Food Is Public Health

Oversight Hearing

Greenfield Community College • Friday, September 27, 2019 • 1:00-4:00 p.m.
Opening Remarks

Senator Jo Comerford
Hampshire, Franklin, Worcester district
Senate Chair of the Joint Committee on Public Health

Representative Paul Mark
Second Berkshire district

Dr. Yves Salomon-Fernández
President, Greenfield Community College
Jo Comerford
State Senator
Hampshire, Franklin, Worcester district
Senate Chair
Joint Committee on Public Health
#FoodIsPublicHealth

Hosted by
Joint Committee on Public Health
Massachusetts Food System Caucus @MAfoodcaucus
Baystate Health @Baystate_Health
Cooley Dickinson Health Care @cooleydickinson
Community Involved in Sustaining Agriculture @CISAstaff
The Food Bank of Western Massachusetts @FoodBankWMA
Greenfield Community College @GfldCommCollege
Massachusetts Farm Bureau @MAFarmBureau
Massachusetts Food System Collaborative @MAFoodSys
Northeast Organic Farming Association - Massachusetts Chapter @NOFAMass
UMass Amherst @UMassAmherst
Paul Mark
State Representative
Second Berkshire district
Dr. Yves Salomon-Fernández
President
Greenfield Community College
PANEL 1

Food Is Medicine & Health System Integration

Jean Terranova
Director of Food & Health Policy, Community Servings

Sarah Downer
Associate Director, Whole Person Care at Center for Health Law & Policy Innovation at Harvard Law School

Damaris Arroyo
Food Assistance Referral Coordinator, The Food Bank of Western Massachusetts

Dr. Kinan Hreib
Chief Medical Officer, Baystate Health
Jean Terranova
Director of Food & Health Policy
Community Servings
EXPANDING ACCESS TO FOOD IS MEDICINE IN THE COMMONWEALTH

The Massachusetts Food is Medicine State Plan
COMMUNITY SERVINGS

Founded in 1990 to provide home-delivered meals to individuals living with HIV/AIDS, we initially served 30 clients a day in two neighborhoods of Boston.

We now serve medically tailored home-delivered meals to 1200 clients a day in 21 cities and towns in Massachusetts, and will soon have the capacity to serve the entire state.
WHY NOW? HEALTH POLICY OPPORTUNITIES

1. 1115 Waiver: MassHealth Flexible Services Program
   • Funding for nutrition and housing supports (including FIM interventions)

2. Medicare Advantage
   • CY 2020- new flexibility to cover FIM interventions

3. Hospital Community Benefits
Lack of reliable access to sufficient, nutritious food is a key driver of health outcomes, health care utilization, and cost. Access to nutrition interventions in health care remains limited.
GROWING EVIDENCE: MEDICALLY TAILORED MEALS

Peer-reviewed claims-based and clinical studies demonstrate that medically tailored home-delivered meals:

- Reduce utilization of acute-care services including hospital admissions, emergency room visits, and ambulance service
- Reduce medical costs
- Improve health outcomes for individuals with complex illnesses, including HIV, diabetes, and Congestive Heart Failure
- Improve self-efficacy and quality of life
GROWING EVIDENCE: OTHER FIM PROGRAMS

**Medically Tailored Food Programs**
6-month medically tailored food intervention:
- Decreased HbA1c levels
- Increased fruit and vegetable intake
- Improved medication adherence

**Produce Prescription Programs**
- Reduced household food insecurity
- Increased fruit and vegetable consumption
- Reduced in body mass index (BMI)
- Decreased HbA1C levels

**Population-Level Healthy Food Programs (HIP)**
- $30 rebate on fresh produce:
  - Increased fruit and vegetable consumption by 26%
  - Decreased grain intake
  - Improve overall Healthy Index scores

Microsimulation Study: Cost-Effectiveness of Financial Incentives for Improving Diet and Health through Medicare and Medicaid: A Microsimulation Study, 2019

