



**NO KID HUNGRY** **SCHOOL-BASED HEALTH ALLIANCE**  
The National Voice for School-Based Health Care

## Roadmap to Food Security in School-Based Health Centers

June 28, 2023

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- American Psychological Association (APA)
- Association of Social Work Boards (ASWB)
- Commission on Dietetic Registration (CDR)

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**Agenda**

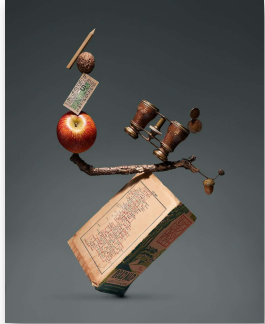


- Welcome and introductions
- Food and Nutrition Security
- Integrating Food Security Interventions in your SBHC
  - Readiness and Asset Mapping
  - Developing solutions and engaging partners
  - Sustaining Interventions
- Toolkit
- Q&A


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## Today's Objectives




- Identify key factors that impact food security
- Initiate steps to address food insecurity through your SBHC
- Identify potential partners in addressing food insecurity



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## Today's Speakers

- **Theresa Dominguez (she/her)**, Senior Program Manager at School-Based Health Alliance
- **Sarah Mills (she/her)**, Senior Manager Health Systems at Share Our Strength
- **Kateri Evans (she/her)**, RN Program Coordinator at RUSH SBHCs
- **Katherine Bissett (she/her)**, School Health Population Health Coordinator, MetroHealth
- **Sara Hodgdon (she/her)** Director, SBHC & HITCH Operations at Open Door Family Medical Center
- **Mary Otwell, LCSW (she/her)**, School-Based Health Clinics Coordinator at Little Rock School District



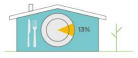
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## Household Hunger in 2021

34 million Americans lived in households that experienced hunger or lacked access to an affordable, nutritious diet.


### Children

13% of households with children could not afford to buy enough food for their families.



### Geography

12% of households in urban areas experienced hunger compared to 9% of households in suburban areas.



Hunger was highest in the South (11%), followed by the Midwest (9%), West (10%) and Northeast (8%).

### Race and Ethnicity


Hunger affects different groups of Americans disproportionately.

Latino	26%
Black	20%
White	7%


20% of Black households and 18% of Latino households were affected by hunger compared to 7% of white households.

### Federal Nutrition Assistance Programs

56% of households participated in one or more of the three largest federal nutrition assistance programs: SNAP, WIC and the national school lunch program.



56%



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## CHILDHOOD FOOD INSECURITY IS ASSOCIATED WITH:

- Poor Health Status
- Developmental Risk
- Mental Health Problems
- Poor Educational Outcomes

## FOOD INSECURITY MAY PRESENT IN A FAMILY AS:

- Food Anxiety
- Diet Monotony
- Decreased Nutrition Quality
- Inadequate Food Intake

[www.frac.org/aaptoolkit](http://www.frac.org/aaptoolkit)



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**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](#)






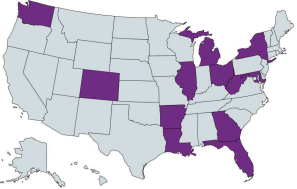

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### 2022 SBHC Food Security Learning Network

The learning network was comprised of 16 health center leaders and champions who came together over an 11-month period to implement a community-driven food security solution in their health center.

#### Learning Network Goals

-  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
-  Evaluate the model to understand the impact on
  - (1) Student health outcomes
  - (2) Student food security
  - (3) Student fruit and vegetable consumption
-  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.










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### SBHC Learning Network Summary

Interventions (# of SBHC)

Food Insecurity Screening (11)	Referrals to food programs (9)	Food Pantry (8) Food Bags (6)	Food or Meal Delivery (6)	Grocery Gift Cards (6)
Nutrition Education (9)	Community food events (4)	Farmers Market (4)	Produce Vouchers (2)	Onsite Garden (3)
Snack program (3)	Clinical Nutrition visit (1)	Hot Meals (2)		

-  **1207** households screened for Food Insecurity & **115** families referred to SNAP.
-  **212** households reported **improved food security**.
-  **158** individuals reported improved dietary health measures

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## Integrating Food Security Interventions in your SBHC

### Readiness and Asset Mapping

“ Go in with an open mind. We learned to listen to students, teachers, and school staff members, as the needs of students are always changing. ”

- E.A. Hawse Health Center



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## Readiness

### Questions to ask before you begin

Does addressing food security align with other organizational goals and priorities?

What is the capacity for addressing food insecurity within your SBHC services, and how could this initiative impact your operations?

Next Step: Assessing community needs and assets



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## Define the Problem and the Need

### Engage the Community in Needs Assessment

“The needs assessment is an essential first step. Obtain feedback from youth, families, school staff, and school administration early on.”

- Rush University Medical Center, IL



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## Defining the Problem & Need

- SBHC experience
- Patient risk assessments
- SBHC CHW integration
- Demographic shifts
- Community health needs assessment
- Neighborhood population health outcomes



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## Stakeholder Engagement


- School champion interviews
- SBHC clinical team group discussion
- Parent survey
- Partner interviews
- Students



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## Family Survey

- Interest level
- Timing
- Frequency
- Choice
- Food preferences
- Assistance with health conditions
- Resource needs
- Household size
- Language



Please respond by June 30<sup>th</sup>!

