Food for Everyone

FOOD ACCESS:
Challenges for LOW-INCOME SENIORS and HOMELESS INDIVIDUALS in San Jose

HEALTHTrust
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A healthier Silicon Valley for everyone.

That’s our vision; what we strive to accomplish. It’s ensuring that health related policies and services exist so that race, language, income and age aren’t barriers to eating affordable, quality, nutritious food.

Sadly, this doesn’t hold true...yet, especially with the most vulnerable populations of our community, low-income seniors and individuals that are homeless. It’s no secret that food insecurity runs rampant among these populations. But what we didn’t know before, we do now:

• Where food assistance resources are relative to these populations
• Where the gaps lay between the resources and the individuals that need them most
• The financial resources required to fill the gaps

This is exactly what Food for Everyone details. It’s a thorough assessment of healthy food access among low-income seniors and individuals that are homeless in San Jose.

The County of Santa Clara and City of San Jose now have an invaluable resource at their disposal. This report allows them to use data to drive informed decision making, while maximizing resources in their efforts to end homelessness and increase food access to seniors. But Food for Everyone is more than just a resource, it’s a call to action. Its imperative that we curb the food insecurities plaguing the most vulnerable among us.

Resolving this plight doesn’t rest solely on the shoulders of our policy makers. It takes all of us working collectively to impact change; change that is attainable as laid out by the findings in the report. As such, we are moving forward with the formation of a Food Access Implementation Task Force. Consisting of City and County officials, and nonprofit partners, this task force will take the lead on ensuring that the findings of this report result in actionable solutions.

As you will read, the findings and recommendations in Food for Everyone present many challenges. But within every challenge, lies opportunity. Access to and consumption of affordable, quality, nutritious food, for everyone. That’s the challenge. Now, let’s seize the opportunity.

Frederick J. Ferrer
Chief Executive Officer
The Health Trust
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Executive Summary

To have sufficient food access means having “access, at all times, to enough food for an active, healthy life for all household members.” In San Jose, a city of both great wealth and great poverty, 30% of all households are living below the self-sufficiency standard, the income level at which an individual or family can afford to meet their basic needs. Two groups disproportionately affected by poverty and food insecurity are individuals that are homeless and low-income seniors. According to the 2015 City of San Jose Homeless Census and Survey, on any given night, there are 4,063 individuals that are homeless in San Jose, and 2,810 of them are unsheltered. Of adults over 65 in San Jose, 29,755, or 27%, are low-income, meaning they earn less than 200% of the Federal Poverty Level. This report analyzes the gaps in healthy food access among these two populations and identifies opportunities to expand and improve food assistance in San Jose.

Individuals that are Homeless

There are over 4,000 individuals in San Jose that are homeless, with over 2,800 individuals unsheltered. For many, securing a consistent and healthy source of food is a daily burden, costing time and resources that could otherwise be spent taking care of their basic needs.

The City’s approach to homelessness recognizes that in addition to housing, providing the full range of supports and services leads to better outcomes for individuals, and to lower public costs. This approach requires close coordination between nonprofits, the City, and the County to ensure that individuals, whether chronically homeless or experiencing a period of housing instability, receive the support they need.

This report underlines the importance of making access to healthy food an integral part of this coordinated response to homelessness. Using a variety of methods, including GIS mapping, interviews with providers, Census data, and local data sets, it identifies significant gaps in healthy food access and opportunities for the City and County agencies, The Health Trust, community-based organizations, and other stakeholders to provide services more cost-effectively.

This assessment is intended to be used as a guide on important questions of resource allocation and coordination in the City’s response to homelessness. Since the analysis portion of this assessment was completed, data from the 2015 Homeless Census have become available, showing that the population of homeless individuals has decreased and spread out to areas beyond downtown San Jose. These developments reinforce the following findings:

**FINDINGS:**

- Providers noted that food safety-net resources are scarce outside of downtown San Jose, and mapping of these sites confirms this. The location and number of homeless safety net providers does not consistently match with where individuals that are homeless are located. There is the strongest alignment of population and resources within downtown. In several Census tracts outside of downtown San Jose, individuals that are homeless have no access to a food safety-net provider.

- Providers expressed that an overall lack of coordination between providers makes it difficult to align resources with the population in areas outside of downtown.

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• Only 14 of 42 food safety-net providers report serving congregate meals, despite the fact that they are the primary source of food for individuals that are homeless. Providers noted that many congregate meal sites are “overwhelmed” with clients that are homeless or living in poverty. If all individuals that are homeless received 1 meal 5 times a week, it would require 20,315 meals. Congregate meal providers serve approximately 8,598 meals per week, leaving a gap of 11,717 meals.

• Not all recently housed individuals have adequate access to food safety-net providers. This report presents opportunities to integrate food into the necessary supports and services provided to recently housed individuals.

• In many parts of San Jose, individuals that are homeless have very low access to transit to and from service providers, shelters, and healthy food retail. Access to public transit—measured by the number of transit stops within a half-mile of safety-net providers and shelters—is very low for all but one site outside of the downtown area.

• Many providers noted the need for a “centralized area” that could make it easier for individuals that are homeless to receive various forms of assistance. The maps show that individuals that are homeless in San Jose most likely do not have access to the full range of services they need within walking distance.

• The retail food environment within walking distance of safety-net providers and shelters provides few healthy food options. Measured with the Modified Retail Food Environment Index (mRFEI), the majority of the 42 safety-net provider sites and 44 shelters have moderately low to no healthy food access within walking distance.

RECOMMENDATIONS

1. Integrate food access into City and County homeless support services.

2. Develop a food assistance protocol to assist those most affected by, or most at risk of nutrition-related chronic conditions.

3. Create a flexible congregate meal system for individuals that are homeless that can move as the population moves.

4. Formalize partnerships with faith-based communities to meet the needs of individuals that are homeless in areas of the city that lack food resources.

5. Explore opportunities to increase and use Senior Nutrition Program funding to better meet the needs of older adults that are homeless.

6. Explore opportunities to increase CalFresh enrollment of individuals that are homeless.

7. Develop infrastructure that supports an ongoing, coordinated solution to the food access needs of individuals that are homeless.

8. Explore opportunities in the existing safety-net infrastructure for cross-population services (e.g., could kitchens at Senior Nutrition Program sites prepare to-go meals for individuals that are homeless).

9. Form partnerships where possible between food safety-net providers and other service providers.

Low-Income Seniors

Building healthy communities is one of the central themes of Envision 2040, the City’s General Plan. The document that sets the tone for future planning and development in San Jose recognizes that equitable access to healthy food is an opportunity to promote social cohesion, spur economic development, and contribute to a safer and healthier built environment. By addressing the food access concerns of one of the City’s most vulnerable populations, the City has the opportunity to invest in building stronger, healthier neighborhoods.

This investment is also a timely one; the percentage of residents over 65 in San Jose is expected to more than double by 2060. Planning for the needs of seniors, then, is planning for the City’s future. Currently, there are approximately 29,755 low-income seniors in San Jose, many of whom experience food insecurity. The forms of food assistance available to them include CalFresh/SNAP, Senior Nutrition Program congregate meals, brown bag and food pantry sites, and Meals On Wheels, a home delivered meal service for homebound seniors.
Using GIS mapping, interviews with providers, and analysis of Census data, this assessment identified a number of missed opportunities for investment in the current food assistance environment in San Jose with potential returns for the City, low-income seniors, and their neighborhoods. The findings presented here are intended to guide the City, County, The Health Trust, and other non-profit partners in future decision making on how to allocate limited resources and where to focus their efforts to support the health and well-being of low-income seniors in San Jose.

**FINDINGS**

- The location and number of senior safety-net providers does not consistently match with where low-income seniors are located. There is the strongest alignment of population and resources within downtown. In several Census tracts outside of downtown San Jose, seniors—including many with ambulatory difficulty—have no access to a safety-net provider.

- Twenty-two percent of seniors in San Jose have ambulatory difficulty. Low-income seniors with limited mobility may not be able to travel to reach Senior Nutrition Program congregate meal sites or brown bag sites, especially outside of downtown San Jose, increasing their risk of food insecurity and social isolation.

- Transit access within walking distance of many Senior Nutrition Program congregate meal sites is limited. The lack of transportation may prevent some low-income seniors from attending congregate meals, depriving them of adequate food and nutrition and the opportunity for social interaction.

- The majority of the City’s planned growth areas, where many low-income seniors reside, contain very few healthy food options and an overabundance of unhealthy food outlets and liquor stores, which can encourage unhealthy food choices and serve as potential centers of crime.

- Many of the City’s affordable housing units, of which 22% are “senior units,” are generally located in areas with low access to healthy foods and an overabundance of unhealthy food options.

- The number of seniors served by Meals On Wheels is small compared to the number of low-income seniors with ambulatory difficulty and living alone in San Jose. Both the number and location of seniors with ambulatory difficulty in San Jose strongly suggest that the population in need of delivered meals is currently underserved.

**RECOMMENDATIONS**

1. Identify senior communities, affordable housing units, and other residential areas with high concentrations of seniors that would benefit from cost-effective solutions such as food drops or mobile produce units.

2. Develop a Senior Nutrition Program outreach strategy to increase participation in communities with high concentrations of low-income seniors and SNP congregate meal sites with the potential to increase capacity.

3. Increase funding for mobile meal services, i.e., Meals On Wheels, for the lowest-income, most vulnerable older adults in San Jose.

4. Explore innovative solutions to allow low-income seniors to access food resources in the community (e.g., restaurant vouchers, grocery delivery service).

5. Incentivize healthy food retail in the City’s planned growth areas.

6. Explore opportunities in the existing safety-net infrastructure for cross-population services (e.g., could kitchens at Senior Nutrition Program sites prepare to-go meals for individuals that are homeless).

7. Explore opportunities to increase CalFresh enrollment of low-income seniors.

8. Form partnerships where possible between food safety-net providers and other service providers.
Individuals that are Homeless: Food Access by the Numbers

- 4,063 individuals are homeless in San Jose
- 66% of individuals that are homeless report receiving free meals
- 38% of individuals that are homeless receive CalFresh
- 61% of individuals that are homeless in San Jose have a total monthly income of less than $449

- 14 Congregate meal sites
- 29 Brown bag/food pantry sites
- 44 Shelters
- 4 Informal feeding groups
- Only 3 Brown bag/food pantry sites
- 5 Congregate meal sites
- Serving individuals that are homeless are open 7 days a week.

If all individuals that are homeless received 1 meal 5 times a week, it would require 20,315 meals. Congregate meal providers serve approximately 8,598 meals per week, leaving a gap of 11,717 meals.

If 1,000 recently housed individuals had access to 1 meal 5 days a week, it would cost $520,000 per year.

The benefit for individuals that are homeless is $190 per month.

An increase of 100 in the number of individuals that are homeless receiving CalFresh could amount to $408,120 in additional economic activity in San Jose.

For a list of sources and more information, please see the full report, Food for Everyone, www.healthtrust.org
Low-Income Seniors: Food Access by the Numbers

29,755 of all seniors in San Jose are low-income.