A 30% subsidy on fruit and vegetables purchased by enrollees in Medicare and Medicaid, if enacted on a national level over a lifetime would:

- prevent 1.93 million CVD events;
- gain 4.64 million quality-adjusted life years; and
- save $39.7 billion in formal health care costs
To learn more:

FoodisMedicineMA.org

Jean Terranova  
Director of Food and Health Policy  
Community Servings  
jterranova@servings.org

Kristin Sukys  
GIS Analyst- MA FIM State Plan  
Policy Analyst  
Center for Health Law and Policy Innovation  
Harvard Law School  
ksukys@law.harvard.edu

Sarah Downer  
Associate Director  
Whole Person Care  
Center for Health Law and Policy Innovation  
Harvard Law School  
sdowner@law.harvard.edu

Katie Garfield  
Staff Attorney  
Center for Health Law and Policy Innovation  
Harvard Law School  
kgarfield@law.harvard.edu

Check out webinars on our data collection and results (including mapping)
Sarah Downer
Associate Director
Whole Person Care at Center for Health Law & Policy Innovation at Harvard Law School
Damaris Arroyo
Food Assistance Referral Coordinator
The Food Bank of Western Massachusetts
Kinan Hreib, MD, Ph.D., MBA

Vice President, Chief Medical Officer,
Chief of Medicine, Northern Region
Baystate Health and
Baystate Franklin Medical Center
5% of Americans were responsible for nearly half of the country's medical spending.

The top 1% of patients accounted for 21.8% of expenditures.

One Care, MA health care program focused on patients with complex needs on Medicare and other similar programs can save 20-40% after few years and decrease the stress of recurring healthcare issues for patients and families.

The CHART work done at BFMC demonstrated the benefit of integrated system and the importance of community health workers resulting in decreasing readmissions by 60% for patients with chronic diseases.
HEALTH DISPARITIES AND HEALTH INEQUITIES

- Nearly 60% of Massachusetts adults are overweight or obese
- Cancer is the leading cause of death in Massachusetts
- Smoking is the leading cause of preventable death in Massachusetts
- Massachusetts spent $30.9 billion on chronic disease in 2010 alone
- Only 1 in 5 Massachusetts adults consume the recommended daily amount of fruit and vegetables
- Those without a high school degree are 5 times more likely to have a myocardial infarction than those with a college degree or higher
- Black non-Hispanics had nearly 5 times the rate of diabetes-related emergency department visits compared to white, non-Hispanics
- Although Black non-Hispanic women are less likely to get breast cancer than their White non-Hispanic counterparts, they are the more likely to die from it
- Prostate cancer mortality among Black non Hispanic men is nearly two times higher than their White counterparts
THE CHALLENGES

- Access to care
- Shortage of providers will not be solved in the next decade, it is going to get worse, by 2032 projected shortages of 47,000-122,000 physicians
- Rural parts of US will be more impacted by shortages
- Reimbursement
- Several payment models undermine the system
- Economic growth
- Broadband Internet
- Transportation
**ELIMINATE BARRIERS TO CARE**

- Partnerships across all available community resources and services.
- Eliminate Silos and stop competition for patients
- Integrate EHRs
- Start early—Middle School. Healthy diets, lifestyle, safety etc..
- Outreach into the community to provide continuity of care
- Reengineer practices to increase access
- Mobile solutions, Hot Spots, Telehealth
- Broadband in rural US, including western MA, significant barrier.

- Reimbursement for Telehealth needs to be as good as actual office visits (moving slowly).
- Reimbursement for non-traditional interventions
- Improve reimbursement for high risk patients and support robust community health worker integrations
- Scope of practice. Additional training for RNs that allows diagnosis and treatment of some basic uncomplicated conditions
Percent of Adults Reporting Consumption of at Least Five or More Fruits or Vegetables Daily, by Educational Attainment, Massachusetts, 2015

<table>
<thead>
<tr>
<th>Education Level</th>
<th>Percent of Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than HS</td>
<td>14.2</td>
</tr>
<tr>
<td>HS</td>
<td>17.2</td>
</tr>
<tr>
<td>College 1-3 yrs</td>
<td>18.8</td>
</tr>
<tr>
<td>College 4+ yrs</td>
<td>23.1</td>
</tr>
</tbody>
</table>
THANK YOU!

