and after Steve punched it into the ground, I poured a quarter cup of black grains down its funnel. From there, Steve would move 18 inches down the row, and Harry—his earbuds buzzing music from his smartphone—would plant a seed and tamp soft dirt on top of it. Technically, it was possible to drop a seed or seedling down the transplanter’s shoot, but sometimes they get stuck or planted too deeply. If you have enough time and people, it’s a job better done by hand.

One seed, three people. Epifanio might have been surprised, but this was labor-intensive, small-scale, organic farming as it is done in the United States today. Steve, Harry, and I did this for three hours; I didn’t screw up too often.

I spent two more weeks working full-time at Greenbrier. In the middle of a stretch of summer heat, I came back and did another week. Last fall, I visited one last time to see how they were wrapping up the season. During my stays, I tried my hand at everything they would let me do. I fed pigs, corralled cattle, drove tomato stakes, and labeled seedlings. I learned that much of the work of local farms like Greenbrier does not take place on dirt.

People come from all over upstate South Carolina to see the...
ULTIMATELY WHAT WE NEED IS AN ECONOMIC MODEL TO MATCH A NEW STORY ABOUT OUR VALUES AROUND FOOD AND HEALTH.

Surprisingly, there is very little research on the actual residents of food deserts. I’m not talking about counting check marks on surveys, or calculating average rates of diabetes within a two-mile radius. I’m talking about sitting down with actual human beings and having honest conversations. Understanding their stories.

Greenville, in spite of its recent acclaim as a great small city and Southern oasis, has a number of areas officially classified as food deserts. Working with local neighborhood associations, I arranged hour-long interviews with 100 residents in the Southernside and West Greenville communities. My questions were straightforward: Where do you get your groceries? How do you get there? How do you make 21 meals a week?

These discussions in living rooms and around kitchen tables illuminated a number of things. For one, I found that grocery stores and corner markets used to thrive in Southernside and West Greenville. At neighborhood meetings and during the summer fish fry, I set up a large map of the neighborhoods and had longtime residents circle intersections where small stores used to be located. They identified more than 30 that had existed at some point in the last 50 years. Today, however, finding so much as a single fresh cucumber is a real challenge. The last major supermarkets moved out more than two decades ago, and all that is left are a few convenience and dollar stores lingering on the edges.

When politicians and pundits talk about food deserts, they are talking about places like Southernside and West Greenville. Predominately African-American, these communities have higher rates of unemployment and poverty than other parts of Greenville. To make matters more difficult, these neighborhoods have the largest percentages of households without access to a car than anywhere else in the city.

Speaking to their residents, however, I learned there is more to buying food than proximity and price. The number of people inside the house matters, too. People who live alone, single mothers, and retired emptynesters see the grocery store very differently than those with multiple mouths to feed. In many cases, those I spoke to who lived in small households didn’t see the benefits of buying raw ingredients and preparing big meals. The expiration dates on fresh vegetables loomed larger for them than they did for bigger families. That’s important because when policymakers talk about impediments to healthy eating, they almost always fixate on distance. It is household size, however, that plays a significant role in how often residents of food deserts prepare meals from groceries.

Since the 1950s, the average household size in the United States has dropped from 3.5 to 2.5 persons. The percentage of people living alone during that time has also doubled. In short, we are living with fewer and fewer people, and this is affecting the way we eat.
When you talk to real people grappling with food access issues, decisions about making meals at home aren’t theoretical exercises. They are grounded in practicality. For a family of four, a big meal (with a round of leftovers) that can fill eight bowls over two days is worth the effort involved in arranging a trip to the grocery store and spending an hour at the sink washing dishes. For someone living alone, though, the traditional supermarket model of cooking at home may no longer apply.

Food preparation works best when you can divide the labor. One person brings home the groceries, the other stores them in the cupboards. One person cooks, the other cleans. When you live alone, you do it all. When I interviewed Rene Blanton, the vice president of the Southernside neighborhood association, she explained how her mealtime decisions mostly revolved around the obligations of her job. The appeal of leftovers waned if she knew that lunch would be offered at a training session the next day. Conversely, passing a grocery store on the way to an off-site meeting might spark ideas about a meal to cook that night. When deciding whether to cook at home or eat out, she explained distance wasn’t the primary issue. Instead, “it would all depend on how busy I had been at work.”

This is what scholars of the food desert miss when they don’t talk to the people who reside within them. If they had spent more time at kitchen tables, they would know that when you shop and cook for yourself, the meaning of food changes. Two late meetings in a row and the once-fresh greens in the fridge have transformed from an aspiration into a race against time.

