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Introduction and methods

This report draws from publicly available data that provides background information about Blue Earth County in relation to the Minnesota Department of Health’s Statewide Health Improvement Program (SHIP) strategies:

- Healthy eating in schools
- Physical activity in schools
- Tobacco-free living
- Healthy eating in the community
- Healthy eating and physical activity in child care
- Physical activity in the community
- Worksite wellness
- Community-clinical linkages

In addition to publicly available data, Wilder Research also received information from schools and nonprofit organizations in Blue Earth County relating to efforts that promote one or more of the strategies listed above.

Wilder Research also conducted two focus groups – one with a group of older adults (55 years or older) and another with social workers who serve immigrant and refugee communities. Wilder Research also conducted nine individual interviews with young parents. Ten interviews were also conducted with key informants that possessed considerable knowledge regarding one or more of the strategies listed above. Specifically, Wilder Research conducted two interviews with informants regarding school wellness, one interview regarding tobacco-free living, one interview regarding child care wellness, two interviews regarding worksite wellness, and four interviews regarding community-to-clinical linkages.

It should be noted that both focus groups were conducted in the City of Mankato and that the young parents were identified by a Mankato-based organization. The viewpoints of Blue Earth County residents who do not live in Mankato are likely underrepresented in findings from these focus groups and interviews. The 10 key informant interviews were primarily conducted with respondents whose work is based in Mankato; two of these interviews were conducted with respondents whose work is not based in Mankato.
Characteristics of Blue Earth County residents

Blue Earth County has a total population size of 63,991 residents (32,050 males and 31,941 females). Residents under the age of 18 make up about one-fifth of the population, residents who are age 18 to 64 make up over two-thirds, and residents who are age 65+ make up about one-tenth of the total population of Blue Earth County.

1. Population by gender (N=63,991)

- Male (N=32,050)
  - 10% 65+ years old (N=7,495)
  - 71% 18-64 years old (N=44,173)
  - 13% 5-17 years old (N=8,603)
  - 6% Under 5 years old (N=3,720)

- Female (N=31,941)
  - 13% 65+ years old (N=7,495)
  - 67% 18-64 years old (N=44,173)
  - 14% 5-17 years old (N=8,603)
  - 6% Under 5 years old (N=3,720)

Source: American Community Survey 2008-2012 5-year estimates

The majority of Blue Earth County residents are non-Hispanic whites (59,295 residents). Fewer than 1 out of 10 Blue Earth County residents are non-white. Also, not shown in the chart, 1,633 residents are of Hispanic ethnicity (any race). See the chart below for more details regarding the race of Blue Earth County residents.

2. Population by race (N=63,991)

- White (N=59,295)
- Total non-white residents (N=4,696)
  - 3% African American (N=1,670)
  - 2% Asian (N=1,246)
  - <1% American Indian or Alaskan Native (N=156)
  - 2% Two or more races (N=1,288)
  - <1% Another race (N=336)

Source: American Community Survey 2008-2012 5-year estimates
Health status of Blue Earth County residents

In 2013, more than 9 in 10 Blue Earth County residents (91% of adults, 95% of students) ranked their health as good, very good, or excellent. This finding is supplemented by the Robert Wood Johnson Foundation county health rankings, which ranked Blue Earth County as 30th out of all 87 counties in Minnesota in terms of health outcomes.

3. Self-reported health status

![Health status chart]

Sources: 2013 Blue Earth Community Health Needs Assessment, 2013 MN Student Survey. Table includes aggregate data for 5th, 8th, 9th, and 11th grade students in Blue Earth County.

Despite high self-reported health status, 68 percent of adults in Blue Earth County and 23 percent of middle and high school students were overweight or obese in 2013. See the table below for other chronic health conditions experienced by Blue Earth County adult residents and students.

4. Chronic health conditions

<table>
<thead>
<tr>
<th>Condition</th>
<th>Adults</th>
<th>Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overweight</td>
<td>38%</td>
<td>14%</td>
</tr>
<tr>
<td>Obesity</td>
<td>30%</td>
<td>9%</td>
</tr>
<tr>
<td>High cholesterol</td>
<td>23%</td>
<td>N/A</td>
</tr>
<tr>
<td>High blood pressure</td>
<td>22%</td>
<td>N/A</td>
</tr>
<tr>
<td>Asthma</td>
<td>9%</td>
<td>14%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>7%</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Cancer</td>
<td>6%</td>
<td>N/A</td>
</tr>
<tr>
<td>Chronic lung disease</td>
<td>2%</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Source: 2013 Blue Earth Community Health Needs Assessment, 2013 MN Student Survey. Note: Table includes aggregate data for 8th, 9th, and 11th grade students in Blue Earth County. Weight status was not calculated for 5th grade students.
Healthy eating in schools

There are 8,603 school-age children living in Blue Earth County. The Minnesota Department of Education lists 22 public schools, six non-public schools, and one charter school in Blue Earth County. These schools are located in following school districts: Lake Crystal-Wellcome Memorial, Mankato, Maple River, and St. Clair.

In 2012, over one-third (36%) of students in Blue Earth County received free or reduced price school lunch, which is an indicator of low-income status (eligible students come from households whose income is 185% or less of federal poverty level). This is similar to Minnesota overall, where 38 percent of students receive free or reduced price school lunch. For these children from low-income households in particular, their school lunch (and breakfast, if applicable) may be their primary opportunity during the day to get healthy, fresh fruit and vegetables and other healthy foods low in fat, sugar, sodium, and preservatives. Over the past five years, there has been a slight increase in the proportion of students who are eligible for free and reduced price school lunch in Blue Earth County and statewide.

5. Children receiving free/reduced price school lunch

Source: 2012 Selected Kids Count Indicators for Blue Earth County.
The Center for Disease Control and Prevention (CDC) recommends two to three servings of fruit and three to five servings of vegetables every day. In 2013, 27 percent of middle and high school students in Blue Earth County consumed fruit at least twice per day and 9 percent ate vegetables at least three times per day.