Almost 70% of Santa Clara County Meals On Wheels recipients live at or below the Federal Poverty Level, 50% nearly half of them live alone.

6,600+

It is estimated that over 6,600 seniors with ambulatory difficulty in San Jose are also low-income.

Senior Nutrition Program congregate meal sites

At City-run Senior Nutrition Program congregate meal sites, the average meal costs about $6.47.

The City bears approximately 31% of the meal cost, while the County bears approximately 69%.

26

Approximately 8,184 seniors in San Jose attend Senior Nutrition Program congregate meals.

That leaves an estimated 14,971 low-income seniors not accessing congregate meals.

Approximately 2,489 seniors receive Meals On Wheels.

That leaves an estimated 4,111 low-income seniors with ambulatory difficulty not receiving meals.

There are 34 affordable housing complexes in San Jose that are deed-restricted for seniors. One-third of these complexes have low or no access to food within a quarter-mile walking distance.

The CalFresh benefit for seniors is ≈ $156 per month.

An estimated 6,400 low-income seniors are not receiving SSI or CalFresh.

An increase of 1,000 in the number of seniors receiving CalFresh could amount to $3.35 million in additional economic activity in San Jose.

For a list of sources and more information, please see the full report, Food for Everyone, www.healthtrust.org
To have sufficient food access means having “access, at all times, to enough food for an active, healthy life for all household members.” In San Jose, a city of both great wealth and great poverty, 30% of all households are living below the self-sufficiency standard, the income level at which an individual or family can afford to meet their basic needs—most notably housing or food. It is not surprising that, according to the Santa Clara County Behavioral Risk Factor Survey, a nearly identical percentage of adults—33 percent—live in “food insecure households.” Access to healthy food is also limited because of the lack of healthy food retail. In low-income areas of San Jose, an average of just 16 percent of all food retailers are considered “healthy.”

Two groups disproportionately affected by poverty and food insecurity are individuals that are homeless and low-income seniors. According to the 2015 City of San Jose Homeless Census and Survey, on any given night, there are 4,063 individuals that are homeless in San Jose, and 2,810 of them are unsheltered. 61% have a total monthly income less than $449. Of adults over 65 in San Jose, 29,755, or 27%, are low-income, meaning they earn less than 200% of the Federal Poverty Level. Despite the size of both groups, relatively little is known about how and to what extent the existing food safety-net meets the food access needs of low-income seniors and individuals that are homeless.

CalFresh Utilization and Limitations

It is widely known that CalFresh enrollment both alleviates food insecurity and has a “multiplier effect,” stimulating economic activity. The USDA Economic Research Service estimates that every SNAP (CalFresh) dollar creates $1.79 in taxable revenue. Research by California Food Policy Advocates has shown that California cities and counties are forfeiting dollars from CalFresh redemption. Based on their estimations for Santa Clara County, the “lost dollars,” or increased economic activity that could be generated by full CalFresh utilization in San Jose totals over $119 million.

The data on CalFresh enrollment show that many eligible individuals that are homeless and low-income seniors are missing a source of income that would help to partially offset the burden of food insecurity. Only 38% of individuals that are homeless reported receiving CalFresh, though this was the most frequently reported form of government assistance. According to safety-net providers, the paperwork for CalFresh is complex and constantly changing, a difficulty that often prevents them from enrolling eligible clients who are receiving other services. An increase of 100 in the number of

11 This was calculated by taking 50% of the CFPA estimate of $238,850,598 in economic activity generated in Santa Clara County from full CalFresh enrollment. This is likely a conservative estimate, since San Jose represents over 50% of the population, and 67% of individuals below the poverty line in Santa Clara County. See: Call, Jared, and Tia Shimada. “Lost Dollars, Empty Plates: The Impact of CalFresh on Local Economies.” California Food Policy Advocates. October 2015. http://cfpa.net/CalFresh/CFFAPublications/LDEP-FullReport-2015.pdf.
12 San Jose 2015 Homeless Census.
individuals that are homeless receiving CalFresh would total approximately $228,000 in benefits, leading to $408,120 in additional economic activity in San Jose.13

A major barrier to low-income seniors’ access to CalFresh is an administrative one, as beneficiaries of SSI (Supplemental Security Income) are not eligible for CalFresh benefits. Even with the possibility that some may not qualify for CalFresh, the estimated gap in senior CalFresh enrollment in San Jose is large, at approximately 6,400 individuals. If just 1,000 additional seniors receive CalFresh benefits, totalling approximately $1.87 million in benefits, it could result in an increase of $3.35 million in economic activity in San Jose.14

While CalFresh benefits have a positive effect on the local economy, and its recipients may rely less on the food safety net, the CalFresh benefit on its own is insufficient to eliminate food insecurity. At approximately $190 per month, CalFresh benefits for individuals that are homeless leave recipients cutting corners or relying on safety-net providers to make it through the month. For the small number of seniors who receive CalFresh, the average benefit is $156, an amount that also does not adequately cover expenses for healthy food.15

This may explain in part why the most frequently utilized service by individuals that are homeless is “free meals,” at 66%.16 Likewise, low-income and disabled seniors are driven to rely on community and home-based food assistance services to meet their basic food security needs. As CalFresh is only part of the solution to healthy food access among low-income seniors and individuals that are homeless, the focus in much of this assessment is on City-, County-, and nonprofit-run safety-net providers and the services they provide.

Food Access and Health

The health implications of food insecurity among individuals that are homeless and low-income seniors deserve particular attention, not the least because of the high costs associated with treating diseases related to nutritional intake. Previous research has found an association between “food insufficiency and increased acute health services utilization”17 among individuals that are homeless. Some of the most common and costliest medical conditions of individuals that are homeless can be traced to diet. A recent study on the cost of homelessness in Santa Clara County found that blood disease—most often anemia — at an average annual cost of $25,924, was the second-costliest medical diagnosis in 2011-2012, with the largest increase in cost ($1,850) over the six-year period under study.18

Similarly, many seniors suffer from multiple chronic conditions that directly relate to food access and often translate into high health costs. Chronic conditions are the leading cause of death among adults over 65, with heart disease, cancer, stroke, and diabetes accounting for almost two-thirds of all deaths in the United States.19

National data from the Department of Health and Human Services show that two-thirds of Medicare recipients have multiple chronic conditions,20 with hospitalizations lasting longer and costing nearly 20% more than for hospitalizations of adults without them. Most (County) Senior Nutrition Program participants have chronic diseases related to diet.21

13 This was calculated using the reported $190 per month in CalFresh benefits received by individuals that are homeless and the USDA dollar conversion on page 7. The estimated monthly benefit is from the focus group with individuals that are homeless and “Frequently Asked Questions.” CalFresh. Accessed February 05, 2016. http://www.calfresh.ca.gov/pg846.htm.
14 This calculation is based on estimates found in the Management Audit of the Santa Clara County Senior Nutrition Program. This was done by taking 50% of the estimate (12,800 seniors), since San Jose represents over 50% of the population, as 67% of individuals below the poverty line in Santa Clara County. See: Management Audit Division of the Board of Supervisors. “Management Audit of the Santa Clara County Senior Nutrition Program.” August 29, 2014. Accessed December 16, 2015. https://www.sccgov.org/sites/bos/ManagementAudit/Documents/Senior-Nutrition-Program_FullReport.pdf.
16 2015 City of San Jose Homeless Census.
Although individuals that are homeless and low-income seniors in the City are exceptionally vulnerable to food insecurity, and their food insecurity has a significant, costly, negative impact on their health, there is much less known about food access resources and barriers among these groups than other populations. The data in this assessment provide a starting point for determining how, and in what locations, the City can strategically improve access to healthy food with the greatest benefit for individuals that are homeless, low-income seniors, and their neighborhoods.

Why a food access assessment?

Commissioned by the City of San Jose Housing Department, the analysis here is intended to provide data-driven guidance to the City in its response to homelessness and to a rapidly growing senior population.

There is an urgency in identifying and responding to the unmet food assistance needs of these two populations. It is imperative that healthy food access be an integral part of the response to homelessness, so that the over 4,000 individuals affected in San Jose are helped, not hindered, in achieving permanent stability. At the same time, San Jose is experiencing a major demographic shift, with the population of adults 65 and over expected to grow from 11% to 12% by 2060. Identifying the gaps in service provision for older adults could lay the foundation for a systematic approach to the nutritional and health needs of an aging population in the decades to come.

Increasing access to healthy food for low-income seniors and individuals that are homeless are smart investments in the future, both for the populations in question and the City’s development. The findings and recommendations here complement the City’s overall strategy to build more vibrant, healthier neighborhoods, as outlined in the landmark general plan, Envision 2040. Acting on the data now is the cost-effective alternative to allowing present trends to continue and neighborhoods to miss opportunities for greater social cohesion, economic opportunity, and an improved built environment.

The publication of this assessment will be followed by a Food Access Implementation Plan to address the food access needs of these two populations as an integrated effort across City and County agencies, The Health Trust, community-based organizations, and other stakeholders.

Layout of report

A list of definitions of frequently used terms in this report is provided in the next section, followed by a discussion of methodology. The main analysis contains a series of maps, analyzed together with qualitative and quantitative data from interviews and research on the determinants of food access. Findings on individuals that are homeless and low-income seniors are discussed separately, and each section concludes with recommendations. Additional maps showing the locations of all food safety-net providers can be found in Appendix C.
II. Definitions

**Food security** is a state when all people, at all times, have physical, social and economic access to sufficient, safe and nutritious food that meets their dietary needs and food preferences for an active and healthy life.

**Homeless.** An unsheltered homeless person resides in a place not meant for human habitation, such as cars, parks, sidewalks, or abandoned buildings (on the street). A sheltered homeless person resides in an emergency shelter, transitional housing, or supportive housing for homeless persons who originally came from the streets or emergency shelters. For the purposes of this assessment, we also refer to “recently housed” individuals that may be considered sheltered.

**Low-income seniors.** Low-income seniors were defined as those 65 years or over living at 200% or below the Federal Poverty Level.

**Safety-net providers.** Providers of meals (hot or cold) or grocery programs, free of charge to individuals in need of food. Program types may include: congregate meals, food pantry/grocery/brown bag programs, Meals On Wheels, and informal feeding groups.

The figure below displays the safety-net food environment in San Jose for both groups by program type.

**Modified Retail Food Environment Index (mRFEI).** The mRFEI analyzes the number of healthy and less healthy food retailers within a given geographic area. The mRFEI examines food stores within a half-mile of each census block and measures the percentage of healthy food stores out of all (healthy and unhealthy) food stores. The mRFEI defines “healthy” food retailers as food co-ops, fruit and vegetable markets, chain grocery stores, ethnic and independent grocery stores (including small stores), and warehouse club stores. These stores are considered healthy because they primarily offer healthy products or a mix of products that could meet the nutritional needs of a family. “Unhealthy” food retailers are defined as fast food restaurants (including pizza and sandwich stores), convenience stores, and liquor stores. These stores are classified as unhealthy because they have very limited or no healthy menu options. The mRFEI score is calculated for a designated geographic area as follows: $mRFEI = \frac{\text{healthy retailers}}{\text{healthy retailers} + \text{unhealthy retailers}}$
III. Methodology

OVERVIEW
Multiple methods were used to assess the food environment in San Jose, including primary data collection, GIS analysis, and a literature review.