Baystate Health | ADVANCING CARE. ENHANCING LIVES.
Questions and Discussion
PANEL 2

Food Deserts & Food Access

Liz Wills-O’Gilvie
Steering Committee Chair and Working Director, Springfield Food Policy Council
Board Chair, Gardening The Community

Christina Maxwell @Steeener70
Director of Programs, The Food Bank of Western Massachusetts

John Waite
Executive Director, Franklin County Community Development Corporation
Co-Administrator, Massachusetts Food Trust Program

Lourdes Santiago-Campos
Community Organizer, Grow Food Northampton Neighborhood Market
and Hampshire Heights Community Garden
Liz Wills-O’Gilvie
Steering Committee Chair and Working Director
Springfield Food Policy Council
Board Chair
Gardening The Community
Healthy Food Access
A Public Health Crisis
A Problem of Equity
Systemic Racism
The unjust Food System of the U.S. built on our agricultural history
Was consciously and systematically erected
IT CAN BE UNDONE

Only if people understand what it is, where it comes from, how it functions and, how it is perpetuated
WHAT’S THE REAL PROBLEM

Food Desert – A situation
vs.
Food Apartheid – A system
A JUST FOOD SYSTEM

Indicators of Equity and Justice would be food system work that Sets a Table where Indigenous, Latino and African American people are designing and developing environments and producing food that respects culture and supports economic and social justice.
INDICATORS OF A MORE EQUITABLE FOOD SYSTEM THROUGH POLICY, SYSTEMS & ENVIRONMENTAL CHANGE

Urban Agriculture Ordinance—Policy Change
Community Based Nutrition Education
Environmental Change

School & Community Gardens
Environmental & System Change

School Food Procurement Policies & Healthier Meals
Policy & Systems Change

Amended School Wellness Policy
Policy Change
UNDERSTANDING POWER

Analyzing & Decentralizing Power

As a society, we often believe that individuals and/or their communities are solely responsible for their conditions. Through the analysis of institutional power, we can identify and unpack the systems external to the community that create the internal realities that many people experience daily.
**ECONOMIC AND SOCIAL JUSTICE**

**Economic Justice**
A set of moral principles for building economic institutions, the ultimate goal of which is to create an opportunity for each person to create a sufficient material foundation upon which to have a dignified, productive, and creative life beyond economics.

**Social Justice**
Social justice is the virtue which guides us in creating those organized human interactions we call institutions. In turn, social institutions, when justly organized, provide us with access to what is good for the person, both individually and in our relationships with others.
“Fair”
Building environments and producing food that respects, inspires and cultivates racial, economic and social justice

“Just”
Functionally we can think about “justice” as a set of universal principles which guide people in judging what is right and what is wrong, no matter what culture and society they live in and no matter what they look like or where they come from.
Racially Equitable Policies & Practices offer an opportunity for the conditions of the lives of marginalized people to be affirmed with a sense of transcendence and hopefulness.
WORK WITH COMMUNITIES

Work to believe that every community has indigenous knowledge about:

- What they need
- How they need it,
- and
- Who in their community has good answers to their problems and what works best for them
“What we thought was waste was really compost, just waiting for a seed.”

Mistinguette Smith
A promise of food, health and justice to those from whence we come, our children, our communities and ourselves
“The eyes of the future are looking back at us, and they are praying that we might see beyond our own time.”

