Celebrating 50 Years
GRETCHEN SWANSON CENTER FOR NUTRITION

Food as Medicine - Understanding the Biden Strategy on Hunger, Nutrition and Health

Improve Food Access and Affordability and Empowering All Consumers to Make and Have Access to Healthy Choices through Pillars 1 and 3

Carmen Byker Shanks, PhD, RDN
Gretchen Swanson Center for Nutrition
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Carmen Byker Shanks, PhD, RDN

- Principal Research Scientist, Gretchen Swanson Center for Nutrition
- Co-Project Director of GusNIP NTAE
- PhD in Nutrition and Registered Dietitian Nutritionist
- More than a decade of experience as a faculty member at Montana State University
- Research at the intersection of healthy diets and equitable food systems to inform policy that promotes public health
- Located in Bozeman, Montana

Connect

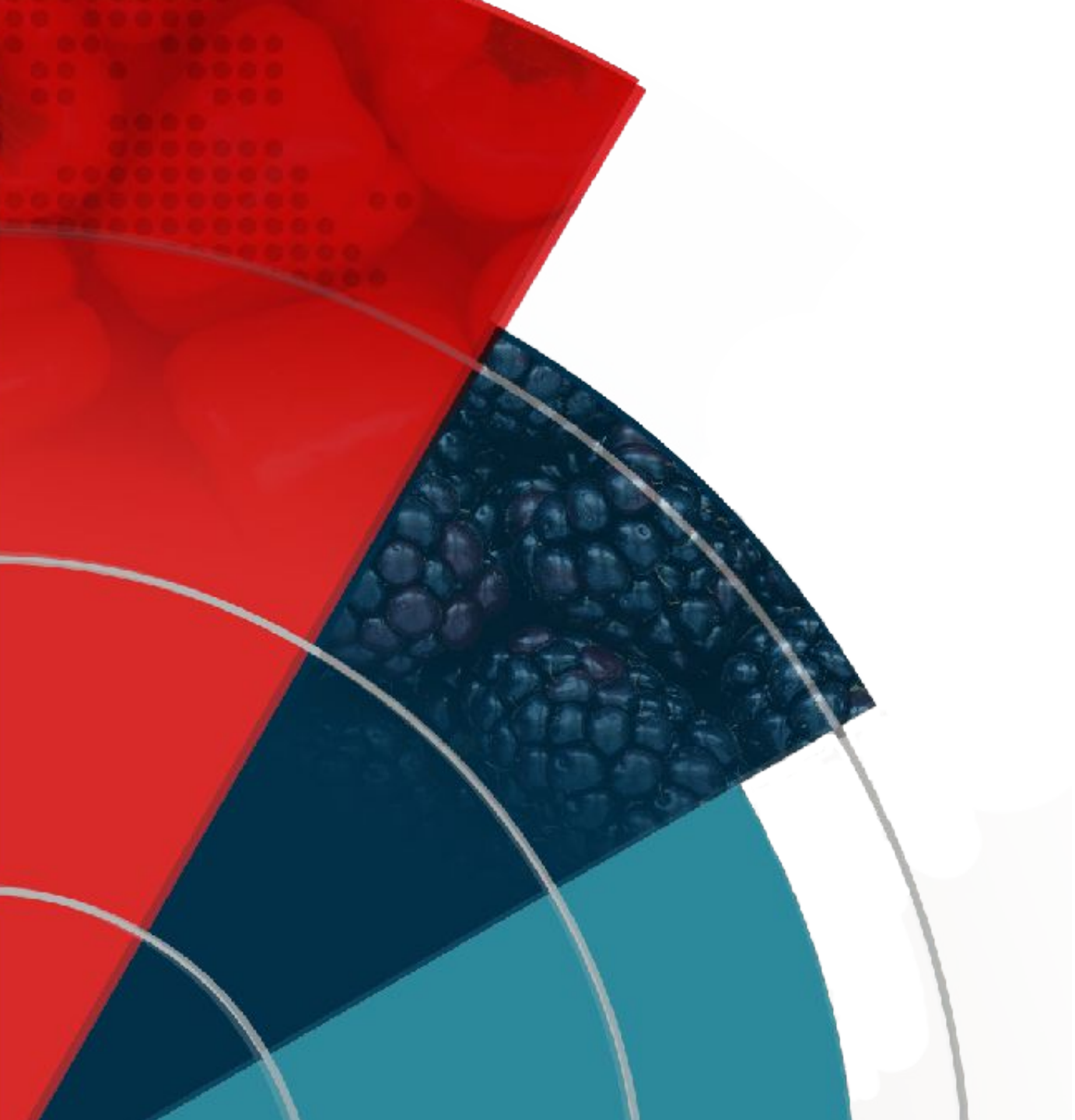
Email: cbshanks@centerfornutrition.org

About Us

Connect with us:

- Website: www.centerfornutrition.org
- LinkedIn: Gretchen Swanson Center for Nutrition
- Twitter: GretchenSwanson

- Founded in 1973, the Gretchen Swanson Center for Nutrition is a national nonprofit research institute providing expertise in measurement and evaluation to help develop, enhance and expand programs focused on healthy eating and active living, improving food security and healthy food access, promoting local food systems and applying a health equity lens across all initiatives. The Gretchen Swanson Center works nationally and internationally, partnering with other nonprofits, academia, government and private foundations to conduct research, evaluation and scientific strategic planning.



