



February 2023  
Hunger Free Community Report

# Food Insecurity in Knoxville's Public Housing Community: *Engaging Residents as Co- Creators of Change*



Written By  
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# ACKNOWLEDGEMENTS

This report would not be possible without the support of the Congressional Hunger Center. I would like to thank Tony Jackson and Paige Clay for their mentorship throughout my fellowship.

This report was also made possible by Kimberly Pettigrew and the United Way of Greater Knoxville. I offer my biggest thanks to Kimberly, who as my supervisor facilitated my work, offered me guidance throughout the process, and inspired me with her own personal theory of change.

I'd like to thank Dr. Marisa Moazen, the Vice President for Strategic Partnerships and Policies with KCDC, for her efforts to improve conditions for KCDC residents and her willingness to accept feedback.

I would also like to express gratitude to the multitude of stakeholders, community members, and program staff who shared space with me and thank them for their efforts towards creating a more equitable food system.

Finally, I am so thankful to the residents who engaged with me, shared their stories with me, and allowed me to learn from them. My ultimate purpose is to serve as a conduit for their knowledge, and to use my privilege and power to amplify their voices. I hope to work towards a world where residents and others with lived experience of hunger and poverty can own advocacy efforts and be empowered to make change in their communities.

## Positionality

My positionality to the issues discussed in this report is informed by my identity and my privilege. I am: an able-bodied, cisgender, woman of color with an upper-middleclass economic background. I have never experienced food insecurity or hunger. I do not have experience living in poverty or with limited economic resources. My perspective has been shaped by my lived experience, and my positionality to the issues of hunger and poverty should be considered when reading this report.

# Table of Contents

S

## 01 Introduction

01 Glossary

02 Abbreviations

03 Introduction

H

Z

## 08 Stakeholder Engagement

10 Asset Mapping

14 Serving East Knoxville with Pastor Battle

18 Barriers to Service: Communication and Coordination

E

## 20 Resident Engagement

21 Knox County Community Food Security Assessment

36 Focus Groups

41 Remembering Local Food Systems with Cheryl

H

Z

## 44 Barriers to Community-Led Food Transformation

47 Mental Health, Food, and Solutions with Jeff

O

## 51 Building Capacity for Community-Led Food Transformation

52 Knowledge Mobilization

53 Building Leadership Capacity with Resident Ambassadors

C

# Glossary



## Community Food Security

"A condition in which all community residents obtain a safe, culturally appropriate, nutritionally adequate diet through a sustainable food system that maximizes community self-reliance, social justice, and democratic decision-making. Food secure communities ensure availability, stability, and access to food at the community level and connect these issues to the community food production and distribution system."<sup>1</sup>

## Community-Led Food Transformation

Changes to the food system that are designed and implemented by the community that will be impacted. People with lived experience of hunger and poverty **lead** research and advocacy efforts aimed at creating community food security.

## Lived/Living Experience

"Personal knowledge about the world gained through direct, first-hand involvement in everyday events rather than through representations constructed by other people."<sup>2</sup> People with lived experience are directly impacted by social issues, including hunger and poverty.

## Mutual Aid

Reciprocal aid and cooperation between members of a community, based on the principles of direct action, cooperation, mutual understanding, and solidarity.<sup>3</sup>

## Stakeholder

"Individuals, groups, communities, governments, and others, that affect, or are affected by, one or more nonprofit organizations or the sector as a whole."<sup>4</sup>

## Client

An individual receiving service from a non-profit organization

# Abbreviations

## ABBREVIATIONS

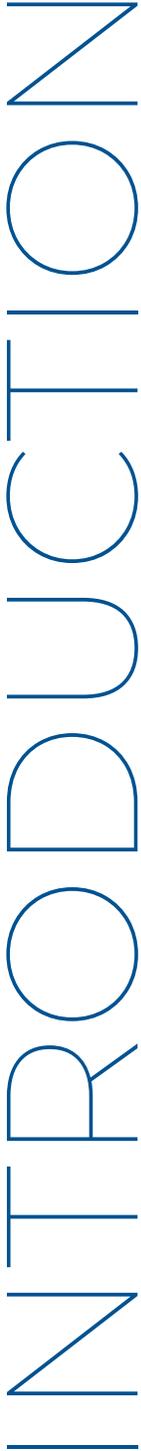
The following abbreviations are used throughout this report:

- **UWGK-** United Way of Greater Knoxville
- **KCDC-** Knoxville Community Development Corporation
- **CAC-** Knoxville-Knox County Community Action Committee
- **SHFBET-** Second Harvest Food Bank of East Tennessee
- **CFSA-** Community Food Security Assessment
- **SNAP-** Supplemental Nutrition Assistance Program
- **PHA-** Public Housing Authority

The following truncations are used throughout this report:

- **Love Towers-** Guy B. Love Towers
- **Beardsley-** Beardsley Community Farm

## Introduction



This report is the result of a joint effort between the United Way of Greater Knoxville (UWGK) and the Knoxville Community Development Corporation (KCDC) to create equitable food access opportunities for KCDC public housing residents



### Mission

UWGK unites people and resources to strengthen communities and solve systemic issues.

Vision: An equitable community through partnerships, impact, and commitment to transformation.

### Impact

United Way of Greater Knoxville acts in solidarity with our region's businesses, nonprofits, and civic leaders to create a more equitable Knoxville – a community where neighbors have stable housing, financial security, quality early care and education, and equitable access to food.

### Food Systems

At the United Way of Greater Knoxville, we recognize that food insecurity doesn't exist in a vacuum and that often those experiencing food insecurity also face issues around housing, childcare, healthcare, transportation, and mental health. Rather than addressing hunger alone, we will focus on community food systems which shifts the burden of negative health outcomes away from the individual and considers the environment and conditions in which an individual is born, lives, works, and plays.

Our Food Systems initiative will work alongside food system stakeholders, community residents, policy makers, non-profit

leaders, and community-based organizations to create a more just, equitable local food system. We recognize how historical and systemic inequities have impacted and continue to influence the food system challenges we have today, so we will create an environment that empowers community residents as co-creators in our countywide vision to transformational change.



The Knoxville Community Development Corporation (KCDC) is Knoxville's public housing authority (PHA). KCDC works to provide housing services to low-income individuals and improve the Knoxville community through public housing for families and seniors, Section 8 housing vouchers, and redevelopment projects.

One key focus area for KCDC is collaborating with nonprofit partners to create communities of opportunity that provide residents with access to resources for growth in education, employment, health, food, and connectivity. **Access to food is a fundamental need and KCDC sought a partnership with Bill Emerson Congressional Hunger Fellowship to better understand where and why the highest inequities of food access occurred among KCDC residents and properties.**

In 2021, KCDC conducted a needs assessment across 21 subsidized housing properties. Through this assessment they learned there was a disparity in food access for residents.

Almost three-quarters (71.7%) of respondents were currently receiving SNAP benefits, and almost half (46.2%) of respondents indicated they worried whether their food would run out before they got money to buy more.

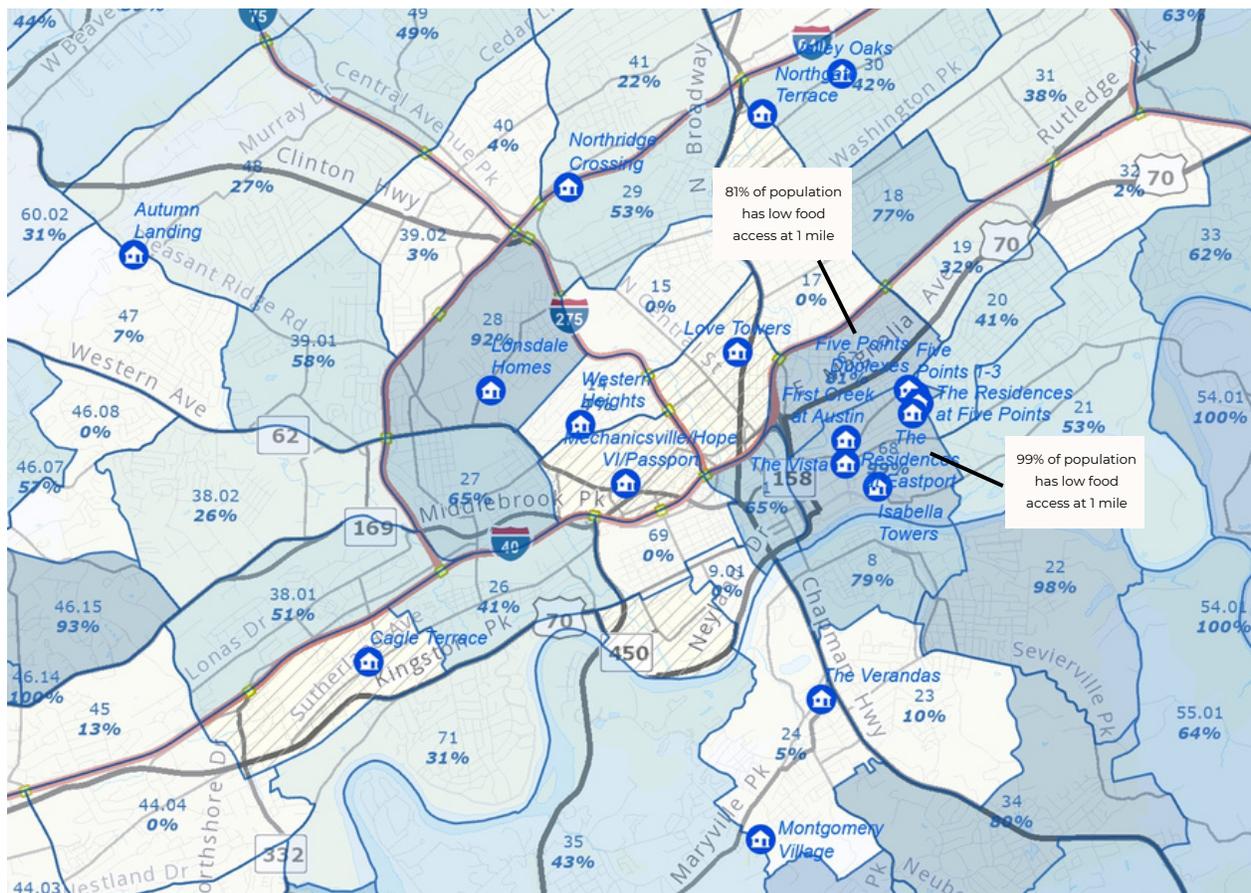
When asked "*What are the top 3 areas of Food Needs in your community?*" respondents indicated affordable food (53.5%), access to fresh foods and vegetables (46.7%), and emergency food assistance/food pantry (33.1%) as their priority needs.

# GOALS FOR THIS REPORT

- Capture the network of organizations and programs providing food and food access related services to KCDC residents.
- Identify gaps in services, and barriers to partnering effectively with KCDC.
- Explore the lived experience of residents and identify barriers to food security from resident's perspective.
- Engage residents as co-creators of community food transformation.

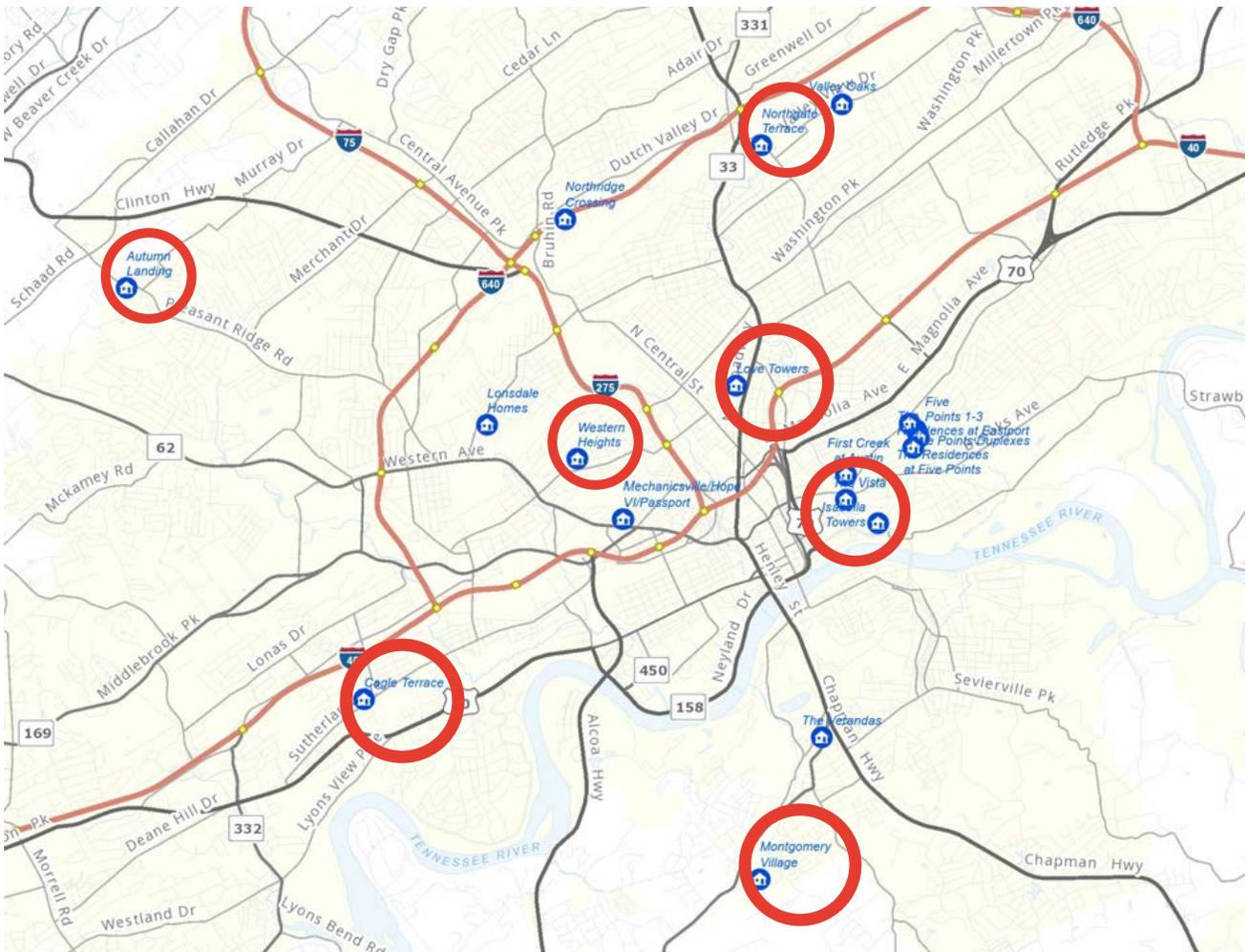
## KCDC PROPERTIES

KCDC owns and operates 26 public housing properties in Knox County. Most of the properties are located in US Census tracts where there is low food access.



Map of US Census Tracts with Low Food Access at 1 mile and KCDC properties<sup>5</sup>

For the scope of this report, seven target properties were identified for asset mapping, stakeholder engagement, and resident engagement. This included four Elderly (62+) and Disabled properties and three Family properties. The Elderly and Disabled properties were chosen in part because they receive the most direct services and programs. They are also the only properties with on-site CAC Case Managers which made resident engagement easier to facilitate. The family properties, Western Heights and Montgomery Village, were chosen because they have on-site services, and it was also important to include a wide geographic range of properties. Autumn Landing was chosen to add contrast as a Knox County rather than City property, and as a property that receives no direct services. While the data from the resident engagement efforts are not disaggregated by property in this report, it is essential to note that each property has unique characteristics and faces distinct challenges related to food access.



Map indicating seven target properties included in this report

# KCDC TARGET PROPERTIES



**Isabella Towers**  
Elderly and Disabled Property



**Guy. B Love Towers**  
Elderly and Disabled Property



**Cagle Terrace**  
Elderly and Disabled Property



**Northgate Terrace**  
Elderly and Disabled Property



**Western Heights**  
Family property



**Montgomery Village**  
Family Property



**Autumn Landing**  
Family Property

## Stakeholder Engagement

# STAKEHOLDER ENGAGEMENT

### Stakeholder Engagement Goals

- Capture existing network of food assistance through asset mapping
- Assess disparities in services between properties
- Identify providers, gaps in service, barriers to service and service duplication through interviews and shadowing

In order to capture the existing food assistance network, interviews with stakeholders were conducted alongside program shadowing.

