

**Recommendations from the Society for Nutrition Education and Behavior** for the White House Conference on Hunger, Nutrition and Health

Submitted: July 15, 2022

Earlier this year, the <u>White House announced</u> that it will host the White House Conference on Hunger, Nutrition, and Health in September 2022.<sup>1</sup> The Society for Nutrition, Education, and Behavior (SNEB), uniquely represents nutrition educators across the globe dedicated to effective nutrition education and healthy behavior based on research and practice. SNEB applauds and supports the federal government for this opportunity to address the long-standing need to achieve the United Nations Sustainable Development Goal of Zero Hunger.

At SNEB, we believe that this is a unique and critical opportunity for the nation and various stakeholders of food and nutrition security in the U.S. We are hopeful that this conference is as visionary and successful as the 1969 conference, which established signature food and nutrition programs while also addressing the entrenched belief that chronic hunger cannot be eliminated, which has been <u>undermining the right to adequate food and water for millions</u>.<sup>2</sup>

The White House hosted listening sessions from June 1, 2022 - June 25, 2022 across all regions of the U.S. Given SNEB's unique perspective on nutrition education, food security, and sustainability, the Society held its own listening sessions from June-July 2022 focusing on the upcoming White House Conference on Hunger, Nutrition and Health. The responses from the

<sup>&</sup>lt;sup>1</sup> <u>https://www.whitehouse.gov/briefing-room/statements-releases/2022/05/04/white-house-announces-</u>conference-on-hunger-nutrition-and-health-in-september/

<sup>&</sup>lt;sup>2</sup> <u>https://www.ers.usda.gov/data-products/ag-and-food-statistics-charting-the-essentials/food-security-and-nutrition-assistance/</u>



SNEB listening sessions for each of the 5 pillars provided by the White House, reflect SNEB's broad recommendations: **1**) improve current programs to meet the dynamic needs of the population and achieve Zero Hunger for all, **2**) increase focus on upstream approaches to eliminate hunger, improve nutrition and health, and develop greater resiliency of the food system, **3**) foster nutrition research that is increasingly interdisciplinary and publicly, securely funded, **4**) increased equitable partnerships among public, private, and nonprofit sectors, and **5**) sustainability as the foundation.

# 1. Improve current programs for greater food access and affordability

Currently, there are several nutrition- and health-related programs in the U.S. that need to be coordinated, measured, communicated, integrated, and disseminated. Importantly, SNEB believes that many program adjustments made to address increased needs brought on by the COVID-19 pandemic should be considered as permanent. For this, we suggest the following:

a. *A single national level portal:* Communities have demonstrated ingenuity and innovation in programs that address hunger or strengthen food supplies in their community, even more vital during the pandemic. As climate change disrupts food systems and food systems currently disrupt climate, the need for more local, regional, and state food systems increases. For example, community gardens where homeowners agree to have gardens established in their yards and maintained by a nonprofit (<u>https://fleetfarming.org/</u>) increased local food production and was critical in feeding the community during hurricane season that disrupted transportation resulting in dwindling retail food supplies. Recognizing community problem solving and innovation, we recommend a national portal where community members and professionals can submit, curate, and communicate case studies and community projects with impact analysis. This portal with several levels of information including a quick pitch with key points, and a detailed version of those case studies and projects would be accessible to



different stakeholders and support effective interventions for diverse populations and communities across geographic regions.

- b. Sustained investment in communities: To help community stakeholders continue with successful programs and solve larger system challenges, funding at the federal or local level needs to be both targeted and broad to address equity, economic progress, or resource allocation. Funders are recognizing the need for community driven solutions. We encourage consideration of different funding models<sup>3</sup> that support equitable community development and foster collaborations. Funding is necessary to support meaningful, structural change. For program sustainability in communities, resources need to be appropriate to different audiences for programs adapted to population segments. For example, guides and templates consider different target populations or different collaborators, such as doctors, teachers, farmers, business owners, etc. We recommend greater consideration of regional food systems,<sup>4</sup> which have been investigated and have potential to the challenges of creating sustainable food systems for rural, suburban, urban, and tribal communities and can draw on expertise that is place-based, culturally relevant and historical.
- c. Supplemental Nutrition Assistance Program (SNAP) and The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC): Participants benefited from changes during the pandemic such as telehealth appointments. We recommend other revisions: (i) include pre-prepared food, and (ii) allow SNAP participants to deliver SNAP-Ed as a replacement for work requirements. These participants who opt to deliver SNAP-Ed should receive training to deliver nutrition education using a *train-the-trainer* model.
- d. Increase Nutrition Education at all levels of education.
  - i. Food, nutrition, and cooking knowledge and skills, are fundamental life skills, necessary for generations. During the pandemic, there was an