Today's Agenda

- Pillars 1 and 3 **overview and details**
- **National application** of the pillars
- Applying the pillars in your work related to **Food is Medicine**

Pillars 1 and 3 Description

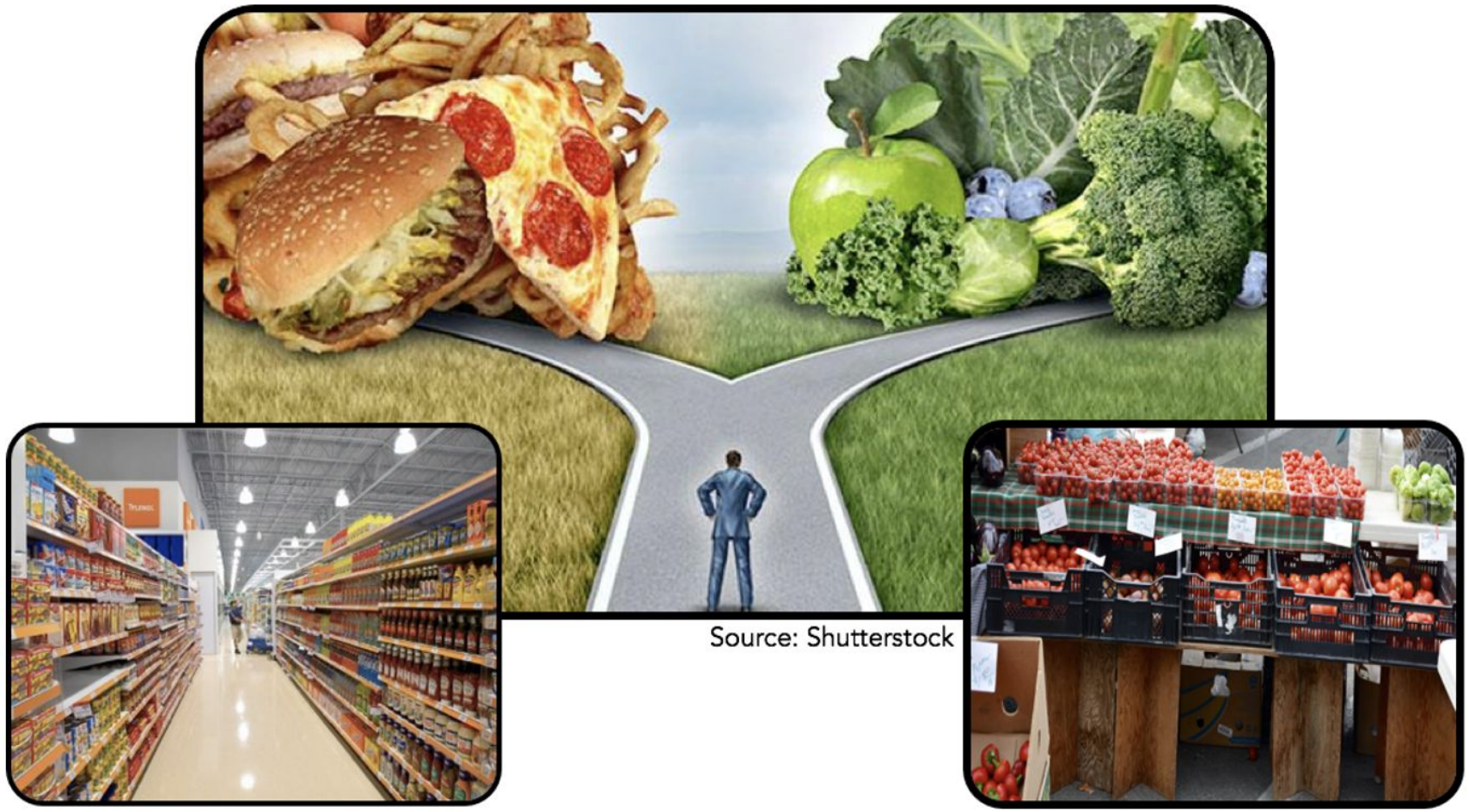
Improve Food Access and Affordability:
End hunger by making it easier for everyone—including **individuals in**

- **Urban**
- **Suburban**
- **Rural**
- **Tribal communities**
- **Territories**

—to access and afford food.

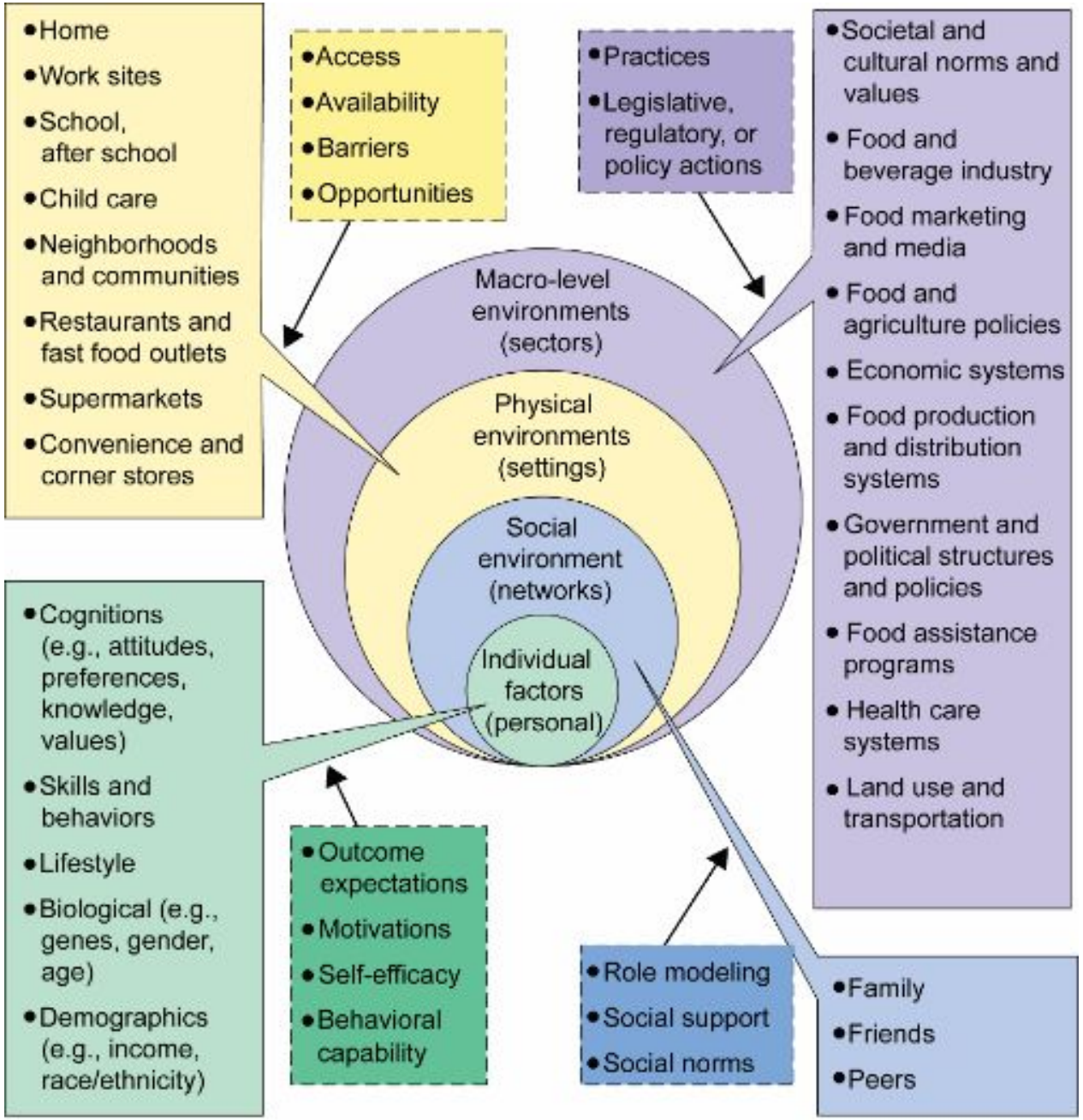
- Foster environments that enable all people to easily **make informed, healthy choices**
- **Increase access** to healthy food
- Encourage **healthy workplace and school policies**
- **Invest in public education campaigns** that are **culturally appropriate** and resonate with specific communities.