Shadowing various programs that provide food to residents gave insight into how these programs are coordinated, what the distribution process looks like, and the barriers to effective programming with KCDC. Informal stakeholder interviews along with many conversations with program staff, added context to the experience shadowing and gave additional insight into these areas.

## Overview of KCDC Partner Organizations

The following organizations are mentioned throughout this report and provide food access related services to KCDC public housing properties:



*"The Knoxville-Knox County Community Action Committee (CAC) is a local public agency serving the community with a comprehensive range of federal, state, and locally funded programs. It is a part of the nation's premier network in building communities, servicing families, and advocating opportunities for low-income people. CAC promotes family self-sufficiency and independent living for low-income and other vulnerable people through caring and efficient delivery of needed services and the development of partnerships at all levels."*



*"CAC Beardsley Community Farm works towards a healthier community in Knoxville by providing culturally relevant produce, accessible education, and land and resources for gardening."*



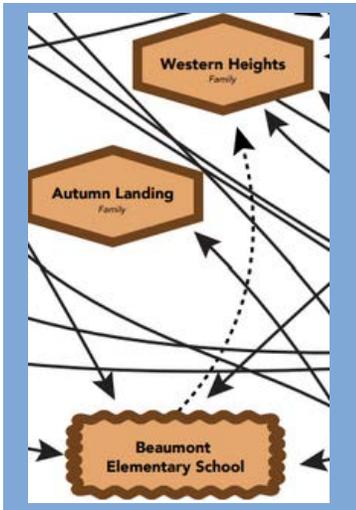
*"Second Harvest Food Bank of East Tennessee, a member of Feeding America, has worked to compassionately feed East Tennesseans experiencing hunger since 1982. Last year, Second Harvest distributed more than 21 million pounds of food across an 18-county service area through multiple feeding programs and 630+ community partners."*



*"BattleField Farm is an urban farm with the mission of transforming the community's relationship to land and food in East Knoxville's underserved communities. BattleField Farm is working to end food insecurity by partnering with community members to make fresh food accessible and to cultivate land-based sovereignty through education, workforce development, and direct relationships to land."*

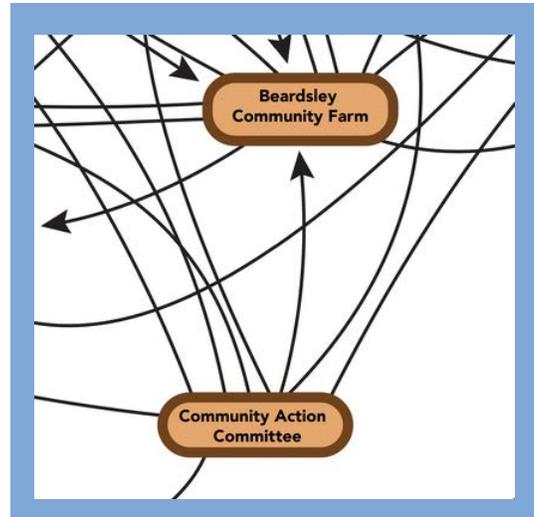
### Asset Mapping

The results from the stakeholder engagement phase were compiled into Food Access Property Profiles which detailed the exact food and food access services going into each target property. In order to create a visual representation of the profiles, asset maps were created as well. Asset maps are a helpful tool when identifying gaps in services, duplication of services, and power dynamics within food assistance networks. The map shown (fig. 1) shows the connections between organizations, properties, and other service sites.

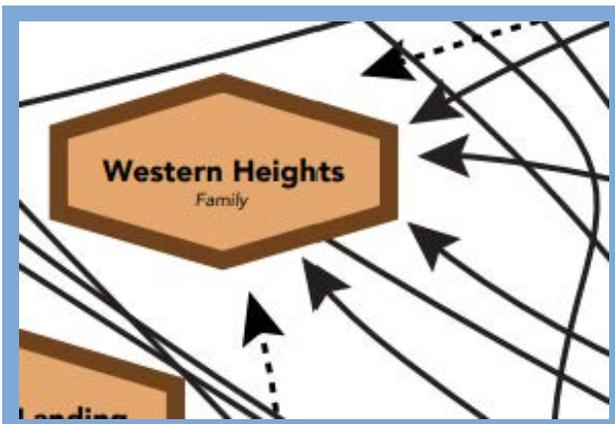


*Indirect lines represent services that are property adjacent, that residents must travel to obtain services, or else provide services and resources in an indirect way. For example, Families with school-aged children living in Western Heights can access services from Beaumont*

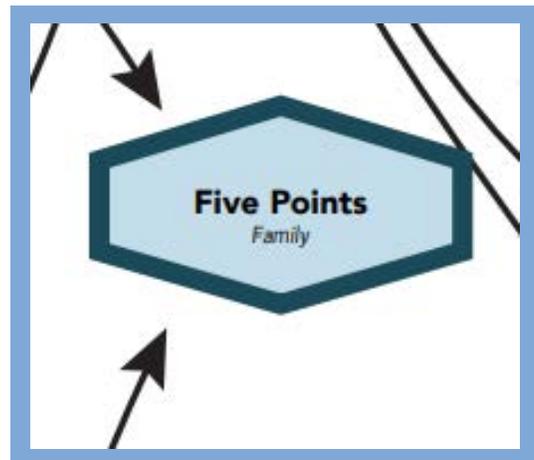
Elementary School. The school is a program site for The Second Harvest Food Bank of East Tennessee (SHFBET) Food for Kids program, which provides food-insecure school children with easily prepared food. Students who are identified by their teachers as being at risk of hunger can receive food every Friday.



*The direct lines represent a direct service meaning a service delivering food or resources directly to the property or organization. For example, Knoxville-Knox County Community Action Committee (CAC) provides funding to Beardsley*

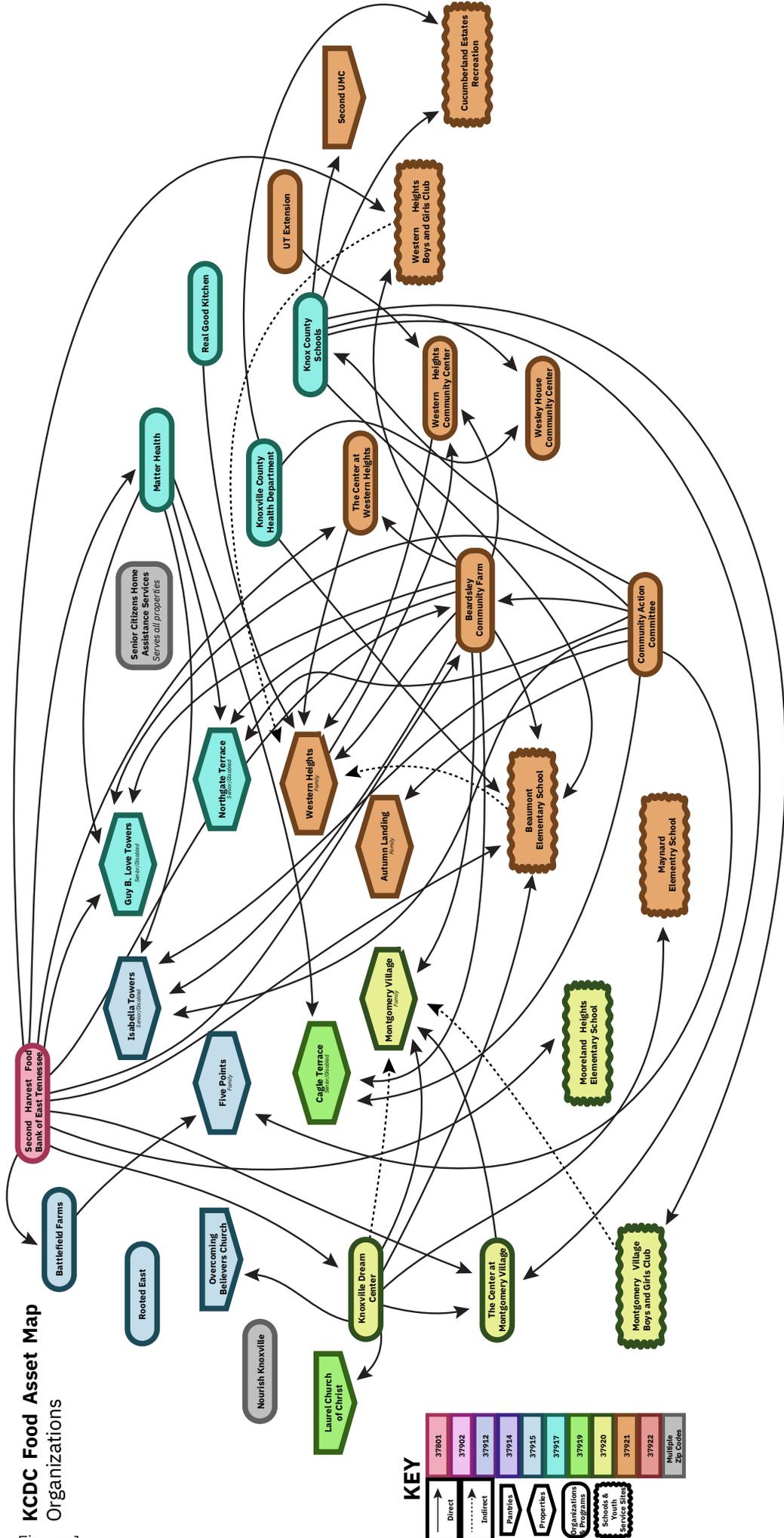


*Properties with many connections receive direct services, and have more access to food resources.*



*Indirect lines represent services that are property adjacent, that residents must travel to obtain services, or else provide services and resources in an indirect way.*

# KCDC Food Asset Map Organizations



**KEY**

- Direct (Solid Arrow)
- Indirect (Dashed Arrow)
- Parties (Pentagon)
- Regents (Hexagon)
- Organizations & Programs (Oval)
- Schools & Service Sites (Scalloped Edge)

|                    |
|--------------------|
| 37601              |
| 37902              |
| 37912              |
| 37914              |
| 37915              |
| 37917              |
| 37919              |
| 37920              |
| 37921              |
| 37922              |
| Multiple Zip Codes |

Figure 1

The number of connections to each property illustrates which properties are islands receiving few direct services, and which properties are well connected to the food assistance network.

The relevance of the number of connections goes beyond direct and adjacent services. Being a well connected property means having more access to the food assistance network as a whole, which enables access to other assets.

### Mapping Food Pantries

The map shown below (fig. 2) shows food pantries within 2 miles from each property, illustrating disparities between them.

## KCDC Food Asset Map Properties and Pantries

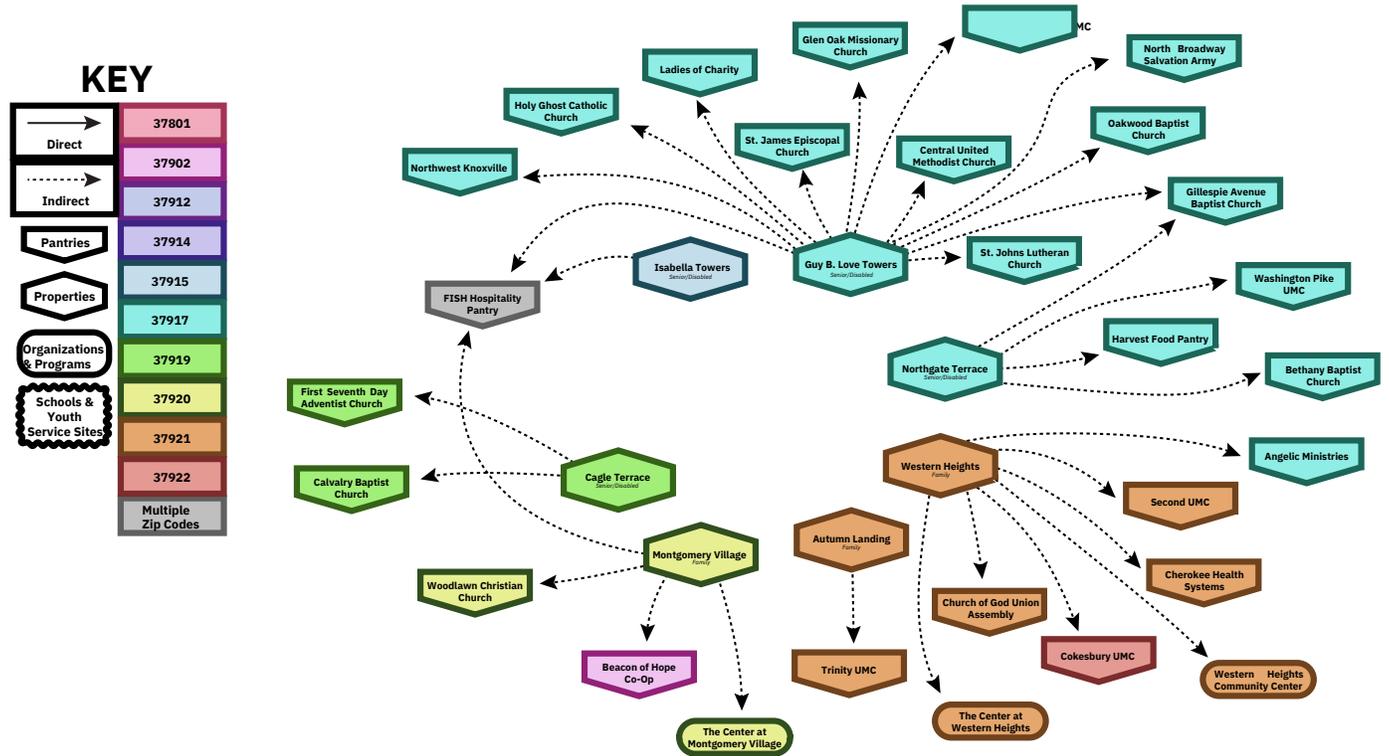


Figure 2

Mapping food pantries also provided insights into barriers to equitable pantry access. The vast majority of pantries shown on the map are high-barrier, meaning they require some form of personal identification, an intake process which includes sharing sensitive personal information, are not client-choice models, or have a religious affiliation.

In addition to these barriers, it is often difficult to find accurate information about food pantries.

The pantries shown on the map were compiled using four sources: the Tennessee 211 Resource Directory,<sup>6</sup> the Knox County Health Department GIS map, SHFBET Food Pantry Directory,<sup>7</sup> and a list created by a KCDC Americorp Vista. There was varying information across these four sources, with inconsistencies on the existence of pantries, pantry hours, and pantry requirements. Accurate and easily accessible information is crucial to equitable pantry access. **When people try and fail to get help from pantries based on inaccurate information, it creates distrust for food assistance programs. It is critical to develop better information sharing practices to improve food pantry access.**

*"You go to these services, and they tell you, 'Go here, go there' but they don't know. If there were an organization where you can get all the information in one place. When I was homeless, it was really difficult to get information about services"* -- CFSA Respondent

*Geographic and Racial Disparities*

The asset maps are coded by zip-code to illustrate geographic disparities between properties and highlight the lack of place-based services in some areas.

There is a lack of place-based services in the 37915 zip-code, including a lack of organizations, programs, and food pantries.

