# Community Food Access: Reducing Food Insecurity and Obesity through the Healthy Montgomery Transforming Communities Initiative

Part 2: Food Is Medicine – Reducing Barriers to Accessing Healthy Food in Vulnerable Communities





# **About Your Hosts:**

Webinar Moderator:

**Evelyn Kelly, Senior Program Manager,** Institute for Public Health Innovation



About Institute for Public Health Innovation: IPHI Launched in 2009 to Serve MD, VA and DC. IPHI **builds partnerships across sectors** and **cultivates innovative solutions** to improve **health and well-being** for all people and communities throughout **MD, VA and DC,** particularly those most affected by **health inequities**.



# Housekeeping

- Today's webinar is scheduled to last 1 hours including Q&A
- Slides and a recording of the webinar will be available online – attendees will receive a link to these resources following the webinar
- All participants are muted
- Questions can be submitted via the Zoom "Q&A" or "Chat" screen at any time
- Questions will be addressed during the Q&A session at the end of the webinar





# Montgomery County, MD

#### Population of 1.05 million

- 20% Black or African American
- 20% Hispanic or Latino
- 16% Asian
- 44% White non Hispanic
- 33% Foreign Born
- 40% Language other than English



Image source: <a href="https://www.visitmontgomery.com/resources/regional-map/">www.visitmontgomery.com/resources/regional-map/</a>



# **About Healthy Montgomery**

- Healthy Montgomery is the official community health improvement planning process for Montgomery County, MD.
- Since 2010, IPHI has worked closely with the Montgomery County Department of Health and Human Services
- Funded by the four Montgomery County hospital systems: Adventist Healthcare, Medstar Montgomery, Holy Cross Health, and Suburban.
- Learn more about our work through our website: <u>www.healthymontgomery.org</u>.



# About The Transforming Communities Initiative (TCI)

- In 2016, Montgomery County, MD was selected as a site for TCI funding by Trinity Health.
- The Healthy Montgomery TCI is a collaborative partnership, comprised of Holy Cross Health, the Institute for Public Health Innovation (IPHI), Montgomery County Department of Health and Human Services (DHHS), the Eat Well Be Active Partnership, and numerous other government and community partners.
- TCI funding supports a range of policy, system, and environmental change strategies to reduce obesity, promote tobacco-free living, and improve community health.
- TCI funding supports the implementation of the Healthy Montgomery Community Health Improvement Plan. The EWBA coalition serves as the primary collaborative working structure for TCI efforts.



# **TCI Strategy Areas**

- Community Food Access
  - Partners: Montgomery County Food Council, Primary Care Coalition, Manna Food, CHEER, Mobile Medical Cares, Montgomery County Health and Human Services, CountyStat
- School Health and Wellness
  - Partners: Montgomery County Public Schools, Alliance for a Healthier Generation, Maryland State Department of Education
- Promoting Tobacco-Free Living (Tobacco 21)
  - Partners: The American Lung Association, The American Cancer Society, Tobacco Free Kids, and the American Heart Association



# **TCI Strategy Areas Continued**

- Promoting and Implementing Safe Routes to School
  - Partners: Montgomery County Department of Transportation, Montgomery County Public Schools
- Implementing Nutrition Standards in Early Childhood Settings
  - Partners: School Readiness Consulting, Holy Cross Hospital



#### HEALTHY MONTGOMERY WEBINAR SERIES

Community Food Access: Reducing Food Insecurity and Obesity through the Healthy Montgomery Transforming Communities Initiative

> Part 1: October 4<sup>th</sup> | Part 2: October 16<sup>th</sup> 2-3 PM EST

Part 1:

Montgomery County Food Council – Best Practices Implementing the Food Security Plan



MONTGOMERY COUNTY FOOD COUNCIL Part 2:

Food Is Medicine – Reducing Barriers to Accessing Healthy Food in Vulnerable Communities



# Food is Medicine

### Healthy Montgomery Transforming Communities Initiative



8757 Georgia Ave, 10th Floor Silver Spring, MD 20910 www.PrimaryCareCoalition.org

### Speaker

#### Ben Fulgencio-Turner Director of Coverage and Connections, The Primary Care Coalition

Ben Fulgencio-Turner is the Director of Coverage & Connections at the Primary Care Coalition of Montgomery County (PCC). He develops and manages partnerships between health care providers, local government, and community organizations, aiming to address non-clinical determinants of health.

Mr. Fulgencio-Turner's previous work and studies centered on health access and community engagement, including work at a safety-net clinic in Washington, DC and community organizing in New Orleans. He received a Masters in Public Policy with thesis work examining the impact of local policy changes on health access.