6. Fruit and vegetable consumption in the past seven days for middle school and high school students in Blue Earth County

<table>
<thead>
<tr>
<th></th>
<th>Fruit</th>
<th>Vegetables</th>
<th>Fruit juice</th>
</tr>
</thead>
<tbody>
<tr>
<td>I did not eat or drink this</td>
<td>6%</td>
<td>10%</td>
<td>21%</td>
</tr>
<tr>
<td>1-3 times in the last seven days</td>
<td>30%</td>
<td>32%</td>
<td>42%</td>
</tr>
<tr>
<td>4-6 times in the last seven days</td>
<td>22%</td>
<td>22%</td>
<td>15%</td>
</tr>
<tr>
<td>1 time per day</td>
<td>16%</td>
<td>18%</td>
<td>10%</td>
</tr>
<tr>
<td>2 times per day</td>
<td>15%</td>
<td>11%</td>
<td>6%</td>
</tr>
<tr>
<td>3 times per day</td>
<td>5%</td>
<td>4%</td>
<td>3%</td>
</tr>
<tr>
<td>4 or more times per day</td>
<td>7%</td>
<td>5%</td>
<td>4%</td>
</tr>
</tbody>
</table>

Percent meeting CDC recommendations (total of bolded figures above) 27%  9%  N/A

Source: 2013 MN Student Survey

Note: Table includes aggregate data for 5th, 8th, 9th, and 11th grade students in Blue Earth County.

Blue Earth County SHIP should consider ways of supporting increased access to and consumption of fresh fruits and vegetables among students in the schools in their county. SHIP grants support healthy eating initiatives that have components of access, health literacy for institutional decision-makers, and policy. This may include approaches such as salad bars and Farm-to-School programs. Currently, Blue Earth County has a number of programs and policies in place to promote healthy eating among school-aged youth, including:

The Backpack Food Program is a partnership between the University of Minnesota – Extension and Feeding Our Community Partners, a food access nonprofit based in Blue Earth County. Backpack food packages, which include a weekend’s worth of healthy food, are sent home with students to their parents. Newsletters are included in the packages which outline habits of healthy eating, recipe ideas for healthy meals, and an inventory of community food assistance programs and resources. Through the Backpack Food Program, Feeding Our Community Partners serves the following elementary schools in Blue Earth County: Franklin Elementary, Jefferson Elementary, Kennedy Elementary, Monroe Elementary, Rosa Parks Elementary, and Washington Elementary.
Partnerships between school districts, community-based organizations, and local dietitians help ensure that school district officials receive education and counseling regarding nutrition and healthy food practices in schools.

Wellness policies in schools outline goals and strategies to promote all aspects of student wellness, including healthy eating. Strategies for healthy eating outlined by several of the school districts’ wellness policies in Blue Earth County include: making healthy food choices for classroom or other school celebrations, selecting vending machine food choices that meet USDA Team Nutrition Competitive Foods guidelines, and offering healthy concession options at school sporting events.

Findings from focus groups and interviews

Immigrant and refugee social worker focus group

According to the service providers who participated in the focus group, immigrants and refugees in Blue Earth County may not be familiar with locally available fruits and vegetables, and that these families may be uncomfortable with and less likely to serve these unfamiliar local produce items at home. Participants expressed that the schools can help children of immigrant and refugee families become familiar with new, locally available vegetables and fruits.

Participants also noted that inherent in the herding Somali culture is the cultural food preference for meats and grains over vegetables. Participants suggested that schools can help instill an appreciation for vegetables in children from immigrant and refugee families who may then share the food appreciation with parents in the homes.

Interviews with young parents

Overall, the young parents who were interviewed for this study cited the importance of developing healthy eating habits in children at a young age. Two parents offered suggestions on ways to improve foods served by schools, such as more adequately fulfilling vegetable and fruit requirements for school lunch as well as providing a wider variety of healthy food options. Parents also expressed concern about the small amount of time that schools schedule for eating lunch, and were worried about how eating a healthy lunch competes with other activities such as participating in recess. One parent commented:

---

1 Any school district receiving funding from the federal school lunch program is required to have a wellness policy. Federal guidelines instruct these school districts to create nutrition guidelines and procedures for the selection of food items and beverages available in schools. In school districts that receive this funding, some infrastructure already exists to support healthy eating programs.
“So, you’re asking kids, to scarf down their food if they want to play outside. The kids want to play outside, so do you want to teach them to scarf down food? That’s an unhealthy way to look at food, that’s encouraging gorging and binge eating.”

Another parent described a different model in her child’s school in which they hold recess before lunch.

In addition, some parents indicated their awareness of activities within schools to promote healthy eating, such as providing healthy options in vending machines and at school events (these strategies are currently outlined in districts’ wellness policies) as well as the Backpack Nutrition News program.

**Interviews with key informants**

Two school district officials were interviewed about school wellness efforts in their districts; interviews focused on healthy eating as well as physical activity. This section incorporates findings that relate to healthy eating.

Respondents noted a number of school wellness activities taking place in their districts, including marketing school lunch guidelines to parents, starting healthy snack carts, walking and running clubs at recess, and breaks for physical activity during classroom learning. One respondent mentioned using a school wellness scorecard, which ranked schools in their district based on their attention to school wellness.

Challenges identified by respondents include lack of engagement from other school personnel, such as food service staff or administration and leadership. In particular, respondents noted that food service staff do not have nutrition training, which has acted as a barrier when promoting healthy eating in schools. Likewise, respondents noted that administration and leadership are often busy with other items that distract from school wellness issues. In addition, lack of staff or volunteers for specific school wellness initiatives was also identified as a barrier.

In general, respondents noted more engagement in elementary schools as compared with secondary schools. One respondent mentioned that staff at secondary schools in their district were not aware of school wellness efforts in the district. It should be noted, however, that one school district official intentionally focuses more efforts in elementary schools with the hope that healthy eating habits continue when students enter secondary schools.

In terms of reaching out to schools or school districts that are less engaged in wellness efforts, respondents noted that reviewing other school district’s wellness policies would have been helpful when starting their own wellness efforts.
Physical activity in schools

On a typical school day in Blue Earth County, about 7 in 10 students (69%) went outside, took a walk, or went for a bike ride *outside of school hours* for at least an hour. However, less than one-fifth of students (19%) were physically active for at least 60 total minutes every day of a seven day period (2013 MN Student Survey).

Frequency and duration of student physical activity may be partly attributed to physical education classes taken during school hours. See the table below for frequency of physical education classes by grade.

