Food and Health: A Critical Connection

Hunger is a cruel reality for some 42 million people across the U.S. In New York, one of the nation’s wealthiest states, one out of every 10 residents faces food insecurity. In New York City alone, an estimated 1.4 million residents rely on emergency food programs every year, including soup kitchens and food pantries.

The impact of food insecurity on health is profound and potentially life-altering. Food-insecure children are at least twice as likely to be in fair or poor health and at least 1.4 times more likely to have asthma as food-secure children. Poor nutrition increases the risk of developing Type 2 diabetes, high blood pressure, heart disease, and obesity. Children at risk of hunger are also more likely to fall behind in school.

One significant cause of food insecurity is what food activist Karen Washington calls “food apartheid”—inequity in the food system based on race, class, and geography. As a former physical therapist at Montefiore Medical Center, Ms. Washington realized that many of her patients’ chronic illnesses were exacerbated by a lack of healthy food options in local stores. (Read more about Karen Washington on pages 4 and 6.)

The COVID-19 pandemic has intensified this nutritional crisis. In a recent report, UHF estimated that at least 130,000 children in New York State may have become newly food insecure between March and June 2020 due to surging unemployment and disrupted access to community-based food sources, such as schools and food pantries.

ADDRESSING FOOD INSECURITY IN UHF’S WORK

Dismantling barriers that prevent equitable opportunities for health is a key part of United Hospital Fund’s mission. Food insecurity is an increasingly prominent barrier to health—particularly for underserved and disinvested communities.

Like poverty and housing instability, the lack of nutritious food is a social need that often falls outside the health care system’s reach. To help address such unmet social needs, UHF strives to foster clinical-community partnerships between the health care system, social service providers, and communities.

Our Partnerships for Early Childhood Development initiative, launched in 2017, is one example. The program, which helps pediatric primary care providers partner

(Continued on page 4)
Peter Newell Is Named UHF’s New Patricia S. Levinson Fellow

United Hospital Fund announced that Peter Newell, director of its Health Insurance Project, is the new Patricia S. Levinson Fellow.

Mr. Newell joined UHF in 2007 after serving as executive director of the New York State Assembly Committee on Insurance and staff director for Assemblymember Pete Grannis. A former reporter and editor for weekly newspapers in Manhattan, he holds a BA in English from the University of Notre Dame.

As the director of UHF’s Health Insurance Project, he conducts research and analysis that highlight barriers to insurance coverage, identifies ways to expand coverage, and helps shape solutions to policy and implementation challenges. The many reports he has written include a widely disseminated 2020 consumer guide with practical advice on how to replace health coverage lost during the pandemic or find a new health plan.

Created in 2017, with the support of the Robert A. and Patricia S. Levinson Award Fund at The New York Community Trust, this fellowship aims to advance UHF’s work improving health for underserved populations in honor, and memory, of one of its most dedicated and longest-serving board members, Patricia S. Levinson.

“Peter’s pivotal work is a fitting way to honor Patricia S. Levinson,” said Anthony Shih, MD, UHF president. “His keen analysis has been critical to supporting universal, affordable, and comprehensive health insurance. We look forward to his further contributions in the year ahead.”

UHF Welcomes Two New Board Members

United Hospital Fund has elected two new directors to its Board: Oxiris Barbot, MD, former commissioner of Health and Mental Hygiene of the City of New York; and Neera Chaudhary, North American president of Ketchum Inc. Both bring a wealth of experience and expertise in health care.

Dr. Barbot is currently a senior fellow for public health and social justice at The JPB Foundation and adjunct assistant professor at Columbia University Mailman School of Public Health. She was the first Latina to become New York City’s commissioner of Health and Mental Hygiene in 2018, a position she held until 2020. Dr. Barbot also served as commissioner of the Baltimore City Health Department.

She holds a bachelor’s degree from Yale University and a medical degree from the University of Medicine and Dentistry of New Jersey. She completed her pediatric residency at George Washington University’s Children’s National Medical Center.