DATA COLLECTION
Primary data collection for this assessment included interviews and surveys with food assistance providers and a focus group with individuals that are homeless. For greater detail on methods and interviews, please see Appendix A.

LITERATURE REVIEW
A literature review on food access was conducted and informed the structure of the analysis, which is built around six main factors affecting food access (see figure to the right):

1. Socioeconomic factors: high cost of living, cost of food, location of services, and competing financial priorities.
2. Food assistance: type, location, capacity, and service of safety-net providers.
3. Transportation: availability and accessibility of public transportation, and access within walking distance.
4. Retail food environment: type of food stores, locations, CalFresh/SNAP-eligibility, and healthy versus unhealthy foods (based on mRFEI- Modified Retail Food Index)
6. Health conditions: mental and physical health.

GIS ANALYSIS
The spatial analysis of data on the food safety-net and target populations in San Jose was conducted using Geographic Information Systems (GIS). The maps created for this report aim to synthesize data on the location of safety-net providers relative to both populations with detailed information to evaluate their capacity and accessibility. Census data on both populations were used to identify potential areas of high need and disparities in food access. These were combined with network analysis to evaluate transit accessibility to safety-net providers and healthy food retail. Data on gang hot-spots were used as a proxy for neighborhood safety to identify barriers to healthy food or safety-net access. Finally, data on health conditions of homeless individuals and low-income seniors were incorporated to identify potential needs within both populations and evaluate the ability of existing food assistance to address them.

For a detailed discussion of the methods used for GIS analysis, please see Appendix B.

A list of all maps in this assessment is in Appendix C.
IV. Individuals that are Homeless

Analysis: Access to Food Assistance

OVERVIEW

The maps in this section provide a visual overview of the food assistance landscape for individuals that are homeless in San Jose. The accompanying analysis identifies potential areas of unmet need. Downtown San Jose appears as a service hub, with concentrations of both safety-net providers and individuals that are homeless. In several pockets outside of downtown, on the other hand, there are significant gaps in access to food assistance and other services. Focusing on these gaps in access would enhance the City’s response to homelessness in these areas of San Jose, with potentially more individuals able to achieve stability and lower long-term public costs related to persistent homelessness.

Maps with the 2013 data showed that most individuals that are homeless were located in Census tracts immediately in and around downtown San Jose; 2015 data reflect a population spread out over a larger area to the north and south. This new dataset shows that the total population of individuals that are homeless decreased by 15%, from 4,770 in 2013 to 4,063 in 2015.

The 2015 data reinforce the importance of the main finding based on the 2013 Homeless Census: individuals that are homeless in and around downtown San Jose may have adequate access to the necessary safety-net providers and services, but access to food in other parts of the city is very limited.

The analysis in this report is based on figures from the 2013 San Jose Homeless Census. Data from the 2015 Homeless Census have recently become available.
4,063

individuals are homeless in San Jose

https://www.sanjoseca.gov/DocumentCenter/View/44727
**LOCATIONS OF FOOD SAFETY-NET PROVIDERS AND INDIVIDUALS THAT ARE HOMELESS**

The adjacent map shows the distribution of homeless food safety-net providers in San Jose and the location of individuals that are homeless. Immediately visible is the concentration of safety-net providers in the downtown area of the city.

The map includes both congregate meal sites and brown bag or food pantry meal sites, in addition to shelter locations and informal feeding sites. These various types of food assistance are provided by community-based organizations, faith-based organizations, or City-, County-, and state-sponsored public programs.

- Congregate meal programs, an alternative that requires no food storage or preparation, are a primary source of food for individuals that are homeless. There are 14 of these sites in San Jose.

- Brown bag and food pantry programs run and supported by Second Harvest Food Bank are located at numerous sites throughout the city.22 There are 29 brown bag/food pantry sites in San Jose.

- Other alternatives include informal feeding groups and outreach programs or shelters. There are 44 shelters in San Jose. There are currently 4 informal feeding groups.

The map also shows the number of individuals that are homeless in San Jose by Census tract. There are several Census tracts outside of downtown that have a significant number of individuals that are homeless; there is a notable lack of providers in and around them. For more information on the safety-net providers in this assessment, please see Appendix D.

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22 Several of the brown bag and food pantry sites labeled as homeless providers are also featured in the maps on low-income seniors, as these sites serve both populations.
Many Census tracts have significant unmet need for food safety-net providers. Areas in red—most notably, south of Highway 280 between Highways 87 and 101 and east of Highway 101—have the highest areas of unmet need.

**AREAS OF UNMET NEED FOR FOOD ASSISTANCE**

Areas of unmet need for food assistance are highlighted in the adjacent map (in red), along with the locations of safety-net providers, shelters, and informal feeding group sites.

Not all tracts in red indicate a lack of access. Unmet need is calculated here by the ratio of safety-net providers to individuals that are homeless in each Census tract. If there is a provider in an adjacent tract, individuals may travel the short distance from their Census tract to that provider. Census tracts in red that are not located near a provider are examples of areas with the greatest need for additional resources.

These include Census tracts located in south San Jose, east of Highway 101, and in a cluster between Highway 87 and Highway 101.

The data on barriers to food access among individuals that are homeless, including location, capacity, and hours of operation of food safety-net providers, can help to inform smarter and more strategic investment in new or existing food safety-net sites. Investing in food assistance in the resource-poor areas identified here means that safety-net providers can reach more individuals experiencing temporary homelessness and food insecurity and reduce the possibility of falling into chronic homelessness. Making healthy food access consistently available can also decrease the risk of hospitalization for nutrition-related diseases, and the costs associated with them.

> “There are people that spend their whole week - they know exactly which day food is distributed at different sites and what are the restrictions at each site...They spend a lot of time doing that and not doing anything else to increase their self-sufficiency or stability.”

- Homeless Safety-Net Provider
ARE THERE SUFFICIENT CONGREGATE MEALS ACCESSIBLE TO INDIVIDUALS THAT ARE HOMELESS?

Congregate meals are a primary source of food for individuals that are homeless, due to lack of storage or equipment to prepare food. If all individuals that are homeless received one congregate meal per day, five days a week, it would require 20,315 meals—making a current “meal gap” of 11,717.24 Since most congregate meal sites are located in downtown San Jose, increasing the capacity of existing sites is not enough to close the gap in congregate meal access.

CONGREGATE MEAL SITE LOCATION AND CAPACITY

Congregate meal sites are the primary source of food for individuals that are homeless. The adjacent map shows these sites, along with the estimated number of individuals served weekly. As the maps show, these sites are primarily concentrated in the downtown area, with two large providers south of Highway 280 and east of Highway 87. Larger-sized dots on the map signify a higher number served weekly.

It is clear from the previous maps that individuals may travel to adjacent tracts to access some type of food assistance, including brown bag and food pantry sites. With so few congregate meal sites (and no providers south of Capitol Expressway), there may be hundreds of individuals that are homeless without access to a congregate meal. This includes individuals over large areas such as south San Jose, east of Highways 87 and 101, which has no congregate meal providers.

If all individuals that are homeless received one meal five times a week, it would require 20,315 meals. Currently, congregate meal providers serve approximately 8,598 meals per week, leaving a gap of 11,717 meals. Expanding capacity is necessary to increasing healthy food access, but it will not suffice to meet the food access needs of all individuals that are homeless. Additional sites located in areas where there are currently no congregate meal providers are another part of the solution to this gap in congregate meal access.

Expanding the hours of operation of congregate meal sites may be another part of making congregate meals accessible to more individuals that are homeless. Focus group participants noted that most safety-net providers are often only open during regular business hours on weekdays, making it difficult for many individuals to access food in the evenings or on weekends. Currently, only 5 congregate meal sites reported being open 7 days a week.

It should be noted that in addition to the congregate meal sites listed here, seniors that are homeless may attend Senior Nutrition Program congregate meal sites. SNP sites are not featured on this map because there is no evidence that significant numbers of individuals that are homeless are attending SNP congregate meals. Senior Nutrition Program congregate meal sites are nevertheless relevant to this section as an untapped resource and a potential part of the solution to expanding congregate meal services for seniors that are homeless.

“Homeless individuals rely more on congregate meals because they do not have the equipment or ability to store or transport the food they receive from brown bag programs... food that is not consumed in a day or two is often dumped or sold.”

-Homeless Safety-Net Provider

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24 This calculation assumes one meal per individual. The gap was calculated as the number of meals required for all individuals that are homeless receiving one meal, five times a week, minus the sum of individuals served by each congregate meal provider on a weekly basis.
DO RECENTLY HOUSED INDIVIDUALS HAVE ADEQUATE ACCESS TO FOOD SAFETY-NET PROVIDERS?

There are gaps in access to safety-net providers among recently housed individuals. The areas shown in orange, surrounding Highways 280 and 85, have the greatest number of recently housed individuals without adequate access to food safety-net providers.

RECENTLY HOUSED INDIVIDUALS

The adjacent map shows the location of individuals recently rehoused through the Housing 1000 campaign. [These ratios are presented by ZIP code, rather than by Census tract.] Two areas with moderate gaps in access are in west San Jose, surrounding Highways 280 and 85. Given the importance of access to supports and services for recently housed individuals, these areas should be examined further for opportunities to guarantee access to food assistance. The estimated cost of providing one congregate meal per day, five days a week to 1,000 recently housed individuals is $520,000. [These ratios are presented by ZIP code, rather than by Census tract.]

“Whether newly housed or still on the streets, food and the lack thereof is a common thread for the thousands of vulnerable men, women, and children who are struggling daily in our community. We owe it to them to make food a robust part of our crisis response system-- and once housed, we should be equally committed to housing and supportive services, including nutritious food, as this allows for recovery, stability and wellness.”

- Jennifer Loving, Executive Director of Destination: Home

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26 ZIP codes with more than 50 recently housed individuals and no safety-net providers were considered to have a high ratio. ZIP codes with more than 20 recently housed individuals and no safety-net providers were considered to have a high ratio. ZIP codes with either between 20 and 50 recently housed individuals and 1 safety-net provider or between 50 and 100 recently housed individuals and 2 safety-net providers were considered to have a low ratio. ZIP codes with fewer than 20 recently housed individuals with no safety-net providers were considered to have “sufficient resources.”
27 This calculation contains only the cost per meal ($2), and does not reflect additional costs associated with expanding food assistance.
Analysis: Transportation and Walksheds

OVERVIEW

In focus group interviews with individuals that are homeless, transportation was cited as a common barrier to food access, with high costs in both money and time. Providers also reported that limited public transportation options contribute to the extensive amount of time people spend traveling for food.

This analysis evaluates the accessibility of food assistance for individuals travelling to safety-net providers and shelters using public transit. Transit accessibility of safety-net providers and shelters varies considerably. The main finding here is that many individuals that are homeless may not have ready access to the full range of services they need because of the difficulty of getting from one point to another.

