Case Study:
Hunger and Health Coalition
Vital Statistics

WHAT:
Hunger and Health Coalition’s (HHC) Food is Medicine program begins with a hospital-based or clinic-based health care provider identifying patients that are managing one or more diet-related chronic diseases and are experiencing food insecurity. Providers write a prescription for a medically tailored meal box, and clients either fulfill that prescription onsite at one of HHC’s locations, or receive a medically tailored meal box delivered to their door. The program provides customizable boxes, nutritional counseling, and regular interaction with HHC staff. Clients can remain in the program as long as they maintain income and other eligibility.

HOW:
HHC operates several pick-up sites for both food and prescriptions, as well as coordinating nutritional counseling, wrap-around service collaborations, and delivery of food and medicine.

WHY:
HHC’s Food is Medicine program seeks to address individual clients’ food and health needs, while simultaneously addressing upstream factors of poor health including supporting healthy local economies through intentional program purchases and partners (e.g., buying local produce from local farmers) and greater community connection.

THE FUTURE:
HHC will scale programs in collaboration with the Healthy Opportunities Pilots (HOPs) effort in western North Carolina, providing more data and evaluation of its programs and impact. HOPs are a statewide Medicaid-funded initiative “to test evidence-based, non-medical interventions designed to reduce costs and improve the health of Medicaid beneficiaries.”¹ HHC is also seeking immediate funding to help with scaling their programs, including funding for more cold storage facilities, nutrition counseling, increased local food procurement, community-led promotion and delivery services, and more.

**Hunger and Health Coalition’s (HHC) mission is to relieve poverty and hunger in a compassionate manner for families and individuals who are experiencing economic hardship and food shortages. This assistance may include food, medicine, wood, and referrals to other community resources.** Since its founding in 1982, HHC has been working to address many social determinants of health, but especially access to food and medications, in and around Boone in Watauga County, North Carolina. HHC has a large scale food pantry, pharmacy, food recovery kitchen, backpack program, woodlot (for firewood), as well as programs to collect and donate cribs and beds for children.

**HHC’S FOOD IS MEDICINE PROGRAM**

The Hunger and Health Coalition began an intentional local food procurement program in 2014. This partnership with local farms not only increased healthy food options for families in the High Country region, but also boosted the local food economy - allowing farmers to increase their own capacity to grow foods most needed by HHC’s target population. This program has grown significantly year after year with the Hunger and Health Coalition now being the largest purchaser of local foods in the region.

In looking to Food is Medicine as a model for their programs and services, the Hunger and Health Coalition began partnering with Appalachian Regional Healthcare System in 2017 to screen hospital patients for food insecurity. The initial pilot program screened 400 people for food insecurity in the inpatient setting, and referred them to HHC for a tailored food box to address nutrition-related chronic disease. The programs have evolved and HHC’s Mobile Food Assistance programs, designed to bring food and other services to participants wherever they are and regardless of access to transportation, serves a wide variety of families through pick-up or delivery of fresh, shelf stable, and frozen food items, as well as hygiene supplies, pet food vouchers, and household goods as they are available. Within the Mobile Food Assistance unit, the Food is Medicine program represents the specific partnership between HHC and local health care providers.
How does the program work?

HHC’s Food is Medicine program begins with a health care provider, either in the hospital or in clinics throughout the community, identifying patients that are managing one or more diet-related chronic diseases and are experiencing food insecurity. Providers write a prescription for a medically tailored meal box, and clients either fulfill that prescription onsite at one of HHC’s locations, or receive a medically tailored meal box delivered to their door. Regardless of how meal boxes are received, clients first provide dietary preferences, medical needs, and allergy information upon enrollment; clients also are prescribed food boxes for the whole family, regardless of who was prescribed the food box by a health care provider. The program provides clients with ongoing phone interactions with the program coordinator and a face-to-face interaction with the client’s regular delivery volunteer, which has led to numerous intangible, community-building benefits including neighbors building relationships with neighbors and collaborative long-term community planning for health advancement amongst nonprofits, farms, and health care leaders.

Clients may participate and continue to receive prescription food boxes as long as they continue to meet income and disease criteria, in order to support long-term disease management.
HEALTH CARE PARTNERS
All Appalachian Regional Healthcare facilities, as well as all private health care professionals within Watauga County, will be participating in food security screening and food prescription referrals to HHC by 2023. Additional health care providers in Ashe and Avery Counties will be added over time.