<table>
<thead>
<tr>
<th>Days of Physical Education</th>
<th>5th Grade</th>
<th>8th Grade</th>
<th>9th Grade</th>
<th>11th Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 days</td>
<td>3%</td>
<td>11%</td>
<td>12%</td>
<td>83%</td>
</tr>
<tr>
<td>1 day</td>
<td>2%</td>
<td>&lt;1%</td>
<td>1%</td>
<td>1%</td>
</tr>
<tr>
<td>2 days</td>
<td>74%</td>
<td>5%</td>
<td>&lt;1%</td>
<td>1%</td>
</tr>
<tr>
<td>3 days</td>
<td>2%</td>
<td>27%</td>
<td>2%</td>
<td>1%</td>
</tr>
<tr>
<td>4 days</td>
<td>8%</td>
<td>4%</td>
<td>&lt;1%</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>5 days</td>
<td>13%</td>
<td>55%</td>
<td>85%</td>
<td>14%</td>
</tr>
</tbody>
</table>

*Source: 2013 MN Student Survey*

The CDC recommends that youth (ages 6-17) engage in at least 60 minutes of aerobic activity every day, at least 60 minutes of muscle strengthening three to five days per week, and at least 60 minutes of bone strengthening exercises (such as jumping rope or running) three days per week. To promote this level of weekly physical activity, Blue Earth County might consider supporting an increase in the amount of physical education classes (or other opportunities for physical activity before, during, and after the school day) for all students in all grade levels in the school districts in the county.

**Physical activity initiatives**

Part of the school day is the period before and after school including the time students spend getting to and from school, as well as any time they spend in activities or programs before and after school. Therefore, the safety of the roads and sidewalks is an important consideration for this SHIP strategy. In 2010, the City of Mankato and the Mankato School District developed the Walking School Bus program for one elementary school (Rosa Parks), which enabled students to be physically active before and after school. Parents at this school most often cited busy roads and traffic concerns as a barrier to
walking to school. In 2010, 13 percent of adults in Blue Earth County said the traffic in the area around their home is heavy and that the speed of the vehicles traveling on the streets in the area around their home makes it difficult to walk (2010 Southwest/South Central MN Adult Health Survey).

Elementary schools in the Mankato school district have completed the Safe Routes to School (SRTS) process, but middle and high schools have not. The planning process includes walking audits and parent surveys, as well as creating goals in terms of infrastructure planning that will support students walking to school. As of February 2014, the Lake Crystal-Wellcome Memorial school district was in the SRTS planning process.

A number of elementary schools in Mankato School District have also incorporated the S.M.A.R.T. curriculum to promote physical activity in classrooms.

As noted previously, any school district receiving funding from the federal school lunch program must have a wellness policy. Wellness policies also include strategies to increase physical activity. Currently, some school districts in Blue Earth County offer the following strategies to increase physical activity among students: opting for physically active school fundraisers (such as walk-a-thons) and including breaks in classroom teaching for physical activity.

**Findings from focus groups and interviews**

**Immigrant and refugee social worker focus group**

Services providers who participated in this focus group frequently mentioned soccer and swimming as being sports that have high interest for younger segments of the immigrant and refugee communities in Blue Earth County. It was clear from participant responses that girls from immigrant and refugee communities experience more barriers than boys regarding participation in these activities.

Barriers identified by participants are rooted in cultural and religious expectations of gender. For example, participants mentioned that the potential of girls having physical contact with boys is a barrier to girls being physically active in co-ed settings. Participants noted that all-girl physical activity is permitted, but there is a lack of all-girl sport or physical activity groups as well as a lack of female-only recreation facilities (or dedicated times scheduled for females only) in Blue Earth County.

In addition, participants mentioned that another barrier to girls’ physical activity is the lack of culturally appropriate and safe athletic wear. In particular, participants mentioned the potential dangers of playing soccer in skirts or swimming in non-swimwear hijabs. Participants mentioned that burquinis (a type of swimsuit similar to a wetsuit that covers the head) are culturally appropriate but expensive.
Tobacco-free living

In 2013, about 1 in 10 adults (12%) who lived in Blue Earth County were current smokers. The most common reasons cited for continuing to smoke included: don’t want to quit/haven’t tried quitting (50%), quit aids are too expensive (24%), and don’t know how or where to go to quit (5%) (2013 Blue Earth Community Health Needs Assessment). Among students, 11th grader students were more likely than younger students to have used tobacco products in a 30 day period. See the table below for grade-specific tobacco use.

8. Student use of tobacco products during the past 30 days

<table>
<thead>
<tr>
<th></th>
<th>Adults</th>
<th>Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>5th grade</td>
<td>1%</td>
<td>N/A</td>
</tr>
<tr>
<td>8th grade</td>
<td>3%</td>
<td>N/A</td>
</tr>
<tr>
<td>9th grade</td>
<td>9%</td>
<td>N/A</td>
</tr>
<tr>
<td>11th grade</td>
<td>15%</td>
<td></td>
</tr>
</tbody>
</table>

Source: 2013 MN Student Survey. Students in 5th grade reported on cigarette use. Other grades reported on any tobacco use.

Overall, Blue Earth County adults and students report relatively low levels of regular tobacco use, but a somewhat higher level of exposure to secondhand smoke. Secondhand tobacco smoke can have negative health effects on non-smokers. See the table below for instances of secondhand tobacco smoke exposure for adults and students.

9. Instances of exposure to secondhand tobacco smoke

<table>
<thead>
<tr>
<th></th>
<th>Adults</th>
<th>Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Someone smoked near me in a public place at least once in the past seven days</td>
<td>40%</td>
<td>N/A</td>
</tr>
<tr>
<td>Someone smokes regularly in my home</td>
<td>11%</td>
<td>N/A</td>
</tr>
<tr>
<td>I’ve been in the same room as someone who was smoking in the past seven days</td>
<td>N/A</td>
<td>28%</td>
</tr>
<tr>
<td>I’ve been in a car with someone who was smoking at least once in the past seven days</td>
<td>22%</td>
<td>22%</td>
</tr>
</tbody>
</table>

Sources: 2010 Southwest/South Central Adult Health Survey, 2013 MN Student Survey. Table includes aggregate data for 5th, 8th, 9th, and 11th grade students in Blue Earth County.
SHIP grants require an approach that focuses on smoke-free multi-unit housing. In Blue Earth County, there are 8,302 rented household units. Of those, 6,146 units are in complexes with two or more units. It should be noted that 1,304 of these units are in complexes with 50 or more units, which may reflect the number of residents in college dormitories or other large apartment complexes.