TRANSIT ACCESSIBILITY

Transit accessibility was calculated by the number of transit stops within walking distance, defined in this analysis as a half-mile. In many parts of San Jose, individuals that are homeless have very low access to transit to and from safety-net providers and shelters.

On the adjacent map showing transit access around safety-net providers, this can be seen in the red-colored points, each representing a safety-net provider with very few transit stops (1-10). As the map shows, public transit around most safety-net providers is plentiful in downtown San Jose, while many providers located in areas north and south of the downtown core have very low access to public transit. Relatively isolated sites, such as those in south San Jose, have the least public transit access. Transit access around shelters follows a similar pattern, with even fewer transit stops for shelters outside of downtown [see Appendix C for the map of transit access around homeless shelters].

It should be noted that transit measured by the number of stops may not fully capture a site’s accessibility. For example, the quantity of stops may have less significance for sites located near important transfer points in the transit network. For the majority of sites, however, transit stops serve as a sufficient proxy, offering a consistent way to compare a site’s relative connectivity to different points in the city.
Analysis: The Retail Food Environment

OVERVIEW

In addition to access to safety-net providers, this assessment attempts to evaluate the quality of the retail food environment in and around providers and shelters. This is done in two ways: through the Modified Retail Food Environment Index, or mRFEI\(^{28}\) within walking distance of safety-net providers and shelters, and walking access to SNAP/CalFresh retailers from shelters.

Prior research has shown that in low-income areas of San Jose, on average 84% of food retailers are considered “unhealthy” by the mRFEI.\(^{29}\) This goes hand in hand with the presence of retailers accepting SNAP/CalFresh. Retailers accepting SNAP/CalFresh in areas where there is low access to healthy food retail (a low mRFEI score) are likely to be small markets or convenience stores with few healthy food options.

\(^{28}\) The modified Retail Food Environment index (mRFEI) provides a ratio for the number of healthy food retailers (e.g., supermarkets, gardens, farmer’s markets, and community-supported agriculture) compared to the number of less healthy food retailers (e.g., fast food restaurants, small grocery stores, and convenience stores).


RETAIL FOOD ENVIRONMENT AROUND SHELTERS

The retail food environment in the half-mile walkshed around safety-net providers tends to reflect poor access to healthy food, though some shelters are located in comparatively better retail food environments than other safety-net providers. Walksheds around eight of 44 shelters have mRFEI scores higher than 25%, indicating moderately high healthy food access (see page 26 for definition), while those around all but three of 42 homeless safety-net providers have scores of 25% or lower, indicating moderately low to no access to healthy food. [See Appendix C for map of mRFEI around safety-net providers] These findings, combined with the data on SNAP/CalFresh retailers in these half-mile walksheds on the following page, show that individuals that are homeless and receiving CalFresh have greater access to unhealthy foods—where there is any retail food access at all.
INDIVIDUALS THAT ARE HOMELESS

FOOD FOR EVERYONE

Legend:
- 0 (No Access to Healthy Food)
- < 10% (Low Access)
- 10%-25%
- 25%-50% (High Access)

Sources: California Nutrition Network/Old of San Jose Planning Department/Brian Fulford and Associates and John Snow, Inc.
ARE THERE RETAILERS ACCEPTING SNAP/CALFRESH AROUND SHELTERS?

Shelters in the downtown core have the largest concentration of retailers accepting SNAP/CalFresh. Areas in south San Jose have low access to healthy food, but also lack access to SNAP/CalFresh retailers.

RETAILERS ACCEPTING SNAP/CALFRESH AROUND SHELTERS

The adjacent map shows that shelters downtown have the most retailers accepting SNAP/CalFresh within walking distance, which reflects the higher number of food retailers in general. Shelters on the City’s periphery appear to have little access to any kind of food retail; these generally have access to 2 or fewer vendors accepting SNAP/CalFresh.
INDIVIDUALS THAT ARE HOMELESS

FOOD FOR EVERYONE
RECOMMENDATIONS
INDIVIDUALS THAT ARE HOMELESS

1. Integrate food access into City and County homeless support services.

2. Develop a food assistance protocol to assist those most affected by, or most at risk of nutrition-related chronic conditions.

3. Create a flexible and mobile congregate meal system for individuals that are homeless that moves as the population moves.

4. Formalize partnerships with faith-based communities to meet the needs of individuals that are homeless in areas of the city that lack food resources.

5. Explore opportunities to increase and use Senior Nutrition Program funding to better meet the needs of older adults that are homeless.

6. Explore opportunities to increase CalFresh enrollment of individuals that are homeless.

7. Develop infrastructure that supports an ongoing, coordinated solution to the food access needs of individuals that are homeless.

8. Explore opportunities in the existing safety-net infrastructure for cross-population services (e.g., could kitchens at Senior Nutrition Program sites prepare to-go meals for individuals that are homeless).

9. Form partnerships where possible between food safety-net providers and other service providers.

“Individuals that are homeless and low-income seniors are some of the City’s lowest-income residents, and those most struggling with food insecurity. As a community, we need to work smarter together to target the areas of high need and to find creative ways to overcome the barriers that many face on a daily basis.”

- Kathy Jackson, CEO of Second Harvest Food Bank
V. Low-Income Seniors

Analysis: Availability of Food Assistance

OVERVIEW

There are 29,755 seniors in San Jose that are low-income, earning less than 200% of the federal poverty threshold. At 27% of the senior population, this is a large group but a likely under-estimate of the number of seniors who may experience food insecurity. Unlike the Elder Index,\(^{30}\) which measures poverty based on the costs of living at the county level, the U.S. Census sets the poverty threshold at the same level for the 48 contiguous states. It can be assumed that a significant portion of seniors in San Jose have incomes that are far lower than what is needed to consistently afford healthy food.


In addition to struggling to afford sufficient food, seniors are also more likely to have health problems that impact their ability to shop for and prepare food. For example, 22% of seniors in San Jose have ambulatory difficulty, a disability defined as “serious difficulty walking or climbing stairs,” and 19% have independent living difficulty, a disability defined as “difficulty doing errands alone.” Lower incomes are also associated with having a disability. While it is unknown exactly what percentage of seniors with a disability are low-income, Census data show that 5,000 seniors in San Jose have a disability and are living in poverty [less than 100% FPL].\(^{31}\)

The Senior Nutrition Program, consisting of congregate meals and a home-delivered meal service, is intended to fill the gaps in healthy food access exacerbated by low incomes or disability. As a community resource, the Senior Nutrition Program has the potential to generate benefits beyond the food itself. For many seniors, attending a meal at one of the City or County Senior Nutrition Program sites is both a source of healthy food and a chance for vital social interaction. Senior meal programs are a helpful tool to get seniors to leave their homes and access secondary support services they may otherwise avoid. The Senior Nutrition Program also promotes community cohesion, a building block of strong neighborhoods. Yet for many low-income seniors, in particular in neighborhoods on the east and west sides of the City, access to Senior Nutrition Program congregate meal sites appears limited.

**Particularly underserved areas for congregate meals include:**

- East San Jose, south of Story Road and east of Highway 101 to Yerba Buena Road. A single provider (Evergreen Community Center), a Senior Nutrition Program site budgeted to serve 415 meals per week (83/day), is located in the entire area. There is one provider south of Curtner Avenue serving 135 meals weekly; the area contains over 2,000 low-income seniors.

- West San Jose, west of Highway 87 and on both sides of Highway 85. There is no congregate meal site from Curtner Avenue in the north to Camden Avenue in the south. The Almaden Community Center is located on Camden Avenue and is budgeted to serve just 245 meals weekly (49/day). This area includes over 1,000 low-income seniors on either side of Almaden Expressway and along Highway 85.

Many seniors also rely on brown bag or food pantry programs as sources of food. Access to brown bag sites also appears insufficient in these same areas, as most sites are located near or in addition to congregate meal sites.

**Particularly underserved areas for brown bag-food pantry programs include:**

- West San Jose, west of Highway 17 surrounding Valley Medical Center, and south of Curtner Avenue west of Highway 87. The area north of Curtner Avenue has no brown bag or food pantry providers. The two closest providers serve 235 and 149 seniors weekly (47 and 30/day), respectively; the area contains over 2,000 low-income seniors. South of Curtner Avenue is one provider serving 135 seniors weekly; the area contains over 2,000 low-income seniors.

- South San Jose, between Highway 87 and Highway 101 and south of Branham Lane. The closest provider serves 262 seniors weekly (52/day); the area contains over 1,500 low-income seniors.

- East San Jose, south of Story Road and east of Highway 101. There are over 3,000 low-income seniors in this area. The two closest providers serve 483 and 262 low-income seniors weekly (97 and 52/day), respectively.

In addition to these gaps in access, the number of seniors with ambulatory difficulty in San Jose strongly indicates unmet need among low-income seniors who may be best served by home-delivered meals.
LOCATIONS OF SENIOR FOOD SAFETY-NET PROVIDERS AND LOW-INCOME SENIORS

The adjacent map shows that safety-net provider sites, in particular, Senior Nutrition Program congregate meal sites, are concentrated in downtown San Jose and along Highway 280, where there are corresponding high concentrations of low-income seniors. More isolated sites are located in other parts of the city; the map shows these single sites surrounded by several Census tracts with moderate numbers of seniors. Some areas with high numbers of low-income seniors have no food safety-net providers; notably, east of Highway 101 and south of Highway 280, and the area north of Highway 85 and west of Highway 87.

Utilization of food assistance has risen among seniors in recent years, reflecting the increase in the senior population. The number of CalFresh recipients aged 60 and over has more than doubled since 2009;\(^\text{32}\) the Senior Nutrition Program congregate meals program has experienced a rise in participation as well. The SNP congregate meal program for adults aged 60 and older maintains sites throughout Santa Clara County, with 26 sites in San Jose. San Jose residents account for approximately 54% of SNP participation.\(^\text{33}\)

Given the number of low-income seniors and levels of food insecurity in San Jose, there is significant potential for SNP participation to grow. Previous research has suggested lack of awareness, varying quality and type of food served at congregate meal sites, or even a perceived “social stigma of getting support” as reasons why SNP participation is not higher among this growing age group. The following analysis attempts to evaluate low-income seniors’ access to SNP sites and how factors such as the location, capacity, or transit accessibility of sites may encourage or limit participation in SNP congregate meals.

In addition to congregate meals, 22 distribution sites in San Jose provide groceries and other non-prepared foods through the Senior Brown Bag program, run by Second Harvest Food Bank. These sites were mapped to assess whether they are located in areas with high numbers of low-income seniors. Since many brown bag programs are located in the same facility or near to Senior Nutrition Program congregate meal sites, the gaps in access are similar to those of the congregate meal sites. This is evident on the map, where several sites appear to be clustered, while large areas in south and east San Jose with high numbers of low-income seniors do not have a single provider. While brown bag sites are a primary source of food for many low-income seniors and may have more ability to expand capacity, they do not offer the same level of support as Senior Nutrition Program congregate meal sites—and they require that seniors or a caretaker prepare meals at home.