What Influences Your Food Choices?



Source: Shutterstock

Pillars 1 and 3 Focus on Key Factors That Influence What People Eat



Story M, et al. 2008.
Annu. Rev. Public Health. 29:253–72

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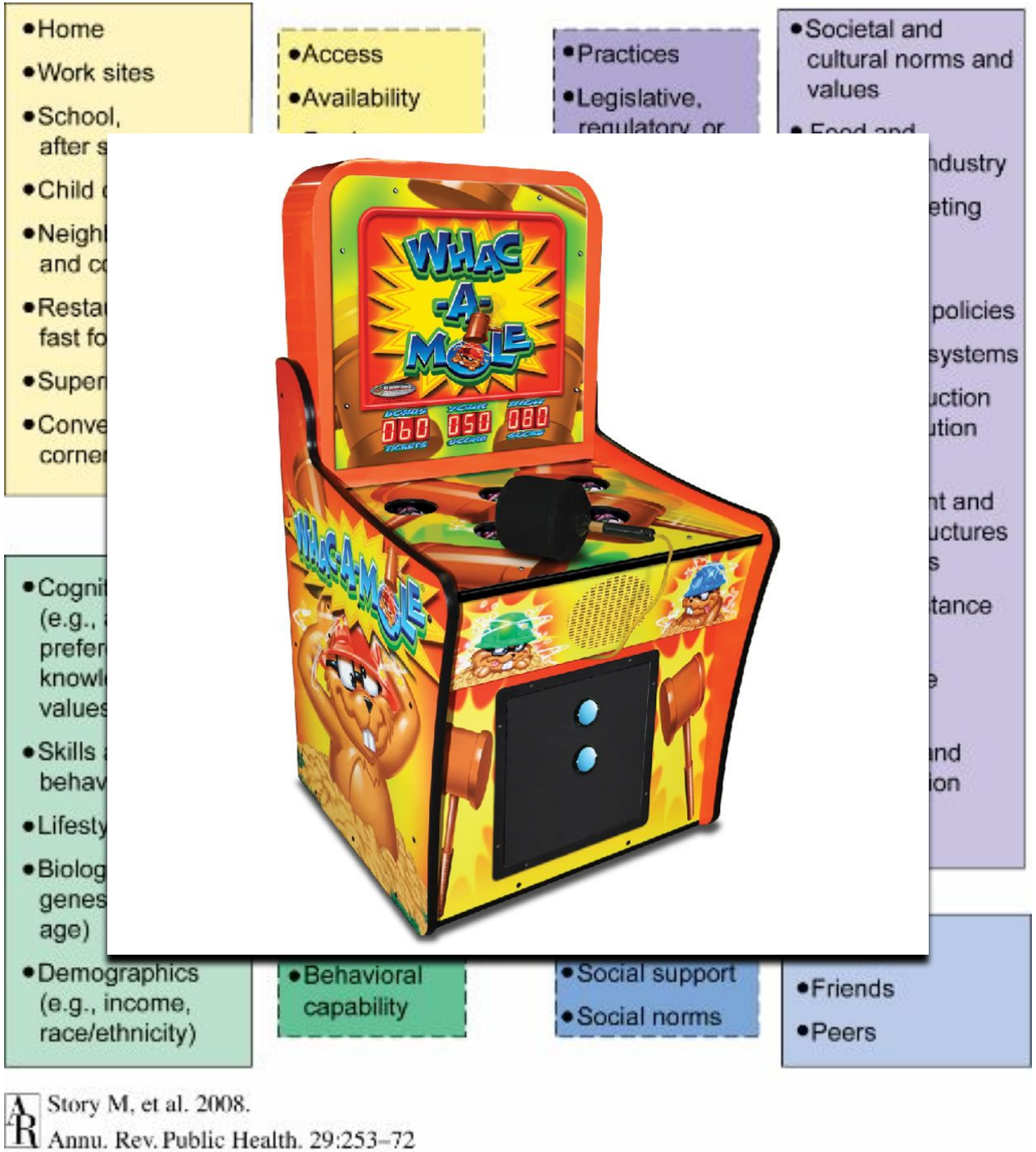
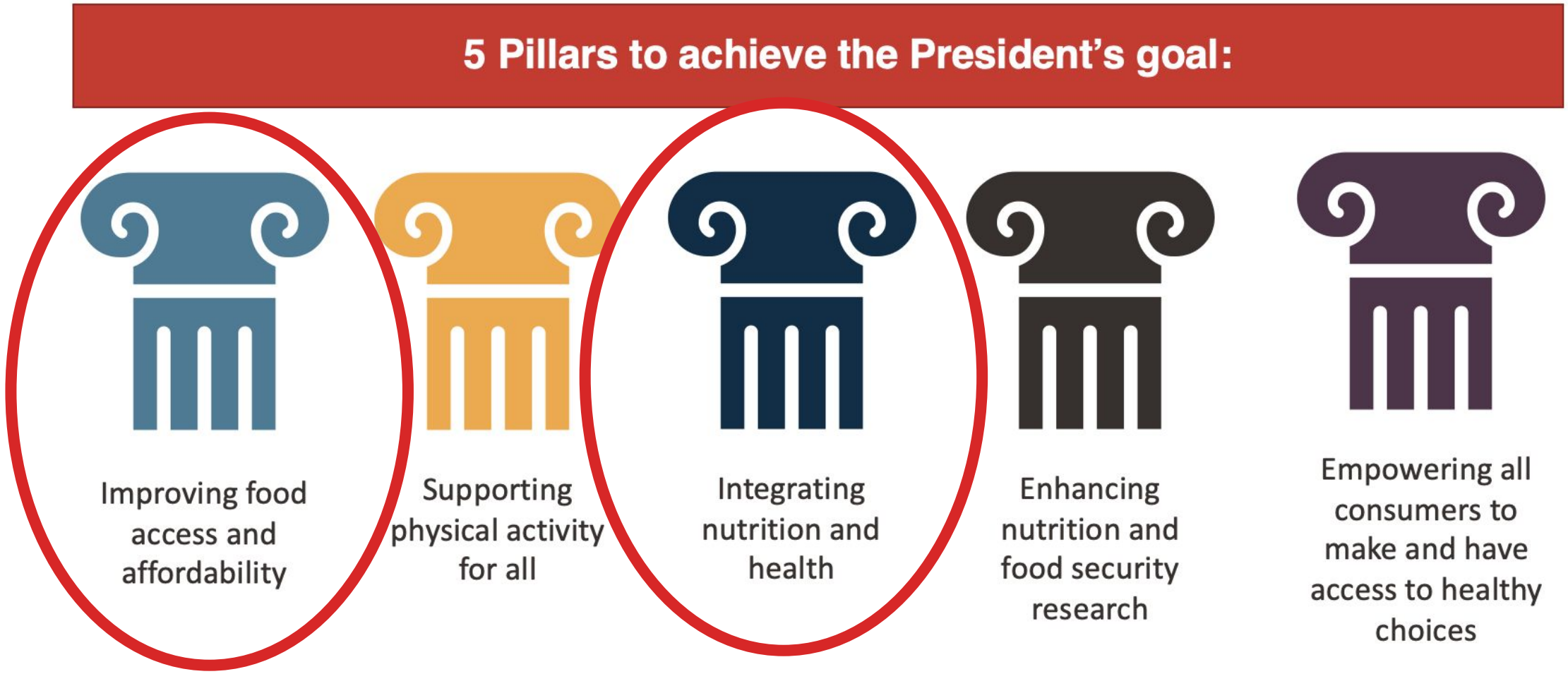