SHIP grants suggest that grantees also pursue smoke-free policies on post-secondary campuses. Three post-secondary education institutions are located in Blue Earth County (Minnesota State University Mankato, Bethany Lutheran, Rasmussen College – Mankato), all of which already have policies that prohibit using tobacco on campus property. MSU Mankato and Rasmussen College prohibit tobacco use on all campus property; Bethany Lutheran prohibits the use of tobacco inside any campus-owned buildings. Some of these policies may be a result of Blue Earth County’s 2010 SHIP-based efforts to promote tobacco cessation on the MSU Mankato campus.

Additionally, according to the Association for Non-Smokers–Minnesota, the City of Mankato has updated its Clean Indoor Air ordinances to include electronic cigarettes.

Findings from focus groups and interviews

Interview with a key informant

According to the one respondent who was interviewed for this study who has expertise on tobacco issues in Blue Earth County, tobacco policies have become more comprehensive in Blue Earth County in recent years, oftentimes including smoke-free policies inside buildings as well as within 25 feet of complexes. Policies also sometimes extend to all building structures, such as playgrounds or gazebos. This shift is indicative of the willingness of apartment owners to enact tobacco-free policies. The respondent mentioned:

> Five years ago we were working hard just to convince the owner or manager that they could do this and that it’s the right thing to do. Now we’re at a point where so many are doing it, our goal is to help them do it well.

Regarding specific sub-groups within the population, the respondent mentioned that in general lower income populations are more difficult to convince of the negative health effects of smoking. When asked about immigrant or refugee populations, the respondent noted that their outreach strategy is the same as for US-born populations, but with translated materials. Regarding international students in Blue Earth County, the respondent mentioned reaching out to this group through campus-sponsored international student groups.
Moving forward with this work in Blue Earth County, the respondent suggested creating disclosure policies that would require owners or managers of multi-unit apartment complexes to disclose the details of their tobacco policies to potential tenants. In addition, the respondent suggested conducting a survey of managers of multi-unit housing complexes in Blue Earth County to better understand their needs and concerns regarding smoke-free policies. The respondent also mentioned that a database of multi-unit housing complexes is currently being compiled, which will provide up-to-date information on all multi-unit housing complexes in Blue Earth County.
Healthy eating in the community

As noted previously, the CDC recommends two to three servings of fruit and three to five servings of vegetables every day. In 2010, half of adults in Blue Earth County (49%) ate the recommended serving of fruit and just over one-quarter (28%) ate the recommended serving of vegetables (2010 Southwest/South Central MN Adult Health Survey). For information about student fruit and vegetable consumption, see “Healthy eating in schools.”

### 10. Daily adult fruit and vegetable consumption

<table>
<thead>
<tr>
<th>Servings</th>
<th>Fruit (%)</th>
<th>Vegetables (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 servings</td>
<td>23%</td>
<td>18%</td>
</tr>
<tr>
<td>1 serving</td>
<td>28%</td>
<td>27%</td>
</tr>
<tr>
<td>2 servings</td>
<td>26%</td>
<td>28%</td>
</tr>
<tr>
<td>3 or more servings</td>
<td>23%</td>
<td>28%</td>
</tr>
</tbody>
</table>

*Source: 2010 Southwest/South Central Adult Health Survey*

In Blue Earth County, four Census tracts in the city of Mankato have been identified as food deserts by the U.S. Department of Agriculture (USDA), which can be seen in the map on the next page. A “food desert” refers to an urban area in which a substantial portion of the residents are low-income and live more than one mile from a supermarket or grocery store. In 2013, 16 percent of residents in Blue Earth County were living in a food desert.

It should be noted that some of the area designated as a food desert in Blue Earth County is near MSU Mankato and Bethany Lutheran College. The average income level for these areas may be affected by the number of full-time students residing there.
11. **Food deserts in Blue Earth County**
From 2010-2013, a substantial portion of Blue Earth County adults residents were affected by food insecurity. See the table below for adult food insecurity information.

### 12. Adult food insecurity in Blue Earth County

<table>
<thead>
<tr>
<th>Description</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sometimes or often worry about running out of food</td>
<td>17%</td>
</tr>
<tr>
<td>Used community food shelf</td>
<td>7%</td>
</tr>
<tr>
<td>Fruits and vegetables at usual shopping location are not high quality</td>
<td>12%</td>
</tr>
<tr>
<td>Fruits and vegetables are too expensive at usual shopping location</td>
<td>59%</td>
</tr>
</tbody>
</table>

*Sources: 2013 Blue Earth Community Health Needs Assessment, 2010 Southwest/South Central Adult Health Survey*

SHIP grants support activities that have components of access, health literacy for institutional decision-makers, and policy. This may include approaches such as healthy retail outlets, community gardens, and regional food policy councils.

The Minnesota Department of Health also outlines “priority populations” relating to its SHIP goals. Regarding healthy eating in the community, priority populations include those who live in communities that have higher than average rates of chronic diseases or meals missing. When compared with other counties, Blue Earth County has higher than average rates of residents missing meals (see Figure A1, Appendix). Regarding chronic diseases, Blue Earth County either has lower than average rates or average rates of chronic disease prevalence.

**Findings from focus groups and interviews**

*Immigrant and refugee social worker focus group*

In addition to findings regarding healthy eating in schools (reported previously), participants also noted differences in what “healthy” means for many immigrant and refugee groups. For example, participants noted that in many refugee and immigrant communities the idea of “fat” or “heavy” is a positive, representing wealth and status. In contrast, “skinny” is stigmatized and is perceived as not having enough to eat.

In terms of access to healthy food, participants noted that even when immigrants and refugees financially struggle, oftentimes they still provide financial support and assistance to family in their country of origin, which may result in less money for healthy food. On the other hand, the service providers who participated in the focus group noted that in recent years the number of grocery stores that offer Halal (Islamic kosher) foods in Blue Earth County has increased; participants generally agreed that this need was being
met. Blue Earth County SHIP should consider ways of partnering with Halal and other ethnic-specific markets and shops to increase access to healthy, affordable produce to immigrant and refugee communities.