Terry Tempest Williams
Christina Maxwell
@Steener70
Director of Programs
The Food Bank of Western Massachusetts
A CONCEPTUAL FRAMEWORK: CYCLE OF FOOD INSECURITY & CHRONIC DISEASE

FOOD INSECURITY

- HOUSEHOLD INCOME
- SPENDING TRADEOFFS
- HEALTH CARE EXPENDITURES
- EMPLOYABILITY

COPING STRATEGIES
- Dietary Quality
- Eating Behaviors
- Bandwidth

CHRONIC DISEASE
John Waite

Executive Director, Franklin County Community Development Corporation
Co-Administrator, Massachusetts Food Trust Program
Massachusetts Food Trust Program
FOOD ACCESS IS ABOUT EQUITY, PUBLIC HEALTH AND ECONOMIC DEVELOPMENT

Research shows lower-income families and communities of color have less access to retail outlets that provide a wide selection of affordable, nutritious foods in their neighborhoods.

These same neighborhoods suffer from disproportionately high rates of diet related health problems and miss out on crucial economic benefits, like jobs and other retail development.
The Massachusetts Food Trust Program (MFTP) provides loans, grants, and business assistance for increasing access to healthy, affordable food in low-income, underserved areas. The MFTP prioritizes support for businesses selling fresh food that is grown, caught, or harvested in MA.
TYPES OF ELIGIBLE APPLICANTS

Eligible projects include the development, renovation or expansion of:

- Grocery stores
- Corner stores
- Co-ops open to the public that do not require membership
- Farmers markets and mobile markets
- Foods hubs, community kitchens, food truck commissaries, indoor and outdoor greenhouses and other infrastructure for gathering, preparing and distributing healthy food for retail in areas that are low-and-moderate income (LMI) and underserved
YEAR ONE AT A GLANCE

- 12 Projects Funded in 7 Months
- 7 Counties Served
- 108,000 Individuals with Improved/Expanded Access
- 344 Jobs Created or Retained
- Representation of Minority Enterprise Owners
  - 83% of projects owned or substantially controlled by either a woman or a person of color
- 95% of Workers Hired from Within the Local Community
- Average Wage of $17/hr.
- 100% of Projects Accept or Will Accept SNAP & WIC
QUABBIN HARVEST

Orange, MA | Retail

- As the **only retail location within a 1.3 mile radius** able to provide fresh food, Quabbin Harvest is the **only place to buy fresh, and often local, produce** that is within walking distance of downtown Orange.

- Quabbin Harvest was named as the **top enroller of HIP customers in the state**, serving nearly 140 families at peak enrollment.
MEXIRICO

Springfield, MA | Retail

- Serves a **culturally diverse, lower-income community** that is dependent upon a single supermarket which was described as **not adequately meeting community’s needs** in the community fit research for the Develop Springfield project.

- MexiRico’s staff aims to provide the community with **culturally relevant products** that are fresh and affordably priced while creating a **welcoming, safe community space**.
## OVERVIEW OF MFTP FUNDING