<sup>&</sup>lt;sup>3</sup> https://www.zsr.org/collaborative-problem-solving

<sup>&</sup>lt;sup>4</sup> <u>http://www.lysoncenter.org/index.php/publications/a-regional-imperative-report</u>

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increase in gardening and food preservation and increased interest in local food systems. This realization that food is sustaining and healing is positive, but requires knowledge and skills. Given the changing environmental conditions, these skills can be adapted to different geographies but retain cultural foodways that are necessary for future generations. Many public schools lack nutrition, food, and culinary knowledge and skills education, and if included, are only minor topics in health, science, life skills, or consumer science classes. We recommend increased federal support to incorporate food, nutrition, and culinary education classes in public schools with support from state departments of education. We recommend statelevel competencies in food and nutrition. With the cooperation of teachers and the state departments of education, we suggest including nutrition as a subject in testing criteria that will recognize this as essential knowledge.

ii. Current medical school education lacks a nutrition-specific curriculum. Most medical school professionals need and want nutrition education, and there are a <u>few examples of those succeeding</u>.<sup>5</sup> Nutrition educators who meet nutrition education competencies, are trained to provide short and long-term food and nutrition counseling and program management. SNEB members, including nutritionists and Registered Dietitians, are trained in food and nutrition knowledge and behavior change techniques to guide food and nutrition improvements for better care of people across the lifespan. Healthcare professionals with nutrition and culinary knowledge would be more likely to refer to nutrition educators and dietitians for supporting people in healthy eating patterns. As climate change challenges increase, collaboration is increasingly necessary to address food security and safety that assures health.

<sup>&</sup>lt;sup>5</sup> Crowley, J., Ball, L., & Hiddink, G. J. (2019). Nutrition in medical education: a systematic review. *The Lancet Planetary Health*, *3*(9), e379-e389.



## 2. Upstream approaches to eliminate hunger and improve nutrition and health

Upstream approaches that focus on addressing social determinants of health are critical to achieving sustainable food security. We suggest system level changes to reduce and eliminate hunger as a chronic issue; structural changes to the current food system to assure a nutritious food supply; and to put upstream approaches in place to support a preventive model of health. We have identified the following high level areas that need to be addressed to eliminate hunger and improve nutrition and health.

- a. *National coordination:* Establish a clear system of communication, coordination, and collaboration for all agencies involved in nutrition education, programming, and research. SNEB members are working within communities that are challenged with addressing food security within households and diverse communities in rural, suburban, urban, and Traditional Native American communities. Streamlining regulations and duplicated efforts among Safety Net Programs provides more time and resources to serve the population. Competition exists for program funding, especially when funding shifts between programs rather than increases funding for food insecure populations. Coordination between agencies would identify the negative impacts of program changes that further threaten the stability of households. For example, meaningful employment is possible for adult family members when adequate and affordable child care is available, transportation is reliable, timely and adequate, and housing needs are met.
- **b.** *Income inequality:* Food security is an income security problem. Food budgets are determined after fixed expenses are paid and livable incomes are necessary for adequate diets. Low wages represent the biggest obstacle to food access for a huge fraction of the U.S. population that are categorized as food insecure. We strongly recommend *Universal Basic Income (UBI)* that aims to provide a living wage as a minimum wage. We recommend a policy change to require adjustments to meet the cost of living and the current national economic changes. We believe that raising the minimum wage will have more impact than, for example, expanding



enrollment criteria to SNAP or WIC. Employment benefits that support health and well-being are often unavailable to low-wage workers. Mandatory overtime and unpaid time off undermine personal and family health.

**c.** *Program participation stigma:* Studies suggest the existence of stigma associated with receiving any aid that reveals the low economic status of the recipient. As one way to address this, we suggest that multiple service providers (e.g. healthcare centers, college and university campuses, local food banks, etc.) screen all their adult clientele with the Food Insecurity tool (*see box beow*) and make lists of assistance programs in the area readily available to their clients. These actions can help take the hesitancy out of asking certain people if they need help, or assuming that people will ask if they need help, which they often don't. For those identified as *food insecure,* staff would refer to local food assistance providers with a vision for developing a community of caring for each other. These linkages should be part of the coordination and collaboration mentioned earlier.

