Healthy children in a healthy world.

We advance health and healthy living for children and families through cutting-edge research, innovative community-based programs, and dissemination of evidence-based practices.

STRATEGIC PLAN GOALS

create

connect

communicate

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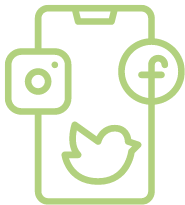
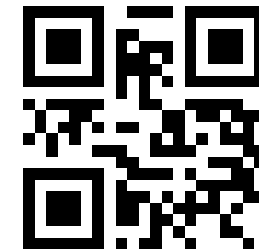**SOCIAL MEDIA**
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VISIT OUR WEBSITE

CULTURA CUISINE
BY THE COOK'S NOOK

The Cook's Nook

The Cook's Nook is a social impact company providing culturally relevant nutrition interventions and solutions that are designed to improve wellbeing and health outcomes.

We partner with organizations serving the health needs of at-risk populations to implement solutions that **provide equitable access to high-quality nutrition** and lead to **improved outcomes** for all.

https://cooksnook.net

Images left to right: CEO Joi Chevalier; culinary staff in action; CBO leaders for White House Summit gathering at The Cook's Nook; Cultura Cuisine Meals' Beef Chili Macaroni with Sauteed Broccoli with Roasted Corn Pips

Elizabeth Polinard, PhD, RN
Ascension Texas NPD Practitioner for Perinatal Services
Co-developer of Food is the Best Medicine, an 8-week food delivery program for postpartum people

120 Meals Delivered:
1 box/week x 8 weeks

01
6 fully cooked and prepared meals
Nutrient dense and culturally relevant

02
4 prepped fruit, vegetable and grain-forward meal kits

03
1 produce and pantry staples box
5 meals
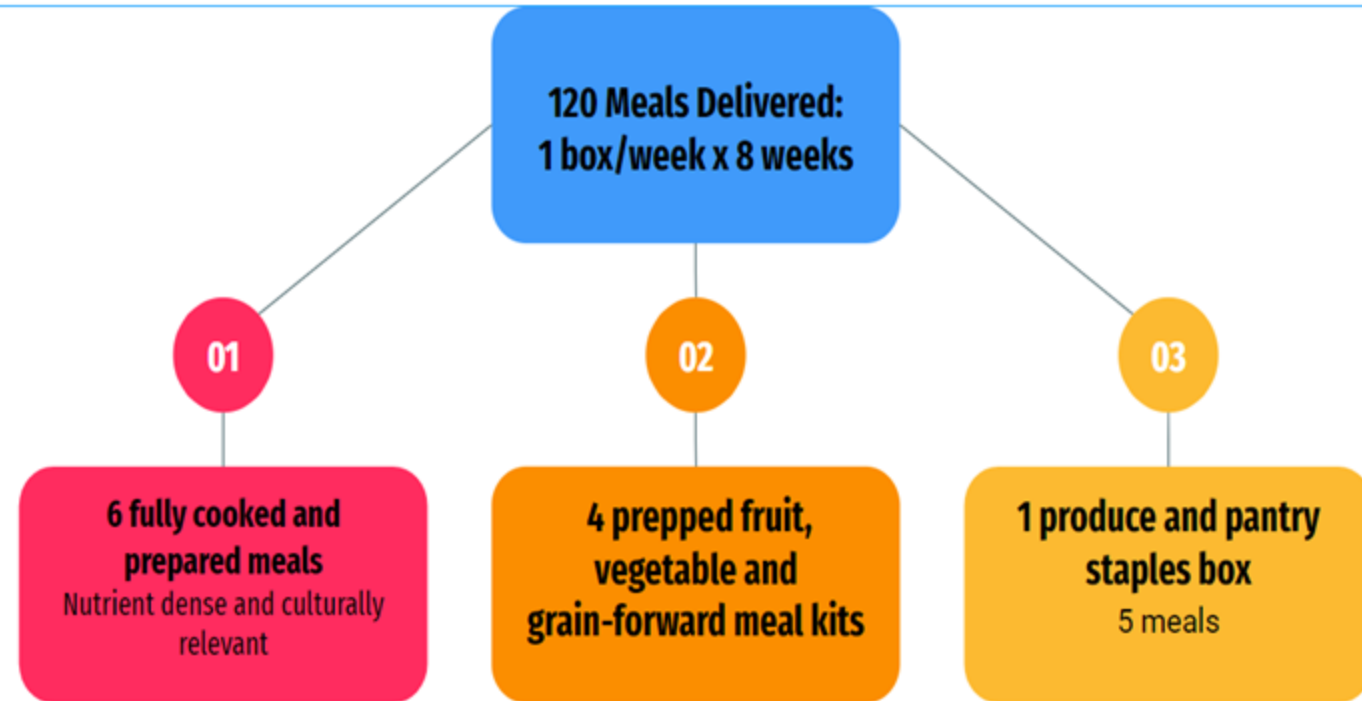
Food *is the* **best medicine**