WHERE IS THE GREATEST UNMET NEED FOR SENIOR NUTRITION PROGRAM CONGREGATE MEALS?

The areas in dark red show where there is unmet need for Senior Nutrition Program congregate meal sites. Areas east of Highway 101 and south of Highway 280, or west of Highway 87 and north of Highway 85, show where the need for additional resources is greatest.

UNMET NEED FOR SENIOR NUTRITION PROGRAM CONGREGATE MEALS

The map34 shows the areas where unmet need for Senior Nutrition Program congregate meals may be highest [Census tracts in dark red]. This was calculated by the ratio of low-income seniors to Senior Nutrition Program congregate meal sites. Not surprisingly, this ratio is highest in tracts with the most low-income seniors. In some cases, however, they are adjacent to tracts with a Senior Nutrition Program congregate meal site. Seniors may travel from their Census tract to a congregate meal site in a neighboring tract.

Other Census tracts are largely isolated from any Senior Nutrition Program congregate meal sites. This includes the areas east of Highway 101 and south of Highway 280, and west of Highway 87 and north of Highway 85, where large numbers of low-income seniors clearly have no access to a congregate meal site.

The number of seniors served by the Senior Nutrition Program congregate meal program in San Jose increased to approximately 8,184 individuals from FY 2013-14 to 2014-15.35 Given the number of low-income seniors and levels of food insecurity in San Jose, there is significant potential for SNP participation to grow further. Previous research has suggested lack of awareness, varying quality and type of food served at congregate meal sites, or even a perceived “social stigma of getting support” as reasons why SNP participation is not higher among this growing age group. This map suggests that location of sites is an important factor in seniors’ participation in SNP congregate meals. With these current locations, it appears that some low-income seniors are less able to benefit from congregate meals than others.

34 Census tracts were ranked according to the ratio of low-income seniors to Senior Nutrition Program congregate meal sites. The ratio was calculated for Census tracts with a population of more than 50 low-income seniors for each SNP site. Census tracts were grouped into five population classes using natural breaks. Census tracts with between 288 and 502 low-income seniors and three or fewer safety-net providers, or 190-287 low-income seniors and two or fewer safety-net providers were considered to have a high ratio. Census tracts with between 129 and 189 low-income seniors and one or fewer safety-net providers or between 73 and 128 low-income seniors and 1 or fewer safety-net providers were considered to have a medium ratio. Census tracts with between nine and 71 low-income seniors and no safety-net providers were considered to have a low ratio. Census tracts with zero low-income seniors were included in the “low” ratio grouping for the purposes of this analysis.


36 U.S. Census Bureau; American Community Survey, 2008-2012 5-Year Estimates, Table B17024 <http://factfinder2.census.gov>
Senior Nutrition Program congregate meal sites can increase capacity, but this capacity is not unlimited, and it will not address the fact that some areas of San Jose lack providers of any kind.

CAPACITY AND LOCATION OF SENIOR NUTRITION PROGRAM CONGREGATE MEAL SITES

The map illustrates the number of meals budgeted to serve weekly at each Senior Nutrition Program congregate meal site. Green points indicate budgets to serve the highest number of meals on a weekly basis; red the lowest. The sites budgeted to serve the most meals, between 390 and 858 meals per week (78 and 172/day), are located in downtown and east San Jose [roughly corresponding with the Mayfair and Alum Rock neighborhoods], where there are corresponding high concentrations of low-income seniors.

Outside of these areas, however, the budgeted capacity of congregate meal sites does not match consistently with where low-income seniors are located. In particular, the capacity of moderately-sized Senior Nutrition Program congregate meal sites (ranging from 100 to 350 meals per week) in south San Jose may be insufficient to serve seniors from surrounding areas, given the number of low-income seniors in those Census tracts.

One limitation to the data in this map is that they show the budgeted, not actual, volume of meals served at Senior Nutrition Program congregate meal sites. Senior Nutrition Program congregate meal sites may increase the volume budgeted to serve each year in response to higher demand, if they are able to expand capacity and match the necessary funding increase from the County. 37

Expanding the City’s capacity to provide meals through the Senior Nutrition Program is an opportunity to leverage additional County and federal matching funds. The County, with a larger share of the cost, will match funding for City-run sites that increase the number of meals served, to the extent that capacity allows. 39

A comparison with recently released County statistics on the Senior Nutrition Program congregate meal program for FY 2014-15 shows that for these moderately-sized sites in south San Jose [Seven Trees, Southside, Almaden, Camden, Willow Glen], the estimated total number of meals served based on the budget is similar to or lower than the actual volume served. 40 This is coupled with the fact that a number of Senior Nutrition Program sites have already reached full capacity. 41 The growing population of seniors and recent increases in Senior Nutrition Program participation also support the assumption that existing site capacity soon will not suffice to serve the population in many parts of the city. Furthermore, many seniors who want to participate in congregate meals or receive brown bag or food pantry items may not be able to travel to these sites. Approximately 22 percent of seniors in San Jose have ambulatory difficulty, defined by the U.S. Census as “difficulty walking or climbing stairs.” In particular, seniors with ambulatory difficulty living alone and at higher risk of social isolation may require food assistance through other means.
Analysis: Transportation and Walksheds

OVERVIEW

For low-income seniors able to travel, the availability of public transit can be critical to accessing food. Safety-net providers located even within short walking distances are otherwise inaccessible to seniors with limited mobility. In addition, some providers reported that senior clients feel unsafe walking due to common hazards such as uneven sidewalks, heavy traffic, or lack of crosswalks on the way to Senior Nutrition Program or brown bag sites.

As the previous maps demonstrate, many low-income seniors do not live in the immediate vicinity of a Senior Nutrition Program site or a brown bag site. Many may rely on friends and family for rides to access food. Others rely on public transportation and assistance from Outreach, the subsidized transportation service provider in Santa Clara County.

RECENT CHANGES TO SENIOR TRANSPORTATION ACCESS

Prior to June 2013, Santa Clara County contracted with Outreach to provide subsidized transportation to Senior Nutrition Program sites. These subsidies were allocated to individual Senior Nutrition Program sites.42 With its adoption of Mobility Management in 2014,43 the County began allocating transportation subsidies to individuals, and expanded the program to include bus passes, gas cards, van and volunteer driver services, mileage reimbursement and taxis. Additional funding

42 Note that the City has its own contract with Outreach. According to the Santa Clara County Board of Supervisors Nutrition Program Audit, “The City of San Jose provides additional transportation services to SNP participants through a separate agreement with Outreach totaling $240,000 in FY 2013-14.”

43 Mobility Management is “a coordinated effort between the Senior Nutrition program (SNP) and Outreach & Escort, Inc. (OUTREACH) to help seniors gain access to congregate meal sites.” FY 2014-2015 Mobility Management Program Progress Report.
for transportation to Senior Nutrition Program sites is
provided through the Measure A–Senior Transportation
Mobility Management Program.44

According to the latest estimates, over 2,400
unduplicated seniors in the County benefited from
Mobility Management (and Measure A) in FY 2014-15;
the average number of seniors utilizing these services
monthly has increased by 64%.45 The most frequently
used feature was bus passes [followed by gas cards and
ADA rides]. San Jose residents constitute approximately
59% of Mobility Management utilization in the

44 Measure A reported serving 1,790 unduplicated seniors in the first quarter
of 2015. These funds are temporary, however, running through 2017.
45 571 seniors were served monthly on average in FY 2013-14. In FY
2014-15, an average of 1,598 seniors were served monthly from Mobility
Management and Measure A combined.

46 Ibid.

The chart below includes data from Outreach on the
total number of trips to Senior Nutrition Program sites
using the various modes of transit through the Mobility
Management Program. The chart shows the breakdown
of SNP sites with the estimated percentage of Senior
Nutrition Program meals accessed using Outreach
services. For some sites, including Catholic Charities
of Santa Clara County and Southside Community and
Senior Center, nearly half of Senior Nutrition Program
congregate meals are accessed through some form of
Outreach service. Please note that at the time of this
assessment, data for all sites were not available.

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<th># of Meals Budgeted Daily</th>
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It is important to note that these data represent only Senior Nutrition Program trips. Seniors access Senior Nutrition Program sites through other Outreach services. As a result, this may underestimate the attendance at Senior Nutrition Program sites.
The transit accessibility of Senior Nutrition Program congregate meal sites varies. There are areas with poor transit access and high numbers of seniors with mobility challenges (shown in red on the map). In some areas, increasing access to congregate meals will also require establishing new congregate meal sites.

**Transit Access around Senior Nutrition Program Congregate Meal Sites**

Public transit access to Senior Nutrition Program congregate meal sites was evaluated by measuring the number of transit stops, as a proxy for a transit network, within walking distance of each site. Walking distance for seniors was defined as a quarter-mile.

The adjacent map shows the number of transit stops in the quarter-mile walkshed around each Senior Nutrition Program congregate meal site. It also shows where there are significant numbers of seniors with mobility challenges, who are more likely to require transportation to Senior Nutrition Program congregate meal sites. Transit access around many of these sites appears limited, as the sites in red and orange on the map show.

It should be noted that transit measured by the number of stops may not fully capture a site’s accessibility. For example, the quantity of stops may have less significance for sites located near important transfer points in the transit network. For the majority of sites, however, transit stops serve as a sufficient proxy, offering a consistent way to compare a site’s relative connectivity to different points in the city.

It is difficult to determine exactly how public transit affects access to Senior Nutrition Program congregate meals. According to the Mobility Management Program Progress Report for 2014-2015, the most funds (39%) were allocated to subsidized bus passes, the most widely-used Outreach service. Low-income seniors may use the bus passes they purchase through Mobility Management for trips to locations other than Senior Nutrition Program sites. This is compounded by the fact that the site-specific data are not broken down by mode of transit.

In general, increases in Outreach services and Senior Nutrition Program participation seem to confirm that improving transportation options can increase low-income seniors’ access to congregate meals. At the same time, it is clear that transportation does not present a catch-all solution to food access for low-income seniors.

For one, Outreach serves only a small percentage of the total low-income senior population; improvements there will have a limited effect. Furthermore, evidence shows that low-income seniors attend—or do not attend—particular Senior Nutrition Program sites for a variety of reasons, such as the type of food, the social atmosphere, or their own mobility needs. While it clearly can act as an obstacle to Senior Nutrition Program congregate meal participation, transit accessibility is not the only factor to consider when assessing low-income seniors’ access to congregate meals. To fully address the unmet need for congregate meals among low-income seniors, the more appropriate solution to consider may be increasing the number of Senior Nutrition Program sites.
Analysis: Retail Food Environment

OVERVIEW

The quality of the retail food environment for low-income seniors was evaluated using the Modified Retail Food Environment Index, or mRFEI (see Glossary for details) measuring access to healthy retail and SNAP vendors within walking distance.

This assessment evaluated the retail food environment of the City’s planned growth areas, specific areas that have been selected for focused growth in jobs and housing over the next 25 years, as outlined in San Jose’s Envision 2040 General Plan. These planned growth areas are intended to be mixed-use and transit-oriented, and they present an opportunity to incorporate food access goals into the planning and development process.