For each statement, please tell me whether the statement was often true, sometimes true, or never true for your household in the last 12 months.

1. "We worried whether our food would run out before we got money to buy more." Was that often true, sometimes true, or never true for your household in the last 12 months?

2. "The food that we brought just didn't last, and we didn't have money to get



- **d.** *Health insurance access:* We support and recommend stronger food and nutrition services within the health insurance structure to make healthcare, including nutrition care, more accessible, effective, and efficient. First, we recommend basic universal government health insurance, modeled after Medicare or those in many other countries, be available to all US residents to make healthcare accessible and better address health inequities. Recognizing Food is Medicine, nutrition educators, including dietitians, are the specialists in optimal nutrition and behavior change. We recommend increasing the innovative programs that encourage doctors' referrals to these experts and reimbursement that recognizes the clinical and community interventions that are in-person or telehealth. Successful eating patterns are based on individual behavior change from sustainable food systems at the local, state, and regional levels. We suggest that health insurance companies should adopt a Preventive Care Model that (i) screens for food and nutrition insecurity, and (ii) allows patients to opt for nutrition counseling, (iii) encourages healthy, culturally appropriate food patterns and (iv) supports local producers. We support a number of innovative programs such as food as prescriptions, health insurance rebates for community supported agriculture subscriptions,<sup>6</sup> and can compile more if this suggestion is accepted.
- e. *Supporting physical activity for all:* We recommend that workplaces should make available evidence-based programs that incorporate physical activity for support of employee health. Employers should provide a common physical activity space, encouraging activities like *walk-and-talk*, and *walk with a doc*. We also recommend employers

<sup>&</sup>lt;sup>6</sup> Jackson, G., Raster, A., & Shattuck, W. (2011). An analysis of the impacts of health insurance rebate initiatives on community supported agriculture in Southern Wisconsin. *Journal of Agriculture, Food Systems, and Community Development, 2*(1), 287-296.



create a workspace conducive to more activity, or non-exercise activity thermogenesis (NEAT) - this may include more standing desks, treadmills, cycles at the desk, or stationary bikes, etc.

f. Green space and physical activity access: Health benefits of green spaces<sup>7</sup> are recognized, with some countries providing prescriptions for spending designated time in green spaces.<sup>8</sup> However, the current urban environments often lack public green spaces like gardens and pedestrian-friendly walking and running areas. The World Health Organization encourages Healthy Cities and evaluation of the European Union Healthy Urban Planning<sup>9</sup> efforts provide examples of successful integration of green spaces within cities and other considerations that support health in many dimensions. Cities need to consider both indoor and outdoor spaces to meet the needs of populations with diverse abilities and interests. Additionally, there is a need for subsidized physical activity spaces so that social determinants do not pose another barrier to accessing preventative care spaces.

# 3. Foster nutrition research that is increasingly interdisciplinary and publicly, securely funded

Americans continue to lack the necessary foods to meet recommended nutrient intakes. Supporting nutrition and food-related research in educational approaches and behavior science is necessary if we are to support a healthy populace. To address social determinants of health, interdisciplinary research is essential. SNEB recommends:

<sup>&</sup>lt;sup>7</sup> Jackson, G., Raster, A., & Shattuck, W. (2011). An analysis of the impacts of health insurance rebate initiatives on community supported agriculture in Southern Wisconsin. *Journal of Agriculture, Food Systems, and Community Development, 2*(1), 287-296.

<sup>&</sup>lt;sup>8</sup> Van den Berg, A. E. (2017). From green space to green prescriptions: challenges and opportunities for research and practice. *Frontiers in Psychology*, *8*, 268.

<sup>&</sup>lt;sup>9</sup> Barton, H., & Grant, M. (2013). Urban planning for healthy cities. *Journal of urban health*, *90*(1), 129-141.