37915 is an East Knoxville zip-code, and the population is predominantly Black and low-income. Prior to the City's urban renewal projects in the 1950's, the 37915 area was the site of a Black-owned business community known as The Bottom. Theaters, restaurants, grocery stores, and a YMCA flourished in this neighborhood, persevering against Jim Crow segregation and racial violence. From the late 1950's, the city began systematically razing over 100 Black-owned businesses and displaced over 2,500 residents, building a tangle of poorly planned freeways where there used to be a thriving Black neighborhood.<sup>9</sup>

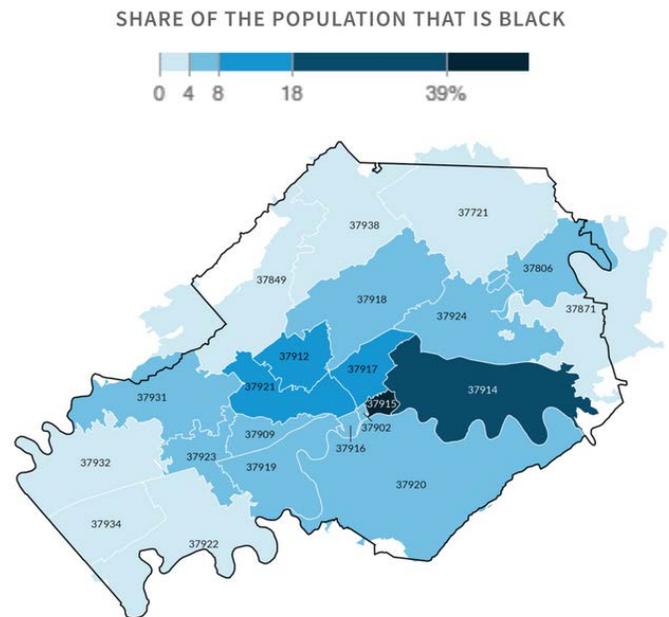
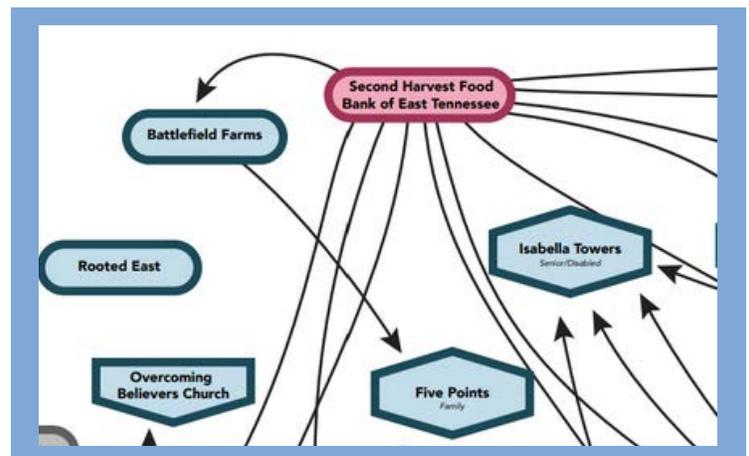


Figure 3<sup>8</sup>



Asset map showing organizations and properties based in 37915

The lack of food access services in Knoxville's predominantly Black neighborhood is a direct result of systemic racism and the disinvestment created by urban renewal. It is essential to center the role of systemic racism in fostering food insecurity in low-income communities of color, and to develop solutions grounded in anti-racism.

Battlefield Farms is one of the only service providers based in the 37915 zip-code. Pastor Battle, who runs Battlefield Farms, provides fresh produce to East Knoxville residents through the Fannie Lou Mobile Produce Van.

### *Serving East Knoxville with Pastor Battle*

I met Pastor Battle at the Market Square Farmer's Market on a hot Wednesday in October 2022. Wearing overalls, he was loading produce into Fannie Lou with two other volunteers. There was a box of plums, a couple boxes of onions, collard greens, peppers, squash, a few other items. I helped finish loading up, chatting with Pastor Battle and the other volunteers, and asking questions about the van, the produce, and the clients we were going to serve. Pastor Battle considers himself a community pastor, and wants to build community in East Knoxville through food. Recognizing how the Black community in Knoxville was devastated as a result of urban renewal, he sees reclaiming their sense of community as reclaiming their sense of power and independence.

We drove from Market Square to Morningside Gardens, a Section 8 public housing complex in East Knoxville. Even though it is only 2 miles away from Downtown, food access changes drastically going from a wealth of restaurants and shops to an abundance of convenience stores along Magnolia Avenue.

When we pulled up to the apartments, there were already people gathering, some with shopping bags and buggies. I walked beside one woman who told me that the van had been such a blessing. Before it started coming, she said, she rarely ate fruits and vegetables because she couldn't afford them. Pastor Battle told me a man once told him this was the first time in years he had eaten produce.



Client at Morningside Gardens



Beardsley Community Farm is a very central organization, making connections to most of the properties through their raised-bed and in-ground community garden programming, monthly produce-distribution, and the Green Thumb program which offers free gardening materials. They often serve as a middleman between larger organizations and service sites. For instance, with the produce distribution program, Beardsley works with SHFBET and CAC to get produce, and then works directly with Case Managers to distribute produce to KCDC residents.

### Produce Distribution at Cagle Terrace

Bill Banks, the CAC Case Manager at Cagle Terrace, coordinates the monthly produce distribution. He works with Beardsley Farm to set up a date, does outreach to residents to increase participation, and delivers the produce to residents. Often a resident will help him pass out produce too or help him unload the produce bags from Beardsley's truck. The produce can vary month to month, although giant squashes seemed to be a regular occurrence. When I helped Bill pass out produce during one distribution, the cherry tomatoes were a big favorite among residents. Even though Bill has a sign-up sheet, he tries to offer items to residents who forgot to sign up too. As we were going door to door delivering produce bags, he noted how important programs like this are because they double as wellness checks on more isolated residents and enable him to build trust and rapport with the community.



Produce at Cagle Terrace, Credit: Bill Banks

### KCDC Food Asset Map Community Action Committee

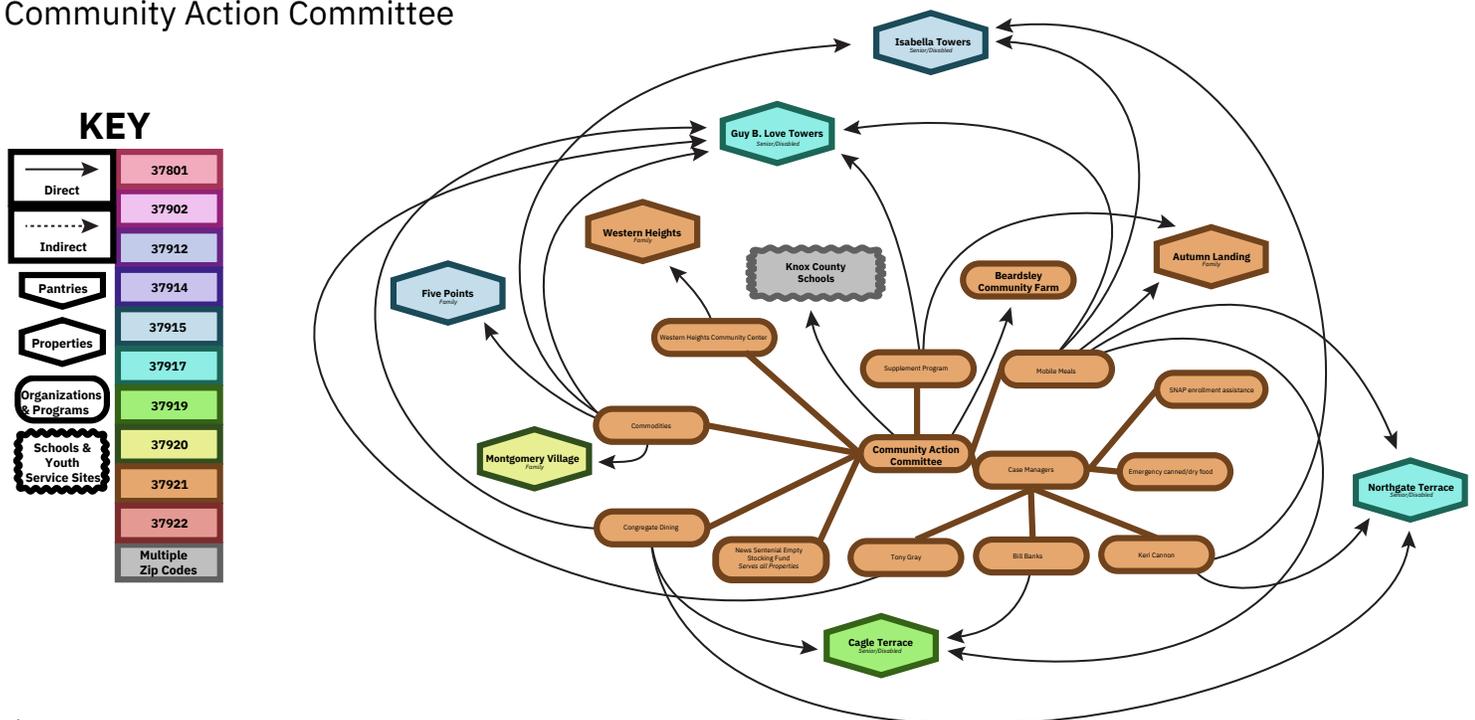


Figure 5

The Community Action Committee is one of Knoxville’s largest non-profit organizations, acting as a social services arm of the City government. Programs from the Food and Nutrition services branch of CAC are shown on this asset map (fig. 5), including Mobile Meals which provides a daily hot meal to homebound seniors, Congregate Dining which provides daily hot meals for seniors in a communal setting at select sites, and Commodities which distributes dry and canned goods to low-income Knoxville residents at a multitude of service sites.

These asset maps overall are representative of a top-down approach to service. Connections show the flow of resources from large organizations like CAC and SHFBET, illustrating the power that these organizations have in the food assistance network.

Power mapping illustrates who has power in a system. A collaborative network model (fig. 6) would show more connections going from properties and smaller organizations to large nonprofits, representing input and influence across the different levels of the network.

**KCDC Food Asset Map**  
Community Action Committee

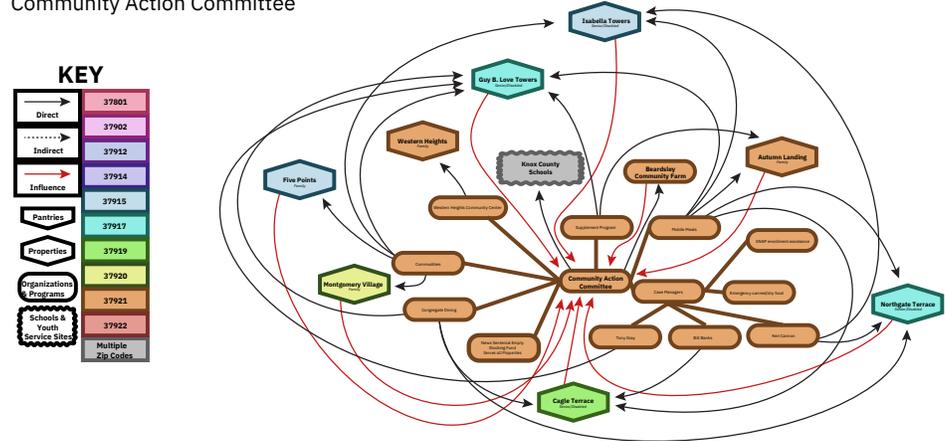


Figure 6

*Case Managers*

The four Elderly and Disabled properties shown here have Case Managers who are hired and managed by CAC. The Case Manager’s primary role is to provide support and connect residents to services, with a focus on keeping residents from being evicted. Case Managers help connect residents to services that can help them with a variety of issues, including making rent payments, substance abuse, and housekeeping. Case Managers also advocate for residents facing eviction proceedings and work with them to make a plan to stay housed. Case Managers are inordinate assets to their communities regarding food access. They help connect residents to emergency food services, coordinate distributions and programs, and help with SNAP enrollment.

### ***Food Assistance at Isabella Towers***

Keri Cannon, the Case Manager at Northgate Terrace and Isabella Towers, exemplifies how Case Managers often go above and beyond their formal job description to help residents meet their basic needs and provide food access. She has started several initiatives to help residents with food needs, including using her own time, space, and equipment to can the leftover produce from Beardsley Community Farm's produce distribution. She also started a partnership with a Food City grocery store, working with the manager to get 30 bags worth of produce donations which she packed and distributed herself. She sees potential within the local food system and wants to build more relationships with local grocers. She also sees the potential for community gardening, food preservation techniques, and community-based food assistance, like a workshare program or grocery cooperative.

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### ***Barriers to Service: Communication and Coordination***

The reliance on middlemen for communication and coordination with KCDC was a common complaint across stakeholder interviews. Stakeholders have called for an updated KCDC directory so they have more clarity on who to contact to coordinate programs. Stakeholders have also mentioned how communication is often relationship-based and people tend to only talk to who they already know. This model of communication limits cross-network collaboration and creates siloes. Additionally, stakeholders have commented that communication is almost always project or program based. KCDC and stakeholders do not have communication channels to share their holistic visions for KCDC residents.

There is also not consistent communication between Case Managers and KCDC. Case Managers and on-site organizations have a wealth of knowledge about the needs of their community, yet they do not communicate directly with KCDC. As noted previously, the reliance on middlemen for communication siloes programs and individuals who work directly with residents. KCDC is missing out on valuable information from stakeholders who have relationships with residents and interact with them daily.

Additionally, the relationship between KCDC staff at properties and Case Managers can make it difficult for Case Managers to meet resident's needs. While the case manager and property manager relationship differ at each property, there is often tension between the two roles. As one case manager put it, "*My job is to keep people here, their job is to get people evicted*".

For programs to work, there needs to be a unified investment from across the community, and this tension often makes that difficult. For example, Beardsley

Community Farm would like to transition the produce distribution to a client-choice model where residents can pick what they want for themselves instead of receiving prepacked bags. This would lessen the workload for Beardsley Community Farm, make the produce distribution program more accessible for residents, and reduce food waste. However, there has been pushback from one Property Manager due to concerns about attracting bugs and fruit flies and residents fighting over food. Ideally, the Property Manager, Case Manager, and Beardsley Community Farm could work together with residents to form a solution, but this is blocked by siloed communication.

At properties without Case Managers, the Property Manager coordinates service, which is something that is not in their job description. Because it is an informal part of their job, it is up to their discretion how much they invest in the program.

When shadowing the CAC Commodities distributions, a Commodities team member commented on how integral property managers are to the program, and participation depends on how much they perform outreach and actively try to recruit residents. There have been a few properties which used to have onsite commodities distribution but were discontinued when the commodities team didn't see active investment from the property manager. Additionally, the high turnover and transfer rate of property managers is an added challenge, as there is not consistency for program staff or residents. **Improving communication between KCDC, its partner organizations, and residents is critical to providing equitable, effective service.**

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## Recommendations

- Create a best practice guide for Property Managers on how to work with Case Managers around food-related programming.
- Distribute a regular survey to KCDC partners to keep track of which services are going into each property, the impact of services, and collect feedback on how KCDC can improve partner relations.
- Work with partners and residents to develop and maintain a holistic food service directory, including organizations, programs, and pantries.
- Create opportunities with partners for residents to provide feedback on programs and influence the development and implementation of programs and services.

## Resident Engagement

# RESIDENT ENGAGEMENT

### Resident Engagement Goals

- Identify barriers to food access in public housing communities.
- Develop community definitions and conceptions of food insecurity and food access rooted in lived experience.
- Engage residents as co-creators of solutions, and seek guidance from residents on how to work towards community food security.

Developing lasting solutions to hunger and poverty requires the leadership of people with lived experience. A core component of this project was to work towards building opportunities for residents to be co-creators of food transformation, with the recognition of their expertise on food insecurity in their public housing communities.

Resident engagement efforts were made up of three components: surveying residents as part of a county-wide community food security assessment, holding focus groups, and resident interviews.