Walking distance to SNAP/CalFresh vendors and healthy food retail was also measured from affordable housing units, as a significant number of low-income seniors live in affordable housing. Nearly 22%, or 3,894 deed-restricted affordable apartments in 34 complexes in San Jose are designated “senior units.” This is in addition to the many seniors living in affordable housing units that are not exclusively for seniors.

PLANNED GROWTH AREAS

The adjacent map shows the number of low-income seniors in Census tracts within the City’s planned growth areas, parts of San Jose where there is expected to be the greatest population growth. The shapes outlined in black indicate the areas designated by the City for planned growth.
**IS THERE HEALTHY FOOD AVAILABLE FOR PURCHASE IN AREAS OF THE CITY WHERE THERE WILL BE THE GREATEST POPULATION GROWTH?**

Planned Growth Areas, selected for focused growth in jobs and housing over the next 25 years, contain high numbers of low-income seniors. 60% of these areas have no access to healthy food (mRFEI = 0).

**RETAIL FOOD ENVIRONMENT IN PLANNED GROWTH AREAS**

Planned Growth Areas are “specific areas of San José which are planned to accommodate the majority of the City’s job and housing growth. Focusing new growth into the Growth Areas helps to protect the quality of existing neighborhoods. It also enables development of new Urban Village areas with a compact and dense form that are attractive to the City’s projected population demographics, that support walking, provide opportunities to incorporate retail and other services in a mixed-use format, and support transit use.”

- Envision 2040, Chapter 1, Context and Key Issues

The map shows that 60 percent of planned growth areas have no access to healthy food, based on their mRFEI scores. Many planned growth areas do not have a safety-net provider that serves low-income seniors. This includes some of the areas described in the Overview lacking Senior Nutrition Program congregate meal sites or brown bag/food pantry providers.

“Most of our neighborhoods are not food deserts but are junk food swamps...So they only have access to corner markets that don’t have healthy options.”

- Senior Safety-Net Provider
Access to healthy food retail within walking distance is low around affordable housing complexes. One-third of senior affordable housing complexes have low or no access to healthy food (mRFEI = 25% or lower).

**HEALTHY FOOD RETAIL AROUND AFFORDABLE HOUSING**

Analysis of affordable housing units in San Jose shows that many are located in areas with low access to healthy foods. The areas identified as lacking senior food safety-net providers also include several affordable housing complexes with low or no access to healthy food, reinforcing the gap in food access for low-income seniors in these areas.

Not all affordable housing with low or no access to healthy food is comprised of senior units; however, 39 percent of all affordable housing in the city has no access to healthy food within walking distance. The map shows that healthy food retail access is also low among senior-designated housing; one-third of these complexes have low or no access to food within a quarter-mile walking distance. [To see the map of healthy food retail around all affordable housing, see Appendix C.]

There are 34 affordable housing complexes in San Jose that are deed-restricted for seniors. **One-third** of these complexes have **low or no access to food** within a quarter-mile walking distance.

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51 See the list of affordable housing maintained by the San Jose Housing Department: https://www.sanjoseca.gov/DocumentCenter/View/18668
**ARE THERE FOOD RETAILERS ACCEPTING SNAP/CALFRESH AROUND AFFORDABLE HOUSING COMPLEXES?**

There are many SNAP/CalFresh retailers within walking distance of affordable housing complexes; however, they are not healthy food retailers. With so many low-income seniors in these areas, investing in healthy food access around affordable housing would have significant returns for low-income seniors and their neighborhoods.

**RETAILERS ACCEPTING SNAP/CALFRESH AROUND AFFORDABLE HOUSING**

The adjacent map shows that many affordable housing complexes have access to at least one SNAP/CalFresh retailer within a quarter-mile walkshed. Taken together with the data in the previous map on mRFEI scores in the walksheds around affordable housing, this map indicates that in many areas, the only retail food options for senior CalFresh recipients are small markets or convenience stores selling unhealthy foods.

These findings reveal significant gaps in access to healthy food retail, but they also present an opportunity to incorporate healthy food access into the City’s planned growth areas. The Urban Village concept, with its emphasis on creating vibrant neighborhoods through jobs, housing, and innovative urban design, is a logical starting point for improving healthy food access. With significant numbers of low-seniors in many of the neighborhoods slated for economic growth, the benefits of a healthier food retail environment would be far-reaching.

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**The CalFresh benefit for seniors is $156 per month.**

An estimated 6,913 low-income seniors are not receiving SSI or CalFresh could amount to $3.35 million in additional economic activity in San Jose.
DO SENIORS FEEL SAFE ACCESSING FOOD RESOURCES IN THEIR NEIGHBORHOODS?

Analysis: Crime and Safety

OVERVIEW
Levels of crime and perceptions of safety can affect neighborhood walkability and, in turn, the neighborhood food environment. Seniors living in neighborhoods with higher crime levels may avoid walking to grocery stores or safety-net providers because of concerns for their safety. Providers in the Senior Nutrition Program reported that some congregate meal sites are located in “unsafe” neighborhoods, which likely prevents some seniors from attending. This assessment mapped the City’s gang hot-spots as a proxy for high-crime areas to analyze how crime levels might be affecting seniors’ ability to access healthy foods.

ACCESS TO FOOD SAFETY-NET PROVIDERS IN AREAS WITH HIGH LEVELS OF VIOLENCE

The map shows three areas where there is a high concentration of low-income seniors and no safety-net providers in the area. Low-income seniors in these areas may be deterred from attending Senior Nutrition Program meals or traveling to brown bag providers because of a perceived lack of safety. Downtown San Jose includes multiple hot-spots with moderate or high numbers of seniors, some of whom may not be accessing the safety-net providers in the area despite their proximity.

This map provides some context for the level of safety in areas where low-income seniors and safety-net providers are located, but additional research on these areas is needed to draw any conclusions about the role of crime in determining low-income seniors’ access to healthy food.
Analysis: Mobility of Low-Income Seniors

OVERVIEW

Congregate meals and brown bag sites are a convenient and effective safety-net food service for many seniors, but there remains unmet need among a significant subset of the population. Census estimates of seniors with ambulatory difficulty were used to identify possible gaps in access to food assistance.

For many low-income seniors with ambulatory difficulty, walking distance may entail a very small radius around the home, and public transit may not be an option. They may not be able to attend SNP congregate meals or pick up unprepared foods from a brown bag site, and may instead rely on caregivers for grocery shopping and food preparation, or rely on processed foods that require minimal preparation. The nutritional demands of chronic disease management are often more challenging for seniors reliant on food assistance.

Low-income seniors with such a profile are less likely to benefit from congregate meal programs than from meal delivery programs such as Meals On Wheels. The number and location of seniors with ambulatory difficulty in San Jose strongly indicate gaps in access to delivered meals and the need for expansion of the Meals On Wheels program.

52 Ambulatory difficulty is defined by the US Census as “difficulty walking or climbing stairs.”
### SENIOR DEMOGRAPHICS BY ZIP CODE TABULATION AREA

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<th>Percent Low-Income Seniors</th>
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Zip Code Tabulation Areas are used by the US Census for data-gathering purposes. They do not correspond in all cases to postal ZIP codes. Totals will be slightly different from those given in the analysis, as Census tract boundaries and Zip Code Tabulation Areas are not perfectly aligned.

Source: US Census Bureau; American Community Survey, 2008-12 5-Year Estimates, Tables B17024 and B18105 http://factfinder2.census.gov
**WHERE ARE THERE LARGE NUMBERS OF SENIORS WITH LIMITED MOBILITY IN SAN JOSE?**

It is estimated that there are 6,600 low-income seniors with ambulatory difficulty in San Jose. Areas in dark red show where seniors with ambulatory difficulty live; many of these seniors are unable to access healthy food.

**SENIORS WITH LIMITED MOBILITY**

The map shows the distribution of seniors with ambulatory difficulty in San Jose. For those aged 65 and over in the United States, it is the most commonly reported disability. While it is unclear exactly what percentage of seniors with ambulatory difficulty are low-income, research has found a strong correlation between disability and low socioeconomic status among all age groups.

Data from the American Community Survey show that poverty rates among older adults with a disability such as ambulatory difficulty are higher than that of the population without a disability. Based on the available data, it is roughly estimated that over 6,600 seniors with ambulatory difficulty in San Jose are also low-income.

Ambulatory difficulty and other disabilities are also associated with older age, being female, and living alone. Nationally, nearly a quarter of individuals aged 65-74 with a disability live alone, compared to 30 percent of those aged 74-80, and 38 percent for those 85 and older. Living alone puts seniors at higher risk of social isolation, which is in turn linked to poor nutrition and poor health outcomes such as increased hospitalizations.

Many of these characteristics describe the average Meals On Wheels client in Santa Clara County. Over half of County Meals On Wheels seniors are over 80 years old. Almost 70% of all MOW participants live at or below the Federal Poverty Level, and nearly half of them live alone. 63% of participants are women.

“**They are waiting for their meal [from] the moment that they wake up because their driver is the only person they are going to see that day.**”

- Senior Safety-Net Provider

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55 This calculation was made by taking 27% of the total number of seniors with ambulatory difficulty in San Jose. US Census Bureau; American Community Survey, 2008-12 5-Year Estimates, Table B18105 http://factfinder2.census.gov.

56 Ibid.


58 This calculation was made by taking 27% of the total number of seniors living alone. US Census Bureau; American Community Survey, 2008-12 5-Year Estimates, Table C11010 http://factfinder2.census.gov.

As many as 4,111 seniors who could benefit from home-delivered meals are currently not receiving Meals On Wheels. Areas in dark red—notably, east of Highways 101 and 680 and bordering Highway 85—show the areas of greatest unmet need.

**SENIORS NOT SERVED BY MEALS ON WHEELS**

The County Meals On Wheels program served 682,988 meals to 1,689 unduplicated seniors in FY 2014-2015, and an additional 80,000 meals were served to 800 unduplicated seniors through the Meals On Wheels program run by the Health Trust. It is likely that there are far more seniors in need of delivered meals than the number currently served by Meals On Wheels. An estimated 4,111 low-income seniors with ambulatory difficulty in San Jose are currently not receiving Meals On Wheels.

The map shows this potential gap in access with the difference between the number of seniors receiving Meals On Wheels and those with ambulatory difficulty in each Census tract.

Almost 70% of Santa Clara County, Meals on Wheels recipients live at or below the Federal Poverty Level, 50% nearly half of them live alone. Approximately 2,489 seniors receive Meals on Wheels. That leaves an estimated 4,111 low-income seniors with ambulatory difficulty.

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RECOMMENDATIONS
LOW-INCOME SENIORS

1. Identify senior communities, affordable housing units, and other residential areas with high concentrations of seniors that would benefit from cost-effective solutions such as food drops or mobile produce units.

2. Develop a Senior Nutrition Program outreach strategy to increase participation in communities with high concentrations of low-income seniors and SNP congregate meal sites with the potential to increase capacity.

