

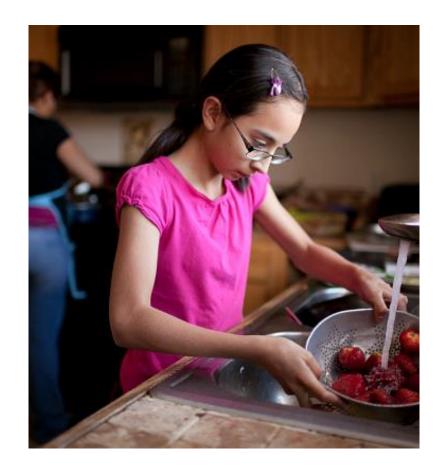


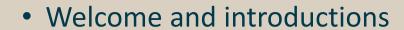


How SBHCs Can Promote Positive Health Outcomes by Addressing Food Insecurity in Their School Communities

June 28, 2022

Agenda





 Food insecurity in the contemporary United States

 No Kid Hungry Learning Network Project

 Best practice case examples from the field: How SBHCs can address food insecurity

• Q&A





Today's Objectives



 Describe how addressing food insecurity improves overall health outcomes.

 Highlight the unique role schoolbased health centers can play in addressing food insecurity.









School-Based Health Alliance

The National Voice for School-Based Health Care

No Kid Hungry is a Campaign By Share Our Strength



We're an organization dedicated to ending hunger and poverty. Through proven, effective campaigns, we connect people who care to ideas that work.



SCHOOL MEALS

Schools are at the center of our work - community centers trusted by parents and staffed by people who know the children by name and care about them. At school, kids can get the healthy food they need - for every meal of the day.



GRANTS

We distribute grants to schools, food banks and community groups across the nation to help them get the essential resources they need to feed kids, from meal carts to refrigerators to delivery trucks.



ADVOCACY

We work with national, state and local elected leaders, fighting for policies that help families make ends meet - from expanding food assistance programs to cutting through red tape to help feed children during the pandemic.



1 in 6

KIDS MAY FACE HUNGER THIS YEAR. THAT'S 13 MILLION CHILDREN.



FOOD SECURITY

- Access at all times to enough nutritious food for an active, healthy life
- Always enough of the kinds of food you want to eat (food sufficiency)







FOOD INSECURITY

Low food security

- Reduced quality / variety of foods
- Worry about food running out

Very low food security

- Reduced quality / variety of foods
- Multiple signs of disrupted eating / reducing intake
- ✓ Sometimes or often not enough to eat (food Insufficiency)



Source: Food Research & Action Center 2021 ©

CHILDHOOD FOOD INSECURITY IS ASSOCIATED WITH:

Poor Health Status



Mental Health Problems

Poor Educational Outcomes



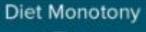






FOOD INSECURITY MAY PRESENT IN A FAMILY AS:

Food Anxiety



Decreased Nutrition Quality

Inadequate Food Intake







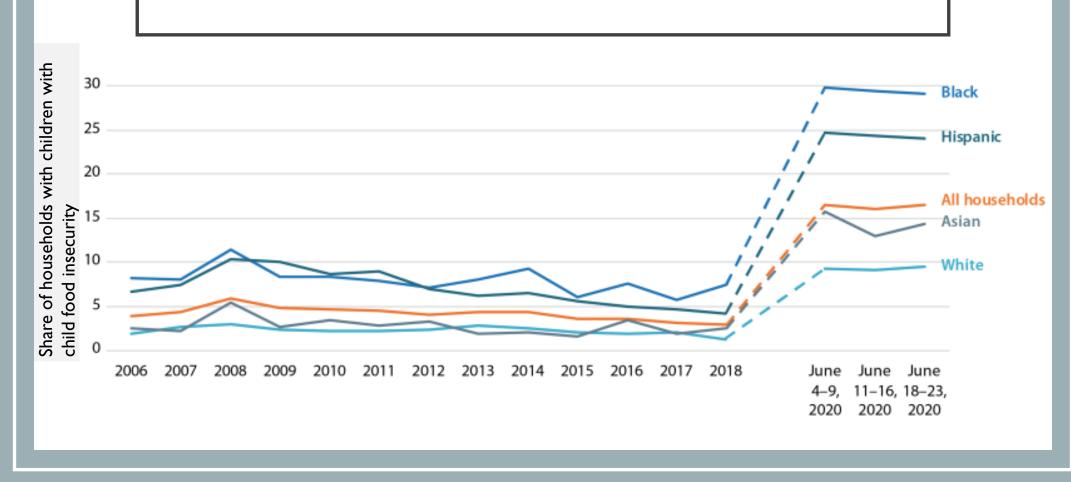


www.frac.org/aaptoolkit





COVID- 19 INCREASES U.S. CHILD FOOD INSECURITY AND DISPARITIES



Improving access to healthy food and federal food programs can have significant impact on families and children.

