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# Tailoring Nutrition Programming to Fit Different Communities and Populations

Presenters:

Lynn Knox, State Health Care Liaison, Oregon Food Bank

Rebeca Marquez, Health Education Manager, Familias en Accion

Haika Mushi, Community Health Specialist, African Family Holistic Health  
Organization (AFHHO)

Sarah Wetherson, MA, Oregon Health Authority

Hosted by:

Oregon Health Authority Transformation Center

The logo for the Oregon Health Authority. It features the word "Oregon" in a smaller, orange, serif font positioned above the "H" of the word "Health". The word "Health" is in a large, dark blue, serif font. Below "Health", the word "Authority" is written in a smaller, orange, serif font. A thin blue horizontal line is positioned below the "Health" text, extending from the left side of the "H" to the right side of the "t".

Oregon  
Health  
Authority

# Presenters



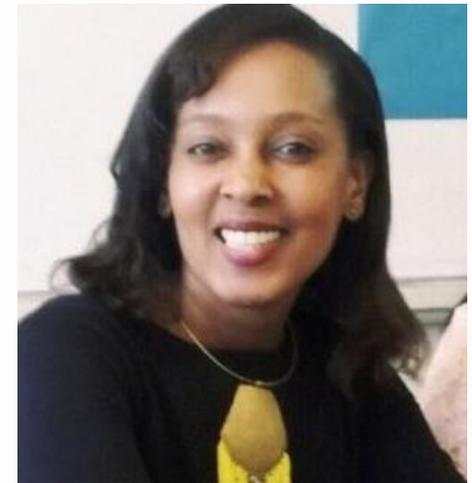
Lynn Knox, State Health Care Liaison, Oregon Food Bank



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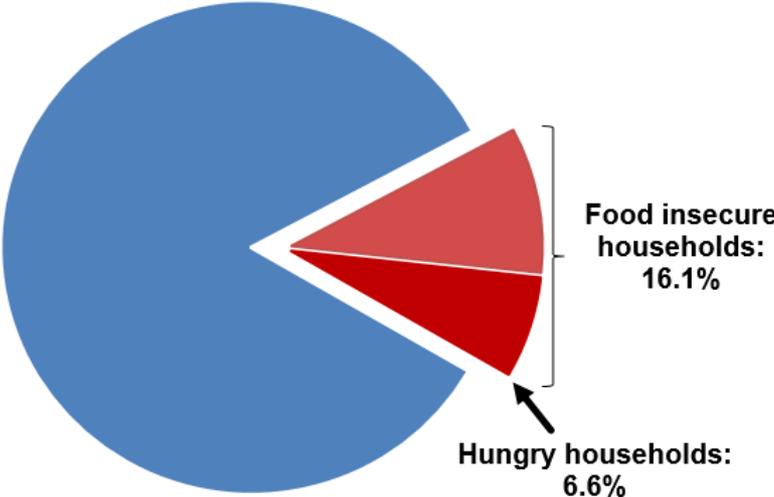
HEALTH POLICY AND ANALYTICS  
Transformation Center



# Oregon's spike in food insecurity: worst among all states

There were about the same number of Oregonians who struggled to put food on the table as lived in Portland, the state's largest city.

Nearly 1 in 6 Oregon households food insecure



2013-15 share of Oregon households with food insecurity.  
Source: OCPP analysis of USDA data.



# Increased risk due to income status and race



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- The odds of having **diabetes** are almost twice as high among low-income adults who are **food-insecure** compared to low-income adults who are **food-secure**. Pregnant women who are **food-insecure** have a greater risk of developing gestational **diabetes** than pregnant women who are **food-secure**.

--*American Diabetes Association*

- People of color have double the incidence of food insecurity as whites.