### *Knox County Community Food Security Assessment*

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The Knox County Community Food Security Assessment (CFSA) aims to give stakeholders the data, tools, and community input to create an equitable, holistic, accessible, inclusive, affordable, empowering, sustainable, resilient, and collaborative food system. The CFSA is being facilitated by the UGWK in partnership with Three3, a research non-profit, and the Knox County Health Department. Jasmine Bryant, a member of the Three3 Core team brought expertise from her lived experience with food insecurity and working with marginalized communities in Knoxville. Additionally, the CFSA Advisory Community included members with lived experience of hunger and poverty and stipends were available to facilitate participation. Three3 and the UWGK aimed to center lived experience, equity, and diversity in the survey design, and engaged leaders with lived experience to do so. They plan to survey over 700 individuals from around Knox County, with a focus on recruiting participants from demographics at high risk of food insecurity. KCDC public housing residents were identified as a high-risk demographic.

61 surveys were conducted across 6 properties. The assessment was designed to create a holistic look at food security, asking a wide range of questions about grocery shopping, food assistance programs, mental health, and community satisfaction, as well as asking respondents for their ideas on how to improve the food system and reduce hunger in Knoxville.

10 surveys were conducted at each property, with an accidental extra survey at Western Heights, and there were a variety of participant recruitment methods used. At the 4 senior/disabled properties with CAC Case Managers, Guy B. Love Towers, Cagle Terrace, Northgate Towers, and Isabella Towers, the Case Managers were asked to recruit and schedule participants. Since Montgomery Village does not have a Case Manager, participants were recruited by hanging flyers around the property, and asking the Center at Montgomery Village to promote the survey to their clients. At Western Heights the CAC Director of Special Activities who runs the Western Heights Community Center helped recruit participants by hanging a flyer at the center and promoting it on social media. At Western Heights and Montgomery Village, participation was on a first-come first-served basis.

Additionally, the original plan was to conduct 10 surveys at Autumn Landing, however it was difficult to connect with anyone at the property, even after emailing the property manager several times and asking the KCDC Vice President of Policies & Strategic Partnerships to contact them. Because of the short timeline of this project, there was not time to continue these efforts, so unfortunately, this report does not have data from Autumn Landing.

The surveys were given in a one-on-one setting. Each survey was given to participants orally, and responses were recorded on a paper survey along with additional comments from participants. The survey took 45 minutes to an hour and a half to complete. Once surveys were completed, the data was input manually from the paper versions into SurveyMonkey.

Most surveys took place in the community room at each property, except for Montgomery Village which does not have a community space. Surveys at Montgomery Village were held outside at a central location on the property. At every property residents seemed eager to participate in the survey. Participants received a \$50 gift card of their choice to Target, Walmart, or Kroger as compensation.

There are several limitations to the survey data. Firstly, at the four senior/disabled properties, because the Case Managers recruited participants there is a selection bias towards residents who have a strong relationship with their Case Manager, or who are more well-known in their community. This leaves out the voices of more isolated residents who may experience food insecurity differently and may have less access to services. Secondly, at Western Heights and Montgomery Village, while there were some surveys which took place after 5pm, most of the surveys took place between 10am and 5pm, so individuals who work during the day were underrepresented. Further, because 40 out of 61 surveys were at senior/disabled properties, the results skew heavily towards the experiences of unemployed, retired, or disabled individuals who are 62 or older.

Finally, while the caseworkers at Isabella Towers and Cagle Terrace made conscious efforts to recruit a diverse sample of residents, including by race and gender, overall White residents make up the majority of respondents. It would have been ideal to overrepresent BIPOC residents to ensure marginalized voices had an equitable chance to be heard. LGBTQ+ residents were also underrepresented in the sample. In addition to these limitations, it is important to note the small sample size and it should be stressed that performing surveys and seeking consultation from residents should be the beginning, not the end, of community engagement and community-led food transformation.

Results Disclaimer from Three3: This data is part of a larger community food security assessment that will end up surveying more than 700 individuals. The data gathered from KCDC has not been fully analyzed by the researchers, so the information shared in this report should not be used to make generalizations about the KCDC residents or the community at large until the full data analysis is conducted.

## Results

### Demographics

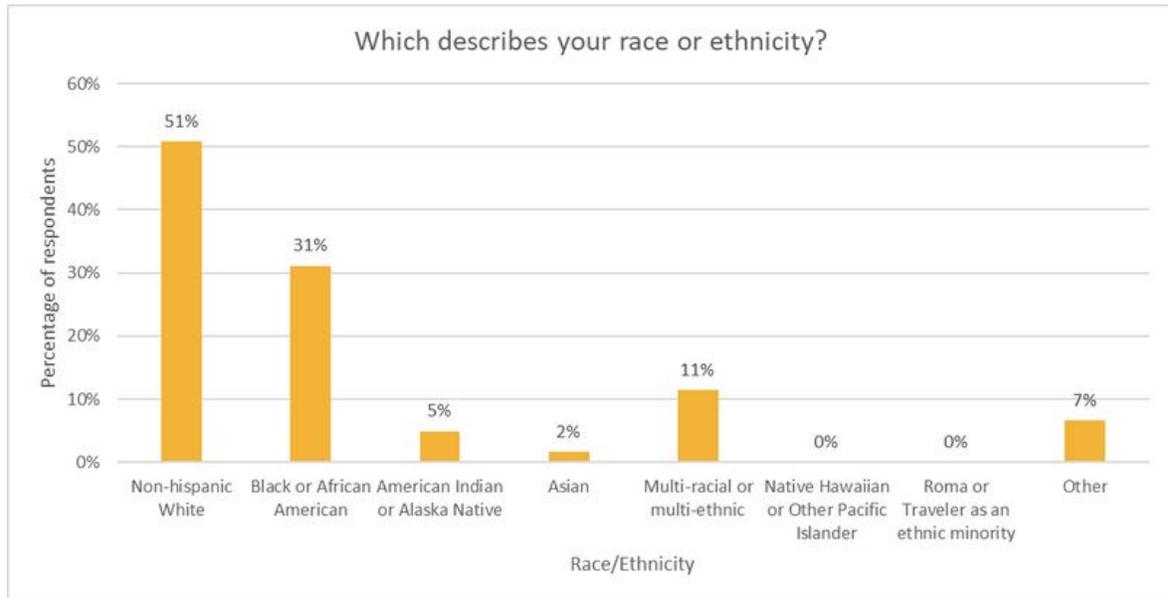


Figure 7

As noted, the majority, 51 percent, of CFSA respondents described their race as White, while 31 percent self-described as Black or African American. 11 percent of respondents self-described as multi-racial or multi-ethnic and 5 percent of self-described as American Indian, with several respondents describing themselves as Cherokee, or saying they weren't sure what exactly their racial makeup was.

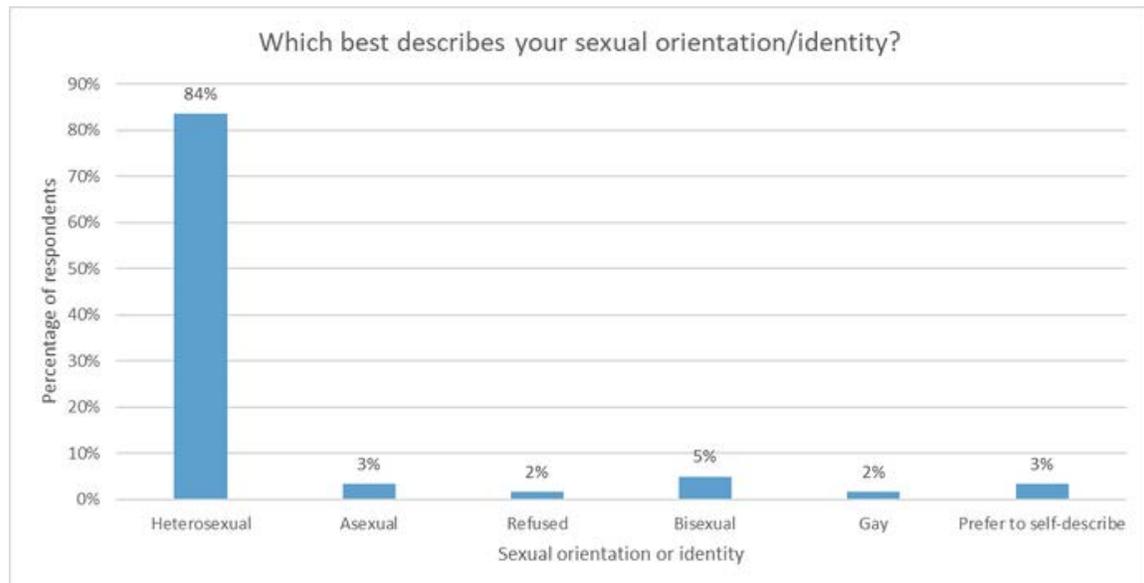


Figure 8

Most respondents self-described as heterosexual. 3 percent of respondents identified as asexual, and an additional 3 percent who chose to self-describe identified themselves as being "disinterested" or "done with all that". 5 percent

of respondents identified as bisexual, and 1 respondent identified as gay.

### *Economic Situation and Employment*



Figure 9

Most respondents relied primarily or only on Supplemental Security Income and had a monthly household income of between \$560 and \$1,124. 77 percent of CFSA respondents described their employment status as *“unemployed, not actively seeking employment”*.

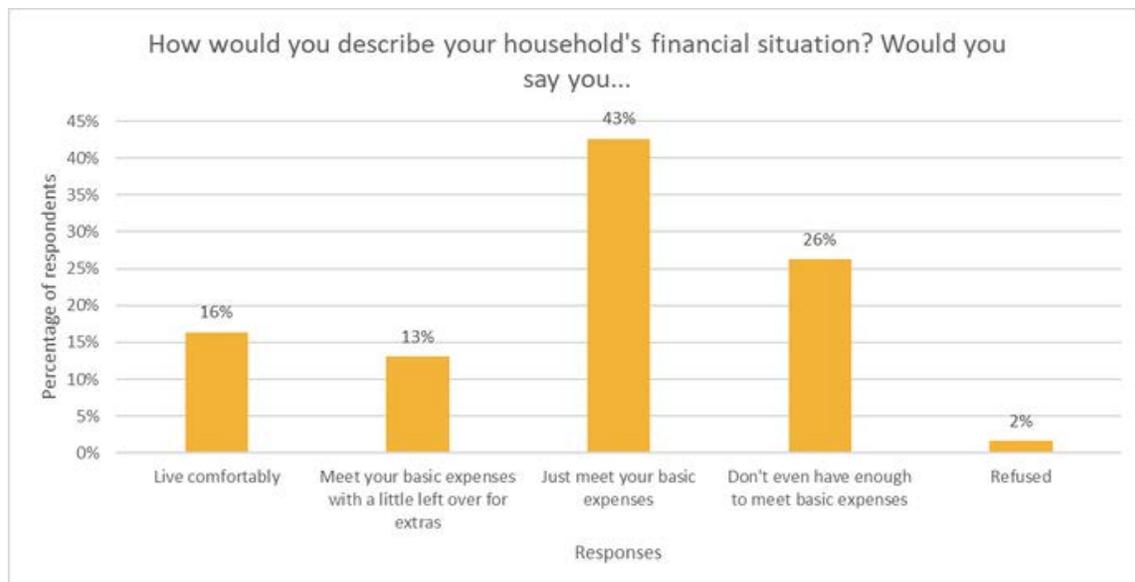


Figure 10

There were many nuances in how respondents seemed to think about their financial situation. Two respondents with the exact same income, living alone, and living at the same property can still have different perceptions of their financial situation, with one saying they live comfortably and another saying they don't even have enough to meet their basic expenses. This illustrates how income is only one part of financial stability, and other factors like social support, race, health, and more contribute as well.

Responses to questions about trade-offs between food and other essentials, like rent, also illustrated the nuanced and sometimes dissonant ways respondents thought about their finances. For instance, one respondent reported that she “*didn't buy food or bought lower-quality food in order to pay for rent and prescription medications*” every few months. However, on a subsequent question which asked, “*In the past 12 months, how difficult or easy was it for your household to meet its financial needs in terms of transportation, housing, utilities, food, childcare, clothing and other necessary expenses?*”, she responded “*easy*”. This way of thinking could be driven by a normalization of financial struggle, which could stem from generational poverty, or by a combination of other factors.

### Community Definitions of Food Insecurity

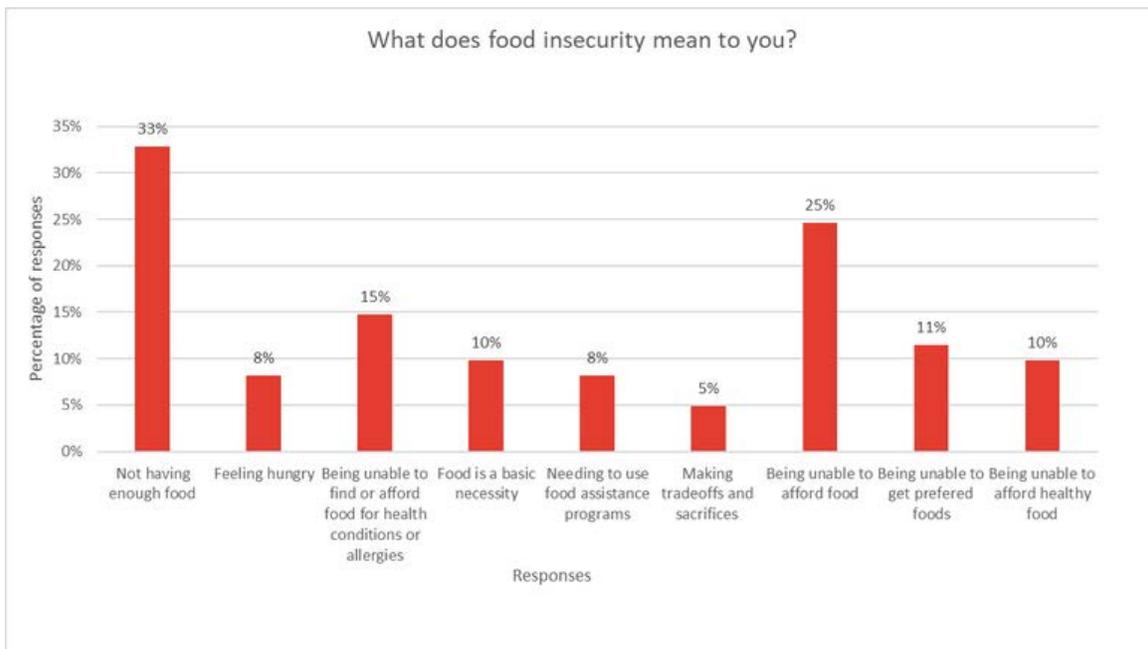


Figure 11

This question was included to develop a community-informed definition of food insecurity. The USDA definition of food insecurity does not use plain language, and is not necessarily reflective of people's actual experiences. The goal with a community-informed definition is to create shared language around food insecurity that resonates with people with lived experience of hunger and poverty.

The definitions of food insecurity tended to be very diverse, but the most common responses involved not having enough food and being unable to afford food. As one respondent concisely put it, *“The cupboard is bare and the bank account is empty”*. Several respondents referenced the inadequacy of SNAP benefits, saying *“SNAP isn’t enough”* and *“If I bought what I wanted [SNAP] would only last me two weeks”*. Many respondents also talked about rising food prices and how food was much more expensive than it used to be before the pandemic.

Another common trend was the lack of access to food for specific dietary needs or health conditions. One respondent who was a Type 2 diabetic said, *“My biggest fear is people won’t recognize that diabetics need to eat special foods [..]. It means not being taken care of as a diabetic”*. Many mentioned how the food they needed to eat for their health conditions was hard to find or unaffordable. A few respondents also noted how pantries don’t always recognize allergies and they’ve received food they can’t eat from pantries, further illustrating the need for client-choice models of food assistance.

10 percent of respondents described food insecurity in relation to the inaccessibility of healthy food, mentioning how healthy food is more expensive: *“My doctor wants me to eat right but all that food is more expensive than all the bad food”*. Several respondents stated that even though they were overweight, they often experienced hunger and considered themselves food insecure. These same respondents also shared about the stigma and discrimination they had experienced when seeking food assistance because of their weight.