- a. *Expanded research agenda:* Federal and state dollars need increased commitment to research on (i) the linkages between biopsychosocial impacts on health disparities and food and nutrition security; (ii) the linkages between sociocultural context and food insecurity with chronic disease-related health outcomes like cardiovascular health, obesity, and diabetes; (iii) and an understanding of what parents need, and more specifically since feeding families is still largely gendered, we need to understand what mothers need to develop evidence-based interventions to support them and their family system. The current food system has resulted in decreased biodiversity and diminished recognition of cultural foodways. This calls our attention to shift social norms and (iv) increase research and understanding of culturally relevant foods. We also support (v) increased, consistent research on food insecurity in college and university students; and (vi) the importance of identifying the barriers to engaging food insecure or marginalized communities in participating in nationwide hunger, food, and nutrition insecurity research efforts. Rapid advancement in technology has touched all areas of life like no other change has. Thus, we need to increase (vii) research to study the impact of technology on food systems, food availability, food accessibility, and health outcomes. Last, but not least, we recommend (viii) research on the evaluation of food security, especially from the perspective of indigenous communities and people belonging to different communities and cultures.
- **b.** *Enhanced research funding:* To increase research on the critical areas identified above, a larger proportion of the federal and state-level funding must be directed toward prevention research including mitigating biopsychosocial impacts on health, evidence-based extension efforts, nutrition education, behavioral research, research on culturally relevant foods, and home and community food production. Studies have suggested that team science, transdisciplinary research, and community-based

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participatory research are more efficient in identifying societal level, practical solutions to address problems including hunger and food insecurity. Funding research that assesses sustainability of food programs is critical before or while recommending changes to address food system resiliency.

**c.** *Democratic research data stewardship:* Technology has expanded faster than regulations and impact analysis. The complexity of the food system, and varied interests and motivations of stakeholders <u>make it</u> <u>difficult for researchers to access data<sup>10</sup></u> for better usage or provide policy guidance. We recommend federal-level regulations that balance privacy considerations and public health needs.

## 4. Partnership among public, private, and nonprofit sectors

For a healthier nation and to achieve Zero Hunger, we realize that engaging individuals, communities, organizations and businesses can bring the desired change. We, therefore, propose fruitful partnerships with several organizations that share the same common goal of addressing hunger and improving food and nutrition security while fostering a sustainable future.

a. *Organizations:* Through the single, national-level portal recommended in (1)(a), we suggest a broad coalition of organizations and groups be involved across national, regional, state, local and Tribal levels, given the current challenge of creating a sustainable and resilient food system with the aim of nutrition for all. They could be modeled after existing Food Councils such as <u>Food Policy Council Directory</u>.<sup>11</sup> We encourage the involvement of food, nutrition and health organizations, such as SNEB, along with healthcare and public health professional organizations;

<sup>&</sup>lt;sup>10</sup> Marshall, Q., Bellows, A. L., McLaren, R., Jones, A. D., & Fanzo, J. (2021). You say you want a data revolution? Taking on food systems accountability. *Agriculture*, *11*(5), 422.

<sup>&</sup>lt;sup>11</sup> <u>https://www.foodpolicynetworks.org/councils/directory/online/</u>



nonprofits that focus on segments of the food system such as National Farm to School Network, Produce for Better Health; professional groups that consider the food system within the larger regional and global systems such as the American Planning Association, the Barilla Center for Food and Nutrition, EAT-Lancet Commission on Food, Planet, Health; and many local and community-level groups such as Leah's Pantry. Innovation for healthy communities requires collaborators and stakeholders who can rethink functions and spaces. For example, major health systems can screen for food and nutrition insecurity and partner with local organizations such as nutrition educators and/or community food banks to refer food insecure patients or to develop an internal program to address food insecurity. This could be made more efficient by creating a carve-out for information sharing related to food and nutrition insecurity within patient privacy laws and regulations. The aim should be to leave no one behind, good nutrition is for everyone!