Families have reported physicians and school health personnel as highly trusted source of information and referrals.

The federal Child Nutrition Programs:

- reduce food insecurity;
- alleviate poverty;
- support economic stability;
- improve dietary intake and the nutrition environment;
- protect against obesity;
- improve health outcomes; and
- boost learning and development.

FRAC 2017 The Role of the Federal Child Nutrition Programs in Improving Health and Well-Being



No Kid Hungry Learning Network

January – December 2022

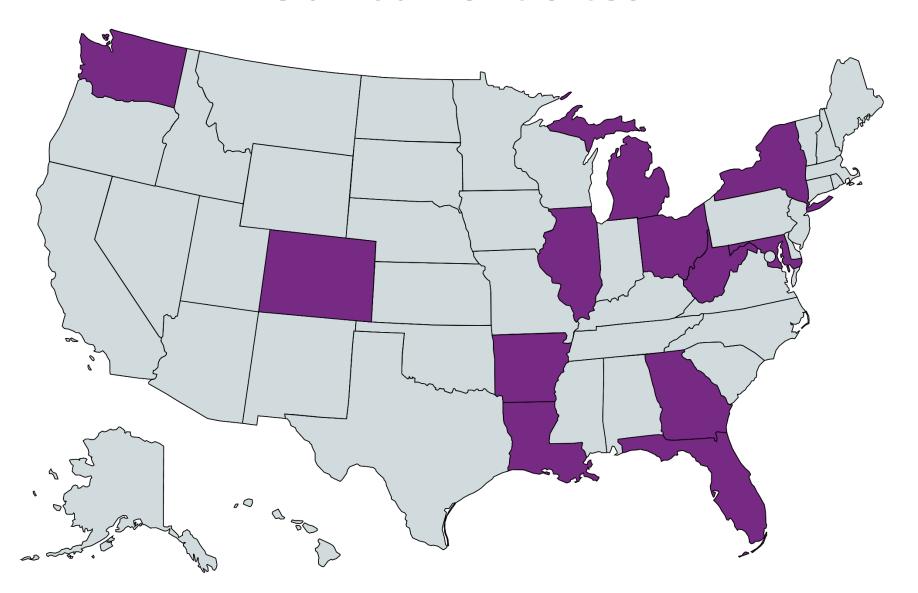
Learning Network Goals:

- 1. Create or expand a local health center model that will identify food insecure students and connect them and their families to healthy food resource(s) and nutrition education
- 2. Evaluate the model to understand the impact on
 - (1) Student health outcomes
 - (2) Student food security
 - (3) Student fruit and vegetable consumption
- 3. Develop promising practices for integration of food security models in school-based health center workflows, and use this network's learning to develop a resource toolkit.





Our Current Sites







Our Current Sites

- Malvern School and Community Health and Wellness Center Malvern, AR
- Mt. Healthy School-Based Health Center Food Pantry Cincinnati, OH
- Caroline and Talbot County School Based Wellness Centers Denton, MD
- Four Corners Youth Clinics @ SWOS and Dolores Campus Cortez and Dolores, CO
- Moorefield High School Moorefield, WV
- Hornet Health Center Pellston, MI
- Turner Elementary School Based Health Clinic Albany, GA
- Alanson Wellness Program Alanson, MI
- MetroHealth School Health Program Cleveland, OH
- Port Chester Middle School Port Chester, NY
- South Cameron High School SBHC Grand Chenier, LA
- The Counseling and Medical Place (The CAMP) at Tahquamenon Area Schools Newberry, MI
- Stephens School Based Health Center Little Rock, AR
- Rush SBHC at Orr Academy/KIPP One Chicago, IL
- Pinellas County School-Based Health Centers St. Petersburg, FL.
- Rising Star Elementary Seattle, WA



Successes to Date

- Surveys/outreach identifying needs and food resource preferences
- Identifying and cultivating partnerships
- Food access interventions have led to opportunities to connect more families with the SBHC health services
- Patients screened: 433 families screened for FI
- Nearly 700 families/students have been reached through food pantry, nutrition ed, other food programs, resource referral, SNAP enrollment

"We had a new student enroll, and through enrollment we found that we could help this family through our food pantry. When they came to the pantry, they enrolled their child in our school based health clinic and received a well-child checkup." - Malvern School and Community Health and Wellness Center

"The program has created a robust resource for families. With multiple and varied components (financial assistance, produce boxes, hot meals, classes, etc.) we have been able to offer every family at least one, and usually many, options that fit with their preferences and needs." - Neighborcare at Rising Star Elementary.