*“You have to get food that's not healthy because it's cheaper. There is a problem with obesity but then there aren't any healthful options”*

--CFSA Respondent

*“Not being able to buy the food you really want even if you can feed yourself”*

--CFSA Respondent

11 percent of respondents described food insecurity as being unable to get preferred foods, saying things like *“Food insecurity means not being able to buy the foods I want to buy”*. The gap between the frequency of this response and the response, *“Not having enough food”*, illustrates a possible reason for the seemingly low proportion of respondents who self-identified as food insecure. The CFSA asked, *“Based on your own definition, do you consider yourself/your household to be food insecure?”* 51 percent of respondents would describe themselves as food insecure based on their own definition and 43 percent would not.

However, 72 percent of respondents indicated they were currently receiving SNAP benefits. This discrepancy challenged assumptions of the perception of food insecurity and poverty in public housing communities. In one survey, a respondent said, *“I can’t be food insecure because I get money from food stamps”*. There is sometimes fear that identifying as food insecure will cause the loss of benefits, including SNAP. There are many factors that contribute to people’s perceptions of food insecurity, and it is essential to recognize the diversity of thought and nuance on this issue.

*“I can’t be food insecure because I get money from food stamps”*

--CFSA Respondent

Additionally, a few respondents said they believed that food insecurity wasn’t an issue at their property because of the presence of food assistance programs.

*“Growing up we had barely enough to eat. There was enough to go around but it was the bare minimum. No one goes hungry here because we have the Second Harvest boxes, commodities, and congregate dining”*

--CFSA Respondent

Another reason why a higher than expected proportion of respondents did not self-identify as food insecure could be because many respondents viewed food insecurity relative to their own past experiences or the experiences of others. For example, several respondents referenced people experiencing homelessness in their descriptions of food insecurity or mentioned how they used to be unhoused. Others spoke about growing up and not having enough to eat, sacrificing their portions for their younger siblings, and remembering their own parents struggling to provide for them. Therefore, respondents might not view themselves as food insecure when they have more access to food now than they did in the past or more access relative to homeless communities.

Overall, the data demonstrates the nuanced ways residents tend to think about food insecurity, and how these are not monolithic communities. It also illustrates the need to create space for residents to think about what food security looks like, beyond simply having enough to eat.

## Changes to neighborhood and neighborhood perception

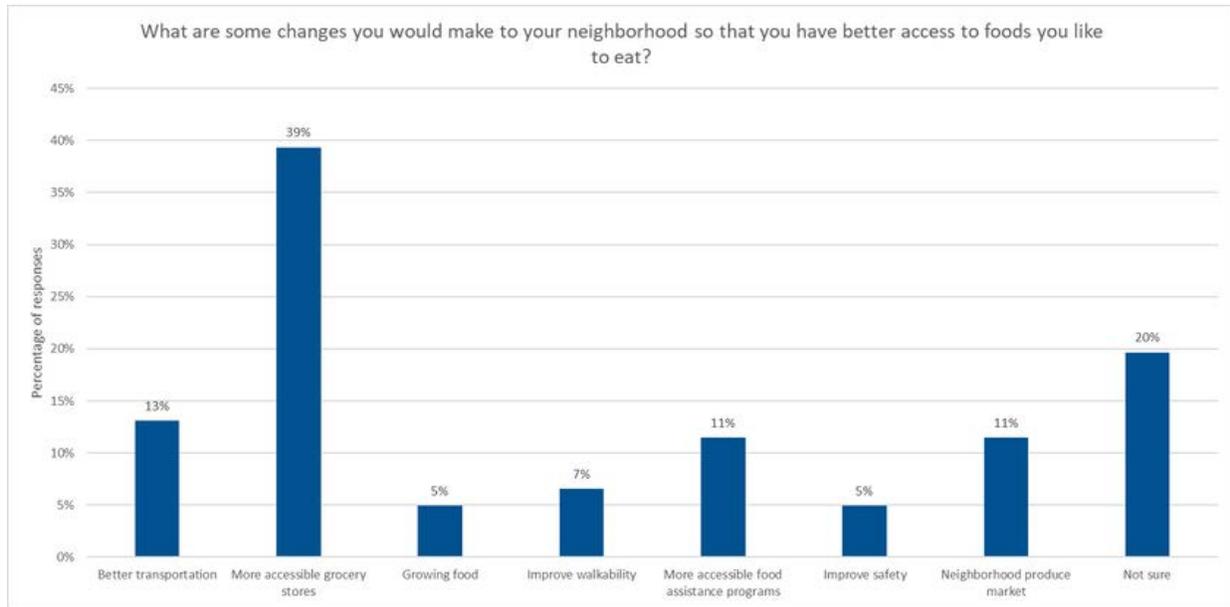


Figure 12

The most common response to this question involved more accessible grocery stores. Many respondents said they wanted a closer grocery store, or a grocery store right in the community. The simple luxury of being able to easily travel to a grocery store and pick out the items you want yourself is not available to most residents, pointing to the importance of client-choice models and the dignity that comes with being able to choose what you eat.

*“An actual grocery store within reasonable walking distance. Being able to go into the store, look around, and pick what you want isn't something we have in this community”*

--CFSa Respondent

In addition to more accessible grocery stores or produce markets, respondents also wanted more accessible food assistance programs, like a closer food pantry or delivery services from food pantries. One resident suggested a “blessing box” which, like a community fridge, community members can put food in for others. 11 percent of respondents wanted more resources to grow food, mentioning more community gardens.

It is important to note that the “*more accessible grocery stores*” response trended across all properties, even properties where there are full-service grocery stores within walking distance. At the senior/disabled properties, many residents are mobility-challenged.

For instance, during one resident's survey, the respondent was asked why she didn't use the CAC Commodities program and she said it was too difficult for her to walk down from her apartment and then carry the box back up. Accessibility is nuanced and subjective, and even if there is a grocery store within half a mile that an able-bodied person can walk to easily, this does not mean food is accessible within that community. Further, residents are often afraid to ask for help. Residents must certify that they are able to live independently on their lease, which includes being able to get food without assistance. Residents fear jeopardizing their lease if they ask for help when accessing food program.

13 percent of respondents said they wanted better transportation to the grocery store. Residents suggested things like *"A community rideshare to the grocery store"* or *"A designated bus line just for groceries that goes straight from your house to the store"*.

Further, 7 percent of respondents wanted improved walkability in their neighborhood, with many complaining about the lack of sidewalks or how sidewalks are in too poor of condition for wheelchair users. In addition to wanting better transportation to the grocery store, many respondents wanted a free or affordable grocery delivery service. This illustrates the diverse ways respondents tended to think about accessibility, with some wanting closer grocery stores, others wanting better transportation, and others wanting groceries to come directly to their doorstep.

*"More walkable, so people can get to the grocery store and back on their own without needing assistance"*

--CFSA Respondent

Several respondents commented on the lack of accessible or affordable fruits and vegetables and wanted a neighborhood produce market or farm stand. In

*"In communities like this there should be a little market with fresh fruits and vegetables where everything is super cheap or there's a sliding scale"*

--CFSA Respondent

responses across every category, there was an emphasis on community responsibility and a desire for more community driven resources, like *"More community driven stores that are about feeding the community"* or *"More food resources that come from and go to the community"*. Place-based resources that are a part of the communities they are serving are more trusted by community members, and this trust improves accessibility

## Food Assistance Programs

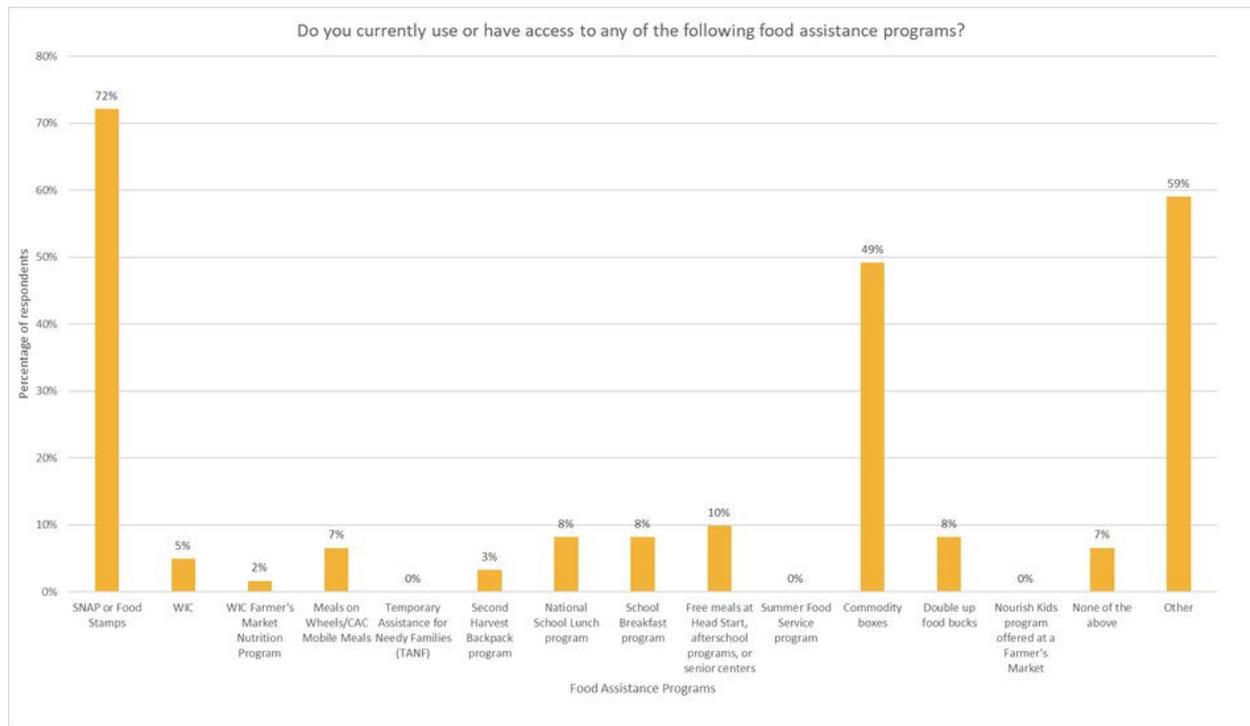


Figure 13

As previously noted, most respondents indicated they were currently enrolled in SNAP. When respondents who were not enrolled in SNAP were asked why, some said they were ineligible, while others said there were barriers preventing them from completing an application, and others said they had applied but the amount they would receive was too insignificant to be worth it.

The underutilization of Double Up Food Bucks (DUFEB) was a notable issue across all properties. DUFEB is a program available in 25 states where SNAP recipients can receive money to buy fruits and vegetables. In Knoxville, Nourish Knoxville administers DUFEB at their farmer's markets. SNAP recipients can get up to \$20 to spend on fruits and vegetables, receiving \$1 for every dollar they spend. Even though 72 percent of respondents presumably qualify for the program, only 8 percent of respondents reported ever using the program. Throughout all the surveys conducted, very few respondents even knew the program existed.



Double Up Food Bucks advertisement, Credit: Nourish Knoxville

However, there was a great deal of enthusiasm about the program after explaining how it worked, and many respondents said they would like to try to use it in the future. Given how many reported that the cost of produce or healthy food is their main barrier to eating enough fruits and vegetables, increasing participation in Double Up Food Bucks would be incredibly valuable.

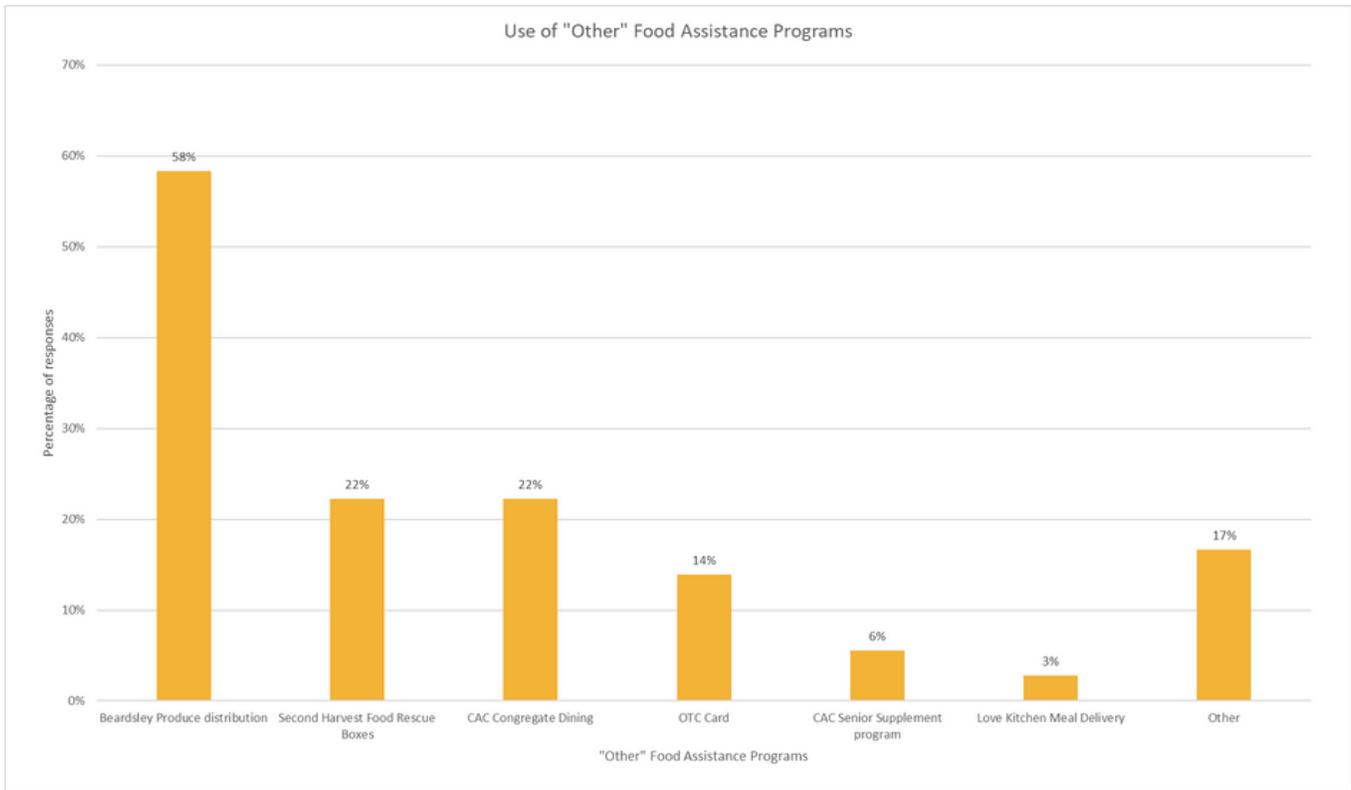


Figure 14

59 percent of respondents said they used an “Other” food assistance program. Out of these responses, 14 percent said they received an OTC card from their healthcare provider, which ranged in amount from about \$30 to \$60 per month. 17 percent of respondents said they used a food assistance program aside from the more common “Other” programs listed, and these responses included things like getting help with food needs from their church, getting occasional food from their caseworkers, or using smaller food assistance programs.

After disaggregating the data within the “Beardsley Produce Distribution” responses by properties participating in the program, 70 percent of respondents reported using the program.