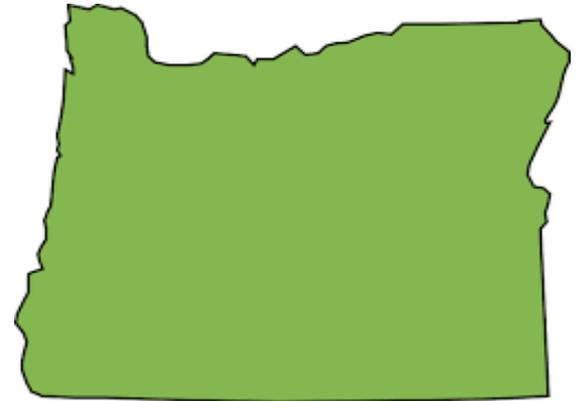
--*US Department of Agriculture*

*In some rural areas of Oregon the problem is worsened by limited access to produce and other healthy food. It can be an hour's drive to the nearest full grocery.*



# Food insecurity in Oregon

- 51 % of Oregon kids qualify for free/reduced lunch
- Income inequality and housing costs among the nation's highest
- Un/underemployment still up to 30% for certain for populations
- 71% of Oregon Medicaid recipients report food insecurity



# What do we do?

1. Screen for food insecurity
2. Connect to existing resources
3. Add new resources and programs



# What more can we do?

- Cooking and smart shopping classes
- Gardening classes and assistance
- Diabetes clinic/pantry partnerships
- Onsite produce distributions or pantries
- Veggie Rx or CSA Rx programs
- Medically tailored meals; food to prevent ED use and readmissions
- Continue, expand SNAP match
- Culturally specific/targeted programming



# Examples

- Peace Health and Trillium, Eugene funded six rural produce distributions through our regional food bank at clinics and a Veggie Rx program for patients with diabetes.
- Rosewood Family Health Center partnered with their neighbor food pantry to provide produce boxes when patients show up to their diabetes support group serving a heavily immigrant and homeless population.
- Virginia Garcia in Cornelius follows their Zumba class with a free produce distribution from the food bank.



For screening implementation assistance or help  
developing food insecurity interventions:

## Contact

*Lynn Knox*

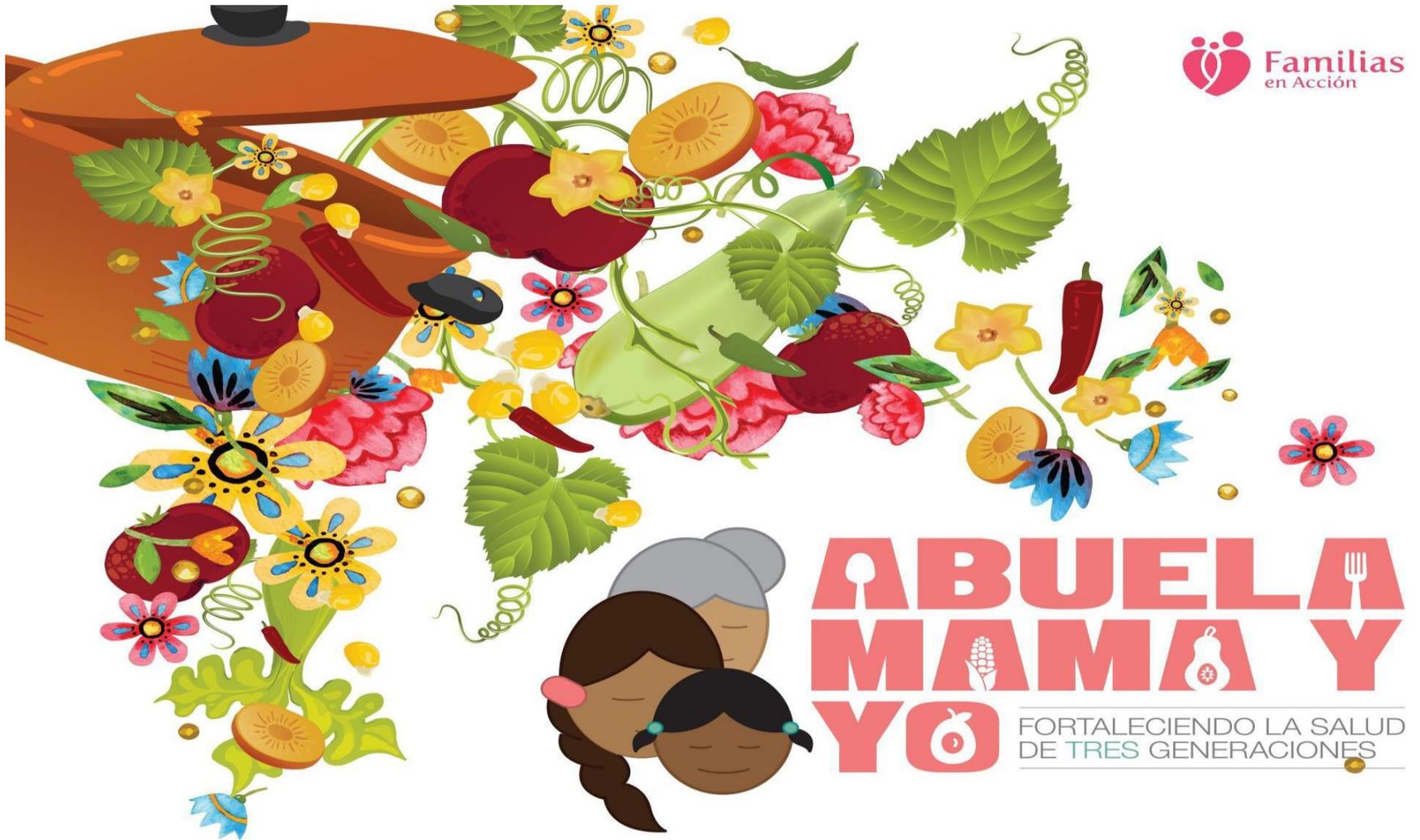
*State Health Care Liaison*

Oregon Food Bank

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# Abuela, Mamá y Yo:

## Food Equity and Nutrition Program for Latinos in Oregon

This research-based program is offered by our community, in our community, to increase knowledge about **healthy practices** and to **build advocacy skills** around the link between food justice, social determinants of health and health equity for families.

The ultimate goal is to reduce the impact of food and health inequities and to build communities that raise strong children who become healthy adults.



# Equity and research

- Developmental origins of health and disease (DOHaD) research has demonstrated the lifelong impact of good nutrition during the first thousand days, from conception to about age two, in preventing obesity and chronic disease risk.
- DOHaD also demonstrates the impact of food and toxic stress on three generations by passing genetic information from the grandmother to the mother to the grandchild.
- Currently Latinos are experiencing an epidemic of obesity and type 2 diabetes. In the US today, 25% of Latino children ages six to 11 years are obese. In Oregon, over 33% of Latino children live in poverty.

# Public policies for health equity

- Food Equity for Healthy Latino Families differs from traditional nutritional programs because it addresses the root causes, social determinants of health and inequities.
- Current public health educational programs often focus on individual responsibility for nutrition and healthy families. However, equally important are the development of equitable public policies to improve social, physical and economic environments for healthy Latino families.



# Community classes

Our Abuela, Mamá y Yo community classes include science on epigenetics, first thousand days of life, prenatal nutrition, infant obesity, diabetes prevention, health inequities affecting the Latino communities, developing advocacy skills, traditional foods, and making culturally specific recipes healthier using local foods.



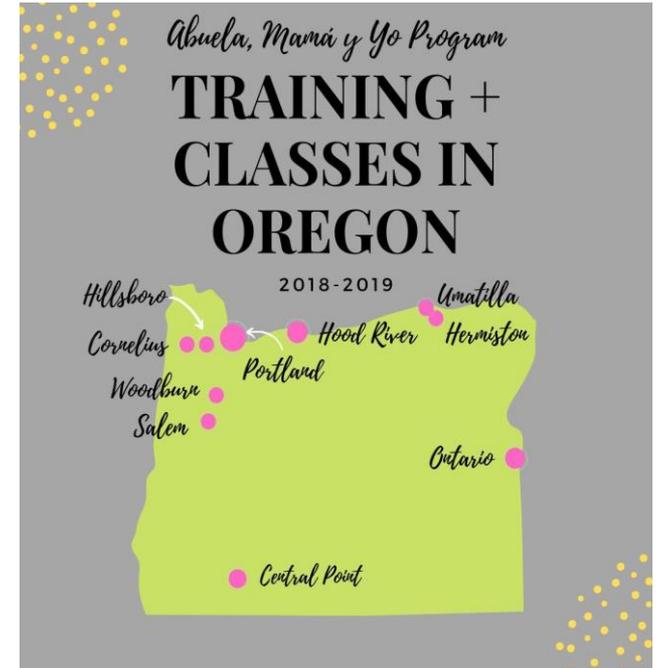
Each of four sessions in the series is about two hours long.