Neera Chaudhary is a communications veteran and the North American president of Ketchum Inc., a global communications consultancy. Before accepting her role there, she was an executive creative strategist for Cohn & Wolfe’s health care practice, where she worked with pharmaceuticals, biotechnology, and medical devices.

Ms. Chaudhary is a registered dietitian and received her master’s degree in nutrition communications and public health from the University of Toronto.

“Dr. Barbot’s experience leading two of the most important public health departments in the country and Ms. Chaudhary’s leadership of one of the largest global communications firms will bring valued perspectives and insights to our board as we continue to advance our mission to improve health and health care for every New Yorker,” said John C. Simons, United Hospital Fund board chair.
Not Sick Does Not Mean Well

Every morning, I check the daily stats on COVID-19 cases, hospitalizations, and deaths in my area. Like many others, I’m trying to discern patterns: Are the upward or downward trends continuing? Are we peaking or is the trough turning upwards? How is the health care delivery system holding up? I’m trying to make sense of the data to inform decisions: whether to open the office, host an in-person event, take the subway, or dine indoors.

Of course, there are real people and families behind every statistic. Yet New York’s strikingly high numbers—over 2.6 million cases and 58,000 deaths so far—vastly under-represent the actual pain New Yorkers have encountered. Even for those who haven’t directly suffered the physical consequences of COVID-19, the mental health impact can be significant and has left virtually no one untouched. It’s grieving for loved ones; loneliness and social isolation; anxiety from economic insecurity; our health care workers’ constant exposure to death; persistent fear of contracting COVID-19; adjusting to in-person school or work—and the list goes on.

THE MENTAL HEALTH IMPACT OF COVID-19

So even if we’re not physically sick with COVID-19, it doesn’t mean we are okay or “well.” Although definitions vary, one’s well-being generally requires both physical and mental health. Even before the pandemic, approximately one in five adults suffered from mental illness, and it was a leading cause of premature death and disability. Countless others experience symptoms of stress, depression, and anxiety that may not meet the criteria for illness but are nevertheless impediments to well-being.

The pandemic has introduced a whole new set of stressors, and now we’re seeing the devastating consequences unfold. For instance, since the start of the pandemic, drug overdose deaths have risen sharply after two years of relative stability. Several months into the pandemic, there was a marked rise in adults with symptoms of anxiety and depression. In our own research, we have quantified the long-term impact on children of the trauma of parental death due to COVID-19. Just as there are long-haul COVID-19 cases, there will likely be long-term mental health effects—even after we emerge from the acute phase of the pandemic.

STIGMA AND OTHER BARRIERS TO CARE

Before the pandemic, less than half of U.S. adults with mental illness were receiving treatment each year. There are a variety of reasons for this. As with physical health issues, cost, insurance coverage, and other problems related to access and accessibility can be real barriers. However, unlike most physical health issues, stigma is an additional impediment to seeking mental health care. Prejudice and discrimination against people with mental illness are substantial and pervasive in our society. Stigma around mental illness can be especially strong in some already underserved cultures and communities.

Addressing stigma requires a multipronged approach, including encouraging open dialogue about mental health. That’s one reason UHF was so pleased to recently honor Kenneth Cole and his work with The Mental Health Coalition to end the stigma surrounding mental health. (See Gala story, page 6.)

A PROACTIVE APPROACH TO ADDRESSING MENTAL HEALTH

Beyond reducing stigma and encouraging people to seek help, health care providers have a special responsibility to proactively screen for and address mental health issues. Children have been exceptionally vulnerable to the mental health effects of the pandemic, with many having difficulty coping with the disruptions to learning and socialization. Supporting their mental health needs now is critically important for promoting lifelong health and wellness. In our statewide Pediatrics for an Equitable Developmental Start Learning Network, integrating behavioral health screening into routine well-child visits is one of the five core building blocks for change. On a policy level, changes can be made to better fund and support mental health care, improve access and accessibility, and address social issues that affect mental health.

