NOPREN Hunger Safety Net Work Group - July 27, 2015 - Meeting Minutes

Partner perspective from Skye Cornell, Wholesome Wave

- Wholesome Wave is a national non-profit that works with a variety of community-based organizations (CBOs), grocery stores, retailers, farmers markets, federally qualified health centers (FQHCs), and hospitals across the country in 31 states + DC with over 650 sites
- Overview of Access and Affordability Portfolios: mission is to increase affordable access to fresh and healthy food for low-income consumers
- Nutrition incentives programs: incentives focusing on SNAP and other consumers (WIC) to incentivize use of these benefits to purchase healthy foods
- Evaluation: In 2010-2013, as part of their program evaluation they evaluated incentives nationally, in partnership with Fair Food Network, and found indicators that nutrition incentives help consumers to purchase more fresh fruits and vegetables
 - they were very important in having consumers spend money on healthy food
 - other indicators found opportunity for incentives to be a part of the healthy food hunger safety net

FINI Grant:

- USDA Food Insecurity and Nutrition Incentive program (FINI) part of 2014 farm bill
- Wholesome Wave was recipient of a FINI grant
- Tasked with ensuring that nutrition incentives reach their partner organizations in 18 states and building the capacity of CBOs to ensure that programs are running in a quality way
- Starting a RCT looking at key questions over 2 years
 - different incentive amounts
 - comparing outcomes of monetary vs. non-monetary incentives
 - site characteristics and differences in outcomes of purchases
- They will be looking at purchasing and consumption from the consumer side; wanting to look at sales data; look at actual purchases of healthier food and how incentives have an impact on overall sales; settings will be farmers markets and CSAs for FINI grant
- Research intended to inform future policy and advocacy efforts
- Additional projects: have a pilot starting in CT and the Southeast this fall to work more deeply with retailers, looking at incentives in retail (retailers have the ability to collect more data than in farmers markets or CSAs)
- FNV Rx program: next stage of ensuring that we're engaging with health care providers to address hunger as a health issue
- Running prescription program in 22 sites across 8 states
- Allows purchase of fruits and vegetables for entire family; we see it as a necessity to include the whole family in the program
- Targeting patients who are at greater risk of diet-related diseases
- Evaluation Results:
 - increases in food security
 - o increased consumption of fruits and vegetables
 - increased knowledge of behavior change
 - Started first longitudinal follow up on programs at 2-3 hospitals this year to examine other factors contributing to these increases; data to come this fall
 - Increase in adherence to dietary guidelines
- Indicators show there is interest in spreading this type of program

- Next steps of research and evaluation:
 - look at key elements of program (education, prescription, repeated visits) to determine which key elements are having the most impact and look at different levels of incentives
 - Look at cost savings of programs (see incredible potential for cost savings through decreased urgent care or hospital visits)
- Carol Caplan (Fair Food Network): important to point out that work being done at farmers markets
 helped to pass FINI initiative, but there is great need to move into grocery stores because that is
 where most EBT money is spent. What we're going to find is that once people are more
 knowledgeable about incentive programs in grocery stores is that we can capture more data on
 consumption and purchase of fruits and vegetables. Grocery stores are critical.
- Skye: we do have some efforts starting to focus on grocery stores. Did a pilot in a grocery store and found indicators showed more convenience and easier to shop at grocery stores compared to farmers markets or smaller stores
- Did work at Navajo nation with convenience stores and alternative retailers
- Wholesome Wave has published several articles and resources that will be made available to the group

Group Discussion: Product Development

- We want to start moving forward with discussions of product development for the work group
- We pulled common themes from last month's call that seemed to be of interest to work group members
- We have 3 ideas to discuss right now, but don't have to do all 3. We could pick what is of most interest and start with 2.
 - <u>Clinical linkages</u> (developing recommendations, looking at screening, what to do with a + screen)
 - Clinical Linkages are a big area of interest for the American Academy of Pediatrics (AAP)
 - AAP is working on policy statement/recommendations that are coming out soon
 - Angela Liese: very interested in this topic; currently doing work on diabetes and food insecurity in children; working with a pediatrician utilizing a food insecurity screener so they know what kids are dealing with at home
 - So many recommendations included dietary recommendations but hardly any ever consider what it means to eat a healthy diet when you are food insecure?
 - Carol Caplan: Fair Food Network presented recently at University of Michigan for Grand Rounds in pediatric department. About 150 doctors reported providing the food insecurity screening (2-questions screener)
 - These questions allow conversations with the doctor to get started
 - What do you do with the results and follow up from screener is important to look at
 - o Geri Henchy: FRAC is doing work around this with children
 - Sanjay Basu: working with geriatric population around hypoglycemia risk and fruit and vegetable intake (working with public housing facilities and senior centers)
 - QUESTION: Has anyone found reporting bias in their efforts?
 - Geri Henchy: in non-clinical settings we found reporting bias and believes other people have found it too (parents are concerned with reporting food insecurity regarding their kids)
 - Steve Cook: found that about 1/3 of parents reported food insecurity was a concern.
 - FRAC: In clinical settings with adults: given the choice between physician asking or giving a
 piece of paper, patients were more likely to be honest when filling out the questionnaire

- *Children's Health Watch has done a lot in this area
- Food systems and food insecurity (how they intertwine, food insecurity possible at every level)
- Sonia: we want to build on the work done by others (Amy Yaroch, Mary Story)
- Don't want to repeat this by doing a manuscript but maybe doing an infographic to support the articles that have been done already
- o Amy Yaroch: we have a few papers that were in JHEN that are related and will send
- o It's a big open area at this point and people are just starting to conceptualize things
- Food systems has been tapped into but in relation to food insecurity it has not and there are a lot of possibilities
- o <u>Developing a research agenda</u> (moving data to action to informing programs)
- Possibly develop an infographic or concept map
- Possibly conduct expert interviews with program providers and those working on ACA implementation (how has the food insecurity landscape changed)
- Screening, interventions, what are interventions affecting, cost?
- Sanjay Basu: one thing we are running into is the timing of incentive benefits and how that relates to risk of hypoglycemia; seems to be strong opinions on weekly vs. monthly incentivizing
- Geri Henchy: in response to Sanjay when talking about SNAP incentive, we prefer a
 monthly issuance because people have transportation issues and weekly would be too little
 amount of money
- Steve Cook: anyone looking at policies around food waste?
- Feeding America: there is a whole team dedicated to this topic at Feeding America
- Jenn at City Harvest: knee deep in these issues; could have someone talk about food waste on a future call

Action items and Announcements:

- Email Melissa Akers to let her know of your interest area for possible subgroups and work group products
- We will keep this discussion going in hopes of focusing in on more specific areas
- Speaker topics in the upcoming months:
 - Overview of hospital community benefits programs and new opportunities under the ACA for the hunger safety net
 - USDA update on SNAP-ed
 - NIH update on their funding perspective for food insecurity
 - Overview from Health Leads on 'green' prescriptions
 - Presentation on connection between communities and research and non-traditional research