Biden-Harris Administration National Strategy on Hunger, Nutrition, and Health



Pillar 1 Details

Why Is Food Access and Affordability Important?

1

2

3

4

Why Is Food Access and Affordability Important?

1

Washington

2

Chile

3

Chile

4

Polson, MT

Why Is Food Access and Affordability Important?

1

Washington $0.75

2

Chile $1.37

3

Chile $0.68

4

Polson, MT $1.52

CURRENT CYCLE

1 FOOD INSECURITY

2 INSUFFICIENT FOOD QUANTITY

3 RELIANCE ON INEXPENSIVE, ULTRA-PROCESSED FOOD

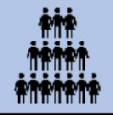
4 LOW DIETARY QUALITY

5 DEVELOPMENT OF NON-COMMUNICABLE DISEASE

"I WANT TO EAT HEALTHIER AND LOSE WEIGHT, BUT HEALTHY FOOD IS SO EXPENSIVE!"

"MY WHOLE FAMILY GAINED WEIGHT AND STARTED EATING A LOT OF PROCESSED FOODS WHEN WE WERE HOMELESS."

"I DON'T KNOW HOW TO COOK HEALTHY FOOD. I USUALLY JUST EAT A LOT OF CANNED FOODS."

		Levels of Influence			
		Individual	**Interpersonal**	**Community**	**Societal**
Domains of Influence *(Over the Life Course)*	**Biological**	Taste Predispositions, Nutritional Status, Nutrition Metabolism, Nutrigenomics, Metabolomics, Microbiome, Food Allergies and Intolerances	Maternal -Child Interaction, Feeding Practices (e.g., breastfeeding), Family Microbiome	Community Illness Food Contaminant	Sanitation Pathogen Exposure (e.g., E Coli)
	Behavioral	Dietary Intake, Dietary Habits, Eating Patterns, Coping Strategies	Family Dietary Practices (e.g., family meals) School/Work Dietary Behavior	Farmers Markets Community engagement (lobbying for full- service grocery stores)	Nutrition Policies and Laws (e.g., food assistance programs and access) State- and City-level Food and Nutrition Policies (soda taxes)
	Physical/Built Environment	Personal Food Environment and Access (exposure to fast food at home)	Household Food Environment School/Work Food Environment	Community Environment Community Resources Neighborhood Food Environment (e.g., food deserts, food marketing)	Societal Structures (e.g., zoning laws) Dept. of Education and School System
	Sociocultural Environment	Food Preferences, Sociodemographic (discretionary income) Food Literacy and Preparation Skills Limited English Cultural Identity/Acculturation Response to Discrimination	Social Networks Family/Peer Norms Interpersonal Discrimination (e.g., dietary practice, body image)	Community Norms Local Structural Discrimination (e.g., dietary practice, body image)	Social Norms Food System (e.g., supply chain) Societal Structural Discrimination
	Health Care System	Insurance Coverage, Access, Utilization Health Literacy Treatment Preferences Medical Nutrition Therapy	Patient-Clinician Relationship Medical Decision-Making (referral to Registered Dietitian)	Availability of Services Safety Net Nutrition Services (WIC, SNAP, food pantries, produce prescriptions)	Quality of Care Health Care Policies for Nutrition Services (screening & treatment) Medically Tailored Meals
Health Outcomes		**Individual Health** 	**Family/Organizational Health** 	**Community Health** 	**Population Heath** 

Agurs-Collins T, Alvidrez J, Ferreira SE, Evans M, Gibbs K, Kowtha B, Pratt C, Reedy J, Shams-White M, Brown AG. Perspective: Nutrition Health Disparities Framework: A Model to Advance Health Equity. Advances in Nutrition. 2024 Mar 21:100194.