Current State

02 Over 1372 food deliveries made

01 Over 350 HEB gift cards distributed

03 Two grant-funded research projects in progress

18,000 meals equivalents delivered to over 150 participants, including ~10,504 lbs of produce

Food *is the* **best medicine**

A Story in Pictures

Kelseanna Hollis-Hansen, PhD, MPH

Assistant Professor
O'Donnell School of Public Health, Harold C. Simmons Comprehensive Cancer Center, UT Southwestern Medical Center
Director, Nutrition Initiatives and Community Health Equity (NICHE) lab

Screening for and Responding to Food Insecurity Among Infusion Patients

Food Pantry Referral (control)

Medically tailored meals (MTM, intervention 1)

$75 monthly debit card payment (intervention 2)

Picture from: Crossroads Community Services

Picture from: https://www.rootsfoodgroup.com/

Patient population: Patients receiving infusion treatment and experiencing food insecurity, majority living with cancer
Setting: Infusion clinic (recruitment, MTM and debit card interventions), Crossroads food pantry ~7 minutes away from clinic (pantry services)

Medically Tailored Groceries and Food Resource Coaching for Patients of a Safety-net Clinic

Tammy Leonard, PhD, MS
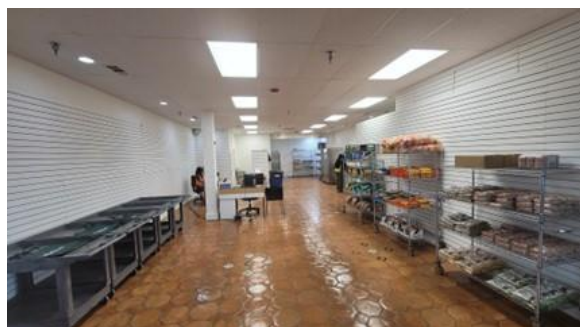MPI

Jaclyn Albin, MD, CCMS, DipABLM
MPI

Usual pantry services (control)

Medically tailored groceries (MTG, intervention 1)

MTG + Food Resource Coaching (intervention 2)

Patient population: Patients of a safety-net clinic with chronic diet-related diseases experiencing food insecurity

Setting: Parkland C.V. Roman Clinic (recruitment), food pantry (program delivery)

Identifying Strategies to Curtail Weight Regain After GLP-1 Receptor Agonist Treatment Cessation

Usual care (control)

Medically tailored meals (MTM, intervention 1)

Noom® mobile app subscription (intervention 2)

Picture from: https://www.rootsfoodgroup.com/

Patient population: Patients stopping GLP-1 Receptor Agonists that have lost at least 10% of their body weight while taking the medication

Setting: Remote, meals delivered to patient's home

The Center for Health Equity

UTHealth Houston
School of Public Health
Center for Health Equity

OUR VISION We see a world populated by healthy people across flourishing communities.

"Health Equity means that everyone has a fair and just opportunity to be as healthy as possible."
– Robert Wood Johnson Foundation

PURPOSE

HOW WE WILL CREATE SHARED VALUE

3 Layers of Activity
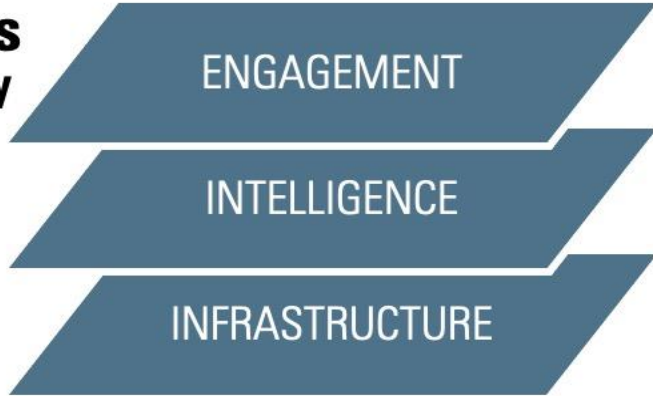
ENGAGEMENT
- Community Voice
- Evidence-based Programs and Interventions