From my experience talking to residents and shadowing the produce distribution at Cagle Terrace, it seems like most residents use the program sporadically, but there is good awareness of the program, and most respondents had a positive perception of it. At Love Towers, several respondents commented that the program was not meeting the demand among the residents, and that signing up

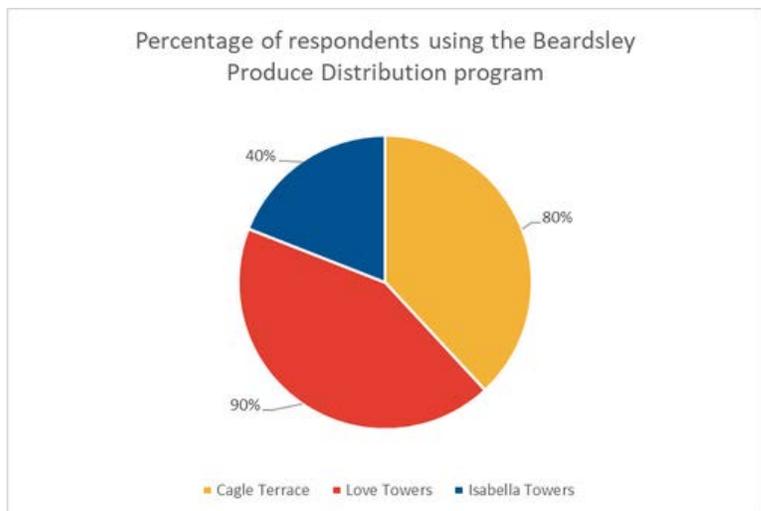


Figure 15

was competitive.

It is unclear why the participation rate differs between Isabella Towers and the other two properties. While all the case managers have done a great job at promoting the program, Keri Cannon at Isabella Towers said she not only hangs sign-up sheets on every floor but also has resident ambassadors on each floor go door-to-door to enroll people for the program. Further, Isabella Towers is the only property that uses a client-choice model for the produce distribution: instead of receiving pre-packed bags, boxes of produce are set up in the community room, and residents come down and pick out what they want while Keri acts as a facilitator. According to anecdotal stories, Isabella Towers has had issues in the past with residents fighting over food, which could contribute to a lower participation rate if residents are worried about violence. One respondent from Isabella commented that she doesn't get produce from Beardsley because she feels that other residents need it more. This was a recurring theme across all the surveys: many respondents did not use certain assistance programs because they thought their need was lower than others. However, the lower rate could be due to a sampling error as well.

The utilization of the CAC Congregate Dining program was similar across all three properties where it is offered, which are Love Towers, Cagle Terrace, and Northgate Terrace, with an average of 33 percent of residents indicating they use the program.

During surveys and focus groups, several participants mentioned that the ordering process is a barrier to participation as they found it inconvenient to have to order their meal the day before.



Residents at Love Towers during Second Harvest emergency food distribution, Credit: Bill Banks

Ordering one day in advance costs time and energy for people who may have unpredictable schedules, have a hard time leaving their apartments, or don't have the mental energy to plan for the future.

80 percent of respondents from Love Towers, the only property receiving service from SHFBET, said they received boxes from the Second Harvest Food Rescue program, which delivers prepacked boxes of dry and canned goods twice a month. There were positive perceptions of this program overall, although some criticized the lack of variety and fresh foods. Several respondents at Cagle Terrace, as well as focus group participants there, said how much they missed the Second Harvest Food Rescue program and that it used to be something they relied on.

One respondent at Cagle Terrace said the program was the main way she got produce, and she would be *“thrilled to death if that came back”*. Cagle Terrace stopped donations when the Covid-19 pandemic began and based on feedback from residents and the case manager there, this decision was made unilaterally by the property manager without community support.

Overall, 49 percent of respondents reported having used the CAC Commodities program. When this data is disaggregated by properties with onsite distributions, the participation rate increases significantly, with 90 percent of Love Towers respondents and 80 percent of Cagle Terrace respondents saying they used the program. This demonstrates the importance of onsite services which meet residents where they are.

### *Improvements to the Knoxville Food System and Reducing Hunger in Knoxville*

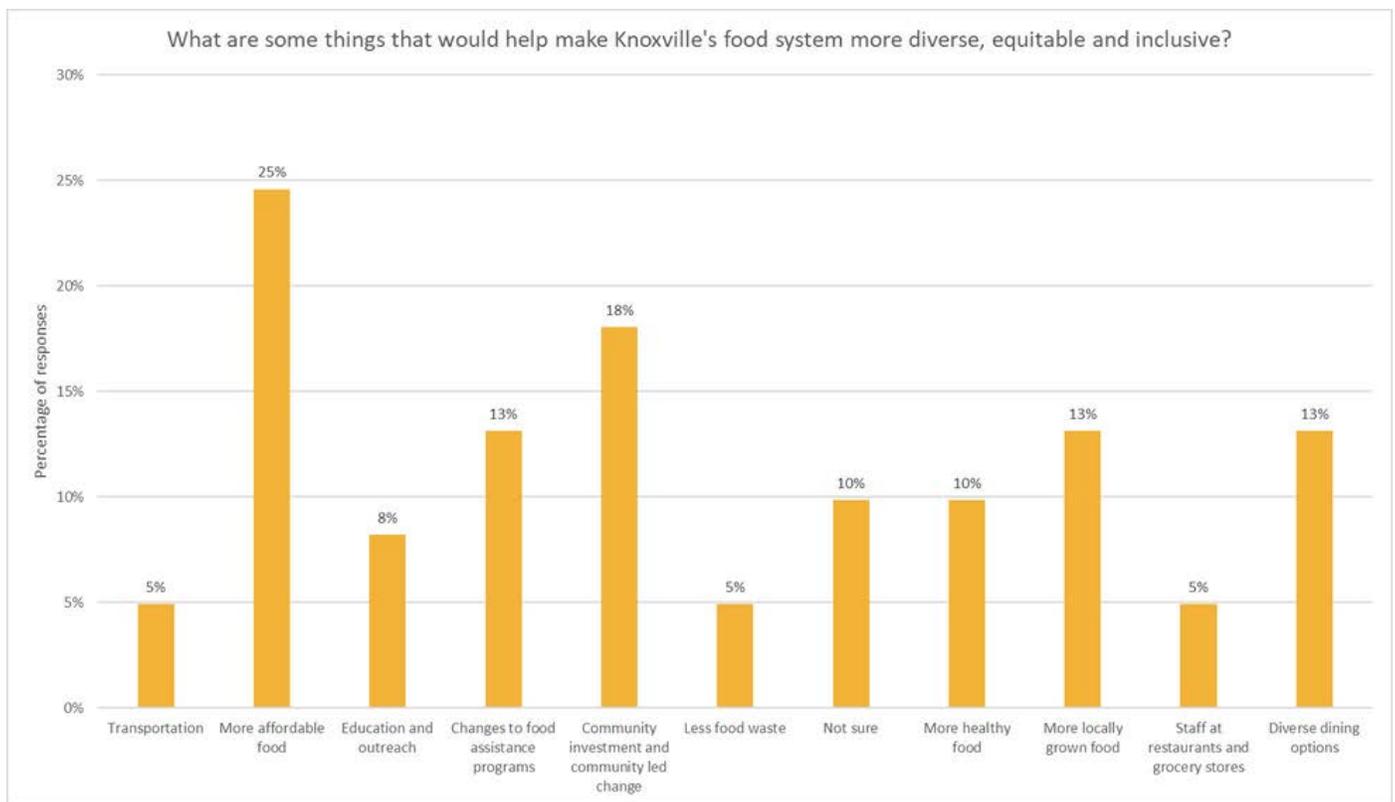


Figure 16

The most common response to the question, *“What are some things that would help make Knoxville’s food system more diverse, equitable, and inclusive?”*, was a desire for more affordable food. Many respondents said things like, *“Cheaper food”* and *“More affordable grocery stores”*. This follows with the respondent’s definitions of food insecurity as lowering food cost is seen as a solution to not having enough food and being unable to afford food. Additionally, 13 percent of respondents wanted more healthy food options, especially affordable healthy food.

13 percent of respondents suggested changes to food assistance programs, with most responses focusing on food pantries. A general theme was that food pantries could not meet demand:

*"We need to open up more food pantries because they can only hold so much."*

13 percent of respondents wanted more locally grown food. Many suggested more community gardens, and one resident wanted to see the old, empty buildings in Knoxville be renovated into food pantries with *"healthy food and food coming out of gardens."*

*"Pantries should be able to refer you to other places you can go when they run out"*

--CFSA Respondent

Many respondents wanted changes that involved community transformation, and community leadership. This included responses like, *"Have people who are willing to help in the community"* and

*"Knowing the community so you can do work based on what you know. You can't work for the community if you don't know them"*

--CFSA Respondent

*"Having more food grown in the community, for the community"*. Like the responses to the question, *"What changes do you want to see in your neighborhood [...]"*, the residents demonstrate a desire for community investment and programs that understand and work **with** rather than **for** the communities they serve

Over half of respondents proposed changes to food assistance programs when asked, *"What do you think are the best ways to reduce hunger in Knoxville"* (Fig. 17). The responses tended to focus on food pantries or SNAP benefits. Several respondents

commented on the inadequacy of SNAP benefits and said they wanted an increase in benefits.

One respondent spoke from her experience enrolling in SNAP, saying the staff at the office *"seem like they don't care"*. She said they should look more holistically at families because they *"turn people down for no reason"*. The responses with suggestions about food pantries included suggestions to increase the number of food pantries, increase the amount of food given out at pantries, have healthier, higher-quality options at pantries, and to change the distribution system so *"people aren't waiting in long lines"*.

*"You have to go to where the food is, find a way to get there, and stand in long lines in the cold where you don't know if they're gonna run out before you get to the front. We need to bring the resources to where people are"*

--CFSA Respondent

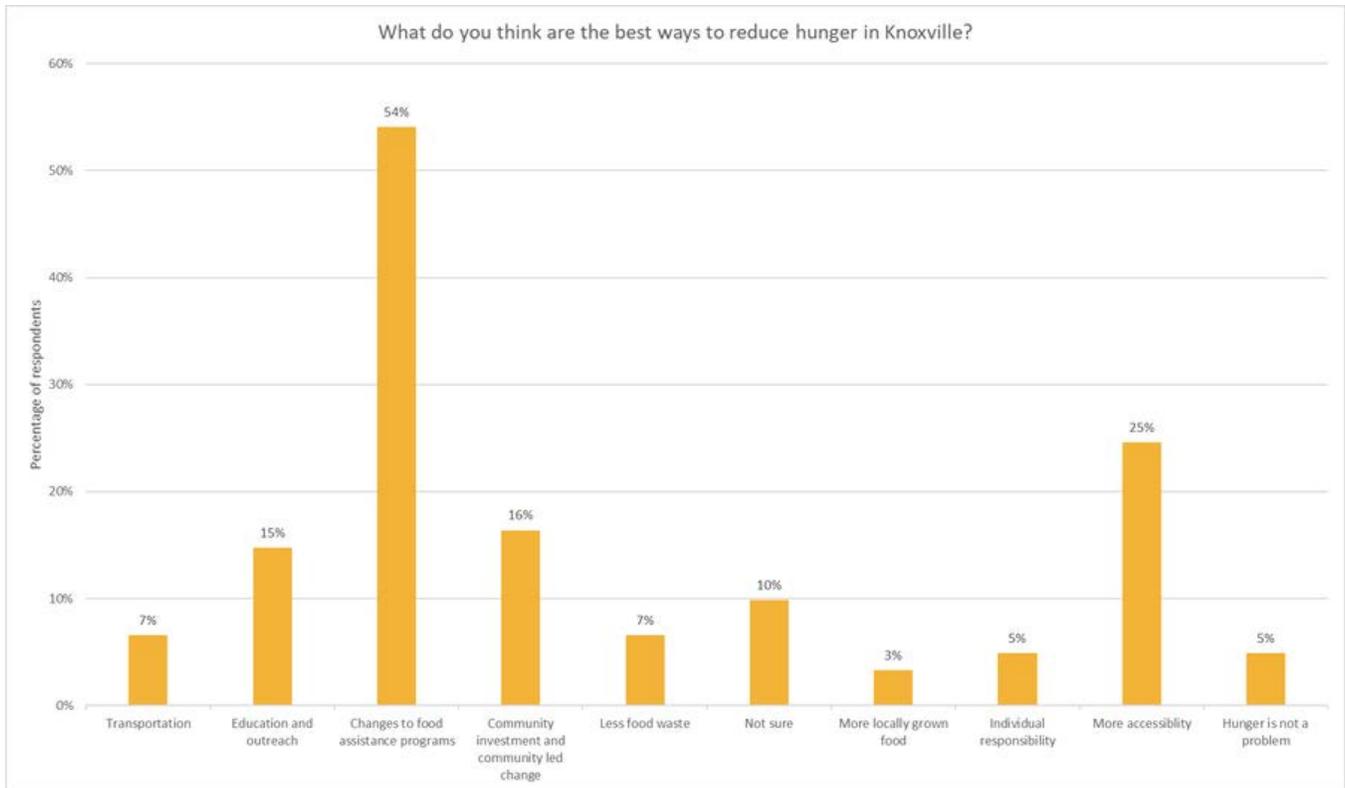


Figure 17

25 percent of respondents had suggestions related to increasing the accessibility of food. These responses included more grocery stores, and more grocery delivery options: *“Make food accessible for everybody. In West Knoxville there's a grocery store on every corner and there's not a single one around here”*. In addition, 7 percent of respondents requested better transportation options to both grocery stores and food pantries.

16 percent of responses were centered on community investment and community-led change, including suggestions to have *“More neighbors and community members giving out food.”* These responses, in addition to responses to questions about community definitions of wealth and the high proportion of respondents saying they often help others with food needs, indicate that there is an interest among residents in mutual aid models of food assistance.

5 percent of respondents had suggestions that laid responsibility on the individual rather than the food system. Some of these were positive, like *“Teach people how to budget and to grocery shop for the best prices.”* There was an emphasis on budgeting, using coupons, and learning to stretch your money throughout all my interactions with residents. Many residents took pride in how well they could budget or find the best prices for food. One respondent also commented that budgeting classes would be more effective if they were led by fellow residents or community members. Community-led classes on budgeting, cooking, and grocery shopping would be a good opportunity for residents to share knowledge with and empower one another, as well as build community.

A few of these responses, however, treated poverty as an individual failing, with one respondent saying the best way to end hunger was *“For people to go to work and stop laying around waiting for a handout.”*

Similarly, 5 percent of respondents said they believed hunger was not a problem in Knoxville because *“there’s always a lot of places like churches and pantries giving out food.”* This speaks to the need for education and outreach to

*“People need to stop being lazy and go find food”*

--CFSA Respondent

destigmatize food insecurity, even for those who may be experiencing food insecurity themselves. Stigma and shame are barriers to accessing food assistance programs, and create conditions where individuals are blamed or blame themselves for their economic situation. More education and awareness of the root causes of food insecurity are necessary to destigmatize and enable residents to lead food transformation in their communities.

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### *Resident Interviews*

Two resident interviews were conducted to provide deeper insight into the lived experience of KCDC residents. The interviews lasted approximately one hour and each resident was compensated for their time with a \$50 Walmart gift card.

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### *Focus Groups*

Two focus groups were held to investigate further community perceptions of food insecurity and to engage residents as co-creators of solutions. One focus group was held at Love Towers and one was held at Cagle Terrace. While the aim was to include a focus group at a family property this was not possible due to time constraints and difficulties coordinating without a Case Manager.

The Case Manager at each property facilitated participant recruitment. They were asked to sign-up eight to twelve people, and to aim to have racial and gender diversity to the extent possible. The focus groups were held at the property in the community room at Love Towers and in the Case Manager’s office at Cagle Terrace. The Cagle Terrace group included 8 participants and the Love Towers group included 9 participants. Each group lasted about one hour and participants received a \$25 Walmart gift card as compensation for their time and effort.

Questions for the focus group were developed using the UWGK CFSA and the USDA Community Food Security Assessment Toolkit. One goal for the focus groups was to ask questions specific to KCDC residents, as the UWGK CFSA was a broad look at food access.

Several themes emerged from both focus groups, including: barriers to food security and food access, perceptions of food assistance programs, and social support networks.

## Barriers to Food Security

The affordability of food emerged as a primary barrier to food security for participants in both groups. Participants felt the cost of food was very high compared to before the pandemic. There were also concerns about the affordability and availability of food for diabetics. As stated, *"They also should think about more sugar free foods for people who are diabetics. Because when you're diabetic, you can't find things easily that are sugar free."*

Transportation was uplifted in both focus groups as one barrier to food security. The lack of adequate public transportation or affordable transportation services that take you directly to grocery stores, and the poor walkability of Knoxville were brought up by participants in both groups.