Pillar 1: National Application

Prioritized List of Policy, Systems, and Environmental Strategies for Families in Rural Places:

- Make it **easier to sign up** for programs
- Make people **more aware** of services
- Make it **trouble free for people to use programs**
- **Expand employment**
- Make it easier to **get from place to place**
- Make **housing more affordable**
- Provide **chances for people to suggest changes** to programs
- **Expand school nutrition programs**
- Increase access to **affordable health care**
- **Expand food banks**
- Make **childcare options and early childhood education** better fit the needs of families
- Provide options for people to **learn about buying and making healthy foods on a budget**
- Provide more places to **get food locally**

Access at https://www.centerfornutrition.org/share-our-strength

Pillar 1: National Application (PLANTS)

1. Building and strengthening relationships among **community-based school food system stakeholders**
2. Improving **school food supply chain coordination** to support the shared values, needs, and regulatory requirements of local food producers and businesses as well as K-12 schools
3. Expanding scratch cooking operations in K-12 schools to both provide **more nourishing, high quality, and culturally inclusive meals** to students as well as incorporate more local and sustainably produced ingredients into meals
4. Increasing **awareness of and access** to K-12 markets among small- to mid-scale and historically underserved food producers and businesses
5. Establishing a **sustainable approach and best practice**s for improvement of the K-12 food system that are easily scalable and adoptable by other organizations.

USDA Food and Nutrition Service
U.S. DEPARTMENT OF AGRICULTURE

CHEF ANN FOUNDATION | GRETCHEN SWANSON CENTER FOR NUTRITION | KITCHEN SYNC STRATEGIES | NATIONAL FARM to SCHOOL NETWORK

Pillar 3: Details

Empower consumers with updated and more accessible food labeling

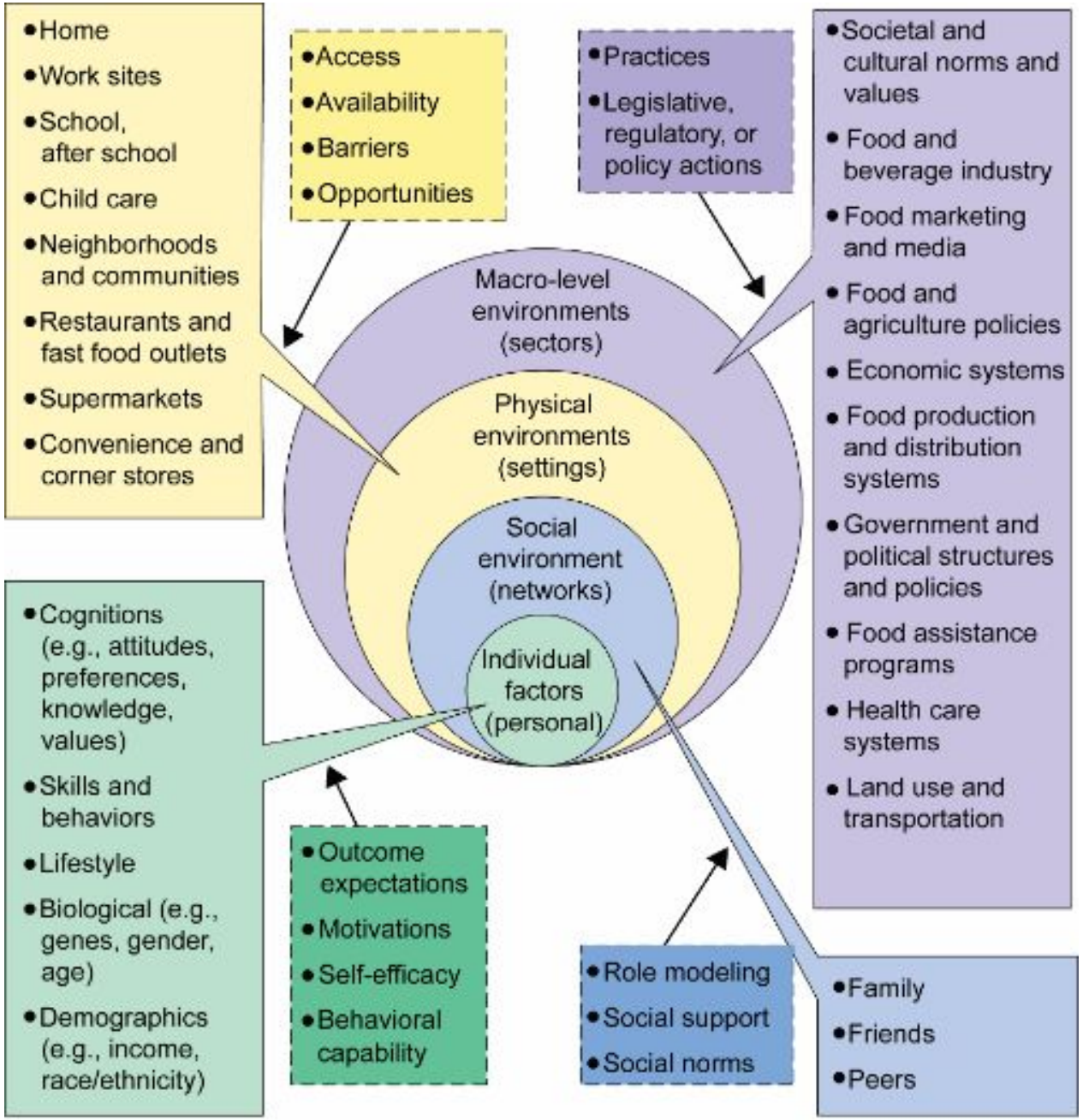
Create healthier food environment and a healthier food supply so the healthier choices is the easier choice

