Illinois Partnership for Childhood Nutrition Security

Sponsored by the Illinois Chapter, American Academy of Pediatrics (ICAAP)
Vision

Ensure every child in the state of Illinois is food secure through partnerships and collaboration.

WHO’S HUNGRY?

YOU CAN’T TELL BY LOOKING
Illinois Partnership for Childhood Nutrition Security

The purpose of the **Childhood Nutrition Security Project** is to foster collaboration between pediatricians, state food delivery, and family support partners to improve pediatrician food insecurity screening, referral mechanisms, and resource delivery to families.

The Partnership will create and implement a **collective impact plan** to advance childhood nutrition in Illinois.

[https://illinoisaap.org/childhood-nutrition-security/](https://illinoisaap.org/childhood-nutrition-security/)
Project Scope

● 9-month limited term project
● Increase healthcare engagement in connecting families to local food resources and in policies and systems change
● Partnership is not meant to supplant the expertise, strategies and roadmap collectively at the state, regional, and local levels
● Springboard for future opportunities/partnerships and to align healthcare with existing partnership strategies
Project Partners

Government Agency
Chicago Department of Public Health
Chicago Public Schools
Cook County Health
Illinois Department of Human Services
Illinois State Board of Education
Southern 7 Health Department
SNAP Education, University of Illinois Extension
Tazewell County Health Department

Healthcare System
ACCESS Community Health Network
American Heart Association
Ann and Robert H. Lurie Children's Hospital of Chicago
Erie Family Health Centers
Esperanza Health Centers
Heartland Health Services
Illinois Academy of Nutrition and Dietetics
OSF Healthcare Children's Hospital of Illinois
PCC Community Wellness Center
Proviso Partners for Health: Veggie Rx
Southern Illinois University School of Medicine
UIC Office of Community Engagement and Neighborhood Health Partnership

Local Food Initiative
Chicago Food Policy Action Counsel
Experimental Station
Illinois 4-H Food Security Communities
Peoria Grown

Food Bank / Pantry
Beyond Hunger
Catholic Charities of Archdiocese of Chicago
Feeding Illinois
Greater Chicago Food Depository
Marillac St. Vincent Family Services
Midwest Food Bank
Northern Illinois Food Bank

Public Health
Illinois Public Health Association
Illinois Public Health Institute

Home Visiting / Daycare
Start Early
Illinois Network of Child Care Resource and Referral Agencies
ICAAP Food Security Work Group Team

**Maggie Chen**, ICAAP MPH Intern, Family Advisor

**Amy Christison, MD, FAAP**, Associate Professor, Department of Pediatrics University of Illinois College of Medicine, Medical Director, Healthy Kids U, Children’s Hospital of Illinois

**Mary Elsner, JD**, Director, Health Equity Initiatives, ICAAP Staff

**Vera Goldberg, MD, FAAP**, Primary Care Pediatrician, Aunt Martha’s Health & Wellness

**Cayla Iwaniuk, MPH**, ICAAP Health Equity Initiatives Coordinator

**Zohra Moeenuddin, MD, FAAP**, University of Illinois College of Medicine - Peoria, Heartland Health Services

**Alisa Seo-Lee, MD, FAAP**, Cook County Health

**Jabari Taylor**, ICAAP MPH Intern

**Alexandra Vaughn**, Family Advisor
Overview of Collective Impact Plan Tasks

Goal 1: Build collaboration and consensus to address food insecurity in Illinois

Goal 2: Build Chapter capacity to promote training and resources and pediatrician efficacy to address food insecurity and connection to local food resources

Goal 3: Implement collective impact plan to improve screening and family connections to food resources

Dec Meeting #1
- Validate assets for promoting food security
- Identify best practices

Jan Meeting #2
- Prioritize best practices to pilot or scale
- Agree upon metrics and shared data

Feb Meeting #3
- Collective impact plan input
- Develop specific plans, outputs, and metrics

Goal 1: Build collaboration and consensus to address food insecurity in Illinois

Goal 2: Build Chapter capacity to promote training and resources and pediatrician efficacy to address food insecurity and connection to local food resources

Goal 3: Implement collective impact plan to improve screening and family connections to food resources
Today's Session Outline

Project Overview: 30 minutes
- Vision
- Scope
- Highlights from last meeting

Breakout Sessions: 40 minutes
- Healthcare/Nutrition
- Community Connections
- Resources

Wrap-up: 20 minutes
- Formative feedback poll
Which best practices should be prioritized of those identified by the larger group?
• Increase Screening for Food Insecurity

How should the best practices be piloted/trialed?
• Heartland will be piloting screening/referral process, implementation, and connect with community partners (creating closed loop system)
• Dr. Goldberg will be training ICAAP members and other physicians to screen and refer
• Institutions that already have screenings should establish better connections to Food Partners

How will progress or success be measured? (Metrics, shared data)
• Look at resource databases like NowPow and IRIS to see how many referrals were made and families that were connected to a food resource
Which best practices should be prioritized of those identified by the larger group?
• Amplify youth and family voice and community representation: Ask people what they need and want, don’t assume
• Culturally appropriate food
• Connection to the grower is important and the taste and nutrition tends to be higher
• For food banks, influencing the food supply is really important to make it healthier

How should the best practices be piloted/trialed?
• Piloting mobile or delivery service for SNAP
  • Share highlights of the community member voice to inform work that is done
  • Make connections among stakeholders to increase local growers/suppliers for culturally match product
  • Partner with pantries/healthcare to create a resource for healthier options

How will progress or success be measured? (metrics, shared data)
• TBD
Which best practices should be prioritized of those identified by the larger group?
• Increase understanding about program details such as eligibility, program enrollment

How should the best practices be piloted/trialed?
• Online education (SNAP, WIC, other) to increase understanding of program purpose, eligibility, enrollment, and emergency food resources
• Tailored to the specific types of organizations (healthcare, social services, childcare providers, faith-based organizations)

How will progress or success be measured? (metrics, shared data)
• Increased utilization rates with quantifiable data
Choose your breakout room

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<thead>
<tr>
<th>Breakout room #1</th>
<th>Healthcare</th>
<th>Dr. Moeenuddin, Ms. Vaughn</th>
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<tr>
<td>Breakout room #2</td>
<td>Community Connections</td>
<td>Drs. Goldberg, Christison</td>
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<td>Breakout room #3</td>
<td>Resources</td>
<td>Dr. Seo-Lee</td>
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Formative Feedback Poll

The Illinois Partnership for Childhood Nutrition Security has increased my teamwork with organizations and stakeholders who are working to end food insecurity in Illinois?
Breakout Room Reports

1. Any remaining breakout room questions/discussions

2. Sustainability:
   a. How can we continue to partner? Who is interested in continued collaboration?
   b. Which organizations/coalitions are already incorporating these best practices into their work?
   c. What are the opportunities for participation in current initiatives?

3. What information do you have that you would like to include in the collective impact plan?
Thank you!

- ICAAP will seek input on the collective impact plan / action agenda
- ICAAP will begin training medical residents and pediatricians on food insecurity screening, referrals, and food resources
- Heartland Health Services in Peoria, Illinois will be piloting food insecurity screening, referrals, and connection to local resources