16% GRANTS | 84% LOANS MAXIMIZING IMPACT AND SUSTAINABILITY

<table>
<thead>
<tr>
<th>MFTP'19 Funding</th>
<th>Admin</th>
<th>City</th>
<th>County</th>
<th>Grant Amount</th>
<th>Loan Amount</th>
<th>Total Funding Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adams Hometown Market</td>
<td>FCCDC</td>
<td>Adams</td>
<td>Berkshire</td>
<td>$25,000</td>
<td>$250,000</td>
<td>$275,000</td>
</tr>
<tr>
<td>Coastal Foodshed</td>
<td>LEAF</td>
<td>New Bedford</td>
<td>Bristol</td>
<td>$12,000</td>
<td>$0</td>
<td>$12,000</td>
</tr>
<tr>
<td>Compare Supermarkets</td>
<td>LEAF</td>
<td>Lynn</td>
<td>Essex</td>
<td>$20,000</td>
<td>$200,000</td>
<td>$220,000</td>
</tr>
<tr>
<td>East Boston Neighborhood Health Center</td>
<td>LEAF</td>
<td>Boston (East Boston)</td>
<td>Suffolk</td>
<td>$10,000</td>
<td>$0</td>
<td>$10,000</td>
</tr>
<tr>
<td>Farm &amp; Community Collaborative</td>
<td>LEAF</td>
<td>Lakeville</td>
<td>Bristol</td>
<td>$20,000</td>
<td>$30,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>Good Food Markets Bartlett</td>
<td>LEAF</td>
<td>Boston (Roxbury)</td>
<td>Suffolk</td>
<td>$0</td>
<td>$150,000</td>
<td>$150,000</td>
</tr>
<tr>
<td>MexiRico Food shop</td>
<td>FCCDC</td>
<td>Springfield</td>
<td>Hampden</td>
<td>$12,500</td>
<td>$0</td>
<td>$12,500</td>
</tr>
<tr>
<td>Quabbin Harvest</td>
<td>FCCDC</td>
<td>Orange</td>
<td>Franklin</td>
<td>$12,325</td>
<td>$20,000</td>
<td>$32,325</td>
</tr>
<tr>
<td>Seeds of Change</td>
<td>LEAF</td>
<td>Boston (Dorchester)</td>
<td>Suffolk</td>
<td>$20,000</td>
<td>$30,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>The Food Project</td>
<td>LEAF</td>
<td>Boston (Dorchester)</td>
<td>Suffolk</td>
<td>$10,000</td>
<td>$0</td>
<td>$10,000</td>
</tr>
<tr>
<td>Vicente's Supermarket</td>
<td>LEAF</td>
<td>Brockton</td>
<td>Plymouth</td>
<td>$30,000</td>
<td>$300,000</td>
<td>$330,000</td>
</tr>
<tr>
<td>Wellspring Harvest</td>
<td>FCCDC</td>
<td>Springfield</td>
<td>Hampden</td>
<td>$18,500</td>
<td>$15,000</td>
<td>$33,500</td>
</tr>
</tbody>
</table>

**Totals**

- $190,325
- $995,000
- $1,185,325
THANK YOU!

John Waite, Executive Director, FCCDC
johnw@fccdc.org, 413-774-7204 ext. 102

Risa Waldoks, Project Manager, The Food Trust
Rwaldoks@thefoodtrust.org, 215-383-5359

Gerardo Espinoza, Executive Director, LEAF
gespinoza@leaffund.org, 617-232-1551 ext. 105

Maddie Ribble, Director of Public Policy & Campaign Strategy, MPHA
mribble@mapublichealth.org, 857-930-4191
Lourdes Santiago-Campos
Community Organizer
Grow Food Northampton Neighborhood Market and Hampshire Heights Community Garden
Hampshire Heights
Community Garden
Cucumbers
(Bella's favorite!)
Northampton "Neighborhood Markets"

photo credit: Gazette
Northampton
"Neighborhood Markets"
Hampshire Heights Community Garden
The Kids Asked for Pollinators....
Questions and Discussion
School Food Breakfast After the Bell, Summer Meals & Hunger-free Campuses

Jordana B. Harper
Superintendent, Greenfield Public Schools

Mistelle Hannah
Food Service Director, Northampton Public Schools

Pat Baker @PatMLRI
Senior Policy Analyst, Massachusetts Law Reform Institute

Melissa Osborne
Nursing Graduate, Greenfield Community College
Greenfield Public Schools
School Breakfast Models

LOCAL PRODUCE
2ND CHANCE BREAKFAST
GRAB & GO CART
BREAKFAST IN THE CLASSROOM
“PICK & CHOOSE” BREAKFAST CARTS
WHY IS BREAKFAST IMPORTANT?

According to Food Research & Action Center (FRAC), school breakfast decreases the risk of food insecurity and may protect against childhood obesity.

The FRAC has found that food insecurity has an inhibiting affect on students’ social skills, increases risk of mental health issues, and may make it difficult for students to be engaged during classroom time. Federal Nutrition Program participation, and breakfast in particular, can improve student behavior, according to FRAC.