Participants suggested a number of other ways to address healthy eating among immigrant or refugee communities in Blue Earth County, including offering cooking classes and demonstrations using locally grown healthy foods in order for immigrants and refugees to become familiar with these items. Participants also suggested investing in community health workers that come from specific immigrant or refugee communities to promote healthy eating.

**Focus group with older adults**

The older adults who participated in this focus group identified a number of reasons that eating healthy foods is important. However, participants also mentioned a number of barriers to eating fruits and vegetables, including the inconvenience of preparing them as well as a lack of transportation to and from grocery stores. Participants noted that they rely on friends or taxis for transportation to grocery stores, specifically mentioning that the available public transportation does not meet their needs. Another barrier identified was large portion sizes of foods sold in grocery stores. This barrier primarily was mentioned by participants who lived alone. Participants generally agreed that they did not lack information about healthy eating.

In terms of ways to increase healthy eating among older adults, participants offered a number of suggestions to increase engagement regarding healthy eating among older adults. One suggestion included using a healthy eating inventory with individualized goals and healthy eating recommendations for participants. Another suggestion was to utilize health programs specifically for older adults that track clinical visits and key measures of health, such as the Heart Healthy program.

Participants also suggested creating gardening plots that would be accessible to older adults, and opening salad bars or “healthy food buffets” in conjunction with community events. In addition, participants focused heavily on changing the environment in local restaurants, expressing a desire for restaurants to offer more healthy food options. Blue Earth County SHIP could consider options such as the restaurant labeling initiative used by the Heart of New Ulm: Heart Beats Back and similar programs.
Interviews with young parents

All parents regarded healthy eating as an important part of healthy living, and expressed that they try to eat fruits and vegetables every day. Parents noted that they became more intentional of their healthy food choices after becoming a parent.

A primary barrier to healthy eating listed by respondents is the amount of time it takes to prepare a healthy meal, especially for families in which both parents work, or in single-parent families. Three parents mentioned extensive marketing for unhealthy foods as a barrier to healthy eating. Another barrier identified by respondent was that fruits and vegetables spoil more quickly, necessitating more frequent grocery store trips. Eight of nine respondents lived close to a grocery store, so access/transportation to the grocery store did not appear to be a challenge for this group. On the other hand, six of nine parents said that the locations and hours of the local farmers market were inconvenient. Parents expressed interest in more farmers markets in more convenient and high traffic locations. Despite these barriers, respondents showed a commitment to buying fruits and vegetables, stating that they would opt to buy fruits and vegetables instead of other food items.

Blue Earth County might consider focusing on the accessibility of farmers markets and other sources of fresh, local produce in Blue Earth County as well as teaching parents quick and easy preparation techniques for healthy foods. In addition, Blue Earth County may consider labeling foods in grocery stores, a strategy pursued by the Heart of New Ulm: Heart Beats Back initiative.
Healthy eating and physical activity in child care

In Blue Earth County, more than three-quarters of families with children who are five years old or younger (77%) have all parents in the labor force. The children in these families are likely to receive some type of child care.

SHIP grants identify child care providers that are eligible for Tier 1 reimbursement rates from the USDA Child and Adult Care Food Program (CACFP)\(^2\) as a “priority population.”

Center-based child care providers in Blue Earth County are less likely than center-based providers around the state as a whole to participate in CACFP, whereas family-based providers in Blue Earth County are more likely than family-based providers around the state as a whole to participate. The difference in participation rate among center-based and family-based providers may be due in part to nonprofit status.

13. Child care program participation in the USDA Food Program

![Bar chart showing participation rates for center-based and family-based child care in Blue Earth County and Minnesota.]

Source: 2012 Selected Kids Count Indicators for Blue Earth County

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\(^2\) The CACFP reimburses nonprofit child care providers, Head Start programs, and after-school programs at free, reduced-price, or paid rates for eligible meals and snacks. In order to be eligible for Tier 1 reimbursement, child care providers must serve low-income areas or, for family-based centers, the provider’s household must be low-income. Providers that are not located in low-income areas are reimbursed at a lower rate (Tier 2) unless they identify income-eligible children they are serving through income applications. For-profit centers are also eligible if enrolled children meet income eligibility criteria. In these instances, providers receive reimbursement for meals served to eligible children.
SHIP grants support a comprehensive approach in early care and education settings that includes active living and healthy eating (including support for breastfeeding) components. Examples of specific programs/curricula include Learning About Nutrition through Activities (LANA) and I am Moving, I am Learning (IMIL). As part of its 2010 SHIP efforts, Blue Earth County arranged for some family-based child care providers to receive IMIL training.

SHIP grants also suggest policies to promote smoke-free child care programs. According to the 2013 Minnesota State Statutes, providers and others cannot smoke inside a center-based or family-based child care facility while children are present. Providers and others, however, can smoke outside while children are present. Providers are required to provide notice to parents if smoking occurs in the house before or after child care hours. Blue Earth County SHIP could consider working directly with child care providers and/or through county-level child care licensing policy to decrease the number of child care providers who may currently allow smoking in their homes when children are not present, to reduce exposure to secondhand and third-hand smoke for these children.

**Findings from focus groups and interviews**

Wilder Research conducted one interview focusing on child care wellness in Blue Earth County. The respondent confirmed some of the 2010 SHIP efforts reported previously, such as LANA and IMIL training. The respondent also mentioned other programs focusing on obesity prevention and nutrition, including Let’s Move!, a campaign started by Michelle Obama, and Tipping the Scales, a video presentation focusing on childhood obesity. When asked about tobacco-free policies in child care, the respondent said that, to their knowledge, no efforts were being made in Blue Earth County to promote tobacco-free policies in child care settings.

The respondent also noted that, to their knowledge, the majority of immigrant and refugee families in Blue Earth County utilize connections with families, friends, or neighbors (FFN) to meet their child care needs.