- Session 1: Sembrando resiliencia/Sowing resilience
- Session 2: Los primeros mil dias/Nutrition for the first thousand days
- Session 3: Volver al maiz/Returning to corn
- Session 4: Familia que esta unida, se fortalece unida/Strong families building healthy communities

# Community classes

- We also offer our classes paired up with gardening education (Seed to Supper, Oregon Food Bank), healthy cooking classes (Cooking Matters, Oregon Food Bank) and exercise walking groups.
- Our classes are held in community spaces, schools, churches and medical settings.

Partner organizations: Doulas Latinas, Valley Family Health Care, Marion/Polk Early Learning Hub, OCDC Washington County, OSU Extension Services Hermiston, Oregon Food Bank, Partners for Hunger Free Oregon, Providence Promotores De Salud, Family Literacy Program in Central Point, Capaces Leadership, OHSU Moore Institute, and others



# Support from Familias en Acción

- Stipends for trainers, childcare and healthy snacks for community classes
- Support organizing classes and doing outreach
- Abuela, Mamá y Yo Nutrition Newsletter
- Community food access resources
- Exchange healthy recipes
- Continue food equity advocacy work

# Contact

**Rebeca Márquez**

Abuela Mama y Yo (AMY) Project Manager

Familias en Accion

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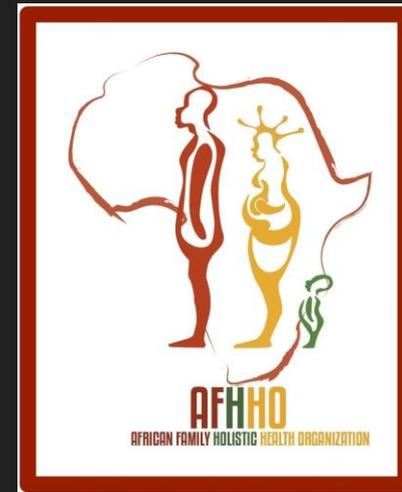
503-939-4734