### **About the Primary Care Coalition**



Vision:

A diverse community in which all people have the opportunity to achieve their highest levels of health.

To cultivate integrated and person-centered systems that support health equity through building partnerships, program management, and advocacy in local communities.





**Mission**:

primary care coalition

# Montgomery County Maryland Background

### **Diverse:**

- Majority people of color
- 40% of residents speak a language other than English at home.

# Growing poverty & disparities:

- Many residents have income below the self-sufficiency standard.
- Growing concentration of poverty.



Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates



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# Montgomery County Maryland Background

**Disparities in income & poverty.** 

People of color and immigrants in Montgomery County are:

- More likely to be low-income and
- More likely to live in high-poverty regions.







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# Health Insurance in Montgomery County

The uninsured population has declined significantly since 2013.

Tens of thousands of residents remain uninsured.







# Health Insurance in Montgomery County

### Persistent disparities in coverage:

Despite gains, people of color remain much more likely to be uninsured.

- Asian residents:
  3.2 times more likely to be uninsured.
- African American residents: 4 times more likely to be uninsured.
- Hispanic/Latino residents: 10.7 times more likely to be uninsured.

#### Uninsured Rate by Race/Ethnicity Montgomery County, Maryland





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# Uninsured in Montgomery County

The populations with high uninsured rates also face more risk factors to their long-term health.

#### • <u>Hypertension</u>:

33% of African Americans & 20% of Hispanic/Latinos

#### Overweight/Obese among adults:

68% of African American adults & 76% of Hispanic adults.

#### Adolescent obesity:

25% of African American teens & 30% of Hispanic teens.





### Health and Risk Factors

Primary health care is very important, especially for low-income people.

But the biggest drivers of health are outside of the health care system.



What We Spend On Being Healthy





# Food Insecurity in Montgomery County

There are over 70,000 Montgomery County residents who are food insecure:

They do not have consistent access to safe, sufficient, and nutritious food.







# Food Insecurity in Montgomery County

#### **Barriers to food access**

- Low income
- Immigration status of self & family members
- Language access
- Transportation



#### Over 70,000

people in Montgomery County are food insecure and that number is rising 25,009

county households received SNAP benefits in 2015 compared to 8,990 in 2005

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**59,480** students in Montgomery County Public Schools are enrolled in Free and Reduced Meals Program

14,680

of households receiving SNAP benefits in 2015 had children under 18

### Food Insecurity and Health

#### Food insecurity & hunger cause poor health:

- Children get sick more often and have trouble keeping up at school.
- Greater stress and anxiety in children and adults.
- Harder to manage chronic disease like diabetes.
- Children are more likely to develop pediatric asthma.
- Adults and children are more likely to be obese/overweight.





#### **Cycle of Food Insecurity**



# Why would hunger cause obesity?

- Stress.
- Cheaper meals that may be less nutritious.
- Reduction in variety in diet.
- Skipping meals then bingeeating when food is available.





The Cycle of Food Insecurity and Chronic Disease.

### Food is Medicine

As a part of the Transforming Communities Initiative (TCI), the *Food is Medicine* program is focused on making policy, system, and environment change.

Our goal:

Create a **permanent pathway** that effectively links the **safetynet health care** programs in Montgomery County with **food assistance & nutrition education** services.





Safety-net health care in Montgomery County

Montgomery Cares serves over 24,000 uninsured, low-income adults. Care for Kids serves over 6,000 uninsured, low-income children.

Partnerships with eleven safety-net clinics, six hospitals, school-based health centers, and a network of private health care providers.





### Food is Medicine – Screening

### Hunger Vital Sign Two question food insecurity screening tool

- 1. In the past 12 months were you worried that food would run out without money to buy more?
- 2. In the past 12 months did your food run out and you didn't have money to buy more?"





### Food is Medicine – Referral & follow-up

### **Community-based follow-up**

Community Health Workers (CHWs) follow-up with patients to link with resources.

CHWs are recruited from the populations serve and provide culturally competent and linguistically appropriate follow-up.

### Referrals without dedicated follow-up simply do not work.





# Initial Results Screening & Referral

#### **Screening and Referral**

• Food is Medicine will be screening a total of 1,500 families annually. Goal to expand to the rest of the safety-net population.

#### Food assistance

• To date, roughly 75% of patients who receive follow-up navigation after the referral are effectively linked with food assistance.

#### Outcomes

• Partners implementing more intensive interventions dedicated to changing behaviors & improving health outcomes.