The respondent confirmed that the majority of child care providers in Blue Earth County are family-based, which offers some unique challenges to implementing policies that focus on child wellbeing. In particular, many family-based providers work 10+ hours per day, which demands creative outreach strategies such as podcasts or other “anytime learning” opportunities, and may also warrant consideration of what types of incentives are available for participation of these providers. In addition, the respondent noted that no center-based providers in Blue Earth County prepare their own food, instead contracting that responsibility to caterers. To address healthy eating among center-based providers, outreach to these caterers is necessary.
Physical activity in the community

The Robert Wood Johnson Foundation’s County Health Rankings ranks Blue Earth County as 36th out of Minnesota’s 87 counties with regard to health behaviors. This is based in part on the fact that Blue Earth County’s adult physical inactivity rate is 24 percent (which is higher than Minnesota’s rate overall of 20%).

The CDC recommends 2.5 hours of moderate aerobic activity or 1.25 hours of vigorous aerobic activity every week as well as muscle-strengthening activity two or more days of every week. In 2010, about two-fifth of adults in Blue Earth County (42%) met the recommended weekly amount of moderate aerobic activity and about one-third (34%) met the recommended weekly amount of rigorous aerobic activity. These two measures were not exclusive.

14. Adult physical activity per week

![Bar chart showing adult physical activity per week]

Source: 2010 Southwest/South Central Adult Health Survey

* Meets CDC recommendations

** Insufficient activity; does not meet recommendations
In 2010, the vast majority of Blue Earth County adult residents (95%) ranked the area around their home as very pleasant or somewhat pleasant for walking. However, one-quarter or more reported that they don’t have sidewalks (26%) or trails (29%) in the area around their home. See the table below for more information about access to and use of recreation facilities. It appears that although most residents have access to recreation facilities in their community, only some use the free, outdoor options and even fewer use indoor and/or pay-for-use options.

15. Community recreation areas and use

<table>
<thead>
<tr>
<th>Area</th>
<th>Percent of respondents who have this in their community</th>
<th>Percent of respondents who use this item</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parks or sports fields</td>
<td>96%</td>
<td>57%</td>
</tr>
<tr>
<td>Walking trails</td>
<td>93%</td>
<td>56%</td>
</tr>
<tr>
<td>Health club, fitness/wellness center, or gym</td>
<td>93%</td>
<td>26%</td>
</tr>
<tr>
<td>Bike paths, shared use paths, or bike lanes</td>
<td>90%</td>
<td>48%</td>
</tr>
<tr>
<td>Schools, colleges, or universities that are open for public use for exercise or physical activity</td>
<td>78%</td>
<td>32%</td>
</tr>
<tr>
<td>Public recreation centers</td>
<td>75%</td>
<td>23%</td>
</tr>
</tbody>
</table>

Source: 2010 Southwest/South Central Adult Health Survey

SHIP grants support approaches that focus on walking, biking, transit, and land use planning. These findings may be useful when planning efforts to increase accessibility to recreation areas.
Findings from focus groups and interviews

Immigrant and refugee social worker focus group

Participants indicated that large family size can act as a barrier to regular physical activity among immigrant and refugee communities. In particular, transporting large numbers of people as well as other responsibilities that accompany family life – such as cooking, cleaning, and care for young or older family members – take priority over physical activity.

In addition, participants noted that access to motor vehicles influences the amount of physical activity that immigrants and refugees get, mentioning that many immigrants or refugees drive – rather than walk – short distances after arriving in the U.S., whereas they previously walked for long distances in their country of origin. Participants also mentioned that among East African immigrants and refugees in particular there is a fear of dogs, stemming from interactions with non-domesticated dogs in their country of origin. Participants noted that many public recreation areas are dog-friendly, which might deter East African immigrants or refugees from spending time in those areas.

Similar to barriers to physical activity experienced by school-age girls from some immigrant and refugee communities (described in a previous section of this report), older women lack access to female-only recreation areas or facilities as well as a lack of all-female physical activities or sporting events.

Blue Earth County could consider strategies to make physical activity more accessible for immigrant and refugee communities, such as planning soccer games near housing sites with large immigrant and refugee populations or providing soccer equipment near to these areas. In addition, Blue Earth County might consider promoting culturally specific events and finding ways to encourage involvement of immigrants and refugees in broader community events through targeted and culturally appropriate outreach.

Focus group with older adults

Participants displayed an awareness of a number of different organizations and recreation areas (including parks and walking paths) through which to get regular physical activity. In particular, participants mentioned the Summit Center as a comfortable, convenient, and affordable place for older adults to be physically active.

Participants generally agreed that older adults are more comfortable exercising if in a group of their peers, rather than with people of different ages. Participants also generally agreed that the parks and outdoor spaces in Blue Earth County (Mankato) were easily
accessible, though one participant mentioned that many parks in Blue Earth County don’t have walking paths or a periphery pathway.

One suggestion from participants to increase physical activity among older adults is to increase awareness regarding the distance to and from already existing landmarks, or the number of laps around a certain landmark, so that Blue Earth County residents can easily track distances they walked or ran. Participants also suggested supporting partnerships between the Summit Center and other recreation organizations, such as the YMCA, to increase the variety of opportunities for physical activity among older adults.

**Interviews with young parents**

As with healthy eating in the community, all parents who were interviewed for this study felt that physical activity is important. However, being too busy is the main barrier to exercising regularly. Respondents also noted cold weather as a barrier to getting physical activity, noting that indoor recreation areas are too small and often crowded in colder months. Young parents recommended providing child care at indoor recreation facilities, as well as child-friendly community-wide events. Blue Earth County SHIP should consider ways of helping make getting physical activity an easier choice for young parents and their families by helping to incorporate physical activity into their daily routines, which could include efforts to provide education and opportunities through worksites, schools, and child care.

The young parents who participated in the focus group for this study mentioned the multitude of parks and trails near to where they live, and most respondents felt safe in these areas.
Worksite wellness

Retail, health care and social services, and manufacturing are the most common types of jobs in the county. Of the 35,269 workers who live in Blue Earth County, just 3 percent walk to work, 1 percent use public transportation, and less than 1 percent bike to work (2012 Quarterly Workforce Indicators). These findings, coupled with eating and physical activity habits of adults, indicate that worksite wellness initiatives could have a substantial impact on the overall health of working adults in Blue Earth County.