What this means for those trying to solve the food desert problem is that, first and foremost, we need to recognize that the shrinking size of American households has fundamentally changed the calculus of whether the time and energy put into acquiring and cooking raw ingredients is still worth the investment. Here’s an amazing statistic: 2014 marked the first year in history that spending at grocery stores was eclipsed by that at restaurants and bars. That trend is not going to reverse itself anytime soon.

During my research with food desert residents, I also learned that grocery stores mean more to communities than the products they sell. Dollar stores signal desperation; full-service grocery stores that butcher meat and fill prescriptions indicate a neighborhood worthy of respect. The residents I interviewed in Southernside and West Greenville desperately wanted grocery stores in their neighborhoods. Although they admitted that having a store close would not likely change the foods they liked to eat, they were sure it would improve their quality of life. Consider, for instance, the time and effort put into arranging rides to the store if you don’t own a vehicle. That will weigh on you and influence where you choose to shop. Getting groceries shouldn’t be a marathon, and time spent traversing a parking lot to wait in a bus shelter is time lost with family and friends. Even if putting grocery stores in food deserts doesn’t dramatically change the way people eat, they are still vital community resources that can significantly affect lifestyle.

The value of a local grocery store is tangible in other ways, too. Economically, they employ people and keep retail dollars in the community. Socially, they serve as a nexus for people to stay in touch with their neighbors. Symbolically, they serve as indicators of a neighborhood’s value. Having a grocery store nearby means living in a place worth caring about.
Organic farms like Greenbrier, farmer’s markets, mobile markets, centralized grocery stores, as well as recognizing the shrinking American family and its impact on eating—there’s a place for all these measures to mitigate food deserts and the larger problems they create. But I still wondered: If eating better is the real solution, what can we do to get people to do that? Ultimately, what we need is an economic model to match a new story about our values around food and health.

Economists have long known that unhealthy foods cost less per calorie than fresh and whole foods. Local farmers like Chad Bishop at Greenbrier know that for a dollar, a parent can put their child to bed with a full stomach. This invites the question: How can we make cooking at home an equally attractive alternative?

What’s interesting about this question is that its relevance extends beyond the borders of the food desert and those who live in them. More and more Americans complain of a disconcerting work-life balance that can prevent the healthy choices we need to stay balanced, even if we don’t live in a food desert ourselves we can become stranded in one by our own lifestyle choices.

One way to address this is to find ways to reduce the number of steps from purchase to plate. We can do that by selling assembled ingredients for healthy meals: washed and chopped. For community organizations that assist the poor by buying in bulk and prepping ingredients for dozens of meals at once, we could scale up their model. Call it a “Blue Apron for All of Us,” or “Mise en Place for the Masses.” High-end grocers or organic purveyors can do the same by miming and measuring on-site and on-demand. If we want people to eat healthy, we need them to see that they can make filling meals from simple, non-processed ingredients. And if we want them to make a regular practice of it, we need to reset the economy of scale of home cooking.

It’s a fallacy that busy people don’t have time to cook; rather, it’s the shopping and the chopping and the planning that take up the bulk of their efforts. The actual number of minutes spent sauteing and simmering is only a fraction of all that is involved with whole meal preparation. To get people to start making their own meals, we need to trim the fat from the long list of tasks of cooking, making it efficient enough so that their plans to cook dinner at home don’t get derailed the next time they have to stay late at the office. Doing so would acknowledge that our problem with food is not just that we are starved for healthy options, but that we are starved for time. Reducing prices and shrinking distances is not enough; we’ve got to find a way to speed up the process. That is the pathway to healthier eating; first show people it is possible given the time they have, and then ask them to look for ways to make more time for it.

Lastly, and most importantly, if we want to solve the food desert problem for those most at risk, we’ve got to spend more time talking to the people who live in them and the people who grow the food they eat. Both have a rhythm to their lives that involves more than just proximity and price. Eating, after all, is a pattern—perhaps the most primal one of our lives. It is a drumbeat that taps in relation to our work, our home, our families, and our geographic location. We can’t expect to understand it by asking people to fill out a quick survey.

Epifanio had a rhythm. I thought I could replicate it in an afternoon. I couldn’t. Years of muscle memory can’t be acquired that fast. Now I know to be patient. Now I know it will take years. And it all starts with a simple question, “When was the last time you cooked a meal?”

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