ADDRESSING HUNGER AS A HEALTH ISSUE
AND OTHER SOCIAL DETERMINANTS
“The test of our progress is not whether we add more to the abundance of those who have much; it is whether we provide enough for those who have too little.”

- FDR - Second Inaugural Address
Addressing the root causes of poor health through cross-sector collaborative partnerships.
Our Work:

– Building consensus, trust, and cross-sector, sustainable partnerships.

– **Advocacy** – local, state, and national

– **Education** – fully engage the healthcare community and community organizations

– **Research** – measure and enhance intervention success
Figure 1

Impact of Different Factors on Risk of Premature Death

- Genetics: 30%
- Individual Behavior: 40%
- Social and Environmental Factors: 20%
- Health Care: 10%

Figure 2

Social Determinants of Health

<table>
<thead>
<tr>
<th>Economic Stability</th>
<th>Neighborhood and Physical Environment</th>
<th>Education</th>
<th>Food</th>
<th>Community and Social Context</th>
<th>Health Care System</th>
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</thead>
<tbody>
<tr>
<td>Employment</td>
<td>Housing</td>
<td>Literacy</td>
<td>Hunger</td>
<td>Social integration</td>
<td>Health coverage</td>
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<td>Access to healthy options</td>
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<td>Early childhood education</td>
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<td>Community engagement</td>
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<td>Debt</td>
<td>Parks</td>
<td>Vocational training</td>
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<td>Discrimination</td>
<td>Quality of care</td>
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<td>Medical bills</td>
<td>Playgrounds</td>
<td>Higher education</td>
<td></td>
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<tr>
<td>Support</td>
<td>Walkability</td>
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</table>

Health Outcomes
Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations
MEDICALLY TAILORED GROCERIES?

• We currently offer five medically tailored grocery meal plan options to fit the dietary needs of our Eat Well South Florida program participants.

• What does it mean to be medically tailored? It means we’re addressing food needs while addressing the increasing prevalence of chronic illnesses in our community:
  
  – Obesity,
  – Diabetes,
  – Hypertension/Cardiac Artery Disease and
  – Chronic Kidney Disease
  – HIV
  – Cancer

• All aided by good nutrition.
MEDICALLY TAILORED GROCERIES?

- What does it mean to be medically tailored? It means we’re addressing food needs while addressing the increasing prevalence of chronic illnesses in our community.
  - Obesity
  - Diabetes
  - Hypertension/Cardiac Artery Disease
  - Chronic Kidney Disease
  - HIV
  - Cancer
- All are aided to some degree by good nutrition.
MEDICALLY TAILORED GROCERIES?

• All food boxes include at least 28 servings of appropriate fresh fruits and vegetables.
• All grocery lists making up our food boxes have been approved by a Registered Dietitian and
• Provide a balanced diet when choices are made with a variety of food groups as recommended by the Dietary Guidelines for Americans and ChooseMyPlate.
GROCERIES FOR A REGULAR HEALTHY MEAL PLAN

• Minimizes added trans-fat and saturated fat
• Encourages
  – healthy choices like whole grains, fruits and vegetables
  – variety in proteins including lean choices like chicken, fish and plant based proteins like beans and peas
  – choices from every food group
WHY ARE THESE GROCERIES HEALTHY?

• Minimize added trans-fat and saturated fat
• Encourage healthy choices like whole grains, fruits and vegetables
• Encourage variety in proteins including lean choices like:
  – chicken
  – fish &
  – plant based proteins (beans and peas)
• Encourage choices from every food group


GROCERIES FOR A HEART HEALTHY MEAL PLAN

• Recommended for Program Participants who have:
  – Cardiovascular Disease including Heart failure, Stroke, Bypass,
  – Cardiovascular risk factors including high blood pressure, high cholesterol, high triglycerides, or
  – who are going through smoking cessation may benefit from our Heart Healthy Meal Plan
WHY ARE THESE GROCERIES GOOD FOR HEART DISEASE?