One participant shared, *"Its hard for me.*

*I have to ride the bus. I have to ride the bus to get where I got to go. And its hard to try to carry the cart and groceries on the bus."*

*"And then when you go to some of these pantries, they got all this stuff but it's all sugary, all packaged, cookies and I can't eat that"*

--Love Towers participant

Cagle Terrace is half a mile away from a Kroger supermarket and one participant in the Cagle Terrace focus group noted how this proximity enabled them to have better food access, saying, *"For me, I'm right here, right around the corner I can walk to Kroger and walk back. So I think its perfect for me."*

Other participants pointed out that although Kroger was close by, the lack of transportation limited their options and their ability to shop for the best prices. One participant noted, *"I mean if you're trying to go to two or three stores to save money and you don't have a ride, then you can't really do it. You can't bring a lot of stuff back on the bus because they don't let you."*

This echoed a conversation with a resident at Montgomery Village, who explained the reality of grocery store access and the way limited access limits choice and autonomy:

*"It doesn't seem like it, but the mile from here to Kroger's is a long mile. [...] like you can go every day and sit by the bus stop at Kroger and see people with you know, 20 bags of groceries on their arm just trying to get on the bus to come back here. [...] Even if you push the shopping cart [...] it's a sh\*\*ty walk [...] that hilly hill, it sucks. And then if you want to go just around the corner to Green Grocery, [...] the same box of cereal that you would get at Kroger's for five bucks is \$8. So, you're limited in what you're going to do if you don't have the resources to do it"*

--Montgomery Village resident

This lack of options is a defining characteristic of food insecurity for many, where a lack of resources forces one to go to the closest store, or the cheapest store, or the store right on the bus line.

Another major barrier emphasized by focus group participants was the inadequacy, of government benefits. Like the CFSA respondents, participants talked about the insufficiency of SNAP benefits, saying, *“And then they go in and reduce the amount of food stamps you've got. [...] What are you gonna buy for \$23 a month? Milk, bread and eggs for one week. It's totally unfair. Especially with the prices.”*

*“The government gives you a raise, a cost of living raise. But if you live in government housing, they turn right around and take half of it back. So you really didn't get a \$50 dollar raise you got a \$25 maybe. If you don't live in government housing you get to keep all of it but if you do, they'll go up on the rent.”*

--Cagle Terrace participant

Participants also talked about a negative feedback loop of benefits, noting how when government benefits like SNAP or SSI are raised, it seems like KCDC raises their rent as well.



Residents at Love Towers, Credit: Bill Banks

### *Perceptions of Food Assistance Programs*

The perceptions of food assistance programs differed between the two focus groups. The participants at Cagle Terrace had more positive perceptions of food assistance programs. One participant explained that food assistance programs provided food they used to supplement the food they could purchase on their own. As stated, *“Yeah that [Beardsley Produce Distribution] and commodities have helped because its stuff you don't have to go buy, or you can buy stuff around it to go with rather than have to buy stuff and then still buy that. And that's for those of us who use it. I don't know how some of them don't use it but that's they're choice.”*

Additionally, the Cagle Terrace group talked about the discontinuation of the SHFBET Food Rescue program. One participant said, *“Second Harvest I think is really one of the biggest things that we lost. There was some good products there, they had some cheese and stuff like that at times.”*

Participants pointed to the difficulties coordinating food assistance programs and noted that there needed to be investment from property staff to keep these programs going. As stated, *“You have to have people to help you do the Second Harvest stuff cuz we had people that didn't even want to deal with it.”* In

response to this, several participants commented that they would be willing to volunteer to help coordinate programs and keep them *“active and functioning.”*

There were also positive comments made about the CAC Mobile Meals and Congregate Dining programs, with participants noting that they used these as supplementary options.

*“Of course I volunteer myself too, to actually keep it active and functioning for those who are going to want access to it. That way, there's a few people who would be here who people would know to go to talk to”*

--Cagle Terrace participant

In the focus group at Love Towers, perceptions of food assistance programs tended to be more negative, with participants commenting on the lack of variety and the lack of fresh foods, saying, *“They all suck. In plain language. Half the time it's like you don't even want to get it but you got to get it so you have something to eat.”*

*“I mean, the produce is fine, but it seems like its the same thing. It seems like it's the same thing with produce. So that's why I stopped getting it. You know, sometimes you might get a cabbage sometimes you might, you know, mostly squash. One time I got I got three leaves, three leaves of greens, whatever kind it was, collards, or whatever, it was just three leaves. I mean what's three leaves gonna do for me?”*

--Love Towers participant

These differing perspectives illustrate how food needs might differ between communities, even when those communities have similar indicators of food insecurity. It is essential for providers to work with clients to identify diverse needs and perspectives and develop solutions with clients accordingly.

## Social Support Networks

In both focus groups, participants discussed how social support networks and mutual aid within their community helped them with their food needs. Sharing food with neighbors was prominent, as well as accessing food assistance programs with the sole intention of giving food to others. One participant shared, *"You know people here has done so much for each other and just sharing with each other when somebody needs something, somebody you know will have something you need, and just helping each other here has been so much. So many times I've just cleaned up my cabinet because people come to me hungry. And I think that people helping each other is a big thing that people has a way of getting something they don't have."*

Informal food assistance through mutual aid was seen as a tremendous asset in these groups and several participants began crying when they recounted times they had received help from their neighbors or friends.

In the focus group at Love Towers, the discussion around social support networks was located in the past with participants remembering times when there was an abundance of food. One participant shared,

*"When I was growing up, you know, everybody was always really helping you know, the church would always give commodities to us and they would give us a dinner, food and that's how we made it until we could get back on our feet or daddy could get a better job."*

*And of course when my mama had garden up in the country we would have a overflow of food you know, we just went to the market square and just gave it free. Back then that's what they did."*

--Love Towers participant

Other participants built on this, remembering local produce stands or *"people who used to go around with bags of greens."* When asked why they thought the food system had changed from this model, participants pointed to a lack of farmers and land access to grow food, but several said they weren't sure how or why things had changed.

Overall, social support networks were indicated as a great asset within these communities. Resident's relationships with their neighbors, their families and friends help them meet their food needs. As demonstrated in the CFSA responses and the focus groups, there is a desire among residents for more community-based food assistance programs where aid is produced by residents, for residents.

## Remembering Local Food Systems with Cheryl

Remembering the way food systems used to be is an important step in producing food systems transformation. Solving the issues of the present requires understanding the past. However, throughout many of my interactions with residents, there was difficulty recalling the way food was grown, distributed and eaten in the past, and most residents could not remember a time when they had good access to the foods they liked.



Cheryl at Love Towers

Cheryl is one resident who does remember a different food system. During the focus group at Love Towers, Cheryl spoke about her memories of her family's garden in the country and the abundance of food they had during that time. I wanted to hear more about her experience with local food while growing up in Knoxville, so a few days after the focus group we sat down and talked for about an hour.

Cheryl had a peaceful, kind demeanor and a passion for education. She had worked as a teacher's aide with students with disabilities, and she had loved doing this work. She saw the impact education could have by building student's

confidence and said her favorite part of that job was when her students would learn new skills *"because when they had a breakthrough for the education, they were like, 'Yeah Miss Cheryl I can work the computer' or 'Yeah Miss Cheryl I can do my subtraction and addition', 'Oh Miss Cheryl I didn't think I was gonna do it', [...] and to see them grow was just amazing"*.

She also worked in Food Service for the Knox County School District, and enjoyed cooking for the kids, saying, *"whatever the kids like, that's what I enjoyed cooking"*. Her father was a pastor and a teacher, and she grew up hoping to be a teacher like him. She still thinks about going back to school: *"I love school. I'm crazy about school. So I want to go to school, just to have something to do that makes me feel good about myself"*. She excelled in Home Economics when she was in high school, and she said she would love to teach Home Economics and help students learn practical skills.

Cheryl was born in East Knoxville, and her great grandmother owned a farm on Hightop Road. *"What was it like growing up on the farm?"* I asked her.

*She described a thriving community, saying, "Oh it was fun. [...] Everybody knew each other, all the neighbors' shared food. Some of them had cattle, like the man that lives like a mile down the road. He had cattle and horses and all that kind of stuff. [It was] just a close net of friends you know, we really called them family and mainly my grandmother took care of everybody on the farm. She was the only one who had a farm up there. So, we all took care of everybody and then if there wasn't enough food there, [...] we all gave them vegetables and fruit and then what we had leftover my grandma took it to the city and just gave it away."*

I asked her what some of her favorite things her grandma had cooked were, and she recalled the various cakes and pies her grandma used to bake. Her great-grandmother had been an amazing cook and also knew how to can food she said, *"she did everything. She didn't waste nothing on the farm. My mom said, 'I don't know how she did it, but she knew how to do all that.' My momma said she used to say, 'Child we can use, get, make, this and give this to kids in the city.' She said she knew a lot of stuff."*

She continued, describing what Market Square had been like when her mom was growing up, depicting it as a space where everyone would bring food and give everything away for free: *"They didn't sell anything. Sweet potatoes, green beans, shelling beans, all kinds of stuff. Everything was free."* Cheryl left Knoxville with her family when she was young and lived around the South-East throughout her childhood and teenage years. When she returned to Knoxville it had changed a lot over the years. She recalled going back to the Market Square farmers market and seeing people selling vegetables instead of giving them away for free. She chuckled and said, *"So that was a rude awakening coming back from Louisville. I was like 'Mama, its not like that!' She said, 'Child no, they've changed.'"*



Market Square in 1960, Credit: Knoxville History Project

Family farms have been decreasing in number in the United States since the 1970's.<sup>10</sup> There are many barriers to passing down family farms from one generation to the next, including the rising cost of farming infrastructure and increasing urbanization. Cheryl's family lost their farm sometime in the 1980's after they couldn't afford the property taxes. She described losing the farm sadly, saying, *"We went 'Oh no our farm, granny's farm.' We all was upset about that. That's where we grew up."*

I asked Cheryl how she saw hunger show up in her community now, and she commented on the lack of fresh fruit and the lack of variety and choices for the residents at Love Towers. She also noted that there are a lot of residents with health issues or disabilities, and said she saw a need for healthy food for dietary health conditions. She had battled colon cancer a few years prior which limited her dietary choices, and she is grateful that she's been able to afford a caregiver who can prepare special meals for her.

Cheryl said she wants future generations to have education and easily accessible nutritious food. She also sees gardening as a way to transform the current food system and make it look more like the food system she remembered growing up on the farm.

*"Do you think there's a way that we could get back to the time in the 60s when there was so much and everyone was sharing with each other?"* I asked her.

She replied, *"You know how they say it goes around in a circle? I'm waiting for that day."*

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# BARRIERS TO COMMUNITY-LED FOOD TRANSFORMATION

Throughout this project, various barriers to community-led food transformation emerged. Efforts to seek the leadership of those with lived experience of hunger and poverty cannot take place without first addressing how systemic oppression creates barriers to their participation.

Within the focus groups, participants seemed somewhat reticent when asked about how to improve Knoxville's food system and how to best work towards community food security. Additionally, across the open-ended questions in the CFSA, 10 to 20 percent of respondents said they weren't sure or didn't know. When respondents didn't answer a question initially, additional prompts were provided sometimes giving examples or bringing up ideas' participants had shared earlier in their surveys. Still, even after additional prompting some respondents chose not to answer. There seemed to be hesitance towards criticizing food assistance programs and KCDC, which in part is due to fear over losing access to services.

Moreover, this hesitance is likely due to a lack of trust between residents and organizations like the UWGK, and the power dynamic between residents and organizations. Surveys and focus groups can be ineffective at engaging residents as true collaborators of innovations because

there is not investment in building relationships with residents. In the CFSA and focus groups, participants were asked to share sensitive personal experiences and their hopes, dreams, and ideas for improvements with someone who is an outsider to their community, and is someone they don't know or trust. It is unreasonable to expect residents to speak candidly under these conditions.

Furthermore, residents have been victims of tremendous trauma and harm directly caused by KCDC. The fundamental dynamic between residents and KCDC is that of a tenant and a landlord. Residents have experiences of being treated poorly or being discriminated against by KCDC staff, being harassed by property managers, and being threatened with eviction. They also have experiences of broken promises from KCDC and therefore do not trust that KCDC wants to make positive changes. KCDC and their partner organizations must first acknowledge this harm, and work to implement policies and practices that give residents true influence and power to balance the tenant-landlord dynamic.

In addition to barriers caused by organizational policies and practices, there are also internal barriers within public housing communities caused by systemic oppression. There is a lack of space given to residents to think about and share solutions to food insecurity. There is a need for a space where residents can converse with each other, educate each other, and empower each other to make change in their communities. There is a need for an avenue for residents to **collaborate** with organizations that aim to serve them.

The leadership of those with lived and living experience of hunger and poverty is invaluable. People who know their communities are best equipped to serve them and create trust and respect between providers and clients. However, there are systemic barriers to community-led food transformation, and it is necessary to work with residents to build capacity and overcome these barriers.

Throughout this research project and throughout conversations with residents and people with lived experience of hunger and poverty, the mindset of generational poverty and chronic mental illness emerged as major barriers to community-led food transformation.

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#### *Mindset of Generational Poverty*

The mindset of generational poverty creates conditions where residents are disillusioned, tired, and don't have the capacity to think of solutions. Many public housing communities have become intergenerational, and poverty as a mindset has become entrenched.<sup>11</sup> As a Case Manager stated,

“When people have been marginalized, ignored, and discriminated against their whole lives, they develop a sense of apathy because they don't think anyone cares about them”

--CAC Case Manager

This apathy cropped up throughout the CFSA and focus groups, with residents viewing systems change as unrealistic. There was a pervasive belief among residents that nothing would ever change for them. When speaking to a survey respondent at Western Heights about the proposed redevelopments to the property, she said, *"They say things are gonna change with this new project, but I don't know. This is the projects. Things don't change around here"*, demonstrating the lack of trust residents have in KCDC and other organizations to follow through with proposed improvements.

It follows that when residents disbelieve in the potential for positive change, they will be reticent about sharing their ideas for solutions. During one focus group, following an explanation of community food security and creating a food system where everyone has an equal voice, a participant said, *"What's the point in having a voice when no one in the government does anything about it?"*

**"Nothing can  
really be done"**  
--CFSA Respondent

This illustrates the feeling of resignation that comes with being disempowered by oppressive systems. Changing the mindset of generational poverty will require long-term efforts to build trust with residents, give them positions of real influence and power, and allow them to see tangible results of improvement efforts.

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### *Mental Illness*

Mental illness is a prevalent issue in public housing communities. All three Case Managers I talked to said that untreated mental illness was one of the biggest problems in their community. Further, the median response to the CFSA question, "For how many days during the past 30 days was your mental health not good?" was 14 days, indicating a high level of mental health issues among residents.

Mental illness can be economically catastrophic, as it can debilitate people from working.<sup>12</sup> Additionally, it can be very difficult to be approved for and maintain SSI payments for a psychiatric disability. Psychiatric disabilities tend to get dismissed more often than physical disabilities.

**"It sucks that people  
don't understand the  
illnesses that they can't  
see"**  
--Cagle Terrace participant

Food insecurity and mental illness act in a positive feedback loop as each increases the risk and effects of the other.<sup>13</sup> People with mental illness are less likely to seek food assistance, and also are often socially isolated so they have less access to a social support network.

In focus groups residents brought up struggles with mental illness and how it impacts their daily lives. One participant shared how she struggled to ride the bus to get groceries, saying, *"I'm not a big crowd people, you know. [...] The bus is a big ordeal for me because of the OCD and my sickness. [...] I encounter too many people. Yeah, so the bus is really hard for me even though it is convenient. And if I take it somebody has to go with me and it's a short trip to and fro"*.

Several of the other participants shared her sentiments about the difficulty of being around too many people. Many participants talked about their tendency to socially isolate because of anxiety, illustrating how mental illness can weaken social support networks.