Research shows that eating breakfast:
- increases a student’s ability to learn,
- improves academic performance, and
- improves school attendance & decreases tardiness.  
(Source: FRAC)
WHAT IS 2ND CHANCE BREAKFAST?

A second chance to get breakfast after the bell rings, which helps benefit:

- Students who aren’t hungry first thing in the morning
- Students who aren’t able to arrive early for cafeteria breakfast
- Reduces stigma associated with school breakfast eligibility
- Many other benefits including: academic performance, social skills, and behavior, lowered risk of obesity, and other improved health outcomes

At Greenfield High School, over 50 students participated in 2nd chance breakfast on the 1st day

Over 100 students participated daily by the 2nd week

On average, over 150 students now take advantage of 2nd chance breakfast daily

66% of GPS students are eligible for free- or reduced lunch
GRAB AND GO CARTS
The benefit of choice (grant funded)

- Reduces food waste
- Decreases cost
- Expands student participation
- Increases food (and nutrients!) consumed

New cart purchased with FY19 USDA School Nutrition Assistance Grant Funds
NEW PICK & CHOOSE CART MODEL FOR BREAKFAST IN THE CLASSROOM

Greenfield Middle School

Students at Greenfield Middle School have been benefitting from Breakfast in the Classroom for 3+ years.

This year, students choose their breakfast items from a cart in the hallway & bring it to the classroom.

This should reduce waste, since students have more choice.

Participation is steadily increasing from the 180s to the 200s in the 1rst weeks of school.
Newton Elementary School, Federal Street Elementary School, and Greenfield Middle School were awarded the Healthy Start Award 2 years in a row!

Greenfield teachers report an improvement in students’ behavior and focus since launching BIC 3+ years ago.
At Greenfield Public Schools we offer available local fruits and vegetables in our school meal program whenever possible.
Mistelle Hannah, MPH, RDN
Food Service Director
Northampton Public Schools
What’s Growing in School Nutrition?
MYTH

REALITY

VS

School Lunch!

ChooseMyPlate.gov

USDA
**Hadley Butternut Squash!**

**Lemon Cucumbers**

Grown in the School Garden!

**KALE**

November

**Butternut Squash**

February

**Potatoes**

April

**Apple & Kale Salad**

PRODUCE OF USA.
LOCAL FOOD PURCHASES

Fruit and Vegetable purchases by School Year

- **2018**
  - Non-local: 0.4%
  - Local: 99.6%

- **2019**
  - Non-local: 12%
  - Local: 88%
BARRIERS AND CHALLENGES

Reimbursement $$$
- Average meal cost $1.60 (w/o labor)
- Average reimbursement $2.45

Time, experience and equipment
- Labor hours; outdated or limited equipment

versus

$0.52 per pound

$0.76 per pound
Thank you!
Pat Baker
@PatMLRI
Senior Policy Analyst
Massachusetts Law Reform Institute
Melissa Osborne
Nursing Graduate
Greenfield Community College
Questions and Discussion
PANEL 4
Role of Agriculture in Public Health
HIP & CSAs

Winton Pitcoff
Director, Massachusetts Food System Collaborative

Emma Morgan
Community Advocate, Participant in Healthy Incentives Program

Malik Muhammad
Youth Leader, Gardening The Community

Kelly Coleman
Program Director, Community Involved in Sustaining Agriculture (@CISAstaff)

Community Involved in Sustaining Agriculture Senior Farm Share Participant
Winton Pitcoff
Director
Massachusetts Food System Collaborative
THE ROLE OF AGRICULTURE IN PUBLIC HEALTH

- Massachusetts has led for decades
- Farm to consumer sales have many health benefits
- HIP and other programs have helped make the local food system more equitable and sustainable
Emma Morgan
Community Advocate
Participant in Healthy Incentives Program
Malik Muhammad

Youth Leader

Gardening The Community
Kelly Coleman
Program Director
Community Involved in Sustaining Agriculture
Community Involved in Sustaining Agriculture
Senior Farm Share Participant
Questions and Discussion