• Diet low in Sodium (<350mg/serving) Cholesterol (<200mg/day) 
  & Fat (50-75gm/day) *
• Minimize
  – added trans-fat
  – saturated fat,
  – processed foods
• Fewer choices from Higher fat proteins like beef, pork and chicken quarters
• High in Fiber (Whole grains, fruits and vegetables) and Omega 3 
  (Salmon, Tuna, beans, nuts, seeds).
• More Lean protein:
  – Chicken breast,
  – Fish,
  – Plant-based proteins
• Low Fat Milk and milk products
GROCERIES FOR A KIDNEY FRIENDLY MEAL PLAN

• Groceries for a Kidney-Friendly Meal Plan are recommended for Program Participants with
  – Chronic Kidney Disease (Stage I-IV) or
  – Highly recommended for Clients on Dialysis (Chronic Kidney Disease V), or
  – For clients who would like another option, our dietitian also recommends groceries for a Heart Healthy meal plan.
WHY ARE THESE GROCERIES KIDNEY FRIENDLY?

• Low in Sodium (<350 mg/serving)
• Low in Potassium (<250mg/serving)
• Low in Phosphorus (<50mg/serving)
• High in Fiber including fruits and vegetables
GROCERIES FOR A DIABETIC FRIENDLY MEAL PLAN

- Program Participants with:
  - Diabetes type I or II,
  - Prediabetes, or
  - concern for weight management

may enjoy groceries on a meal plan that highlights Limited carbohydrate choices or servings per meal/ grocery cart.
WHY ARE THESE GROCERIES DIABETIC FRIENDLY?

- 15-18 carbohydrate choices/day* or 225-275gm/day*
- Decreased intake of added sugars
- Foods high in Fiber including:
  - whole grains,
  - fruits and
  - vegetables
- Balanced diet with foods from all food groups
- *Standards based on average 2000kcal diet, with carbohydrates coming from variety of food sources (fruits, vegetables, grains, milk, etc.) enjoyed throughout each day.
GROCERIES FOR A VEGETARIAN FRIENDLY MEAL PLAN

- Clients who prefer a vegetarian diet which Focuses on:
  - Plant-based proteins like beans,
  - peas,
  - nuts, or
  - Grains

may select from Groceries for a Vegetarian-Friendly Meal Plan.
WHAT MAKES THESE GROCERIES VEGETARIAN FRIENDLY?

For Program Participants who prefer a vegetarian diet which focuses on plant-based proteins like: beans, peas, nuts, the Vegetarian-Friendly Meal Plan:

• Adds additional proteins like seafood (fish) and eggs
• Includes high fiber foods including whole grains, fruits and vegetables
• Encourages variety in food groups
**100% PARTICIPANT CHOICE**

- Specials are items donated that are easily included into a healthy meal plan, but that won’t be a regular part of our list.
- Dairy
- Fresh Fruits
- Fresh Vegetables
- Grains
- Proteins
- Beans
CONTACT INFORMATION

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www.Poverello.org
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@EatWellSFL
@LiveWellSFL
@BeWellSFL
Models for increasing access to local, healthy food

November 5, 2017
Leigh Caswell, MPH, Director, Center for Community Health
"Inadequate attention to and investment in services that address the broader determinants of health is the unnamed culprit behind why the United States spends so much on health care but continues to lag behind in health outcomes."

Elizabeth Bradley and Lauren Taylor, The American Health Care Paradox
Presbyterian Delivery System

- **8 hospitals** in 7 communities. Opening a new medical center in Santa Fe in 2018
- 1 tertiary care facility and 2 community hospitals in Albuquerque metro area
- 2 community hospitals and 3 critical access hospitals in five rural communities
- **981** licensed hospital beds
- Presbyterian has **44.5 percent** of inpatient discharges in Albuquerque metro
Why Presbyterian is working in communities

Charitable Purpose

Community Benefit

PRESBYTERIAN
Community health assessments and plans

• Addressing Affordable Care Act requirements for non-profit hospitals
  • Part of our community benefit requirement
• In 2013 and 2016 completed 6 assessments and plans, covering 10 counties
• Priorities
  • System-wide: Healthy eating, active living, prevention of unhealthy substance use
  • Select counties: Economic development, behavioral health, violence prevention
Our role in community health

