





















Loneliness as a co-morbidity

"Impact of Loneliness on Healthcare Utilization"

- group therapy interventions improves QOL and decreases health care costs
- those that are chronically lonely are likely to turn to their healthcare provider for social support

"Reducing social isolation on mental health and physical well being for older adults"

- Reduction of depression
- higher health for those with comorbidities







Eating for Better Health

Structure

- Billable Medical Visit with Medical Provider and Nutrition Expert
- Patients check their own vitals
- Check-Ins: patient goals, what they are working on and how it's going, what they've learned
- Expert instruction with cooking/prep demo
 Share food and check out on new

Challenges

- Balancing information and experience, keeping programming new
 - Best attendance has been in the initial 12 months after changes in programming

 Separate location from PC sites
- Attendance ebbs and flows
- Collaborative Medical Provider Involvement/Passion has ebbed and flowed







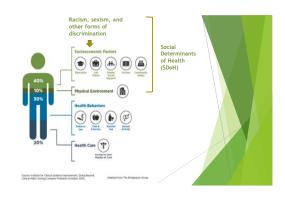


FOOD, HEALTH & ENVIRONMENT \$77 billion in health care costs 00% of deaths (1.5 million annually in the US) related to poor diets; I I million globally 40% of children in the US with pesticide levels that could

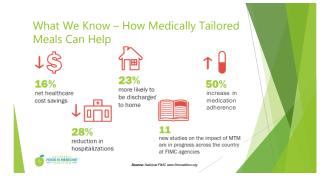
impact brain development

Conventional agriculture a leading cause of climate disruption – regenerative systems part of the solution









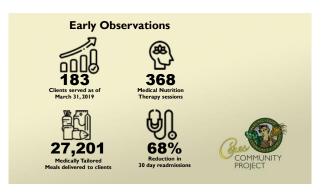
PROVINGTHE CASE - CURRENT RESEARCH

- California Congestive Heart Failure Nutrition Pilot for MediCal Patients
- Kaiser Permanente Hospital Congestive Heart Failure Discharge Study
- Smart Box Pilot Nutrition Education & Food Access Intervention for Patients at Risk for Heart Attack or Stroke



California Congestive Heart Failure Nutrition Pilot * 3 year \$6 million study funded by the state * 6 medically tailored meal providers, 6 counties * 1,000 Medi-Cal patients with congestive heart failure * 3 months of 100% nutrition plus nutrition education * Goals: * Demonstrate that investing in food improves outcomes and lowers healthcare costs * Policy change making this intervention a reimbursable part of MediCal



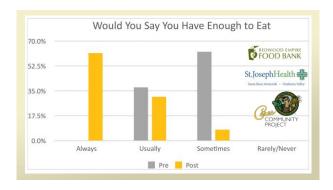


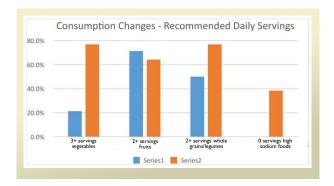
Smart Box Pilot - Reducing Heart Attack/Stroke

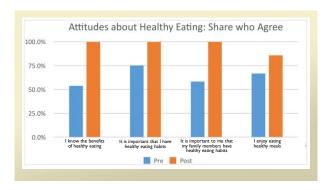
 Low-income primarily Latinx residents with high/very high blood pressure and/or diabetes

> COMMUNITY PROJECT

- Weekly class for 12 weeks taught in Spanish at local elementary school with childcare; entire family welcome
- Families receive 5 prepared meals/week for each family member + groceries and recipes
- Followed by monthly class/support group for 12 months
- Pre/post survey and health screenings







Policy & Systems Change

- Networking & Coalition Building Projects
- With Marin Food Now established food quality guidelines including language about environmental nutrition
- With CCOF and Health Care without Harm workshop at 2019 Root Cause Coalition Conference on the importance of organic and sustainable food standards for FIM interventions
- With UC Davis written into NIH grant to study plant forward whole food diets for diabetes
- With CCOF supporting Roadmap to an Organic California project



References

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- "Meeting Individual Social Needs Falls Short Of Addressing Social Determinants Of Health," Health Affairs Blog, January 16, 2019.DOI: 10.1377/hblog20190115.234942
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COMMUNITY

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 COMMUNITY
 PROJECT

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