We are all familiar with the newsreel scenes of the COVID-19 pandemic showing patients crowding overwhelmed hospitals. As we follow these stories and the accompanying numbers and charts, let us not forget about a parallel mental health crisis that may not be as visible but nonetheless also demands our attention and compassion.
with community-based organizations to address unmet social needs, identified food insecurity as one of the most critical of these needs. And more recently, our Pediatrics for an Equitable Developmental Start (PEDS) Learning Network aims to reduce inequities in childhood in part by increasing the number of young children receiving primary care-based interventions that can address social risks such as food insecurity.

UHF is partnering with Boston Consulting Group (BCG) to analyze the health effects of food insecurity on New Yorkers as well as options for, and potential cost savings from, addressing this critical issue. UHF previously collaborated with BCG on two reports, one that examined the impact of the opioid crisis on children throughout the U.S. and another that analyzed the toll of the COVID-19 pandemic on children in New York State.

**UHF REPORT: AN OPPORTUNITY TO IMPROVE INFANT HEALTH**

In September, UHF’s Medicaid Institute released a HealthWatch issue brief, *Improving Nutrition and Infant Health Through WIC: Opportunities During and Beyond a Public Health Crisis*. The authors note that food insecurity is particularly dangerous during pregnancy, when nutritious food is critical for promoting the fetus’s healthy development.

The new report delved into how the federally funded Special Supplemental Nutrition Program for Women, Infants, and Children—commonly known as WIC—can be leveraged to reduce food insecurity for Medicaid-enrolled families, who are disproportionately at risk of having low-birthweight infants. In 2017, 9.4 percent of New York infants covered by Medicaid were born with low birthweight—that’s 11,373 underweight babies—compared with 7.2 percent of infants covered by all other payers.

WIC provides low-income parents, infants, and children with supplemental food benefits, nutrition counseling, breastfeeding support, and referrals to health care and social services. There are many structural barriers to enrollment, however, and in 2017 only 44 percent of New York’s WIC-eligible pregnant people participated in the program, a rate lower than those in 23 other states.

The brief details programs across the state that aid families covered by Medicaid. For example, Public Health Solutions’ Neighborhood WIC program, the largest in New York State, launched an electronic care coordination system in 2018 that can identify food-insecure families and refer them to support services. It can also share and track referrals and other patient information across its partners, from community-based organizations to hospitals.

The report also highlights policy recommendations for reducing food insecurity, low-birthweight births, and associated poor health outcomes—these include extending the offering of remote WIC application and appointments beyond the COVID-19 crisis and developing automatic enrollment of pregnant recipients in WIC.

“Emergency actions taken during COVID-19 removed several barriers to WIC, and access improved,” noted Alexandra Brandes, director of UHF’s Medicaid Institute. “We hope these changes become permanent, benefiting families experiencing food insecurity.”

**CELEBRATING A FOOD JUSTICE CHAMPION**

At its annual Gala on October 4, UHF awarded its 2021 Distinguished Community Service Award to Karen Washington, known in the Bronx as “the godmother of urban farming.” (Read about the Gala and more about Karen Washington on page 6.)

For more than 30 years, Ms. Washington has worked to make her home borough healthier by fighting “food apartheid.” Thanks in large part to her efforts, the Bronx is home to more than 200 community gardens and urban farms.

Today, Ms. Washington and three other women operate Rise & Root Farm, a five-acre cooperative in Orange County that she says uses “the healing power of food and farming to build a more equitable food system.”

---

In New York State, only 44% of eligible pregnant people participated in the WIC program, a lower rate than seen in 23 other states.
Medicaid Conference Spotlights Social Needs and Disparities

Medicaid’s role in addressing social needs and the worsening health disparities during the pandemic was the central focus of United Hospital Fund’s 2021 Medicaid Conference on July 15. Speakers highlighted the need to focus on homelessness, the increased use of telehealth, and the role of community-based organizations.

The conference, supported by The Commonwealth Fund, was held via live webcast. It drew more than 600 unique viewers, including providers, payers, state and local government officials, researchers, consultants, and consumer advocates.

Keynoter Brett Friedman, then director of Strategic Initiatives and Special Medicaid Counsel in the Office of Health Insurance Programs, New York State Department of Health, and now the State’s Medicaid director, outlined some of the state’s planned actions to improve health equity. These included a pilot medical respite program for people experiencing homelessness who have been released from the hospital.