Improve the health of the communities we serve

3 Core Priorities: healthy eating, active living, and prevention of unhealthy substance use

Serve as a convener and help people work across boundaries in service of overarching community health priorities

Support for interventions in partnership; honoring local expertise

Partner to strengthen what exists; improve effectiveness of healthcare interventions; support economic development

PRESBYTERIAN
Food access and nutrition education

- Fresh, organically grown fruits and veggies from local farms
- Visiting schools, community centers, and clinics
- Nutrition education and food tastings
- Incentives and subsidies
- Veggie Rx from provider

Funded by the National Institute of Food and Agriculture, U.S. Department of Agriculture, under award number 2016-33800-2588. Made possible (in part) with funding from the Centers for Disease Control and Prevention, Presbyterian Healthcare Services and Bernalillo County.
Access - leveraging federal funds

Mobile Farmers' Market 2017 Sales by Type

- FreshRx Vouchers & Other Credits: 37%
- Cash/Card: 31%
- Senior Checks & Double Up Senior Checks: 13%
- SNAP / EBT & Double Up SNAP: 15%
- WIC & Double Up WIC: 4%
- Other Credits: 37%
$14,534 in Farmers’ pockets and the local economy in 2016

4,110 lbs. of local food sold at the Healthy Here Mobile Farmers’ Market
Access - free healthy meals for kids

• Utilize existing hospital cafeteria infrastructure
• 16,000 meals
• 5 out of 8 hospitals

Free Healthy Meals Seven Days a Week
Are you between the ages of 3-18 or do you have a child who is? If so, you can receive a free healthy meal or snack* at one of the following Presbyterian cafeteria locations:

PRESBYTERIAN HOSPITAL
1100 Central Ave. SE
The cafeteria is located on level 5-2, north side of the hospital.
• Meals available between 1 and 7 p.m.,
  seven days a week
• Healthy snacks are available between 11 a.m. and 1 p.m.,
  seven days a week

PRESBYTERIAN KASEMAN HOSPITAL
8300 Constitution Ave. NE
The cafeteria is located on the south side of the hospital.
• Meals available between
  11 a.m. and 1:30 p.m.,
  Monday through Friday
• Healthy snacks are available between 1 and 4:30 p.m.,
  Monday through Friday

No identification is necessary and anyone between 3 and 18 qualifies. You will need to order from a cashier and sign a log showing you received a meal. The meal or snack must be eaten at the hospital.

*Meal and snacks are specific items.

Questions? Email us at CommunityHealthTeam@phs.org

PRESBYTERIAN
Center for Community Health

USDA

Presbyterian
Nutrition Services

Community Health

Nutrition Services
Access - partnering with our food bank

- Demonstration kitchen
- Healthy food center
Local procurement – anchor institutions

GOAL: Procure locally-grown food. Identify locations to grow local food supply, meet with local growers to explore barriers to purchasing locally and develop pilot projects.
Building community infrastructure

Three Sisters community kitchen – supporting entrepreneurs and nutrition education

Community farm and food hub – supporting farmer cooperatives and physical infrastructure

Food Bank local procurement study – increasing access to local, healthy food through food pantries
Thank you!
lcaswell@phs.org
# Social Determinants of Health

## Economic Stability
- Employment
- Income
- Expenses
- Debt
- Medical bills
- Support

## Neighborhood and Physical Environment
- Housing
- Transportation
- Safety
- Parks
- Playgrounds
- Walkability

## Education
- Literacy
- Language
- Early childhood education
- Vocational training
- Higher education

## Food
- Hunger
- Access to healthy options

## Community and Social Context
- Social integration
- Support systems
- Community engagement
- Discrimination

## Health Care System
- Health coverage
- Provider availability
- Provider linguistic and cultural competency
- Quality of care

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**Health Outcomes**
- Mortality, Morbidity, Life Expectancy
- Health Care Expenditures
- Health Status
- Functional Limitations
Humana - Food Insecurity Pilot