Choptank School Based Health Center's Produce Prescription Program











Mission – to provide access to exceptional, comprehensive, and integrated health care for all

Vision – to improve the health and well-being of the communities we serve; to provide and outstanding care experience; and to be an exceptional place to work and make a difference

Patients - 30,000 patients

43% patients Caroline County 37% under 18

24% patients Talbot County 59% white

27% patients Dorchester County 82% ethnicity Hispanic/Creole

6% patients non- service area 43% Medicaid/Medicare





CHOPTANK A history of care on the Eastern community health Shore of Maryland....

Founded in Caroline County in 1978

- Federally Qualified Health Center
- 1st health Center opened in 1980 in Goldsboro, MD-Northern Caroline County
- Six health care centers across the Mid-Shore/Eastern Shore of Maryland

Opened first SBHC April 2000

- Caroline County Public School partnership for school health services
- By 2012 operated a SBHC in EVERY school in Caroline County

Expanded SBHCs Talbot County in 2010

- Partnered with Talbot County Public Schools and the Talbot County Health Dept.
- Opened newest SBHC in 2022
- 2022 Talbot County Public **School Community Partner** of the Year

Growing an Integrated Model of Care

- Expanded in office primary medical/dental/behavioral health care
- SB Dental Program in Caroline, Dorchester, Talbot, Kent and Queen **Annes Counties**
- Mobile Unit to provide SB dental care and community outreach in 2021

Choptank's Community Based Program

- School Based Health and **Dental Programs:**
- ©Caroline County
- Talbot County
- **©** Dorchester County
- Ment/Queen Annes County
- Migrant
- Community Outreach



Choptank provides CLINIC BASED medical, dental services

Behavioral Health- Integrated with medical and dental services

Pediatrics- medical and dental

Women's Health/Prenatal

MAT-Medication Assisted Therapy

Choptank provides COMMUNITY BASED medical, dental services School Based Health Centers

- Operational since 2000
- Provided care to 5500 SB patients in 2019
- Currently 32 school-based sites in 5 counties
- Adding behavioral health, nutrition services and
 4 additional SBHC medical sites in the 2022-2023 school year