INTELLIGENCE
- Innovative Data Analysis
- Dynamic Insights
- Customizable Actions

INFRASTRUCTURE
- Collective Impact Efforts
- Systems Design
- Capacity Building Focus

OUR VALUES

Human-Centered Design
Innovation through Collaboration
Transparency
Courage
Impact

Policy and Systems	Data and analytics	Interventions
Health Equity Collective systems coalition for NMDOH	Spatial epidemiology – mapping and advocacy	Food Is Medicine
Community and Stakeholder Engagement Studio for Research	Food security Nutritional Epidemiology	School-based research
Policy partnerships – CHLPI, TX NMDOH consortium	Water security	Physical Activity
Community Health Workers		Medical Legal Partnership
		Financial security

Building evidence-base through clinical trials
Design, Measurement & Evaluation
Food Is Medicine

1. Assessment & Design (Human-centered design)

2. Build partnerships

3. Capacity building & Technical Assistance for partners

4. Implementation toolkit

5. Implementation outcomes and impact evaluation

6. Sustainability, scalability

FIM Core Team

UTHealth Houston
School of Public Health
Center for Health Equity

Food Prescription Programs in Texas
Research Overview

Large-scale evaluations of Food Prescription programs among persons with diabetes in the Greater Houston Region found Food Rx:

Is cost-saving and cost-effective leading to increased quality-adjusted life years (QALYs) and averted medical costs

Led to a clinically meaningful decrease in glycosylated hemoglobin, a marker of long term glucose control
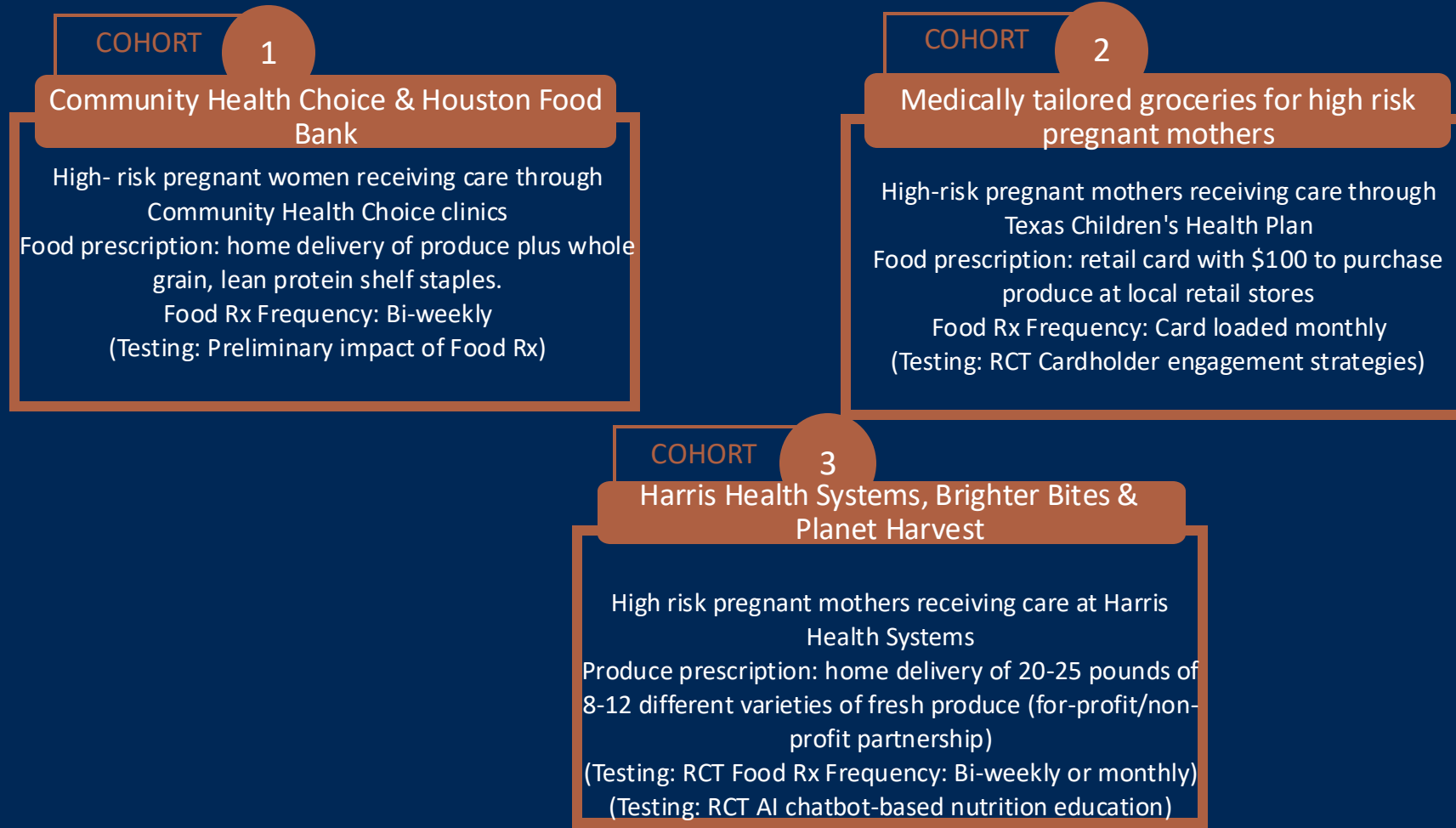
Dose matters, higher redemptions of food prescriptions were associated with greater improvements in glucose control