*"I do okay, as long as I'm not around people too much"*

--Cagle Terrace participant

Another participant shared about the emotional effects of food insecurity, explaining the guilt she felt when she chose to buy her preferred foods: *"I look at it like if I go to the grocery store and get a bottle of olives, because I really like olives. And I think well, there's really no necessity. It's more of a pleasure food for me. And I think well you know, I deserve this. Right, I say it's a treat, it's a treat for me, you know, I'm gonna spend \$5 to \$6 on a small bottle jar of olives and eat every one of them and love it and then think wow, I could have done better with that money"*.

Food insecurity takes not just a physical toll but an emotional toll as well. Food insecurity, mental illness, and poverty perpetuate and exacerbate each other and a deeper understanding of the interconnectivity of these issues is needed. There is a great need for robust mental healthcare in Knoxville's public housing, including increased access to clinical services, counseling, increased efforts to foster sociality, and trauma-informed training for property staff.

### *Mental Health, Food, and Solutions with Jeff*

I met Jeff while I was doing CFSA surveys at Montgomery Village. Chatting with him while giving the survey, I was immediately struck by his insight into the food system in Knoxville and his unique perspective as a White, able-bodied man facing poverty and food insecurity. He had an awareness of his own privilege, which he said was because of his upbringing in a predominantly Black, low-income neighborhood in Memphis. As I asked him questions about food access, he would often note that even though he didn't experience discrimination at food pantries, or have fears over walking alone to the grocery store, these were issues facing marginalized people in his community.

Aside from this unique perspective, he and I shared a love for food and cooking. He told me he had worked in restaurants since he was in his 20's, from fine dining to fast food. I asked him what he liked to cook and he shared his *lengua* recipe with me explaining how he buys the cow tongue whole, marinates it and slow cooks it.



Jeff at Montgomery Village

I returned to Montgomery Village a few weeks later to have a more in-depth conversation with him about food, his life, and his experience living in public housing. We met at the Center at Montgomery Village, an onsite organization offering supportive services, and talked for over an hour. Jeff was full of stories from his tumultuous childhood and rebellious college years, telling me about having his first beer at only 8 years old, and pursuing music while waiting tables and bartending.

When I asked him how food had played a role in his life, he said it had played a huge role. Growing up he said food in his family was “*very toxic*”. Neither of his parents

cooked and he grew up largely on fast food.

“*How did working in restaurants shape that?*”, I asked him, wondering how he had come to shift his relationship to food since his childhood.

“*Working in food, especially when I started serving, and [I] started realizing like how crappy all the food is, you know what I mean?*” he replied. Working at better restaurants then allowed him to see how good food could be and made him passionate about cooking and eating well for himself.

I asked him what some of his favorite things to cook were and he replied, “*Since I'm on a budget. I have like these ideal meals that I know are going to be great. Like I'll make a fried pork chop with red beans and rice and some sort of vegetable. [...] Unfortunately, I'm priced out of the seafood market but I mean just like a nice like maple honey balsamic glazed salmon or something like that with thick green asparagus*”. Cooking is one thing that continues to bring him joy, he said, and as he talked about making mushroom tortellini, I could see his passion for food shine through.

*"But it's not easy to actually eat right," Jeff continued, focusing on the barriers created by poverty, "you know if you have three kids, microwaving some Dino Nuggets is a lot easier than you know spending 30-45 minutes in the kitchen you know just sautéing asparagus. [And] your money stretches farther when you eat garbage".*

Our conversation turned as Jeff began to talk about his recent struggles with mental illness. He had been diagnosed in the past year with anxiety and depression and his symptoms had been exacerbated by the pandemic. He had been through a year of tremendous hardship and loss.

*"Both my parents passed during the pandemic. My dad and I had a heart attack on the same day in two different cities," he told me. A month and a half after his heart attack, Jeff had his first panic attack and ended up in the hospital. He continued to have panic attacks after that and he described the visceral experience of his most recent one saying, "I got on the bus to go to work and out of nowhere I just go couldn't breathe. My vision started going, I couldn't hear. I was like, Oh God, and so I just immediately went home".*

He continued to talk about how his mental illness caused him to feel stuck in his situation and limited his ability to work. On the day we first met he had an interview for a job at Kentucky Fried Chicken. He got the job and tried to limit his schedule so that he only worked in short shifts, hoping he could keep his anxiety at bay for a few hours.

*"Like, I'm only there for a couple hours," He said, "I can do it. I can do it. I can do it. And then I start spiraling into this weird anxiety and depression like it's like, it's so recognizable, and I know it. [...] It's like walking out my door becomes like the hardest thing". He had started therapy through the Helen Ross McNabb Center, and said he was trying to get approved for SSI. Without being able to work, Jeff said, "I live on food stamps and they [KCDC] pay my rent and they pay basically \$68 of my utilities."*

Jeff's experiences illustrated how poverty and mental illness can produce food insecurity while limiting the capacity of individuals to work towards change. Poverty makes people feel like they don't matter. He talked about the disempowering experience of trying to get help, saying, *"The help I get is because I basically begged for it, you know, 'please any therapy,' like 'Helen Ross Mccnabb, please, like I don't know what to do'. [...] Like I'm supposed to recertify my food stamps this month. I can't get a hold of the lady. And I'm like, I gotta beg for the money to eat."*

Feeling uncared for then creates a sense of apathy around food, he explained: *"Yeah, like, 'nobody cares about me. I don't care about myself. What does it matter if I eat right or don't eat right?"* Jeff also saw a lack of

education contribute to this mindset saying that education was the biggest challenge he saw in his community, and in society at large.

I asked him how he thought we could build capacity for people to grow, learn, and become co-creators of food transformation. He explained that because of the barriers created by systemic poverty, building capacity would require consistent incentivization. Using a gardening class as an example, he said, *“Do this to create your own garden, everybody that comes gets this gift card, right? And then we're going to come back in a month, and you show me how your garden is doing, we'll give you another gift card. Basically, you're gonna have to pay somebody to because no one's going to just automatically care”*. When you are struggling financially, worrying about your next rent payment or where you're going to get your next meal, it is incredibly difficult to focus on anything past simply surviving. Offering monetary incentives would build capacity for residents by freeing up the time and energy spent on meeting their basic needs.

At the end of our conversation, I asked Jeff about his ideas for how to create more equitable food access for KCDC residents. He thought that transportation was the biggest thing organizations could do to improve food access and had an innovative idea for a transportation service that doubled as an education hub: *“Getting people to the food, I feel like that's the biggest thing. [...] And you could have someone who rides the bus [...] or a pamphlet with [...] recipes on how to cook the stuff [you get at the pantry.”* A transportation service to food pantries or grocery stores would likely be highly utilized by residents as this is a prominent service gap across all properties, and the inconvenience of using public transportation to get food has been voiced often in all my interactions with residents. Using transportation as a *“medium for education,”* as Jeff said, could provide a valuable opportunity for non-profits and other organizations to engage with residents.

As we finished up, I thanked him for sharing space with me. I had hoped to have another chat with him, but with time constraints I wasn't able to see him again. My conversation with him exemplifies the need for more efforts to seek the expertise and leadership of people with lived experience. Jeff, and the residents like him, deserve the space and resources to explore their ideas, tell their stories, and be empowered to advocate for change.

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Building Capacity for  
Community-Led Food  
Transformation

# BUILDING CAPACITY FOR COMMUNITY-LED FOOD TRANSFORMATION

Residents have a wealth of knowledge about their communities, and about hunger and poverty from their lived experience. There is tremendous potential among residents to develop innovative solutions to food insecurity.

Solutions produced by and for community members have community buy-in, which is critical to the success of new initiatives.

KCDC uses a model of resident engagement that limits their participation to brief consultation rather than including them as true collaborators, from design to implementation. Building capacity for community-led food transformation means giving residents the power to direct change from start to finish. Knowledge mobilization is a key component of engaging residents as co-creators of food transformation.

## Knowledge Mobilization

Knowledge mobilization is the process of transforming knowledge from lived experience, through reflection, discussion, and research, to build shared knowledge that can be used to develop and advocate for solutions. One of the biggest things KCDC and its partner organizations can do to work towards community food security is create spaces for residents to explore their ideas about food, to talk to and learn from each other and build community.

*"Knowledge mobilization is defined as the process of getting knowledge into active service in society based. Knowledge mobilization is political in nature and works to influence decision-making and policy by getting the information to the right people in the right format at the right time."<sup>14</sup>*

## Ways of Knowing Framework

| Instrumental Knowledge   | Interactive Knowledge   | Critical Knowledge  |
|--|---|---|
| <ul style="list-style-type: none"> <li>• Typically thought of as scientific and expert-driven, such as academic or government / industry research.</li> <li>• What we consider "facts".</li> <li>• Often overrepresented in advocacy efforts.</li> </ul> | <ul style="list-style-type: none"> <li>• Comes from the lived experiences of individuals and communities.</li> <li>• Represents the knowledge that we gain throughout our lives.</li> <li>• Often underrepresented and undervalued</li> </ul> | <ul style="list-style-type: none"> <li>• Comes from reflecting about instrumental and interactive knowledge</li> <li>• Contextualizing knowledge to understand how social structures and policies affect quality of life.</li> <li>• Generating innovations to improve things.</li> </ul> |

Created by Toba Bryant, University of Toronto<sup>15</sup>

Oftentimes decision-makers at non-profit organizations rely on instrumental knowledge to guide their policies and practices. Interviews during the stakeholder engagement phase revealed a profound lack of employees with lived experience of hunger and poverty, indicating a lack of interactive knowledge.

As discussed previously, there is also a lack of trust between organizations and residents that discourages residents from sharing their interactive knowledge. As noted, 10 to 20 percent of CFSA respondents did not provide an answer for several open-response questions. This is perhaps less indicative of a lack of ideas than it is of a lack of willingness to share those ideas. To build critical knowledge, trust is necessary between those with interactive knowledge and those with instrumental knowledge. It is also important to note that interactive and instrumental knowledge do not exist in a dichotomy, and people usually have a combination of the two.

In order to generate solutions rooted in the expertise of people with lived experience and develop informed solutions, there must be a holistic and long-term effort to build critical knowledge among residents and organizations.

## Recommendations

- Investigate ways to heal trauma caused by KCDC to residents and develop trauma-informed practices for resident engagement
- Create opportunities for residents to participate meaningfully in food service programming and can draw from their interactive knowledge
- Develop spaces for residents to have a community dialogue about food, like regular community meetings or round tables with stakeholders
- Build relationships between residents and organizations that are based outside of the provider-client dynamic and where residents are equal collaborators

### *Building Leadership Capacity with Resident Ambassadors*

Residents are the experts on the issues in their communities. Organizations miss out on valuable information when they don't recognize this expertise and seek leadership from people with lived experience. Various PHA's around the U.S have had success when they have appointed residents to leadership roles, created opportunities for them to learn new skills around advocacy and facilitation.<sup>16</sup> Creating a compensated, formal position for residents to coordinate services, perform outreach, plan activities, and act as liaisons between their community, KCDC and partner organizations would empower residents and build capacity for both residents and providers.

Within Knoxville, some opportunities have been created by CAC for residents to participate more significantly in resident engagement efforts. CAC developed a Resident Ambassador program for Western Heights as a part of their partnership

with KCDC on the Transforming Western initiative. KCDC was awarded a Choice Neighborhoods grant of \$40 million by HUD in September of 2022, following 14 months of community engagement efforts to develop the plan to transform Western Heights. The Transforming Western Initiative includes redeveloping existing affordable housing, building new green space, and working with almost 100 partner agencies to provide services around food, healthcare, education, economic mobility, and more.

The Resident Ambassador program was developed to engage the community and ensure that residents were being consulted throughout the grant-making process. CAC hired five Resident Ambassadors to provide outreach to other Western Heights residents to engage in self-sufficiency workshops, partner agency activities, and community events. Resident Ambassadors worked 10 hours a month and received \$200 in gift cards as compensation. Gift card compensation was chosen over cash payments because of concerns with residents losing eligibility for government benefits.

In addition to providing outreach, Resident Ambassadors serve as liaisons to CAC staff by providing resident feedback so programming can be tailored to meet their emergent needs. CAC also provides Resident Ambassadors with monthly leadership training and goal setting. After six months, the five Resident Ambassadors are rotated off and five new residents are hired. While the outcomes of this program are still being evaluated, the CAC Special Activities Director mentioned that the Resident Ambassadors have been able to engage with other residents using social capital which outsiders lack, making their outreach efforts more effective.

This is supported by results from other resident leadership programs, as residents have the unique ability to tap into existing social networks to assess needs, get the word out about programs, and mobilize their community.<sup>17</sup> Without meaningful involvement, initiatives to achieve deep and lasting results will be ineffective. Residents know their community and already have trust and rapport with their neighbors so they are ideally positioned for engagement efforts. Further, when residents are given opportunities to contribute meaningfully a sense of ownership over the project is created. Community buy-in is critical to the success of new initiatives and this sense of ownership fosters community support.

In addition to the CAC Resident Ambassador program, Keri Cannon, the CAC Case Manager at Northgate Terrace, began an informal Floor Ambassador program when she was at Isabella Towers with many positive outcomes. Keri assigned two residents to each floor, picking people with whom she had a good relationship, trusted, and knew would get the job done. Their duties included performing wellness checks, informing residents of various programming, hanging up flyers and sign-up sheets, helping out during food distributions like Commodities, and performing basic cleaning on their floors. With the help of the Resident Ambassadors, Keri was able to offload some of her outreach efforts and

build capacity to focus on other tasks. Residents responded very positively to the program and were able to see the direct impacts, like having a cleaner building and more opportunities to participate in activities. One Floor Ambassador said that his role gave him a sense of purpose and he was excited about the opportunity to improve his community.

The idea of a resident leadership position was also uplifted by residents in CFSA responses and in focus groups. In focus groups, participants mentioned that they wanted an appointed representative to talk to about food assistance and similar programs, stating, *"It'd be nice to know that we have a go to person."*

One participant commented on the importance of having a representative residents knew would be around consistently, saying, *"That way in case like say like they're busy all day, the person was around at night or they can leave him a note they can always get back to him."*

Several participants emphasized the importance of having someone who is a member of the community fill a representative role.

One focus group participant noted that residents would be best suited to represent the community and take the lead on coordinating programming, saying, *"I think it's a good idea because we know what's going on around here."*

**"Whenever they appoint someone to look over things and help us, they always f\*\*k it up. They should appoint a community member or someone who knows the community"**

--CFSA Respondent

It is important to note that residents are already helping programs run. With every food assistance program providing direct service to KCDC properties and adjacent sites there were resident volunteers helping, from unloading food rescue boxes off the SHFBET truck, bringing food to mobility challenged neighbors, or helping pass out produce. Residents already have knowledge of various programs and how to coordinate services.

A resident ambassador position at every property would also help build capacity for providers by freeing up resources spent on patchwork coordination efforts with KCDC. As discussed in Stakeholder Engagement, coordination and communication are major barriers to effective partnerships with KCDC and there is no designated role at each property to coordinate programs. Properties without Case Managers and without property managers willing to coordinate programs are therefore left without services. Giving providers a representative from each property to work with would enable more efficient coordination and give residents an avenue to provide feedback to food assistance providers. Residents could also have the opportunity to influence policies and practices at KCDC and KCDC's partner organizations.

A property-wide resident ambassador program should be developed **with** residents and could be used as an opportunity to create spaces for knowledge mobilization. More resident engagement is needed before the specifics of a resident ambassador program can be described, and these engagement efforts should seek not just consultation but leadership from residents. Insights from the existing program at CAC can be sought to inform best practices moving forward.

## Recommendations

- Engage residents as collaborators to develop a resident ambassador program where residents have a compensated, formal position focused on improving their communities.
  - Perform outreach to existing Resident Ambassadors at Western Heights to inform best practices for such a program.
  - Develop a compensation strategy that does not threaten resident's eligibility for public benefits.
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