**b.** *Farmers/producers:* At SNEB, we recognize the need for researchers and practitioners to establish trust with farmers/producers to enable more diverse, balanced production of all food groups, while at the same time, building trust and understanding within the community to consume diverse foods and to communicate what foods they would like. We recommend that subsidies be provided to farmers, especially small and medium sized, for growing diverse foods from all the food groups, especially those that are usually in lower supply: fruits, vegetables, and nuts/seeds. Monitoring the food system and working with local food councils will determine production needs. Food systems should encourage sustainable eating patterns, support cultural eating patterns, maintain or regenerate healthy ecosystems, provide a living wage, and be affordable to consumers. While fresh produce must have economic parity with processed/ultra-processed foods and be widely available, this cannot



undercut farmers whose share of each food dollar expenditure is only 16 cents. –To support farmers, we recommend increasing programs that align health care and local/regional farmers in healthcare centers similar to *farm to hospital* programs where physicians can serve on the programs. A successful example includes the partnership of <u>Augusta Health and</u> <u>Allegheny Mountain Institute and Ami Farm.<sup>12</sup></u>

- c. *School wellness policies:* The success of school wellness policies that provide holistic approaches to human development and health outcomes are supported when academic expectations align, rather than compete, with life skills and knowledge. Legislation to strengthen academic success such as the Every Students Success ACT (ESSA) have unintended consequences of undermining school wellness policies and subjects which are not directly related to test outcomes, such as agriculture, food, and nutrition. We need to support and strengthen school wellness policies, as those are effective measures to provide preventative care for students at all levels.
- **d.** *Public-private partnership:* All recommendations (2)(a) through (2)(f) can be made possible only with public-private partnerships with a shared understanding of achieving common goals. In some cases, public and/or private funding already exists that needs adjustment in how it is utilized, in other cases new funding will need to be generated.

# 5. Sustainability

The mission of the Society for Nutrition Education and Behavior advances food and nutrition education research, practice, and policy that promote equity and support public and planetary health. We are dismayed and disappointed that the crisis in our planetary health was not mentioned in the 5 pillars nor is there any indication that this will be addressed at the conference. None of these pillars will be adequate to address the disruption that we face. We understand the

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<sup>&</sup>lt;sup>12</sup> https://www.instagram.com/amifarm\_augustahealth/?hl=en



dependency that humans have on the planet and the need to focus on securing a stable planet as the foundation of human security, including food security. Reinvisionsing urban, suburban, rural, and Tribal communities as integrated systems across the nation and globe to address the planetary emergencies is necessary.

It is well-established that the food system <u>both significantly impacts and is</u> <u>significantly impacted</u><sup>13</sup> by climate change and ecosystem fragility. Every person in the U.S. and the global community will be impacted directly or indirectly by planetary boundaries being breached. This unprecedented situation requires a systems approach that can quickly respond to dynamic situations. Globally, <u>the</u> <u>food system is responsible as the primer driver for biodiversity loss</u>,<sup>14</sup> and the U.S. food system is dominated by this destructive production model. Major food producing areas in the U.S. are experiencing unprecedented drought, wildfires and over-extraction of groundwater with <u>more disruption to the food system</u> <u>anticipated</u>.<sup>15</sup>

Given the dependency on an emergency food system to respond to current food insecurity, as evidenced by food banks that have become permanent structures, SNEB recognizes this conference as an opportunity to shape the future of food systems, foster actions to address negative climate changes and planetary challenges in order to increase resiliency and sustainability, and create an environment where all people in the USA are well-nourished every day.

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<sup>&</sup>lt;sup>13</sup> Mbow, C., Rosenzweig, C., Barioni, L. G., Benton, T. G., Herrero, M., Krishnapillai, M., ... & Xu, Y. (2019). Food security.

<sup>&</sup>lt;sup>14</sup> Zhongming, Z., Linong, L., Xiaona, Y., Wangqiang, Z., & Wei, L. (2021). Our global food system is the primary driver of biodiversity loss. <u>https://www.unep.org/news-and-stories/press-release/our-global-food-system-primary-driver-biodiversity-loss</u>

<sup>&</sup>lt;sup>15</sup> <u>https://www.ers.usda.gov/topics/natural-resources-environment/climate-change/</u>



In summary, SNEB makes the following recommendations to address food and nutrition security:

- Establish a clear system of coordination and collaboration for all agencies involved in nutrition education, programming, and research.
- Improve existing nutrition and food security programs.
- Improve food, nutrition, and culinary education at all educational levels.
- Restructure health insurance programs to include food prescriptions and allow referrals for dietetic consultations.
- Support school wellness policies and alignment with curriculum.
- Increase support for nutrition and food security research.

SNEB's 1,000 nutrition educator members stand ready to assist, advise and amplify the conference. Please do not hesitate to reach out if you have any questions or are interested in further conversations about any of our recommendations.

Sincerely,

Jašía Steinmetz, PhD, RD President