Ranjit N, Aiyer JN, Toups JD, Liew E, Way K, Brown HS, McWhorter JW, Sharma SV. Clinical outcomes of a large-scale, partnership-based regional food prescription program: results of a quasi-experimental study. BMC Research Notes. 16, Article number: 13 (2023)

Food Rx Evaluations in High-Risk Pregnant Mothers in Texas

COHORT 1

Community Health Choice & Houston Food Bank

High- risk pregnant women receiving care through Community Health Choice clinics
Food prescription: home delivery of produce plus whole grain, lean protein shelf staples.
Food Rx Frequency: Bi-weekly
(Testing: Preliminary impact of Food Rx)

COHORT 2

Medically tailored groceries for high risk pregnant mothers

High-risk pregnant mothers receiving care through Texas Children's Health Plan
Food prescription: retail card with $100 to purchase produce at local retail stores
Food Rx Frequency: Card loaded monthly
(Testing: RCT Cardholder engagement strategies)

COHORT 3

Harris Health Systems, Brighter Bites & Planet Harvest

High risk pregnant mothers receiving care at Harris Health Systems
Produce prescription: home delivery of 20-25 pounds of 8-12 different varieties of fresh produce (for-profit/non-profit partnership)
(Testing: RCT Food Rx Frequency: Bi-weekly or monthly)
(Testing: RCT AI chatbot-based nutrition education)

Outcomes of Interest

- Implementation outcomes: Dosage, reach, fidelity, satisfaction
- Weight gain during pregnancy
- Food & nutrition security, diet quality
- Diagnosis of gestational diabetes
- Diagnosis of pregnancy-induced hypertension
- Pre-term birth

Budget impact of interventions

Food Is Medicine in Pediatric Populations at-risk for obesity

Brighter Bites and UT Physicians

Children 5-12yo receiving care at UTP clinics at risk for obesity
Food prescription redeemed through home delivery + nutrition education
Food Rx Frequency: Bi-weekly for 32 weeks

Brighter Bites in School-based Health Centers (Legacy)

USDA GusNIP funded in Galena Park ISD
Home delivery produce prescriptions + nutrition education among children at risk for obesity

Culinary Medicine & Pediatric Health

Shared medical visits with UTP pediatric patients
Culinary medicine in school-based settings
Culinary nutrition and oral health (dental clinics)

Outcomes of Interest

- Weight change over time
- Food & nutrition security
- Dietary behaviors
- Children's BP, LDL, HDL, TG, ALT/AST

Source: Mathur M, Marshall A et al. Design and protocol of a clinic-based comparative effectiveness randomized controlled trial to determine the feasibility and effectiveness of food prescription program strategies in at-risk pediatric populations. Contemporary Clinical Trials. https://doi.org/10.1016/j.cct.2023.107379

Human Centered Design Approach

Mom Community Advisory Group

Feedback

Difficulty with the technology

Need single point of contact

Relationship building with driver

UTHealth® Houston
School of Public Health
Center for Health Equity

Food *is the* best medicine

UTHealth School of Public Health, Michael and Susan Dell Center for Healthy Living:

    PI: Alexandra van den Berg, PhD, MPH

    Co-I: Nalini Ranjit, PhD

    Aida Nielsen, MPH

    Christopher Reyes, BSA

    Sara Elsharkawy, MPH

    Alejandra Gonzalez, CHW

    Martha Diaz, CHW

    Maria Tello, CHW

FBM Evaluation

The Cook's Nook   FARM SHARE AUSTIN   Ascension Seton Foundation   UTHealth Houston School of Public Health | MICHAEL & SUSAN DELL CENTER for HEALTHY LIVING

Summary of FBM initiative

FBM Evaluation

WHY?