### We Want to Hear From You!


The Rush School Based Health Center (SBHC) wants to hear from Orr Academy and KIPP One families.

The SBHC is exploring how we can support Orr Academy and KIPP One families who have food needs. Please complete this short survey, so your input can inform planning a food pantry or other programs in the school.

Hover your phone over the QR code to the right or click on this link to access the survey

<https://bit.ly/3G6sc0L>

Your help is appreciated! This survey is anonymous unless you provide your information at the end. Thank you!



**RUSH** Excellence is just the beginning.

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## Resources & Partners

- Who is already doing this? What have they learned?
- What resources & programming already exists?
- Where are there gaps?
- School
- School district
- Partners
- Health system



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## Determine Assets and Possible Partners

“Partnership is key. Each of our partner schools has additional community organizations they collaborate with to provide services to students. Creating partnership of our own with those community organizations has been vital to the planning process.”

“Explore what food programming and organizations already exist in your community for potential partnerships and resources.”

2022 SBHC Learning Network member



### Asset Mapping Worksheet

- Scan code
- Open Google doc file
- Click "Share and Export" from menu
- Make a copy

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## Asset Mapping Activity



Learn More Here:  
[Sustainability – SBHA](#)  
[Toolkits \(sbh4all.org\)](https://sbh4all.org)



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## Integrating Food Security Interventions in your SBHC

**Developing Solutions and Engaging partners**

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## Identify Existing Assets to Connect families


**Screening in Primary Care:**

- 426 patients screened
- 61 (14%) responded YES to at least one question
- 49 (80%) of YES's referred to patient advocate
- 130 patients screened a 2nd time
- 9 (7%) responded YES to at least one question and referred to patient advocate

**Screening Adolescents (>11 yrs)\*** (If possible, assess with confidential questions)


*"For each statement, please tell me whether the statement was Often True, Sometimes True, or Never True based on your experiences in the past 12 months."*  
*"Por cada una de las siguientes declaraciones, por favor indique si la declaración se aplica a su familia frecuentemente, a veces o nunca durante los últimos 12 meses."*

- "I worried about not having enough to eat."  
*"Me preocupé sobre no tener suficiente que comer."*
- "I tried not to eat a lot so that our food would last."  
*"Traté de no comer mucho para que nuestra comida dure."*

 **NOPREN**  
Nutrition & Obesity Network  
POLICY RESEARCH + EVALUATION

**Patient Advocates at Open Door Family Medical Center (FQHC)**

- Trained to complete more thorough SDOH screenings
- Provide education on asthma and diabetes
- Make supported referrals to specialists, CBOs, and other services



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## Identify Existing Assets to Connect families

**Our Workflow**

- Include the two validated hunger vital sign screening questions used system wide into our existing pre-visit questionnaire
- Whoever schedules the appointment (RN, CHW, PSS) asks the parent the questions at time of scheduling.
- Any positive responses are routed to the assigned CHW
- Appropriate referrals are placed through UniteUs to CBOs
- CHWs follow up to ensure needed connections have been made

*\*Can be done on paper, by any staff, without UniteUs!*

**Utilizing Health system's existing screen and refer model, leveraging community organizations**



**Greater Cleveland Food Bank**


**An example of the Hunger Vital Sign screening tool:**

1. Within the past 12 months, we worried whether our food would run out before we got money to buy more.

● Often True — **At Risk**  
 ● Sometimes True  
 ● Never True  
 ● Don't know/Refused

2. Within the past 12 months, the food we bought just didn't last, and we didn't have money to get more.

● Often True — **At Risk**  
 ● Sometimes True  
 ● Never True  
 ● Don't know/Refused



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## Identifying Gaps & Establishing Resources

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### Weekend Food Bags

**WHAT'S MISSING?**

- Clinic SDOH Screenings - "Do you need food today?"
- 83% In past year ran out of food (no money, food stamps left)
- 84% Need food today

**WHAT'S GIVING?**

- Weekend food bags



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## Identifying Gaps & Establishing Resources



### Weekend Food Bags

#### WHAT'S HAPPENING?

- Distributed in clinic, on Fridays, at family events, Community Cafes
- Staffing with volunteers/students (City Year, university students, student workers)

#### WHAT'S DONE?

- 60 bags per week
- Over 1,780 bags distributed



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## Recap Additional Successes



Identifying and Elevating food needs in the community.

Training and increasing staff awareness of resources.

Establishing new food access points in the community.



Partnership Development and coalition building.

Centralizing food resource information and connection.

Strengthening school & SBHC partnership.



Developing closer relationships with families to address other needs.

Increasing connection and use of SBHC health services.

Student Involvement in planning & implementation.



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## Integrating Food Security Interventions in your SBHC

### Sustaining your Intervention

### What's Next?

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## Toolkit Resource



### Emerging Models And Resources To Address Food Insecurity In School-Based Health Centers

No Kid Hungry and School-Based Health Alliance believe that by embracing and building on families' trust in school-based health centers, we can promote federal nutrition programs and nutritious food consumption in support of favorable health outcomes and improved food security for families.

This toolkit highlights promising practices for integrating nutrition and food access into school-based health center (SBHC) services to address social influencers of health, improve food security for families, and support student success and wellness.



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Questions?