# AFHHO SWAHILI FOOD SECURITY AND ACCESS PROJECT

## Who we are

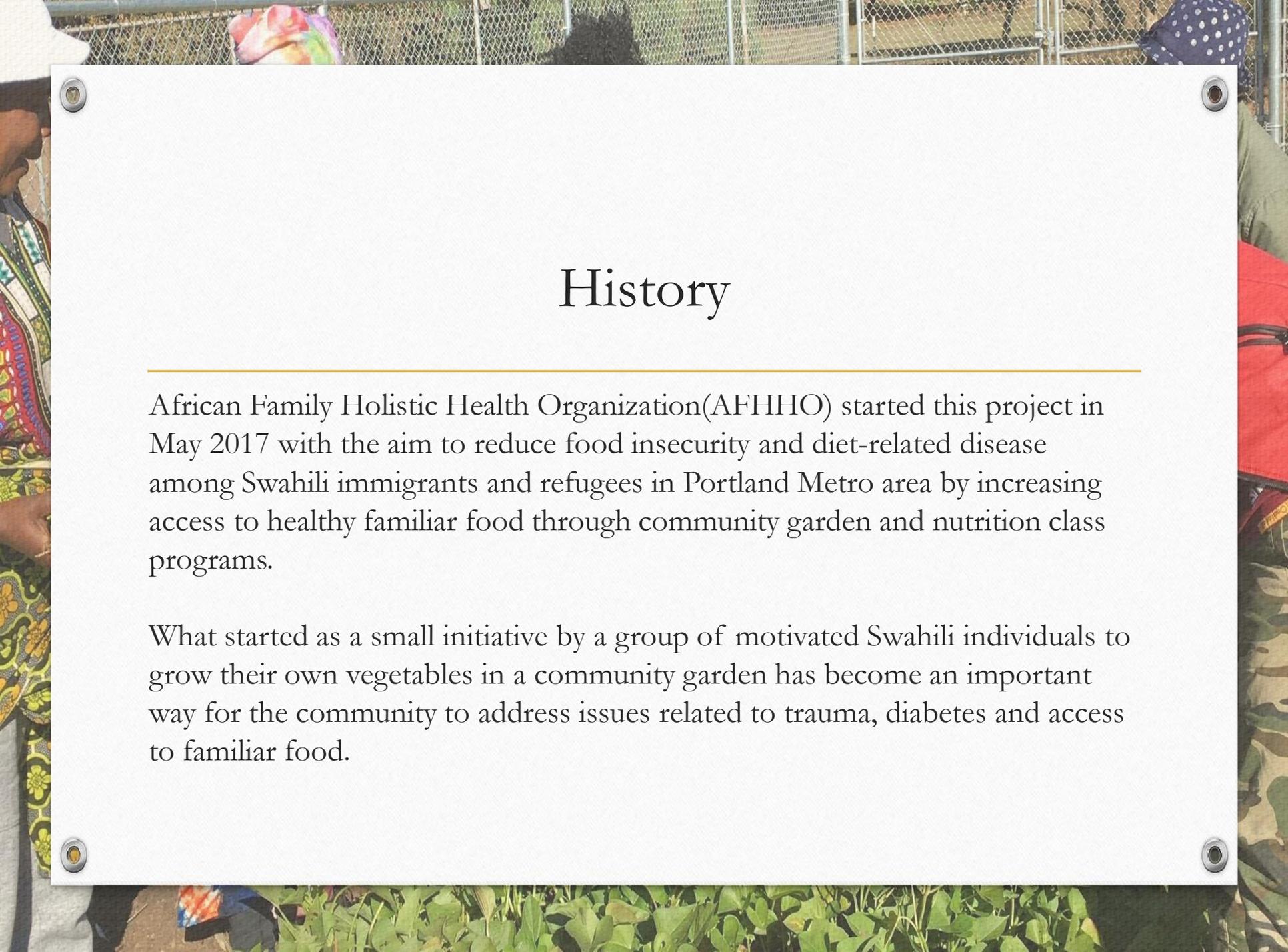
The African Family Holistic Health Organization (AFHHO) was created in 2014 in part by Portland's Swahili-speaking community health workers (CHWs) seeking to build on their strengths to improve their community health through peer health education, increased access to health resources, and connecting community members with Portland health providers to create positive change.



[www.afhho.org](http://www.afhho.org)

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# History

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African Family Holistic Health Organization (AFHHO) started this project in May 2017 with the aim to reduce food insecurity and diet-related disease among Swahili immigrants and refugees in Portland Metro area by increasing access to healthy familiar food through community garden and nutrition class programs.

What started as a small initiative by a group of motivated Swahili individuals to grow their own vegetables in a community garden has become an important way for the community to address issues related to trauma, diabetes and access to familiar food.



## Overview

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Based on the studies, a growing number of Swahili refugees and immigrants are developing type 2 diabetes within five years, and some as quickly as six months, after their arrival in this country. Food insecurity and lack of exercise play a big role.