16. Total working age population and total workers in Blue Earth County

<table>
<thead>
<tr>
<th>Total population ages 15-64</th>
<th>46,110</th>
</tr>
</thead>
<tbody>
<tr>
<td>Workers in Blue Earth County</td>
<td>35,269</td>
</tr>
</tbody>
</table>

Source: American Community Survey 2008-2012 5-year estimates

SHIP grants support a comprehensive worksite wellness assessment and planning process that includes healthy eating, active living, tobacco cessation and tobacco-free policies, and breastfeeding support strategies. The grant suggests that each participating worksite identifies at least one strategy to implement in the first year of the SHIP grant through changes in policy, environment, and social supports.

In 2010, nine employers participated in the Blue Earth County SHIP-based worksite wellness initiative, including Blue Earth County, City of Mankato, Dotson Company, Lake Crystal-Wellcome Memorial School District, Mankato Area Public Schools, Mankato Clinic, Maple River School District, MRCI, and Schwickert Company. Worksites worked with Blue Cross Blue Shield and/or the Lake Crystal Area Recreation Center to form wellness committees, and most worksites developed worksite wellness vision statements. Efforts made by worksite wellness committees included:

- Mapping walking and running trails within or near worksite facilities
- Coordinating competitions among employees that promoted healthy lifestyles, such as walk-a-thons or healthy eating competitions
- Providing relevant health information, such as healthy eating or physical activity suggestions
- Other physical activity events, such as 5k runs or fitness classes
The number of total employees at worksites that participated in Blue Earth County’s 2010 worksite wellness initiative ranged from 100-1000 employees per site, though seven of the nine employers (78%) had fewer than 400 employees. The Minnesota Department of Health identifies worksites with fewer than 100 employees as “priority populations” regarding the SHIP worksite wellness goal, noting that Minnesota and national data show that smaller companies are less likely to have wellness initiatives. Blue Earth County might consider reaching out to smaller worksites as part of its SHIP 3 worksite wellness efforts. Representatives from Blue Earth County have been approached by the following worksites interested in being involved with upcoming worksite wellness initiatives: Open Door Health Center and Region Nine Development Commission.

**Findings from focus groups and interviews**

**Interviews with key informants**

The three respondents who were interviewed for this study as experts on worksite wellness had become involved in these efforts as early as 2007, noting that oftentimes efforts they have been involved with have focused on increasing physical activity, healthy eating, weight management, and ergonomics. Respondents identified engagement from the organization’s leadership and having a designated point person as critical for successful worksite wellness efforts.

Overall, respondents noted that each organization or company demands a unique worksite wellness approach, depending on characteristics of their employees, such as employee demographics or needs identified by employees. One respondent had worked minimally with refugee or immigrant employees, and all respondents noted the difficulties of incorporating cultural competency (such as translating materials or addressing cultural practices) into their worksite wellness efforts.

Respondents noted a number of successful worksite wellness efforts. In particular, one respondent mentioned an inter-company competition as a successful employee engagement strategy, noting that local newspapers publicized the results of the competition.

Regarding SHIP’s “priority population” for worksite wellness (worksites with fewer than 100 employees), respondents recognize that such worksites need a unique worksite wellness approach. Respondents also noted that worksite wellness efforts might be more easily incorporated into a smaller working environment than in larger ones.
Community-clinical linkages

In 2013, almost 9 in 10 Blue Earth County residents (89%) had insurance coverage. For every primary care physician in Blue Earth County, there were 1,073 residents, which is better than Minnesota’s statewide ratio (1,116:1) (Robert Wood Johnson Foundation 2013 County Health Rankings). Although the majority of residents have at least some access to health care, these findings indicate that creating community-clinical linkages may be a useful strategy to reach those who are under- or uninsured.

SHIP grants encourage chronic disease management and prevention through community services and in a patient’s community. The MN River Area Agency on Aging, which is based in Mankato, currently offers two chronic disease management and prevention classes that are delivered in community settings. In 2010, as part of its SHIP efforts, Blue Earth County started an active referrals initiative, which focused on building partnerships to better facilitate active referrals of patients to local resources that increase access to healthy foods, opportunities for physical activity, and tobacco use cessation.

In past years, Mayo Clinic Health System has supported SHIP efforts in the Mankato area. Specifically, a partnership that developed from the 2010 SHIP efforts in Blue Earth County resulted in the Healthy Living Mankato website, which offers resources pertinent to SHIP goals.

Also based in Mankato, the Open Door Health Center specifically serves patients who are uninsured or underinsured. Blue Earth County may consider partnering with the Open Door Health Center, particularly to reach out to low-income Blue Earth County residents to provide better access to community-based resources for healthy eating, physical activity, and tobacco cessation/prevention.

Findings from focus groups and interviews

Immigrant and refugee social worker focus group

The immigrant and refugee service providers who participated in this study were open and receptive to the idea of community-to-clinical linkages and expressed that the immigrant and refugee communities that they served would also likely be receptive as long as efforts were culturally responsive and easily accessible.

Participants mentioned the need for trained interpreters who not only know the language, but understand cultural practices and issues at a deeper level. One focus group participant described a need for cultural sensitivity in healthcare professionals:
Focus group with older adults

All of the older adults who participated in this study had visited their doctor in the past year, but none of them had been referred to a community resource regarding their health. Overall, participants supported the idea of community-to-clinical linkages, saying that it might raise awareness of community-based services available. Another participant mentioned that linking patients to community resources might enable older adults to set and reach longer term health goals, rather than only focusing on more immediate health concerns during doctor visits.

Participants indicated that they would be more likely to follow-up with referrals if they were to nonprofit or community organizations rather than to for-profit entities, such as commercial gyms. Participants also noted that they would be more likely to follow-up if the referral was directly related to a current health risk, and if the referral organization was familiar with this risk and could offer practical and specific assistance.

Interviews with key informants

The seven key informants who are experts about community-to-clinical linkages in Blue Earth County who participated in this study noted a number of partnerships currently underway in Blue Earth County, including partnerships among local and county governments, nonprofits, and schools. Current partnerships focused on a wide range of topics, including: assisted living and other services specifically for older adults, mental health, food access, tobacco cessation, efforts to increase physical activity, and services specifically for youth and school-based efforts such as working with school dietitians and incorporating healthy foods at school sporting events.