Pillar 3: Empower All Consumers to Make and Have Access to Healthy Choices

NUTRITION

Support robust and tailored nutrition education

Reminder: Key Factors That Influence What People Eat



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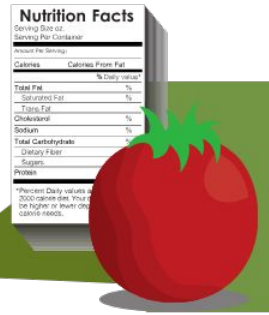
Pillar 3: Details

Pillar 3: Empower All Consumers to Make and Have Access to Healthy Choices



Empower consumers with updated and more accessible food labeling

Front-of-packaging (FOP) labeling system

“Healthy” food labels align with nutrition science and Dietary Guidelines for Americans

Fund HHS FDA’s Center for Food Safety and Applied Nutrition, prioritize nutrition and labeling

Nutrition information is easily available when grocery shopping online

Side-by-Side Comparison

Original Label

Nutrition Facts

Serving Size 2/3 cup (55g)
Servings Per Container 8

Amount Per Serving

Calories 230	Calories from Fat 70
	% Daily Value*
Total Fat 8g	**12%**
Saturated Fat 1g	**5%**
Trans Fat 0g	
Cholesterol 0mg	**0%**
Sodium 160mg	**7%**
Total Carbohydrate 37g	**12%**
Dietary Fiber 4g	**16%**
Sugars 12g	
Protein 3g	
Vitamin A	10%
Vitamin C	8%
Calcium	20%
Iron	45%

* Percent Daily Values are based on a 2,000 calorie diet. Your Daily Value may be higher or lower depending on your calorie needs.

	Calories:	2,000	2,500
Total Fat	Less than	65g	80g
Sat Fat	Less than	20g	25g
Cholesterol	Less than	300mg	300mg
Sodium	Less than	2,400mg	2,400mg
Total Carbohydrate		300g	375g
Dietary Fiber		25g	30g

New Label

Nutrition Facts

8 servings per container
Serving size **2/3 cup (55g)**

Amount per serving
Calories **230**

	% Daily Value*
Total Fat 8g	**10%**
Saturated Fat 1g	**5%**
Trans Fat 0g	
Cholesterol 0mg	**0%**
Sodium 160mg	**7%**
Total Carbohydrate 37g	**13%**
Dietary Fiber 4g	**14%**
Total Sugars 12g	
Includes 10g Added Sugars	**20%**
Protein 3g	
Vitamin D 2mcg	10%
Calcium 260mg	20%
Iron 8mg	45%
Potassium 240mg	6%

* The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.

FDA

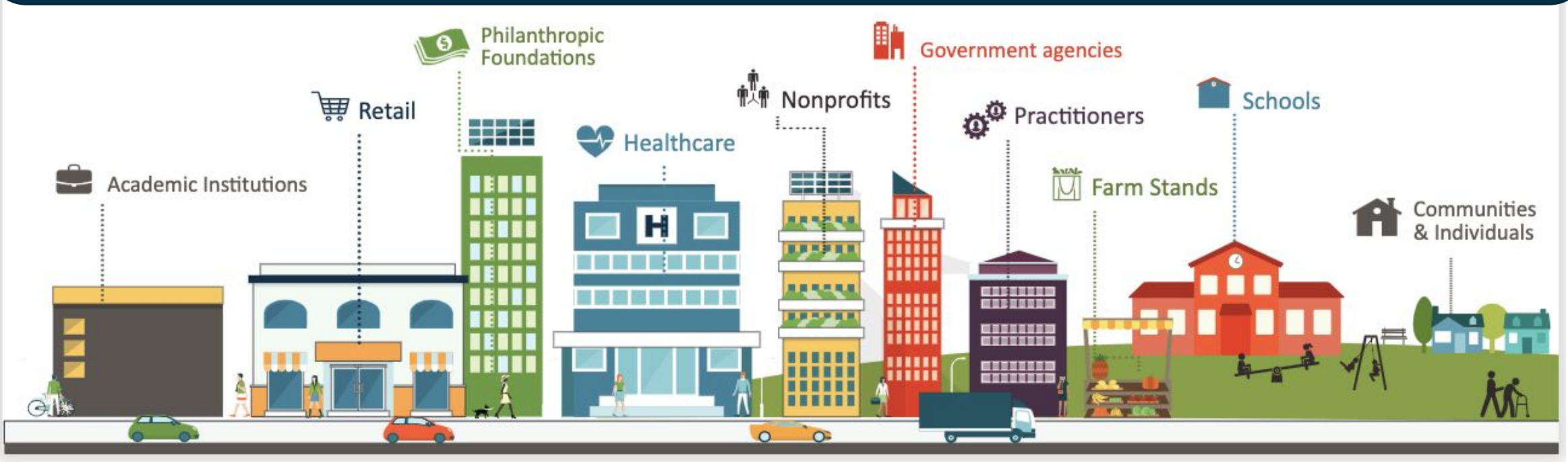
Pillar 3: Details

Pillar 3: Empower All Consumers to Make and Have Access to Healthy Choices

Create healthier food environment and a healthier food supply so the healthier choices is the easier choice

- **Expand incentives for fruits and vegetables in SNAP**
- **Facilitate lowering added sugar consumption**
- **Address marketing of unhealthy foods and beverages**
- **Leverage federal nutrition assistance programs to promote healthy habits**
- **Facilitate lowering the sodium content of food**
- **Expand access to healthier environments in federal facilities**
- **Create healthier food retail, restaurant, and college campus environments**
- **Increase access to local food to better connect people to nutritious foods**

It takes a village to create healthier food environments and food supplies.
How does your work contribute?