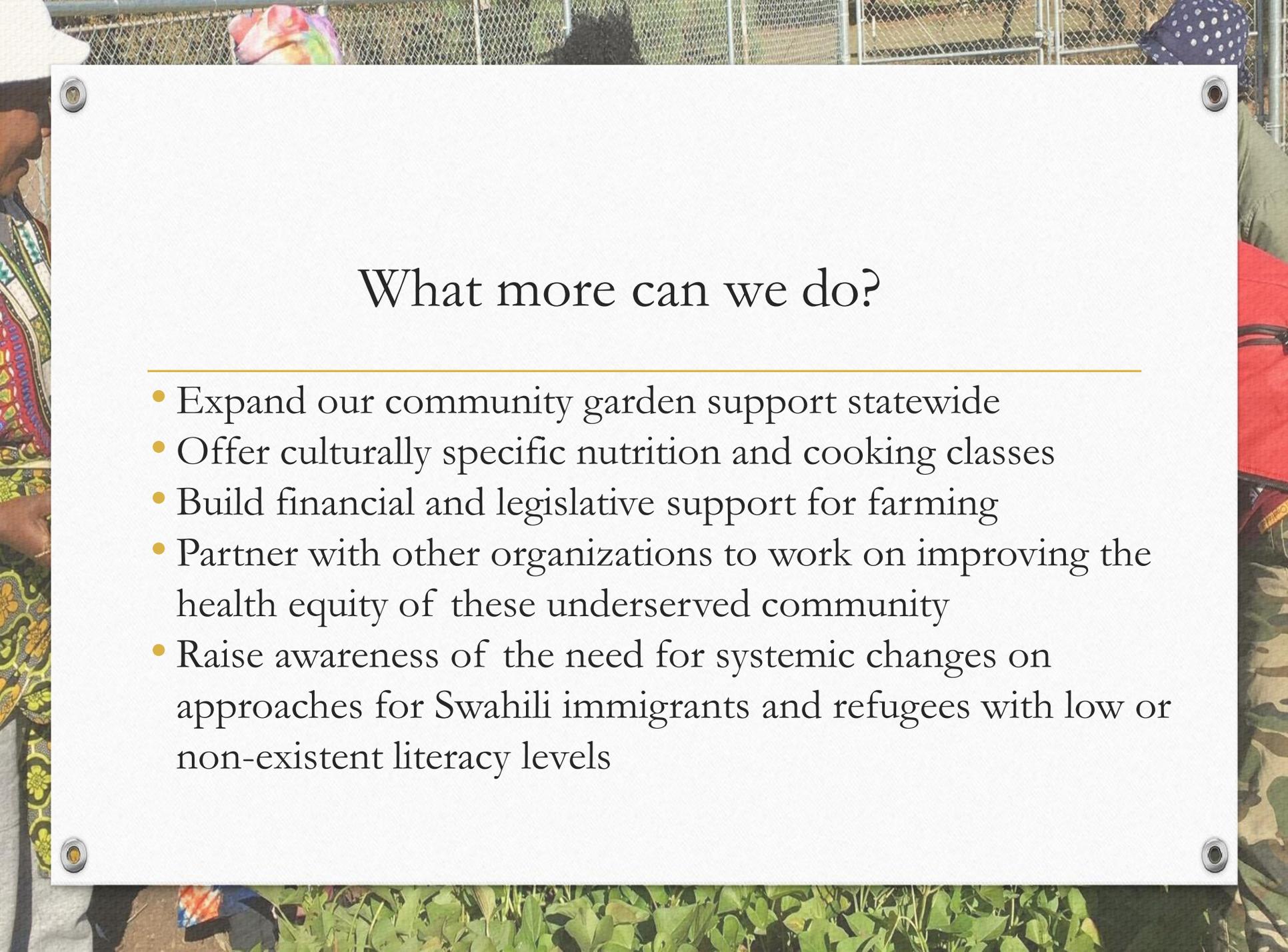
## What is AFHHO doing to address diabetes?

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- Group education classes: cooking and nutrition classes (Cooking Matters with Oregon Food Bank)
- Increasing access to healthy food through gardening and connecting individuals to resources available
- Providing individual and group support: home visits and class settings
- Increasing participation in physical exercise: gardening and Zumba

## What have we done so far?

- Community Garden: About 273 families have benefited from the program
- Nutrition Classes: 85 participants have received the training
- Garden Education Classes: 96 Gardeners have attended and complied this classes
- Farming: 10 families ventured into commercial farming : Aiming to reduce poverty and increase job opportunities



## What more can we do?

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- Expand our community garden support statewide
- Offer culturally specific nutrition and cooking classes
- Build financial and legislative support for farming
- Partner with other organizations to work on improving the health equity of these underserved community
- Raise awareness of the need for systemic changes on approaches for Swahili immigrants and refugees with low or non-existent literacy levels

## Our partners

- Oregon Food Bank
- ORCHWA
- Multnomah County Health Department
- Grow Portland
- Outgrowing Hunger of Portland
- Catholic Charities
- Lutheran Community Service

**For more  
information**

Please contact:

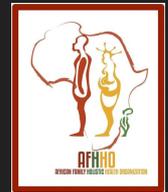
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[www.afhho.org](http://www.afhho.org)

# Thank you!

This webinar is hosted by the  
Oregon Health Authority Transformation Center.

- For more information about this presentation, contact [Transformation.Center@state.or.us](mailto:Transformation.Center@state.or.us)
- Find more resources for diabetes care (including webinar slides and recordings): <https://www.oregon.gov/oha/HPA/dsi-tc/Pages/Diabetes.aspx>
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