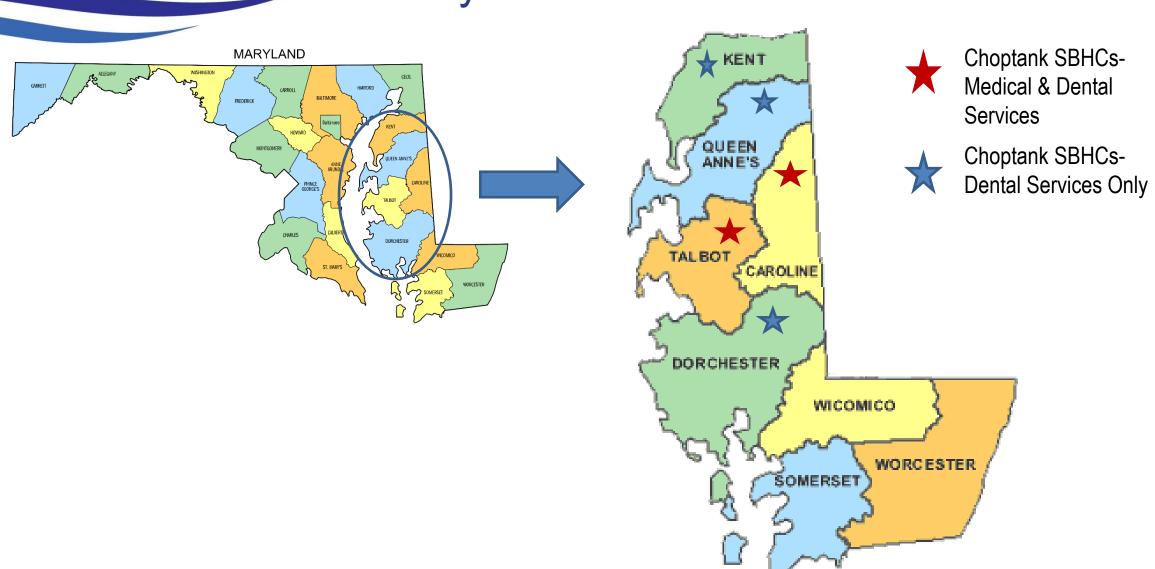








School Based Centers on Maryland's Eastern Shore

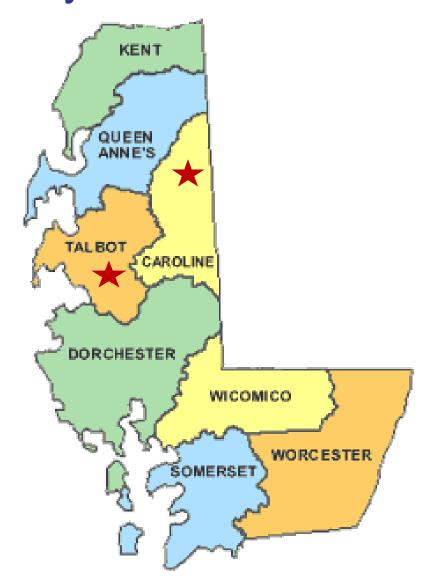


CHOPTANK School Based Health Centers on Community health Maryland's Eastern Shore

Caroline County SBHCs:

Greensboro Elementary Ridgely Elementary Denton Elementary Lockerman Middle North Caroline High

Federalsburg Elementary
Preston Elementary
Colonel Richardson Middle
Colonel Richardson High



Talbot County SBHCs:

Easton Elementary
White Marsh Elementary
Easton Middle
Easton High

St. Michaels Campus-Elementary/Middle/High



community health Caroline County Public Schools

- 5,500 students enrolled in PreK-12th grade
- 58.5% FARMS
- 36.6% Economically Disadvantaged
- 16% Hispanic
- 46% designated as Title One
- Two Concentration of Poverty/Community Schools-Greensboro/Federalsburg Elem
 - Caroline County
 PUBLIC SCHOOLS
 GROWING THE ESSENTIALS FOR LEARNING

- Greensboro Elementary
- Ridgely Elementary
- Denton Elementary
- Lockerman Middle
- North Caroline High
- Federalsburg Elementary
- Preston Elementary
- Colonel Richardson Middle
- Colonel Richardson High



Talbot County Public Schools

- Easton Elementary
- White Marsh Elementary
- Easton Middle
- Easton High
- St. Michaels Campus-Elementary/Middle/High

- 4,524 students enrolled in PreK-12th grade
- 49.5% FARMS
- 29.7% Economically Disadvantaged
- 22% Hispanic
- 37% designated as Title One





Local Nutrition and Food Access Data

Caroline County, Maryland

- Population = 32,985
- Median Household Income = \$61,021
- Unemployment = 7%
- Households below Federal Poverty Level = 15%
- Food Insecure = 11%
- Rate of Obesity = 33%
- Living in a USDA Food Desert = 24%
- Population participating in SNAP = 17%
- Number of Pantry and Free Meal Sites = 18
- Total Number of Supermarkets = 3

Talbot County, Maryland

- Population = 38,025
- Median Household Income = \$63,399
- Unemployment = 6%
- Households below Federal Poverty Level = 10%
- Food Insecure = 9%
- Rate of Obesity = 33%
- Living in a USDA Food Desert = 24%
- Population participating in SNAP = 9%
- Number of Pantry and Free Meal Sites = 10
- Total Number of Supermarkets = 6

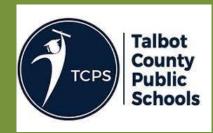


Choptank Health's Produce Prescription Program























Sho Go Curbside Market

MISSION: CREATE HEALTHIER, MORE ECONOMICALLY STABLE FAMILIES. THE MOBILE UNIT WILL ESTABLISH A MORE EQUITABLE SYSTEM OF DISTIBUTING FOOD & NUTRITION EDUCATION IN OUR COMMUNITY.