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### Speaker

#### Lucia Zegarra Director of Health Programs, Community Health and Empowerment through Education and Research

Peruvian native, Lucia Zegarra, has been involved in community development projects from a very young age. From leading youth and environmental groups in Peru to developing and facilitating bilingual support groups for the homeless in DC, Lucia has become a strong advocate for peer support as a sustainable complement of formal health care services and prevention of disease.



After working as a quality control manager at a Microsoft call center in California, she arrived in the DC area to pursue her passion for science. Here, she obtained a B.S. in Biological Sciences at UMBC while working at the phylogenetics lab in the university. Hoping to make a difference in women's lives, Lucia had become a certified domestic violence counselor in Los Angeles and later a certified breastfeeding counselor in DC, using the latter as a way to help minority populations achieve healthier lives. She is the recipient of a Hispanic Heritage Award sponsored by Governor Martin O'Malley's Commission on Hispanic Affairs for being a "Leader on the Rise."







Community Health and Empowerment through Education and Research

#### FOOD IS MEDICINE: THE LONG BRANCH HEALTHY FOOD ACCESS PROGRAM



CHEER'S mission is to give people the knowledge and ability to create healthy, thriving communities and neighborhoods



# PROGRAM AREAS

# Health

Housing

Community Development

# Development

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# PROGRAMS

- Affordable Care Act
- Health Outreach
- Lunch and Learn
- Leadership Development
- Ask the Doctor
- Long Branch Healthy Food Access Program





#### OUR PARTNERS:



OUR FUNDERS:









Community Health and Empowerment through Education and Research

#### FOOD ACCESS PROGRAM

#### PROGRAM DESCRIPTION

- For people with diabetes in our area (zip codes: 20901, 20902, 20903, 20904, 20910 and 20912)
  - Low-income qualified
  - 12 weeks of free fruits and vegetables

#### PROGRAM REQUIREMENT

• Participate in one activity a month to learn about healthy eating and healthy cooking



through Education and Research



#### THE ROLE OF OUR COMMUNITY HEALTH WORKERS (CHW)

- Conduct intake interviews
- Connect participants to food resources
- Motivate and provide personal support
- CHWs are members of the community we serve. They bridge cultural and linguistic barriers to expand access to coverage and care, and improve health outcomes.



#### POPULATION SERVED

- 85% of participants primarily speak Spanish
- 35% speak English "well" or "very well"
- 75% are over 45 years
- 70% of participants are women
- 90% of participants are overweight or obese
- Only 12% of participants in the "normal" range of glycemic control (<6)



#### FOOD ASSISTANCE SERVICES DELIVERED: FIRST YEAR





#### EDUCATION: FIRST YEAR



#### FOOD CHANGES HEALTH OUTCOMES THE LONG BRANCH HEALTHY FOOD ACCESS PROGRAM:



- 1. Reduces food insecurity, improved healthy eating and shopping behaviors. -Food insecurity declined from 74% to 57% in the 2nd cohort.
- 2. Encourages healthier nutritional habits:
- -40-50% of participants consume more servings of fruits or vegetables.
- 3. Improves self-reported health and well-being:-60% of those with fair or poor health improved their self reported health status
- 4. Improves clinical measures of health:
- -65% of participants lost weight, averaging 8.2 lbs lost in three months
- -79% of these lost an additional 3.8 pounds 3 months after the program ended
- -75% of participants with out of control diabetes improved their blood glucose control (HbA1c).



#### CHALLENGES

- Immigration policy climate
- Isolation
- Mental health
- Food Distribution Logistics
- Lack of transportation
- Cultural Assimilation



#### BEST PRACTICES

- Establish strong personal relationships
- Use a wholistic approach
- Understand programs have a learning curve
- Teach step-by-step
- Identify means of communication used and how information is acquired
- Avoid scheduling events and activities during bussiness hours
- Respect participants decision to change or not



#### **Ben Fulgencio-Turner**

Director of Coverage & Connections, Primary Care Coalition Ben\_Turner@primarycarecoalition.org

#### Lucia Zegarra

Director of Community Health Programs, CHEER Lucia@communitycheer.org







# **Questions**?

 Please type your questions into the "Q&A" or "Chat" panel at the bottom of your screen and we'll direct your questions to the panelists





# **Contact Information**

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For more information on the Transforming Communities Initiative, please visit: <u>www.institutephi.org/HealthyMontgomeryTCl</u>

For More information on Healthy Montgomery, please visit: www.HealthyMontgomery.org

For more information on Primary Care Coalition, please visit: <u>www.primarycarecoalition.org</u>





# Thank you!

Information and registration for all upcoming Healthy Montgomery Webinars will be posted online at:

www.institutephi.org/healthy-montgomery-webinar-series