ENROLLMENT
Clients are enrolled in the program if they are identified as food insecure using a two-question food security screening tool and have one or more diet-related chronic diseases. As of January 2022, 215 clients across 104 households have received medically tailored food assistance. Enrollment numbers continue to grow.

Food Insecurity Screening Questions:
- Within the past 12 months, have you worried that food would run out before having money to buy more?
- Within the past 12 months, has the food you bought run out before having money to buy more?

FOOD ACCESS
HHC’s medically tailored meal boxes provide a combination of fresh and shelf stable options. The monthly box contains approximately 55 pounds of food supplies including non-perishables, fresh produce, frozen proteins, ready-to-eat meals, dairy, and eggs as available. Pet food vouchers, hygiene supplies, and other household goods are also available via food boxes by request when available.

HHC does prioritize and partner with local and regional farms, especially Black, Indigenous, People of Color (BIPOC)-owned, small, and/or women-owned farms, to supply the fresh produce, eggs, and dairy included in the medically tailored meal boxes. These partnerships are a deliberate approach to increasing the economic impact and shared value of HHC’s programs.

FUNDING
HHC has received numerous smaller grants and group donations to implement component services of the FiM initiative, such as food and prescription delivery. Support from the Blue Cross and Blue Shield of North Carolina Foundation has helped in driving outreach to clinics and helping HHC secure early medical partners to begin conducting food insecurity screenings and referrals. HHC’s recent acceptance as a partner in the managed Medicaid Healthy Opportunities Pilot (HOP) in western North Carolina will allow HHC to scale the FiM initiative, and to be part of the first cohort to create cost estimates of providing value-based care through a combination of medical and social services.

EVALUATION
HHC does not currently collect data or conduct evaluations to understand the full impact of all of its programs. Partnerships with funders and the HOPs efforts in 2022 are key to providing the skills, capacity, and funding for HHC to collect, track, and analyze data that can illuminate the true impact of HHC’s Food is Medicine program on clients, health care, HHC, local economies, and beyond. HHC has started collaborations with private clinics to share some of these data, especially related to food prescriptions.
COMMUNITY IMPACT

HHC continues to ramp up spending on produce to meet the growing needs of the Food is Medicine program. HHC’s partnerships with local farms are strong enough and large enough that farmers have not only increased their capacity and infrastructure, but farmers can now plan and budget for community needs ahead of time. Farmers continue to reflect that being able to share their time and talents in ways that directly contribute to the health of their community is incredibly rewarding.

BARRIERS AND CHALLENGES

HHC has strong community roots, and established community-based organization and health care connections which have facilitated the creation of locally-focused, culturally relevant Food is Medicine programs that are trusted by the community in western North Carolina. Upcoming challenges are all funding related; HHC’s capacity to serve is limited not by skills, training, or time, but mostly by funding. Cold storage is needed at one HHC location to maximize food storage to be able to continue adding clients to the Food is Medicine program. Additional funding is needed to increase the dollar amount and frequency of spending on produce and farm products from local and regional producers.

HHC aims to create capacity within the neighborhoods they serve; HHC is seeking funding for training and stipends for current Food is Medicine clients to conduct outreach and delivery within their neighborhoods. This strategy aims to increase buy-in from low-income communities directly, and build up local economic resilience through paid work opportunities. And finally funding is needed for a full time, permanent Registered Dietician on HHC’s staff.

These needs reflect capital investments as well as ongoing investments needed to sustain a truly community-supportive Food is Medicine program.
TAKEAWAYS

Hunger and Health Coalition has decades of experience working for community health. HHC’s Food is Medicine program reflects the organization’s understanding of the upstream factors that affect both an individual’s current health, an individual’s ability to address health challenges as they arise, and the need to maximize Food is Medicine’s economic benefits not just for individuals or health care systems, but for the broader health of local community through investment in local agriculture, businesses, and community-based organizations.

Like many other organizations in North Carolina doing Food is Medicine work, HHC has connected to the HOPs projects as a way to expand, evaluate, improve, and adapt their programs to meet the needs of patients, health care, and community alike. The ongoing success of HHC will be determined by a changing funding landscape in the years ahead.