Pillar 3: National Application

GusNIP NTAE
data collection + evaluation

Individuals who qualify for SNAP
are eligible for nutrition incentives

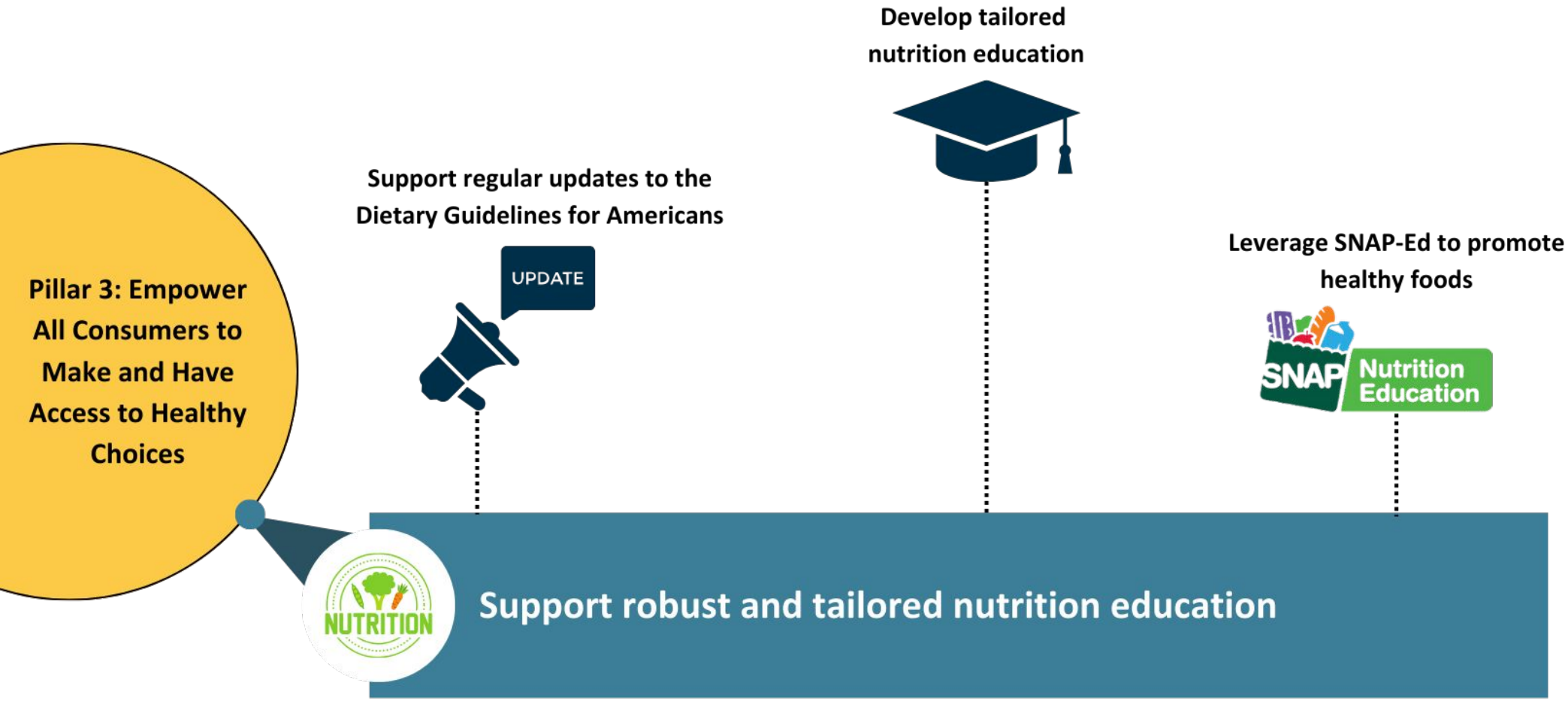
Nutrition education

Receive nutrition incentives at
farmers markets, grocery stores,
and other participating
GusNIP nutrition incentive sites

