Indiana SNAC Quarterly Meeting Minutes

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Description automatically generated with medium confidenceMeeting date: February 2, 2022

Meeting time: 1:00-2:30 p.m. EST

**Attendees (62)**

Alexis Michalski Jeff Walker Rebecca Tuholski

Amanda Congrove Jeff Lake Calvin Roberson Jr.

Fern Bachner Jill Tuley Walters Ashley Roberts

Lindsey Bouza Jonathan Barclay Joyce Robertson

Julia Brunnemer Jose Juarez Amy Rupp

Tonia Carriger Kilah Kuiper Samantha Schaefer

Corrine Chatterton Katelyn Kutemeier Nathan Schaeper

Katlyn Davidson Kylee Bennett Emma Smythe

Deanna Reinoso Bindi Lessing Jenna Sperry

Debbie Mix Marcia Sweet Wanda Stevens

Melinda Duckett Mary Tyndall Ashlee Sudbury

Annie Eakin Megan McGregor Tedd Grain

Elise Gahan Megihann Leininger Tina Graves

Jodee Ellett Chase Messersmith Nancy Ward

Tempitope Erinosho Erin Meyer Alohna Warren

Allison Finzel Michelle Bojrab Lacy Wilson

Kristen Fitzgerald Michelle Shippy Legita Wilson

Naima Gardner Rachel Miller Amber Zimmer

Hanna Kelley Megan Paskey Grace Bawitlung

Veronica Jalomo Katherine Pope Nila Cangmah

Chelsie Jaramillo Rachel Stohlma

**SNAC UPDATES**

* Update on strategic plans:
  + What are we doing with SNAC?
  + 12 Topically Based Dialogue Sessions
    - January:
      * Marjorie Hennessy with Health by Design presented
      * 29 attendees
      * Gained data and information on mural- Working with spring intern to organize
    - Find the dialogue session calendar below. Let us know if you would like to present at ant of them!

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* + Community Listening Sessions
    - In planning phases with the Indiana Minority Health Coalition
    - 6 planned sessions
  + State Health Improvement Plan Objectives Related to Nutrition and Physical Activity
* Student Networking Event
  + Postponed to summer to get people interested for spring 2023 internships

IDOH Health Challenges and Opportunities Grant

* Competitive grant funding through American Rescue Plan Act (ARPA)
* Priority areas:
  + Tobacco use, food insecurity/obesity, lead exposure, hepatitis C, chronic disease (diabetes, cardiovascular disease, asthma, and cancer) and public health prevention programs (community paramedicine for chronic disease, immunizations, and substance use disorder and community health workers/patient navigators)
  + Each priority area has their own guidance document with project areas and metrics
* Applications due March 31st at 5pm
* Projects would be for 12-month periods starting after July 1, 2022
* More information: <https://www.in.gov/health/grant-opportunities/healthissuesandchallengesgrant/>

**Organizational Updates**

*Emily Weikert Bryant- Executive Director, Feeding Indiana’s Hungry*

([ewbryant@feedingindianashungry.org](mailto:ewbryant@feedingindianashungry.org))

State legislative update:

* Halfway point of Indiana general assembly
  + About 4 bills that directly impact hunger relief
  + Two that deal with Governor’s Executive Authority
    - For the state to continue using maximum allotment benefits with SNAP, there must be a federal and state public health emergency
      * Senate bill 3 and House Bill 1001
  + Other two bills 1354 and 1410
    - 1354: require SNAP recipients who are noncustodial parents to comply with a child support order and not be delinquent on payments. Anyone ages 16-59 who is considered able to work to enroll to the SNAP employment and training program or else they will not receive SNAP benefits
      * Add about 105,000 people to IMPACT program
    - 1410: TANF

*Sarah Wilson- Nutrition Manager, Gleaners Food Bank of Indiana (swilson@gleaners.org)*

* Cultural Food Guide:
  + <http://www.gleanersnutritionhub.org/uploads/2/9/7/6/29762123/1-22_cultural_food_guide_for_pantries.pdf>

*Legita Wilson- WIC Commodities Program Manager, IDOH (*[*Lwilson2@isdh.in.gov*](mailto:Lwilson2@isdh.in.gov)*)*

* WIC Program Update:
  + Reminder: increased CVB benefit
    - Stock up on fresh, frozen, and canned fruit and veggies
    - Shop early, often, and use all of the CVB
  + Grant proposal is sitting with manager
    - Grant process is extended by 2 weeks
    - Built Back Better (TFAP)
  + WebSDM will be down in March
    - Only supporting access by Chrome
  + April 1st, USDA will no longer use Dunn’s numbers when allocating funds
    - Will use UEI
  + Alternate quarterly meetings
  + LFPA is still in the works

*Grace Bawitlung- Social Worker and Health Advocate Chin Community of Indiana (grace@chincommunity.org)*

* Update on services and programs
  + Chin Community of Indiana
    - Refugee and immigrants from Burma and Myanmar
      * Employment service, SNAP benefits, Medicaid, scheduling people doctors’ appointments, and other essential tasks
      * See about 45-50 people each day
      * Located on southside of Indianapolis (Greenwood, Franklin, Whiteland area)

*Marcia Sweet- Marketing and communications (Purdue Extensions)*

* New video out with community gardens: <https://www.youtube.com/watch?v=NkBpH4OgRxk>
  + How to make gardens accessible using Growing Together Grant
* Purdue Extension 2021 Impact Report is now avalaible: <https://www.eatgathergo.org/about-nep/>

Partner Presentation: Eskenazi Health

Tedd Grain- Vice President of Social Determinants of Health

“Helping People Live Longer and Better Lives”