- Food Insecurity = Poor Maternal Outcomes
- Severe Maternal Morbidity and Mortality
- 50% of Birthing Patients are Un/Under Insured

PARTNERS

FBM was created with academic & community partnerships:
- The Ascension TX Council on Racial and Health Equity/ Ascension Foundation
- The Cook's Nook
- Farmshare Austin
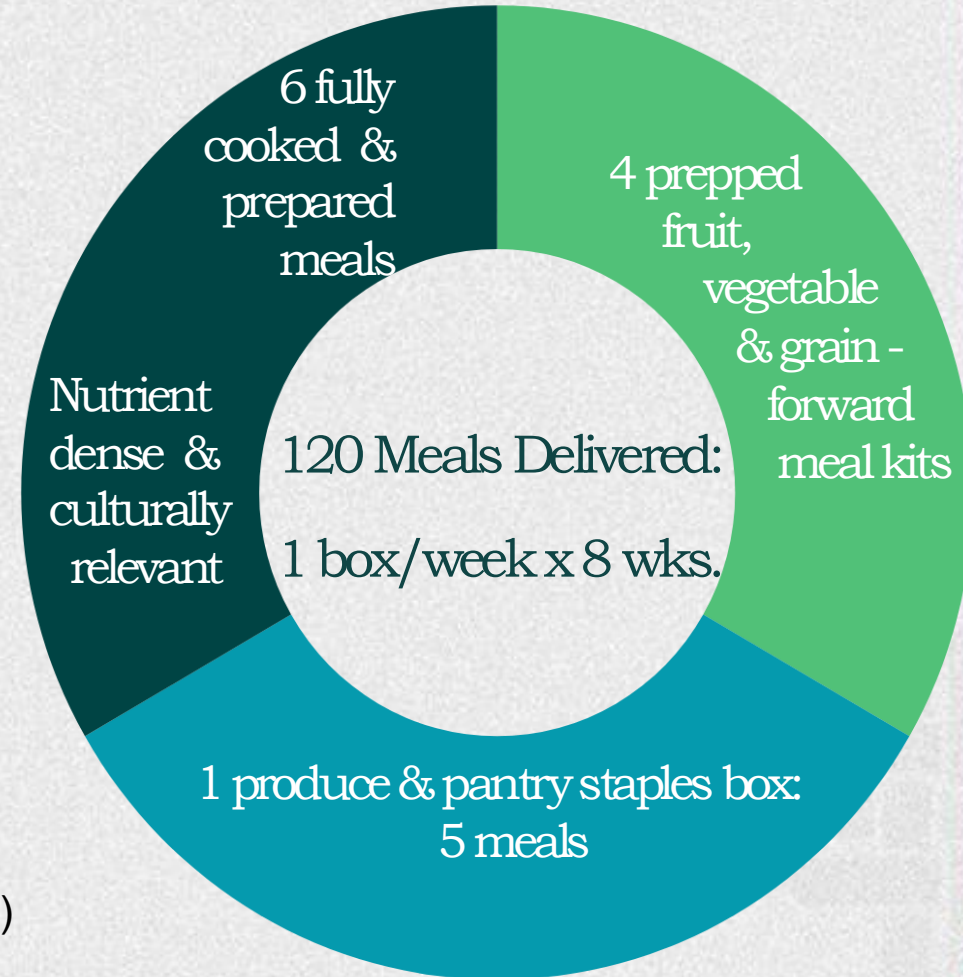- UTHealth Houston School of Public Health

METHODS?

RCT: 150 women randomly assigned to one group:

FBM-Standard (8 weekly food boxes)

FBM- CHW (8 weekly food boxes plus CHW home visits)

FBM-Virtual (8 weekly food boxes plus Foodways platform)

Donut chart: 120 Meals Delivered: 1 box/week x 8 wks. Nutrient dense & culturally relevant.
- 6 fully cooked & prepared meals
- 4 prepped fruit, vegetable & grain - forward meal kits
- 1 produce & pantry staples box: 5 meals

Questions?

Please post your questions in the chat for the audience Q&A Session

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