MARKET ITEMS

• FRESH FRUIT & VEGETABLES

(LOCALLY SOURCED FIRST)

• GROCERY STAPLES

- READY MEALS:
- READY MEALS:
 INDIVIDUAL &
 FAMILY SIZE
- FREE SUMMER MEALS FOR KIDS

FOOD ACCESS

- WEEKLY VISITS TO "FOOD DESERT" AREAS
- SENIOR &
 COMMUNITY
 CENTERS
- LOW INCOME NEIGHBORHOODS
- USE OF SNAP AS PAYMENT OPTION

EDUCATION

- RECIPES
- COOKING DEMOS
- SCHOOL VISITS
- SENIOR CENTER VISITS

COMMUNITY ENGAGEMENT

- OUTREACH W/ OTHER ORGANIZATION PARTNERS
 - WELLNESS CHECKS
 - HEALTH CAREVACCINATIONS
 - EXERCISE
- INFORMATION OUTLET
- CRISIS RESPONSE FOR FOOD DISTRIBUTION







Shore Gourmet Mobile Market



- · Caroline, Talbot and Dorchester County
- Stopping at busy bus stops in high needs areas
- Scheduled visits to every Summer Camp Program in Caroline County
- Visits to subsidized housing & community centers
- Churches
- Existing food pantries
- Homeless shelters
- Health Departments & Choptank clinics





- Parks and Recreation Summer Program
- Avalon Foundation- Summer Activities
- Local Public Library for free books
- Sho-Go Partner's- MD Food Bank, local farmers (stands) for summer harvest & Walmart during the winter months
- University of MD extension for recipe cards, labeling, and educational materials
- Participation in county 4H/Children's Day Activities



Going mobile....













Choptank Health's Produce Prescription Program

- Increase SBHC Enrollment
- Measure Food Insecurity
 - Hunger Vital Signs
- Measure Dietary Knowledge
 - Healthy Habits Questionnaire
- Health and Nutrition Education
 - Health Chats
 - Summer Camp Programming
 - Community Events

months, we worried whether our food would run oney to buy more. (Yes or No)
months, the food we bought just didn't last, and y to get more. (Yes or No)
nough an affirmative response to both questions increases the likelihood of foold, an affirmative response to only 1 question is often an indication of food dditional questioning.

Healthy Children	(Ages 10-18)		
We are interested in the health and well-being of	all our patients. Please take a mo	ment to answer the foll	owing questions	
atient Name:	Age:	Today's Date:	_	
. How many servings of fruits or vegetables do you eat (One serving is most easily identified by the size of the palm of your				
. How many times a week do you eat dinner at the tab	ole together with your family?			
. How many times a week do you eat breakfast?				
. How many times a week do you eat takeout or fast	food?			
. How many hours a day do you watch TV/movies or	sit and play video/computer games?	2		
Do you have a TV in the room where you sleep?		Yes 🗆	No 🗆	
. Do you have a computer in the room where you sleep	p?	Yes 🗆	No 🗆	
How much time a day do you spend in active play (faster breathing/heart rate or sweating)?		-	F1252	
How many 8-ounce servings of the following do you o	drink a day?			
100% juiceFruit or sportsWhole milk		ow-fat (1%), or reduced-fat	(2%) milk	
0. Based on your answers, is there ONE thing you	a would be interested in changing	now? Please check one	box.	
□ Take the TV out of the bedroom. and p	d less time watching TV/movies playing video/computer games. t less soda, juice, or punch.	nputer games. Drink more water.		
	Please give th	e completed form to you	r clinician. Thank	

Healthy Children	(Ages 2	2-9)			
We are interested in the health ar	d well-being of all our patients. Please take	a moment to an	swer the f	ollowing questions	
Patient Name:	Age:	Today's D	Date:		
How many servings of fruits or vegetable One serving is most easily identified by the size of					
2. How many times a week does your child	eat dinner at the table together with the family	?			
3. How many times a week does your child	eat breakfast?				
4. How many times a week does your child	eat takeout or fast food?				
5. How many hours a day does your child w	ratch TV/movies or sit and play video/computer	games?			
6. Does your child have a TV in the room where he/she sleeps?				No □	
7. Does your child have a computer in the room where he/she sleeps?				No □	
B. How much time a day does your child sp	end in active play (faster breathing/heart rate or	sweating)?			
9. How many 8-ounce servings of the follow	ring does your child drink a day?				
100% Juice Water	Fruit drinks or sports drinks Whole milk	Soda or punch Nonfat or redu	iced fat milk	:	
10. Based on your answers, is there <u>ON</u>	<u>E</u> thing you would like to help your child c	hange now? Pleas	se check or	ne box.	
☐ Eat more fruits & vegetables. ☐ Take the TV out of the bedroom. ☐ Play outside more often.	□ Spend less time watching TV/movies and playing video/computer games. □ Drink less soda, juice, or punch.	☐ Dri	☐ Eat less fast food/takeout.☐ Drink more water.☐ Switch to skim or low fat milk.		
	DI.			our clinician. Than	