Suggestions for continued engagement regarding community-to-clinical linkages included community conversations as well as regular communication between project leaders and those who are “on the ground” doing work in the community on a day-to-day basis. Another suggestion for increased community engagement was to regularly measure results of a partnership and share them with community members. One respondent mentioned that contracting a facilitator with a focus on community-based partnerships as a potential strategy for success.

A primary challenge to successful partnerships that respondents mentioned was the lack of a formal agreement between partners. Respondents noted that the logistics that
accompany any partnership, but especially a formal partnership – such as scheduling meetings and agreeing on a Memorandum of Understanding or some other contractual agreement – often compete with delivering patient or client care. Respondents also mentioned the importance of open and intentional communication regarding which tasks and roles are assigned to which partners, and for those task and role assignments to be shared with each partner.

Respondents repeatedly noted the desire to network with others involved in this work in Blue Earth County to establish a base knowledge of who is providing which services. Such networking, respondents mentioned, would provide partnership opportunities as well as decrease duplication of services.

In terms of where respondents would like to see partnerships like these expand, the following areas were mentioned: immigrant and refugee communities, mental health with a focus on how mental health intersects with physical wellness, and healthy eating initiatives such as community gardens.
Community Resources

In 2011, the University of Minnesota – Extension compiled the following list of resources relating to food access and assistance for Blue Earth County. For questions relating to these community resources, please contact the University of Minnesota – Extension at 612-625-8260.

Eligibility Assistance

**Bridge to Benefits**, www.bridgetobenefits.org, is an online benefits eligibility screening tool for families to see what public programs they may qualify for to help them stretch their budget. If you do not have access to the Internet, call the Minnesota Food Hotline at 1-888-711-1151 to connect with someone who can walk through the Bridge to Benefits online tool with you over the phone.

**SNAP Outreach (federal food support program enrollment assistance)**: Provides information about food support, screening and application assistance. Provided by Second Harvest Heartland. Call Sydelle McCabe at 507-514-3535.

**United Way's 2-1-1**: If you or someone you know needs help, dial 2-1-1 on any land-line phone or dial 1-800-543-7709 on any cell phone. Get connected to the help and resources that will help you get through these tough times. It's free, confidential and available 24/7. Trained information specialists and volunteers can connect you to over 40,000 community resources available throughout Minnesota.

Food Assistance Programs

**ECHO Food Shelf**: Serves Blue Earth County and North Mankato residents. 1014 S Front Street, Mankato. To register for assistance, attend in person and bring proof of identity (driver’s license or photo ID). Once registered you can make an appointment to use the shelf and choose your items (similar to a grocery store). Each household can visit 12 times per year (July 1 through June 30). If phones are busy, please keep trying. Walk-ins always welcome. Call to register or schedule an appointment: 507-345-7508.

**Fare for All**: No requirements. Save up to 40% on your monthly groceries. Purchase discounted meats, veggies, and general grocery packages. Monthly pick up at Bethel Baptist Church 1250 Monks Avenue, Mankato. Call 1-800-582-4291 for dates and times.

**Federal Food Support Program (SNAP)**: Formally Food Stamps. Blue Earth County Government Center 410 S 5th Street Mankato. Call 507-304-4335
**Food for All:** Distribution 2nd Saturday of the month starts at 9:30 a.m. $3 donation. 1700 3rd Avenue, Mankato. Call 507-625-7228 for more information.

**Mother And Children (MAC):** Children ages 5-6 years old, women who have a baby under one year of age, but are not breast feeding. Pregnant or breast feeding women or infants not served by WIC. Provides a monthly food package. Call 1-800-365-0270.

**Nutrition Assistance Program for Seniors (NAPS):** Men and women over age 60. Provides a monthly food package. Call 1-800-365-0270.

**Women’s Infants and Children (WIC):** Women can apply for assistance while pregnant, for their newborn or their children up to age 5. 410 S. 5th St., Mankato. Call 507-304-4163.

**Meal Assistance Programs**

**Meals on Wheels:** Well balanced meals available for individuals 60 years of age and over. Meals are delivered or individuals meet at a location to eat. Call 507-387-4076 for more information and site locations.

**Salvation Army's Noon Meal Program:** Free noon meal served 5 days a week from 12pm-1pm at the downtown Salvation Army building, 700 S Riverfront Drive, Mankato. All are welcome, no one goes away hungry! For more information, please contact Salvation Army at 507-345-7840.

**Community Supper:** Hosted Wednesday Night from 5:00-6:00 pm at Christ the King Lutheran Church, 207 McConnell Street, Mankato, 507-345-5056. Free of charge.

**Campus Kitchen Project:** Nationwide student led initiative. For more information 507-389-6076.

**Education Programs**

**Simply Good Eating:** Food budgeting, nutrition and food education. Blue Earth County Courthouse, 204 S 5th Street, Suite 310, Mankato. Call 507-304-4141.

**Medical & Dental Assistance**

**Open Door Health Center:** Provides treatment for chronic and acute health conditions, and preventive and restorative dental care for low-income, uninsured individuals and families living in the Greater Mankato area. Call 507-388-2120.
Tobacco cessation and policy information

The Association of Non-Smokers – Minnesota (ANSR MN) addresses tobacco cessation and policy in a number of different settings. Please see below for contact information for specific locations/areas.

**Multi-unit housing**: Kara Skahen – kara@ansrmn.org or 651-646-3005 x301.

**Post-secondary campuses**: Emily Anderson – emily@ansrmn.org or 651-646-3005 x304.

**Outdoor spaces/Community Centers**: Emily Anderson – emily@ansrmn.org or 651-646-3005 x304.

**Child care programs (family-based and center-based)/Foster care homes**: Jeanne Weigum – jw@ansrmn.org or 651-646-3005 x311.

**Ordinances/Point of Sale**: Chris Farmer-Lies – chris@ansrmn.org or 651-646-3005 x309.

**K-12 tobacco policies**: Chris Farmer-Lies – chris@ansrmn.org or 651-646-3005 x309.

**Media engagement**: Chris Turner – ct@ansrmn.org or 651-646-3005 x303.
Appendix

Priority population maps

A1. Hunger prevalence by county
References