Eskenazi Health and Social Determinants of Health

* Only 20% of health outcomes are linked to community care
  + SDOH create a buffer around someone that helps them have better health outcomes/ live a better and healthier life
* Building on our tradition of social care
  + Medical Legal Partnership
* Lifestyle Medicine
* Primary Care
* Other Partnerships
  + Sandra Eskenazi Mental Health
  + Food as Medicine
  + Housing
* Growing our Capacity
* Community Health Workers
* Community Weavers
  + SDOH Screening in EPIC
  + Finding Partnership Referral Software
* Life expectancy gap
  + From Fishers to downtown Indianapolis is a 16.8-year life expectancy gap (84.8 to 68.0)
* SDOH Strategy
  + Person Centric Care
  + Community Health
  + Health Equity ZONE
    - 8 categories: food as medicine, transportation and connectivity, housing, community connectivity, mental wellness, healthy lifestyles, safety, and economic opportunity.
* Our Vision: *In 25 years, life expectancy in health equity zones will be the same or better then the rest of Indianapolis.*

Eskenazi Health and Food as Medicine

* Medically meal tailored program
  + Supply patients the food they need for their medical conditions
    - Produce meals on campus from locally sourced food
      * 70% of food comes from Indiana
* Fresh for You Market
  + Market-Pantry Hybrid
  + Serves the patients, staff, and surrounding neighborhood
  + Attempt to address food insecurity in a dignified way
  + Rotating chefs from local businesses provide the special menu options of the day
  + Can sell food to anyone, but also have a voucher program
  + Goal is to put it on wheels to go into the communities who need it most
* Lifestyle medicine and nutrition
  + Group education programs
    - Chronic disease: dietician led educational groups for those living with chronic disease
      * Diabetes (DSMES)
      * Hypertension (HTN)
      * What Can I Eat (WCIE)
    - Nutrition Incentive: groups that pair nutrition education with health food distribution
      * + Food Is Medicine (FIM)
        + Veggie boxes
        + Sky Farm
        + Produce Rx
    - Healthy Me: preventative health groups led by lifestyle wellness coaches
      * + Diabetes Prevention Program (DPP)
        + Lifestyle Support Groups
    - Pediatric: healthy living education focused around 5-2-1-0 content led by the dietician and wellness coach
      * + Growing Strong Cooking Matters (GSCM)

Academic Spotlight: IU Bloomington School of Public Health

Tope Erinosho- Associate Professor

Katherine Pope- Project Manager ([kjpope@iu.edu](mailto:kjpope@iu.edu))

**Lessons Learned from a Rural IN Community to Support Healthy Weight Behaviors in Preschool-Aged Children**

* Background
  + Rural children experience poorer quality diets, lower levels of physical activity, fewer grocery stores, and limited access to physical activity resources than urban counterparts
  + Lack of obesity prevention policies is a challenge
* Purposed of this study
  + Assess the needs/challenges, facilitators/assets, and opportunities to promotes healthy weight habits in children aged 2-5 year in Greene County
  + Inform the use of community-engagement to develop a community-based intervention
* Study methods
  + Interviews:
    - 12 community stakeholders
    - 8 childcare providers
    - 14 parents of preschool-aged children
  + Observational audits:
    - 26 physical activity resources (e.g., parks, playgrounds)
    - 19 grocery stores
* Physical activity assessment
* Food environment assessment
* Study Findings
  + Performed audits from August 2020 to August 2021
* Understanding hoe the environment supports physical activities
  + An average physical activity resource in Greene County has:
    - 9 features
    - 18 amenities
    - 3 incivilities
* Accessing fresh food in Greene County
  + 32% stores sold quality fruits and vegetable
  + 37% store sold other types of healthy foods (e.g. whole wheat bread)
  + 95% stores charged higher than average prices for produce
* Demographic characteristics of interview participants
  + Stakeholders
    - From various organizations (community leaders, social services, healthcare, business, schools)
  + Childcare providers
    - Female and Caucasian
    - 50% were center directors and teachers
    - <50% had 4-year college degrees
  + Parents
    - Female and Caucasian
    - Most were married
    - Most did not receive social services
* Needs and Challenges
  + Family Level
    - Lack of nutrition knowledge
    - Limited cooking skills
    - Limited financial resources
  + Child-Care Providers
    - Disconnect between child-care and home practices
    - Lack of funding and training in health and wellness
    - Not enough childcare for preschool-aged children to meet demand
  + Community Level
    - Lack of public transportation
    - Limited infrastructure to support healthy eating and active lifestyles
    - Limited community activities and opportunities to be physically active
* Facilitators and Assets
  + Family level
    - Parental role-modeling of healthy eating habits
    - Provision of a variety of foods
  + Child-Care Providers
    - Low-cost, healthy meals provided
    - Nutrition and physical activity lessons
    - Fun ways for children to be physically active
    - Family activities, opportunities for families to connect
  + Community level
    - Other sources of healthy foods🡪 food pantries, blessings boxes, farmers makers, child-care programs
    - Built environment infrastructure
    - Support from community stakeholders and businesses
    - Community-wide events
* Opportunities to intervene should:
  + Involve community partnerships
  + Target the entire family to build the community
  + Include outreach and awareness promotion
  + Explore ways to improve/increase infrastructure

Announcements and Reminders

* SNAC Member Profiles
  + The new SNAC profiles are linked below:
* SNAC Newsletter
  + Please send updates, stories, funding opportunities to be included in the SNAC Newsletter to Amy at [arupp@isdh.in.gov](mailto:arupp@isdh.in.gov)
* Involvement
  + If you or anyone you know might be interested in speaking at the dialogue sessions, please let us know!

**NEXT QUARTERLY MEETING: MAY 4TH, 2022, 1PM-2:30PM**

**(we have shortened the meetings by 30 minutes)**