3. Increase funding for mobile meal services, i.e., Meals On Wheels, for the lowest-income, most vulnerable older adults in San Jose.

4. Explore innovative solutions to allow low-income seniors to access food resources in the community (e.g., restaurant vouchers, grocery delivery service).

5. Incentivize healthy food retail in the City’s planned growth areas.

6. Explore opportunities in the existing safety-net infrastructure for cross-population services (e.g., could kitchens at Senior Nutrition Program sites prepare to-go meals for individuals that are homeless).

7. Explore opportunities to increase CalFresh enrollment of low-income seniors.

8. Form partnerships where possible between food safety-net providers and other service providers.
Conclusion

This assessment used stakeholder interviews, constituent focus groups, GIS mapping and extensive data collection to identify gaps in healthy food access and opportunities to make smarter investments in food assistance for the nearly 30,000 low-income seniors and over 4,000 individuals that are homeless in our city. Analyses for both low-income seniors and individuals that are homeless revealed a concentration of food assistance resources downtown and a mismatch of resources to the population in many other parts of the city. At the same time, this report identified several opportunities to improve healthy food access among individuals that are homeless and low-income seniors-- solutions that are within the reach of partners in City and County government, safety-net providers and other non-profits working to serve these populations, and other key stakeholders. With a commitment to partnership and a vision for a San Jose where no one lives outside and no senior goes hungry, we can fundamentally improve food access for those who need it most.

Individuals that are Homeless

These findings, based on data from the US Census and from interviews with safety-net providers and individuals that are homeless, show that there are numerous reasons why access to healthy food is so variable.

In some parts of San Jose, healthy food access is limited by the lack of a safety-net provider nearby; this is compounded by low public transit accessibility near providers outside of downtown. In other cases, the accessibility of healthy food may depend on providers’ capacity, or the days and times that food is available: several congregate meal providers appear overburdened, and only a small number of brown bag and congregate meal sites are open 7 days a week. The retail food environment around safety-net providers and shelters also reflects poor access to healthy food, according to the mRFEI scores in the half-mile walkshed around them.

These findings argue for making food access a priority in the response to homelessness. Evidence from Santa Clara County shows that access to the full range of supports and services, in addition to housing, leads to better outcomes for individuals that are homeless. As one of these services, access to healthy food can mean fewer diseases related to nutrition and more resources that can be directed towards finding housing and achieving stability. Focusing on the gaps in food access—with evidence of why and where they are occurring—can make the City’s response to homelessness more effective for individuals, and ultimately less costly to health, social service, and justice systems.61

There are numerous opportunities to make small but significant changes in the approach to food assistance for individuals that are homeless. The recommendations here emphasize communication between providers and developing the mobility to provide food where necessary. These steps are important to elevating food access as one of the essential components of the City’s response to homelessness and meeting the specific needs of individuals that are homeless.

Low-Income Seniors

Findings on low-income seniors’ access to food, based on data from the US Census and Santa Clara County and from interviews with safety-net providers, show that some low-income seniors are less able to benefit from the senior food safety-net than others.

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Healthy food access for low-income seniors outside of downtown San Jose is more limited in part because of the lack of Senior Nutrition Program congregate meal and brown bag sites, particularly in the east and south of the City. Public transit access to many of these sites is low. Some seniors can reach them using Outreach, the subsidized transportation service supported by the City and County, though the data suggest several other reasons keeping seniors from SNP congregate meal sites, including the type of food, the social atmosphere, and seniors’ mobility needs. Increases in SNP congregate meal participation (along with the number of low-income seniors in recent years) also raise the concern that existing sites may be reaching or exceeding capacity.

Senior Nutrition Program congregate meal sites are a main focus of this assessment because they increase seniors’ access to healthy food, and because they are a valuable community asset. The expansion of SNP congregate meal sites could enable more seniors to benefit from congregate meals in their neighborhoods, at the same time contributing to neighborhood cohesion.

The same may be said for improving the overall retail food environment in Urban Villages and other planned growth areas. At present, the mRFEI scores of quarter-mile walksheds around affordable housing units and planned growth areas—where many low-income seniors reside—indicate a poor retail food environment. The benefits of a healthier food retail environment, as described in Envision 2040 as part of the City’s vision for healthier and more vibrant neighborhoods, are multidimensional. From small business opportunity to increased public safety, making a concerted effort to improve food retail goes beyond a strategy that serves only seniors.

Low-income seniors’ access to healthy food is made more challenging because many seniors experience some degree of mobility problems; 22% of seniors in San Jose report having ambulatory difficulty. The high number of seniors with forms of limited mobility and low-income strongly suggests that there are many seniors in need of a delivered meal service, though fewer than 2,500 currently receive Meals On Wheels. As the senior population grows, expanding food assistance to seniors in need through Meals On Wheels should be at the forefront of the conversation on access to healthy food in San Jose.

NEXT STEPS

The next step is to develop a Food Access Implementation Plan, a multi-stakeholder effort that incorporates the findings here into a detailed action plan. With a deeper understanding of gaps in food access and various opportunities to improve food assistance for individuals that are homeless and low-income seniors in San Jose, it is now time to address the food needs of two of the most vulnerable groups in our city.
Appendix A. Detailed Methods: Primary Data Collection

PHONE & EMAIL SURVEY OF FOOD ASSISTANCE PROVIDERS

In order to collect information on the availability and accessibility of safety-net food resources for the target populations, we identified and surveyed 125 providers regarding hours and days of operation, meal services/programs offered, clients served, and information about enrollment services for public food assistance (SNAP, WIC).

We identified 72 providers that met the following criteria: 1) provide food assistance in the form of a brown bag/grocery program, meal program, or other program (e.g. Senior Nutrition Program); and 2) are located within the City of San Jose. Sites were initially included (n=192) if they were listed as a Second Harvest Food Bank distribution site or were listed on a public resource directory as organizations that provide food assistance to one of the target populations (homeless individuals or low-income seniors).

A member of the research team recorded as much information as available from online resources (including information about hours, program offerings, and location) prior to calling identified sites. Sites were called to confirm their address, request basic information about the food assistance provided (e.g., program type, days/hours, eligibility requirements, and number of people served per day), and obtain contact information for a staff member that could answer in-depth questions via email. Sites were removed from the final list if: 1) they no longer existed or no longer provided food assistance of any kind, or 2) if they did not serve meals and/or distribute food on-site (e.g., were an administrative office).

KEY INFORMANT INTERVIEWS

We conducted key informant interviews with food assistance providers serving homeless and senior clients that could provide insight on the target populations as well as those who have the potential to address food access but are currently experiencing barriers. Interviews discussed assets and challenges at the organizational, political, and systems levels as well as potential opportunities to address food access within their respective organizations. Organizations were identified for interviews by The Health Trust staff and the City of San Jose public agencies. These sites had a reputation of or were known to provide a large number of meals or serving a large number of homeless or low-income seniors clients in San Jose. Additional food assistance sites were identified for interviews during the course of data collection. In addition, we conducted a group interview with five homeless providers at a meeting organized by the City of San Jose.

FOCUS GROUP

JSI conducted a focus group with homeless individuals at a large homeless shelter (HomeFirst) in San Jose to gather information about how they were accessing food and food assistance resources. This information helped to assess how available safety-net resources are meeting the food needs of the homeless population. Two facilitators asked questions about individuals’ habits and preferences for accessing food or food assistance resources as well as challenges and needs to accessing food.
Appendix B. Detailed Methods: GIS Mapping

All mapping and related spatial analyses were completed in ArcGIS 10.2.2. All analyses were calculated within the City of San Jose. Demographic data for low-income seniors was obtained from the 2008-2015 American Community Survey 5-Year Estimates at the Census tract level. Tracts were clipped to the boundary of the City of San Jose. For tracts that overlapped the city boundary, weighted averages for demographic values were calculated based on the proportion of the area of the tract within the city and by reviewing urban land use patterns in these locations using high resolution aerial photos.

- Low-income seniors were defined as those 65 years or older with incomes under 200% of the Federal Poverty Level.

- The population of individuals that are homeless was obtained at the Census tract level; however, weighted averages were not applied to the population of sheltered homeless individuals.

- The locations of retail food, shelters, SNAP vendors, and safety-net providers were geocoded using ArcGIS online world geocoding service.

- The modified Retail Food Environment Index (mRFEI) was calculated using geocoded locations of healthy and unhealthy food retailers downloaded from the California Nutrition Network (September 2014).

- Housing 1000 participants were reported as the number of individuals by zip code. Only participants for zip codes that are mostly within the City of San Jose were included in the analysis.

**FOOD ASSISTANCE AVAILABILITY & ACCESSIBILITY**

Accessibility and availability were mapped as both concentrations and/or walking distances. Concentrations were calculated as frequency of safety-net providers in relationship to the number of individuals that are homeless or low-income seniors within a given tract to identify possible unmet need. These are intended to highlight potential gaps in availability and/or accessibility.

**TRANSIT ACCESSIBILITY**

The number of transit stops within walksheds was used as proxy for transit accessibility. The number of transit stops within a half mile (quarter mile for low-income seniors) were grouped into accessibility categories (e.g., low to high access). Walking distances were calculated by tracing along the street centerline network obtained from the City of San Jose up to ¼ or ½ mile from a given point (e.g., a safety-net provider). Walksheds (both ¼ and ½ mile) are the areas that encompass these streets. Half-mile walksheds were calculated for food safety-net providers and/or shelters serving individuals that are homeless. Quarter-mile walksheds were calculated around safety-net providers primarily serving seniors.
**UNMET NEED (RATIO OF SAFETY-NET PROVIDERS TO INDIVIDUALS THAT ARE HOMELESS)**

Census tracts were ranked according to the ratio of safety-net providers to the number of individuals that are homeless. Census tracts with no safety-net providers and more than 20 individuals that are homeless were considered to have high unmet need. Census tracts with one safety-net provider and more than 50 individuals that are homeless were considered to have medium unmet need. Census tracts with one safety-net provider and up to 50 individuals that are homeless were considered to have a low unmet need. Census tracts with more than one safety-net provider or fewer than 10 individuals that are homeless were also included in the “low” unmet need grouping.

**RATIO OF RECENTLY HOUSED INDIVIDUALS TO SAFETY-NET PROVIDERS**

ZIP codes with more than 50 recently housed individuals and no safety-net providers were considered to have a high ratio. ZIP codes with more than 20 recently housed individuals and no safety-net providers were considered to have a moderate ratio. ZIP codes with either between 20 and 50 recently housed individuals and 1 safety-net provider or between 50 and 100 recently housed individuals and 2 safety-net providers were considered to have a low ratio. ZIP codes with fewer than 20 recently housed individuals with no safety-net providers were considered to have a very low ratio for the purposes of this analysis. ZIP codes with no recently housed individuals were considered to have “sufficient resources.”

