

The Healthy Retail Initiative: Working to educate retailers on the importance of reading and understanding nutrition labels on food packages

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Multnomah County Healthy Retail Network
www.multco-itstartshere.org



Background Information: Healthy Retail Initiative (HRI)

- Is supported by the Multnomah County Health Department
- Is funded by the Kaiser Permanente Grant
- Overarching goal:
 - Increase community access to healthy, affordable food
 - Help store owners market healthy products, and make store improvements to increase the neighborhood desirability and value of their businesses
 - Improving healthy options for customers and the community



Label Reading Education

- **Goal:** To educate corner store retailers on reading and understanding food nutrition labels in order to stock healthy food options to successfully participate in the Multnomah County Healthy Retail Network.
- **Objectives:**
 - The retailers will be able to list the important nutrition label identifiers for healthy food choices (I.E. sodium, fat, fiber, sugar and additives).
 - The retailer will be able to compare two beverage options and chose the healthier option.
 - The retailers will be able to select six healthy foods that will fit the criteria to become part of the Multnomah County Healthy Retail Network.



Literature Review

- Hee-Jung Song, J. G. (2009). A corner store intervention in a low-income urban community is associated with increased availability and sales of some healthy foods. *Public Health Nutrition* , 12, 2060-2067.
 - Study to look at the feasibility of increasing healthy food options at corner stores in low-income communities.
 - Intervention: small monetary incentives; nutrition education training and booklet; guidelines that provided guidance with regard to food purchasing, stocking and placing.
 - Result: a modest but positive impact on increasing the availability of healthy foods.



Literature Review

- Melanie Jay, J.A. (2009). A randomized trial of a brief multimedia intervention to improve comprehension of food labels. *Preventative Medicine* , 48, 25-31.
 - Looked at the effects of a multimedia intervention to improve food label comprehension, as well as the benefits and barriers of food label use
 - In English and Spanish to help the participants better understand the food label
 - Multimedia: An interactive video along with a color-coded “stop light” food label was used to educate participants
 - Results: interactive intervention improved the short-term comprehension of the food label



Literature Review

- Russell L. Rotham, M. M. (2006). Patient understanding of food Labels: the role of literacy and numeracy. *American Journal of Preventative Medicine* , 31, 391-398.
 - This article focuses on patients' ability to read food labels. It looks at the importance of being able to understand numbers
 - Measures used: a questionnaire regarding demographics and behaviors related to nutrition label usage, a validated health literacy measure, a validated measure of math skills, and a Nutrition Label Survey.
 - *Many of the participants were confused by the complexity of the food label and had a difficult time finding the proper information on the label, or incorrectly used the information that was provided on the label.



Literature Review

- Tatiana Andreyeva, A. E. (2011). Food retailer practices, attitudes and beliefs about the supply of healthy food. *Public Health Nutrition* , 14, 1024-1031.
 - A look at healthy food options in convenience stores located in low-income areas. Retailers and managers of these stores were interviewed to understand their perception of demand and profit for different foods
 - Items that were assessed: categorizing the suppliers; retailers' perceived demand for product; perceived profitability by product category; and attitudes about selling healthy foods
 - Results found that retailers primarily took into consideration customer requests when deciding on which products to stock





Target Audience

- The ethnically diverse local corner store/ convenience storeowners of Multnomah County
- Inclusion/exclusion criteria:
 - Storeowner interest in the program
 - Willingness to adopt the requirements
 - Criteria such as the store's location and infrastructure

Implementation and Evaluation

Implementation/Evaluation Table:

Step	Start	End
Visit existing stores/retailers to ask questions	January 2012	January 2012
Visit potential stores/retailers to talk about interest and readiness level	January 2012	January 2012
Administer pre-education survey questions to retailers	February 2012	February 2012
 Educate retailers on reading labels, being able to pick healthy foods, and assess literacy and readiness levels	February 2012	March 2012
Administering post-education survey to retailers	March 2012	March 2012
 Evaluation and report of educational program results	April 2012	May 2012

Example of Education Material

Nutrient Label Reference Charts

SNACK REQUIREMENTS

Calories per serving:

MUST be less than **200**

Sugar:

(Accept for fruits and vegetables)

*May not exceed 35% by weight of the food

Per Serving Weight of food in ounces (oz)	Weight in grams (g)	35% Limit of Sugar in grams (g)
1 oz	12.5g	4g
2 oz	25g	8g
3oz	37.3g	13g
4oz	50g	17.5g
5oz	62g	21g
6oz	74.5g	26g
7oz	87g	30g
8 oz (1/2 pound)	99.4g	34g

Saturated Fat

*May not exceed 10% of total calories

Grams (g) Sat. fat per serving	Calories (kcal) of Sat. fat per serving	Lower limit of total # calories per serving
1g	9 kcal	90 kcal
2g	18 kcal	180 kcal
3g	27 kcal	270 kcal

For example: If you have a granola bar that has 2 g of saturated fat, the entire granola bar must have at least 180 calories

Example of Education Material

- How to Read a Nutrition Facts Label

- Step 1: Look at the serving size

Serving Size 1 cup (228g)
Servings Per Container 2

- Step 2: Look at the Calories

Amount Per Serving	
Calories 250	Calories from Fat 110

- Step 3: Look out for Fats and Sodium (salt)

Total Fat 12g	18%
Saturated Fat 3g	15%
Trans Fat 3g	
Cholesterol 30mg	10%
Sodium 470mg	20%

- Step 4: Look at the Sugar content

Sugars 5g

- Step 5: Look at fiber content

Dietary Fiber 0g	0%
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Facilities and Personnel

- **Facilities:**

- Multnomah County Health Department (MCHD)
- Office of Public Health
- Corner stores

- **Personnel**

- Myself, other interns
- Suzanne Briggs, Food Policy Council
- Jennifer Young MPH, RD, Office of Family Health
- MCHD employees: Tera Couchman Wick and Rachael Banks, program supervisors for the HRI



Budget

- Labor Cost (approx. \$15.00/hour)
- Material Cost:
 - Surveys (25-30)
 - Educational Materials (x 25-30)
 - Computer use
 - Printing and paper use
 - Approximate total materials: \$ 500.00
- Kaiser Permanente Grant Money
 - Mini-Grants of \$4500 to retailers, if they qualify



Policy Implications

- **Initial impact on the local level**
 - Residents who are served by the corner stores
- **Organizational Policy**
 - Collaboration of many agencies
- **Potential to impact State and National Policies**

Questions???

References

- Hee-Jung Song, J. G. (2009). A corner store intervention in a low-income urban community is associated with increased availability and sales of some healthy foods. *Public Health Nutrition* , 12, 2060-2067.
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- Tatiana Andreyeva, A. E. (2011). Food retailer practices, attitudes and beliefs about the supply of healthy food. *Public Health Nutrition* , 14, 1024-1031.
- Website: U.S. Food and Drug Administration. How to Understand and Use the Nutrition Facts Label. Version Current 11 March 2011. Internet: <http://www.fda.gov/food/labelingnutrition/consumerinformation/ucm078889.htm>
- Website: Multnomah County Health Department. Healthy Retail Initiative promotes community and business win-win. Internet: <http://www.multco-itstartshere.org/news/healthy-retail-initiative-promotes-communitybusiness-win-win>