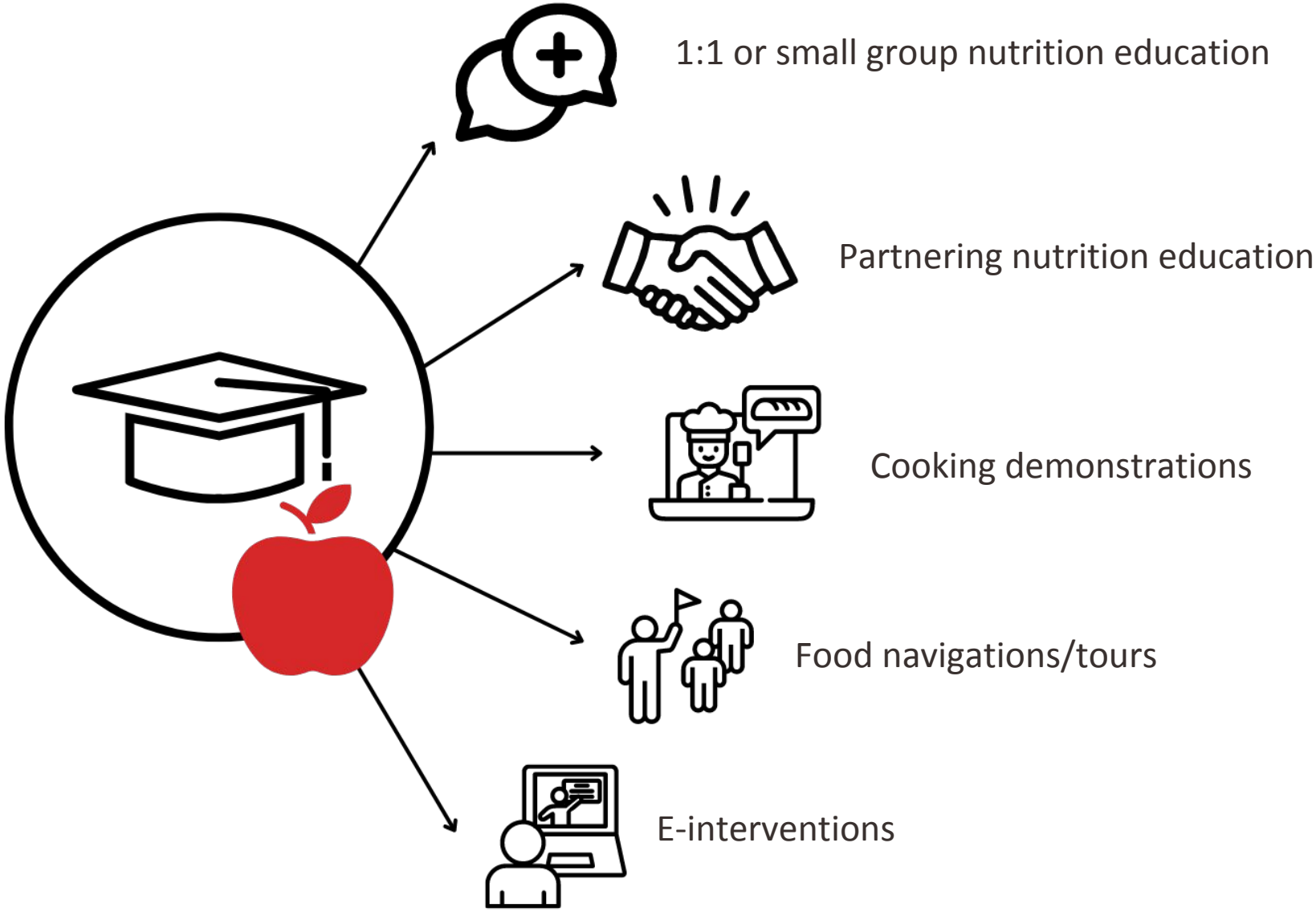
Redeem nutrition incentives

More info at https://nutritionincentivehub.org/

Pillar 3: Details



Pillar 3: National Application



1:1 or small group nutrition education

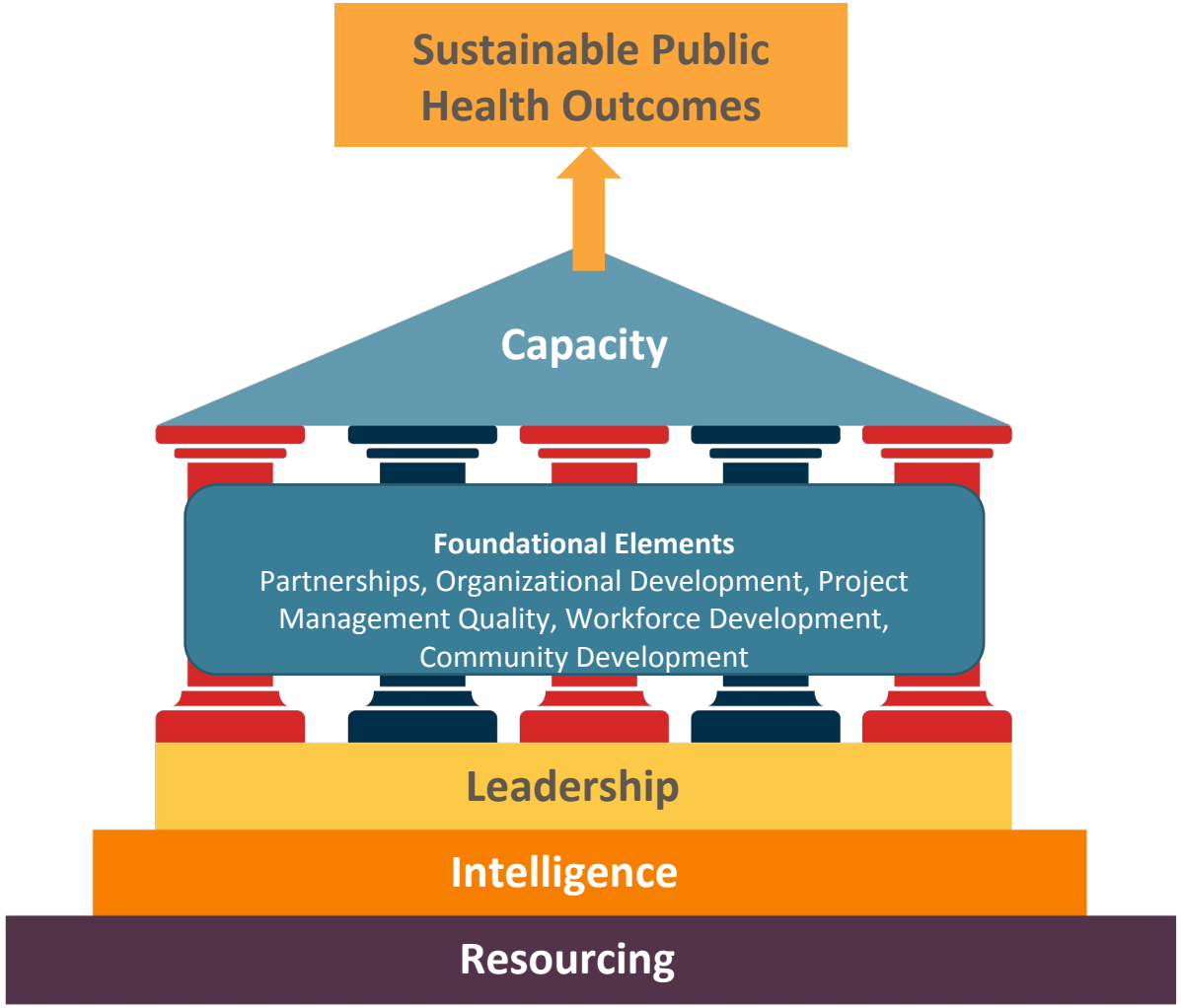
Partnering nutrition education

Cooking demonstrations

Food navigations/tours

E-interventions

Applying Pillars 1 and 3 in Your Work Related to Food Is Medicine



- Human, financial, and infrastructure resources
- Knowledge to develop strategies and resolve issues
- Leadership from all sectors to support the vision
- Diverse partnerships in healthcare, food and agriculture sector, community organizations, funders, policy, payers/insurers
- Project management that provides ongoing technical assistance, evaluation, and information
- Engagement with communities for localized buy in and implementation
- Workforce capacity and competency to deliver programs

Baillie E, Bjarnholt C, Gruber M, Hughes R. A capacity-building conceptual framework for public health nutrition practice. Public health nutrition. 2009 Aug;12(8):1031-8.

Questions

Let's Chat!

Carmen Byker Shanks, PhD RDN

Principal Research Scientist

Gretchen Swanson Center for Nutrition

cbshanks@centerfornutrition.org

www.centerfornutrition.org