**RATIO OF LOW-INCOME SENIORS TO SENIOR NUTRITION PROGRAM CONGREGATE MEAL SITES**

Census tracts were ranked according to the ratio of low-income seniors to Senior Nutrition Program congregate meal sites. Census tracts were grouped into five population classes using natural breaks. Census tracts with between 288 and 502 low-income seniors and three or fewer safety-net providers or 190-287 low-income seniors and two or fewer safety-net providers were considered to have a high ratio. Census tracts with between 129 and 189 low-income seniors and one or fewer safety-net providers or between 73 and 128 low-income seniors and 1 or fewer safety-net providers were considered to have a medium ratio. Census tracts with between nine and 71 low-income seniors and no safety-net providers were considered to have a low ratio. Census tracts with zero low-income seniors were included in the “low” ratio grouping.

**LOW-INCOME SENIORS AND MEALS ON WHEELS**

Utilization of the county Meals On Wheels (MOW) program was determined by subtracting the number of MOW participants (FY 13-14) from the number of seniors with ambulatory difficulty.
Appendix C

List of Maps

Locations of Food Safety-Net Providers and Individuals that are Homeless
Areas of Unmet Need for Food Assistance
Location and Capacity of Congregate Meal Providers
Recently Housed Individuals
Transit Accessibility of Food Safety-Net Providers
mRFEI within Walking Distance of Shelters
Food Retailers Accepting SNAP/CalFresh around Shelters
Locations of Food Safety-Net Providers and Low-Income Seniors
Unmet Need for Senior Nutrition Program Congregate Meals
Transit Access Around Senior Nutrition Program Congregate Meal Sites
Location and Capacity of Senior Nutrition Program Congregate Meal Sites
Transit Access Around Senior Nutrition Program Congregate Meal Sites
Low-Income Seniors in Planned Growth Areas
mRFEI in Planned Growth Areas
mRFEI within Walking Distance of Affordable Housing (Senior Complexes Only)
Food Retailers Accepting SNAP/CalFresh around Affordable Housing
Low-Income Seniors in Gang Hot-Spots
Seniors with Ambulatory Difficulty
Seniors with Ambulatory Difficulty not Served by Meals On Wheels

In Appendix only:

2015 San Jose Homeless Census data
Transit Access around Homeless Shelters
mRFEI within Walking Distance of Safety-Net Providers
mRFEI within Walking Distance of Affordable Housing (all)
<table>
<thead>
<tr>
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<td>Number of Unsheltered Homeless Individuals (by tract)</td>
<td>Applied Survey Research (City of San Jose Homeless Census)</td>
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<td>Destination Home</td>
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<td>Safety Net Providers (homeless) – all sites</td>
<td>BFA/JSI</td>
<td>2015</td>
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<td>Safety Net Providers (homeless) – congregate meal sites</td>
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<td>Safety Net Providers (homeless) – brown bag sites</td>
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<td>Safety Net Providers (homeless) – food pantry sites</td>
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<td>Safety Net Providers (seniors) – all sites</td>
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<td>Safety Net Providers (seniors) – Senior Nutrition Program (SNP) congregate meal sites</td>
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<td>Safety Net Providers (seniors) – brown bag sites</td>
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<td>Unmet Need (Ratio Food Safety-Net Providers to Homeless Individuals)</td>
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<td>Transit Routes</td>
<td>Santa Clara Valley Transportation Authority</td>
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<td>Walksheds (½ mile) of Safety Net Providers (homeless)</td>
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<td>Walksheds (¼ mile) of Safety Net Providers (seniors)</td>
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<td>Walksheds (½ mile) of Shelters</td>
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<td>Transit Accessibility (# of transit stops w/i walksheds) of Safety Net Providers (homeless)</td>
<td>BFA/JSI</td>
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<td>Transit Accessibility (# of transit stops w/i walksheds) of Safety Net Providers (seniors)</td>
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<td>mRFEI within Shelter Walksheds</td>
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<td>mRFEI within Affordable Housing Walksheds</td>
<td>BFA/JSI (California Nutrition Network; City of San Jose Housing Dept.)</td>
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<td>mRFEI within Planned Growth Areas</td>
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<td>Number of SNAP vendors within walking distance to Shelters</td>
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<td>Number of SNAP vendors within walking distance to Affordable Housing</td>
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<td>Number of Low-Income Seniors within Crime Hot Spots</td>
<td>American Community Survey (2008-2012 5 Year estimates); City of San Jose Police Dept.</td>
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<td>Number of Seniors with Ambulatory Difficulty not served by MOW (County)</td>
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<td>HomeFirst (Formerly EHC LifeBuilders) Boccardo Reception Center</td>
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<td>Loaves and Fishes Family Kitchen Saint Maria Goretti Kitchen</td>
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<td>St. Julie Billiart Parish</td>
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# Food for Everyone

## Map Key: Low-Income Seniors

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<td>901 E Santa Clara St, San Jose, CA 95116</td>
<td>SNP Congregate Meal</td>
</tr>
<tr>
<td>27</td>
<td>Sacred Heart Church</td>
<td>325 Willow St, San Jose, CA 95110</td>
<td>Brown Bag</td>
</tr>
<tr>
<td>28</td>
<td>Santa Clara Valley Blind Center</td>
<td>101 N Bascom Ave, San Jose, CA 95128</td>
<td>SNP Congregate Meal</td>
</tr>
<tr>
<td>29</td>
<td>Seven Trees Community Center 1</td>
<td>3590 Cas Dr, San Jose, CA 95111</td>
<td>SNP Congregate meal</td>
</tr>
<tr>
<td>30</td>
<td>Southside Community and Senior Center 1</td>
<td>5585 Cottle Rd, San Jose, CA 95123</td>
<td>SNP Congregate meal</td>
</tr>
<tr>
<td>31</td>
<td>St. Maria Goretti Catholic Church</td>
<td>2980 Senter Rd, San Jose, CA 95111</td>
<td>Brown Bag</td>
</tr>
<tr>
<td>32</td>
<td>The Salvation Army Silicon Valley</td>
<td>359 N 4th St, San Jose, CA 95112</td>
<td>SNP Congregate meal</td>
</tr>
<tr>
<td>33</td>
<td>Trinity Episcopal Cathedral</td>
<td>81 N 2nd St, San Jose, CA 95113</td>
<td>Brown Bag</td>
</tr>
<tr>
<td>34</td>
<td>Westminster Presbyterian Church</td>
<td>1100 Shasta Ave, San Jose, CA 95126</td>
<td>Brown Bag</td>
</tr>
<tr>
<td>35</td>
<td>Willow Glen Community/Senior Center</td>
<td>2175 Lincoln Ave, San Jose, CA 95125</td>
<td>SNP Congregate meal</td>
</tr>
<tr>
<td>36</td>
<td>Willow Glen United Methodist Church</td>
<td>1420 Newport Ave, San Jose, CA 95125</td>
<td>Brown Bag</td>
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<tr>
<td>37</td>
<td>Yu Ai Kai (Japanese American Community Services) 1</td>
<td>588 N 4th St, San Jose, CA 95112</td>
<td>SNP Congregate meal</td>
</tr>
<tr>
<td>38</td>
<td>Northside Community Center</td>
<td>488 N 6th St, San Jose, CA 95112</td>
<td>SNP Congregate meal</td>
</tr>
<tr>
<td>39</td>
<td>Alviso Senior Center</td>
<td>5050 N 1st St, San Jose, CA 95134</td>
<td>SNP Congregate meal</td>
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<tr>
<td>40</td>
<td>Billy De Frank LGBT Community Center</td>
<td>938 The Alameda, San Jose, CA 95126</td>
<td>SNP Congregate meal</td>
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<tr>
<td>41</td>
<td>Cypress Senior Center 2</td>
<td>403 Cypress Ave, San Jose, CA 95117</td>
<td>Brown Bag</td>
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<tr>
<td>42</td>
<td>Korean American Community Services</td>
<td>1099 N 4th St, San Jose, CA 95112</td>
<td>SNP Congregate meal</td>
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<tr>
<td>43</td>
<td>Mayfair Golden Manor – 2</td>
<td>2627 Madden Ave, San Jose, CA 95116</td>
<td>SNP Congregate meal</td>
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<tr>
<td>44</td>
<td>Portuguese Organization for Social Services and Opportunities (POSSO) – 2</td>
<td>1115 E Santa Clara St, San Jose, CA 95116</td>
<td>SNP Congregate meal</td>
</tr>
<tr>
<td>45</td>
<td>Seven Trees Community Center 2</td>
<td>3590 Cas Dr, San Jose, CA 95111</td>
<td>Brown Bag</td>
</tr>
<tr>
<td>46</td>
<td>Southside Community and Senior Center 2</td>
<td>5585 Cottle Rd, San Jose, CA 95123</td>
<td>Brown Bag</td>
</tr>
<tr>
<td>47</td>
<td>Yu Ai Kai (Japanese American Community Services) 2</td>
<td>588 N 4th St, San Jose, CA 95112</td>
<td>Brown Bag</td>
</tr>
</tbody>
</table>
## Appendix D: Food Assistance Programs in San Jose

<table>
<thead>
<tr>
<th>Program Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Congregate meal program</td>
<td>Provide prepared meals or snacks on-site to clients in need who may or may not reside on the agency’s premises.</td>
</tr>
<tr>
<td>Brown bags, grocery, or pantry programs</td>
<td>Distribute non-prepared foods, groceries, and other household supplies for off-site use, usually for preparation in the client’s home. Bags may be prepared for clients or clients may be able to choose foods from a pantry.</td>
</tr>
<tr>
<td>Informal feeding groups</td>
<td>Distribute prepared meals at parks or other outdoor venues.</td>
</tr>
<tr>
<td>Senior Nutrition Program</td>
<td>County- and City-sponsored program providing congregate hot meals to seniors.</td>
</tr>
<tr>
<td>Santa Clara County Meals on Wheels Program</td>
<td>Distribute hot and frozen meals delivered to homebound individuals in their homes.</td>
</tr>
<tr>
<td>The Health Trust Meals on Wheels</td>
<td>Distribute hot and frozen meals delivered to homebound individuals in their homes. Also conduct a wellness check at delivery.</td>
</tr>
<tr>
<td>Senior Brown Bag Program</td>
<td>Distribute non-prepared foods and groceries for off-site use, usually for preparation in the client’s home. Run by Second Harvest Food Bank, a large food bank serving Santa Clara and Santa Cruz Counties.</td>
</tr>
<tr>
<td>CalFresh, the Supplemental Nutrition Assistance Program (SNAP)</td>
<td>Clients receive financial assistance monthly to purchase food at eligible retailers.</td>
</tr>
</tbody>
</table>
Appendix E: Organizations Interviewed

SAFETY-NET PROVIDERS FOR INDIVIDUALS THAT ARE HOMELESS:

- HomeFirst
- Loaves & Fishes
- Martha’s Kitchen
- Sacred Heart Community Service
- Second Harvest Food Bank

SAFETY-NET PROVIDERS FOR LOW-INCOME SENIORS:

- Alzheimer’s Activity Center
- Asian Americans for Community Involvement
- City of San Jose, Senior Nutrition Program
- Institute on Aging
- MidPen Housing
- Outreach Mobility Management
- Santa Clara County Senior Nutrition Program
- Sourcewise
- The Health Trust
The Health Trust
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