The morning panel, “Medicaid’s Role in Providing Holistic Health Care for People Experiencing Homelessness in New York,” expanded on some of Mr. Friedman’s themes. The discussion was moderated by Bonnie Mohan, Executive Director, The Health and Housing Consortium, Inc.

The afternoon panel, “Addressing Community Needs Through Medicaid,” was moderated by two staff members from Maimonides Medical Center in Brooklyn: Kishor E. Malavade, MD, Vice Chair, Department of Population Health; and Shari Suchoff, Vice President, Population Health Policy and Strategy and Executive Director, Brooklyn Communities Collaborative. Their message: a more holistic approach is needed to address health through community-designed solutions.

Quality Leaders Forum Focuses on “What Matters to You?”

“What matters to you?” may seem like an obvious opening question to ask a patient, yet it is only in the last decade that health care institutions and providers have asked it, according to Maureen Bisognano, President Emerita and Senior Fellow, Institute for Healthcare Improvement.

Ms. Bisognano was the featured speaker at the UHF Quality Leaders Forum on September 22. She discussed the “What Matters to You” campaign, an international person-centered care movement that has spread to over 48 countries, including the U.S. She mentioned that it was inspired by a 2012 article in The New England Journal of Medicine, “Shared Decision Making—The Pinnacle of Patient-Centered Care.”

Ms. Bisognano shared her own experience with her brother, who died from non-Hodgkins lymphoma when he was 20. As he lay in a hospital, a physician asked him what mattered most to him in terms of his treatment.

His answer: “I want to go home.” The doctor immediately helped him to his sister’s car. She drove him home, where he was surrounded by friends and family in his final weeks. “That changed my view of what caring for a patient means,” Ms. Bisognano said.

Members of the Quality Leaders Forum, organized in collaboration with Greater New York Hospital Association, are invited to discuss current issues in health care quality with nationally recognized quality leaders.

UHF is grateful to Elaine and David Gould, whose generosity supports the Quality Leaders Forum.
UHF’s Gala Honors Health Care Leaders and Health Care Workforce

United Hospital Fund’s annual fall Gala, one of New York’s signature health care events, was held virtually on October 4 to support our work to build an effective and equitable health care system for every New Yorker. The event honored two exceptional New York-area leaders along with the New York region’s extraordinary health care workforce.

New York’s health care workforce was honored with the 2021 Health Care Leadership Award in recognition of their courage, compassion, and commitment during the COVID-19 pandemic. Although the award usually goes to an individual or organization, this year UHF chose to salute the more than 1 million health care heroes across metro New York who tackled the challenge of the pandemic head on, responding to unrelenting demands and providing a beacon of hope for all of us.

Karen Washington received the Distinguished Community Service Award in recognition of her exemplary work as a champion of food sustainability for over 30 years and as a community organizer for food justice. A cofounder of Black Urban Growers, Farm School New York City, City Farms Market, and Rise & Root Farm, she is also a trustee of the New York Botanical Garden where she has played a key advisory role in the development of the Bronx Green-Up community gardening program and the Edible Academy.

The Distinguished Community Service Award was presented by Thasunda Brown Duckett, president and CEO of TIAA, the underwriter of the Distinguished Community Service Award for the past 16 years.

Kenneth Cole, chairman of Kenneth Cole Productions, was honored with a Special Tribute for his role as founder and chairman of The Mental Health Coalition, which works to destigmatize mental health conditions and enable equitable access to behavioral health resources and support. For more than 30 years, the fashion designer has used his considerable clout to raise awareness of social causes, particularly the HIV/AIDS epidemic. In October 2019, after approaching leading mental health organizations, he announced the formation of The Mental Health Coalition.

The one-hour program also featured musical tributes by the Northwell Health Nurse Choir and by Annalissa Vicencio, an arts and music therapist at The Children’s Hospital at Montefiore.