Supporting School Nutrition Programs

- School food service and farm to school programs
- Health/Nutrition and Science education
- Intro to Culinary & Ag education
- Aeroponic growing tower
- School and Community Gardens











Choptank Health's Produce Prescription Program

1,000 Caroline and Talbot County students

Family participation in health and nutrition discussions

Individual or group health education opportunities



Consistently evaluate food insecurity

Provide families with local food resources

Raise awareness of SBHC resources and increase enrollment



If you can't feed a hundred people, then feed JUST one.

Mother Teresa

Chrissy Bartz PAC, MMS
Director of Community Based Programs
Choptank Community Health Systems
410-479-8392 admin office
410-482-9148 GES SBHC
cmbartz@choptankhealth.org

Share Our Strength/No Kid Hungry SBHC Food Access Project

Emmet County Michigan





Project Sites

- ► Hornet Health Center, Pellston, MI
 - ► K-12, 250 students
- Alanson Wellness Program, Alanson, MI
 - ► K-12, 236 students
- Staffed by the Health Department of Northwest Michigan. Each have a mental health professional and a nurse.







Community & Demographics



- Rural, resort/vacation area/drive-thru to the bridge
- ▶ 14% Poverty Rate, > 75% of students qualified for free or reduced lunch pre-Covid, 64% economically disadvantaged.
- Limited access to lower cost food and grocery. Gas Station grocery model in both communities, need transportation to access others.
- Community Pantry in Pellston
- ▶ By self-identification, the population by race is made up of 85% white, 7% two or more races; 6% American Indian (or Alaska Native); and 1% black.





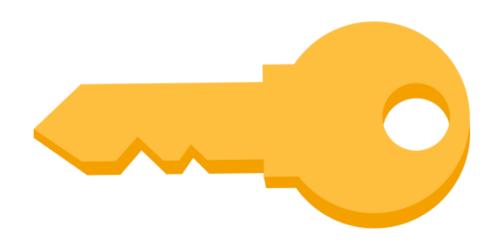
Project Goals Hornet Health Center

- Cooking skills classes targeted to freshmen and seniors, series of 6 classes thru Science/Health class -21 students- completed Spring 2022
- Hornets Nest Food Pantry opened May 2022
- Implement healthier pre-game meals for afterschool sports – trial with wrestling program Spring 2022
- Create You Tube channel of cooking instruction



Project Goals Alanson Wellness Program

- Demo cooking classes with 8th and 9th grade health classes 51 students, 2 classes April 2022, more in Fall 2022
- Viking Vault Food Pantry opened February 2022
 - ▶ Middle and High School
- Backpack Program K-5
- Food Demos Parent Teacher Nights – March, Open House/August, October
- Pop-Up Farmers Market –
 System Open House 8/22 and
 Parent Teacher Night 10/22



Resources/Staffing

- Groundwork Center for Resilient Communities
- FoodCorps service member
- Contracted qualified cooking/nutrition instructors + volunteers
- Volunteers with Northmen Den, LLC.



IMPACT & LESSONS

- Cooking Classes:71 students
- Pantries: 80 students/week
- Backpack program will be opt out offering in Alanson K-5
- Pre-Game meals/snacks TBD
- We are hopeful that through diplomatic conversations, we can establish nutrition guidelines for the pantries.
- ► It takes staffing to implement and manage the resources. Community partners are essential:
 - FoodCorps member
 - Northmen Den volunteers
 - Manna Food Project
 - Groundwork Center



Food System Catalyst Funding

Funding awarded to both programs for:

- School Garden implementation and infrastructure
- ► Northmen Den, LLC support for centralization of storage and distribution of healthy foods.

Regional Partner Awarded funds:



Groundwork Center for Resilient Communities



Thank You

Judi Marlin, MS, RDN

Nutritionist

Health Department of Northwest Michigan

j.marlin@nwhealth.org

231-347-5287



Questions?





What Can Your Center Do Now?

- Incorporate Food Insecurity screening to your Center workflow
- Ask students and families if they are participating in food programs
 - Provide flyers to all families about food resources available
 - Identify other food resources available in your community
 - Partner with local nutrition education resources

** See session resources for toolkits and sample flyers and other resources to support these efforts!



Thank you!