BROWARD COUNTY, FLORIDA

Model:
1) Screen
2) Refer
3) Learn
## Food Insecurity Screening and Intervention

**By the Numbers**

<table>
<thead>
<tr>
<th></th>
<th>Details</th>
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<tbody>
<tr>
<td><strong>4</strong> weeks in Broward Continucare clinics</td>
<td>530 patients screened for food insecurity</td>
</tr>
<tr>
<td></td>
<td>46% of patients screened positive (vs. 15%)</td>
</tr>
<tr>
<td></td>
<td>nearly 2x more Unhealthy Days (27.0 vs. 14.2)</td>
</tr>
<tr>
<td>86% accepted referral to meet with FSF</td>
<td>94% accepted emergency food</td>
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<tr>
<td></td>
<td>83% referred to local food agencies</td>
</tr>
<tr>
<td></td>
<td>44% referred to SNAP and 48% receiving</td>
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</tbody>
</table>

*ADDRESSING HUNGER AS A HEALTH ISSUE AND OTHER SOCIAL DETERMINANTS*
Humana’s Strategy

1. “High Touch” Intervention randomized control trial
2. Factors Affecting Health in Older Adults study
3. Healthcare screening and referral toolkit
4. Other partnerships and learning opportunities
Hunger hardship an issue in Toledo

More than 1 in 5 families with children experience food hardship in Toledo

<table>
<thead>
<tr>
<th>MSA</th>
<th>Food Hardship Rate</th>
<th>Rank</th>
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<tbody>
<tr>
<td>Columbia, SC</td>
<td>30.6</td>
<td>1</td>
</tr>
<tr>
<td>Dayton, OH</td>
<td>29.4</td>
<td>2</td>
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<tr>
<td>Chattanooga, TN-GA</td>
<td>28.2</td>
<td>3</td>
</tr>
<tr>
<td>Winston-Salem, NC</td>
<td>27.2</td>
<td>4</td>
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<tr>
<td>Greensboro-High Point, NC</td>
<td>26.8</td>
<td>5</td>
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<td>Tucson, AZ</td>
<td>26.5</td>
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<td>Bakersfield, CA</td>
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<td>Lakeland-Winter Haven, FL</td>
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<tr>
<td>New Haven Milford, CT</td>
<td>25.6</td>
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</tr>
<tr>
<td>Memphis, TN-MS-AR</td>
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<td>Fresno, CA</td>
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<td>Louisville/Jefferson County, KY-IN</td>
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<td>New Orleans-Metairie, LA</td>
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<td>El Paso, TX</td>
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<td>Scranton--Wilkes-Barre--Hazleton, PA</td>
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<td>San Antonio-New Braunfels, TX</td>
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<td>Allentown--Bethlehem--Easton, PA-NJ</td>
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<td>Las Vegas--Henderson--Paradise, NV</td>
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<td>Orlando--Kissimmee--Sanford, FL</td>
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<td>Tulsa, OK</td>
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<td>Augusta-Richmond County, GA-SC</td>
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<td>Nashville-Davidson--Murfreesboro--Franklin, TN</td>
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<td>Akron, OH</td>
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<td>Tulsa, OK</td>
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<td>Toledo, OH</td>
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The Root Cause Coalition

Addressing hunger as a health issue and other social determinants
Screening / Food pharmacy

2016 statistics
Screened: 57,244
Screened positive: 2,243
Average age: 50
Number of new food pharmacy clients: 1,100

Of 4,000 Medicaid patients completing screen and food pharmacy referral:
• Reduced ED usage (3%)
• Reduced readmission rates (53%)
• Increased primary care visit rate (4%)
A HAND UP NOT A HAND OUT

ProMedica Ebeid Institute

- Food market
- Teaching kitchen
- Job training/career skills
- Financial literacy classes
- Parenting classes
- Nutrition counseling
- Diabetes education
- Block by block community empowerment/improvement
Stay in touch

- Join the Coalition
  - www.rootcausecoalition.org
- TRCC Monthly Webinars
- TRCC 2018 National Summit
  - October 8-9, 2018 in New Orleans, LA

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Addressing the root causes of poor health through cross-sector collaborative partnerships.