The Gala, which was chaired by John C. Simons, raised nearly $1 million.
Joan Guzik was named director of quality and efficiency and director of UHF’s Quality Institute in September. She has extensive experience in quality and patient safety initiatives, most recently serving as UHF’s director of quality improvement and, before that, as regulatory coordinator and director of quality improvement at the Robert Wood Johnson University Hospital Somerset in New Jersey.

UHF’s Quality Institute aligns the work of many agencies, payers, providers, and other groups across the region engaged in improving health care quality and patient safety.

Q: How has the pandemic changed the work of the Quality Institute?

Like many organizations, we shifted to a remote environment during the pandemic. This meant some big changes. For example, our project to improve transitions from skilled nursing facilities (SNF) to home—which originally planned to incorporate in-person learning and site visits—has been conducted virtually. Equally important, we had to shift expectations so the organizations we worked with could address the pressing needs of caring for COVID-19 patients.

Q: Can you share a few highlights of the Quality Institute’s work with skilled nursing facilities?

We are nearing the end of the second year of our SNF learning collaborative. We worked with eight New York nursing homes to make transitions to home for short-stay, older, vulnerable patients safer and more effective. Facilities implemented interventions focused on patients and caregiver education, discharge planning processes, and post-discharge follow-up. As part of our work, we engaged a market research firm to conduct a survey of patients and family caregivers; the results were used to ensure that interventions address the needs and priorities of patients and families.

Q: You recently hosted a virtual graduation ceremony for Class 12 of the Clinical Quality Fellowship Program. What stood out for you?

Class 12 started the program in January 2020 with an in-person retreat. Due to the extraordinary demands of COVID, we decided to put the program on hold. We reconvened virtually in September 2020. What stands out to me is what our graduating fellows, many of whom were on the front lines of the COVID crisis, were able to accomplish in their quality improvement capstone projects during extraordinarily challenging times.

Q: Each Fellow worked on a Capstone project—can you highlight the quality issues tackled and the results?

There were so many important projects, but the results of a few stand out. One of our fellows was able to substantially decrease cycle time in an ambulatory care clinic, meaning patients got care more quickly. Another implemented an enhanced recovery pathway to decrease length of stay for craniotomy patients who met specific criteria. Another substantially increased the number of patients referred for substance use treatment following a primary care visit.

Q: How does the challenge of health equity relate to the work of the Quality Institute?

Two decades ago, the Institute of Medicine defined six domains of quality: safety, effectiveness, patient-centeredness, timeliness, efficiency, and equity. Until recently, quality improvement efforts had focused less on equity than the other dimensions. Now there is an increased focus on equity, and we have embraced this at the Quality Institute and strive to make equity a priority in all our work.
ON THE CALENDAR

MAY 9, 2022
Tribute to Excellence in Health Care
A luncheon event recognizing quality improvement champions in the New York metropolitan area. Cipriani 42nd Street

JULY 2022
Medicaid Conference
Bringing together health care policymakers, providers, insurers, community organizations, and policy experts to discuss timely issues of import to New York’s Medicaid Program.
Date and location TBD

OCTOBER 3, 2022
Annual Gala
A special event celebrating the work of United Hospital Fund and saluting the outstanding contributions of health care leaders. Cipriani 42nd Street

PUBLICATIONS
These and other UHF reports are available at www.uhfnyc.org.

Pain Points Along the Journey from Skilled Nursing Facility to Home: Patient and Caregiver Perspectives presents and analyzes responses to a survey of patients and family caregivers who had recently experienced a discharge to home from a skilled nursing facility.

After the American Rescue Plan: Trick or Treat? examines what initiatives would help reach New Yorkers who still lack coverage as the state seeks to get out from under the COVID-19 virus and its variants.

Improving Nutrition and Infant Health Through WIC: Opportunities During and Beyond a Public Health Crisis explores why Medicaid plans and providers may wish to focus on food insecurity as a critical opportunity for improving infant health and reducing associated health costs.

Be sure to visit UHF’s website at uhfnyc.org. Find information on our programs, sign up for email alerts, or make a tax-deductible gift. You can also follow us at:

www.twitter.com/unitedhospfund
www.facebook.com/UnitedHospitalFund