

Food is Medicine: Addressing Food Access and Nutrition Security

Walter Wanas / Registered Dietitian - Nutritionist |

The Wright Center for Community Health and Graduate Medical Education

Upon completion of this educational activity, you will be able to:

- Identify approaches for integrating food access and nutrition support into healthcare delivery.
- Describe partnership models that connect healthcare organizations with community - based food and nutrition resources.
- Apply strategies for incorporating food and nutrition interventions into efforts to address social drivers of health and improve patient outcomes.



KPCA
IMPROVING KENTUCKY'S CAPACITY TO CARE

2026
Annual
Conference

Faculty Disclosure

I have not had a financial relationship with an ineligible company
within the past 24 months.

Food Insecurity vs. Nutrition Security

Related concepts, but they answer different questions about access and health.



FOOD INSECURITY

“Do I have enough food?”

Limited or uncertain access to enough food because of financial or resource constraints.

Focus: quantity and reliable access

Concern: hunger, skipped meals, running out of food

A household may be food secure yet still struggle to obtain foods that support good health.



NUTRITION SECURITY

“Do I have access to the foods I need for health?”

Consistent access, availability, and affordability of foods and beverages that promote health and support disease prevention and management.

Focus: quantity + quality + health needs

Includes: affordability, cultural fit, preparation, and access to nutrient-dense foods

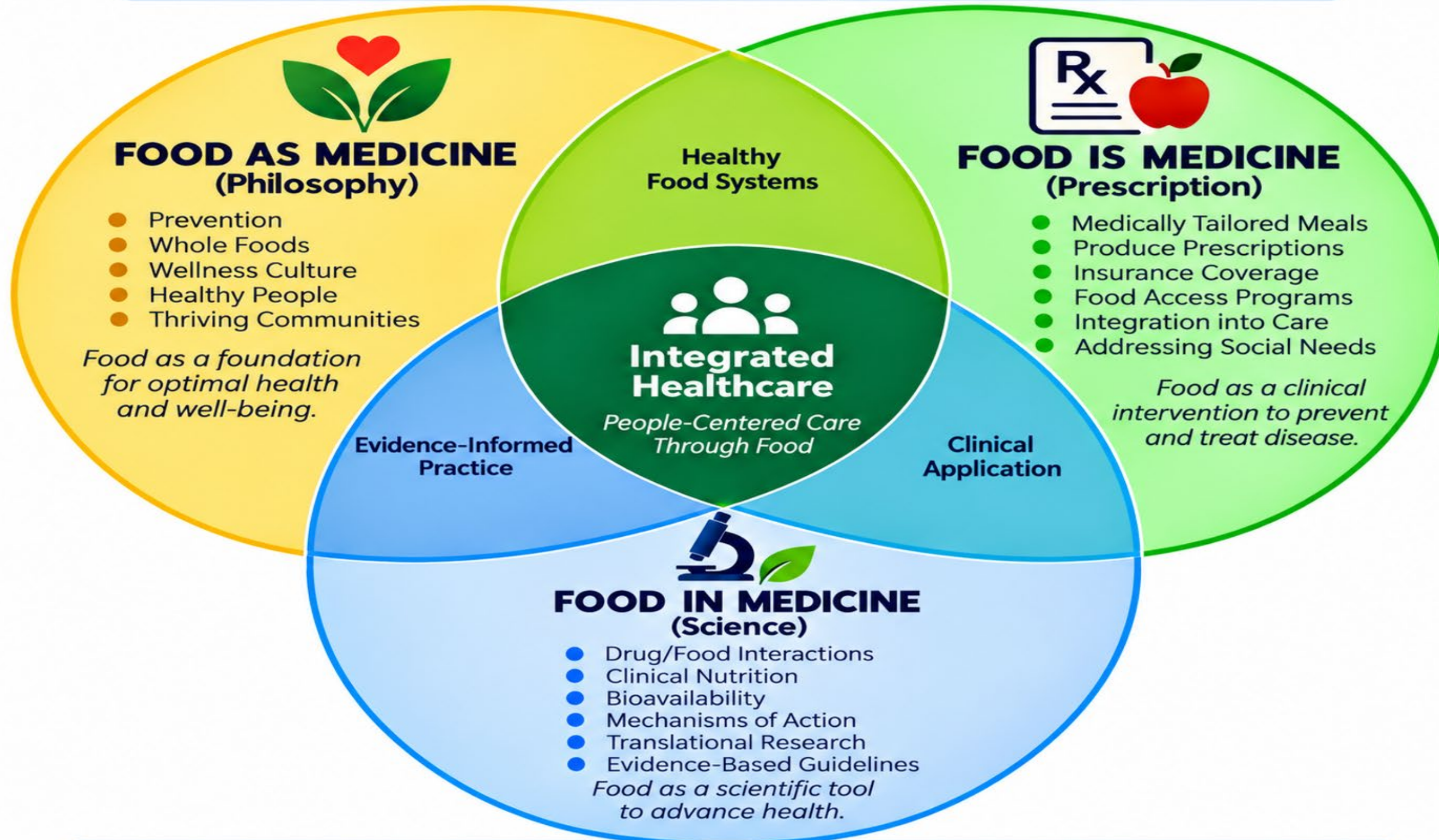
Nutrition security asks whether the available food actually supports well-being and chronic disease prevention or treatment.



KEY TAKEAWAY: Food security is about having enough food. Nutrition security is about having enough of the right foods to support health.

The Three Pillars of Food-Based Care

A Healthier People • A Healthier Food System • A Healthier Future



A three-pillar framework for identifying opportunities to integrate nutrition, food access, and clinical care into healthcare delivery.

*Good Food.
Stronger Communities
Healthier Lives*

Food as Medicine

Healthy eating patterns, foundational philosophy, and nutrition education

*Real Food.
Healthier People.
Brighter Futures.*

What should we recommend?

Core Philosophy



- ✓ Food is a foundation for health and well-being
- ✓ Emphasizes prevention and long-term lifestyle change
- ✓ Focuses on whole, minimally processed foods
- ✓ Supports chronic disease prevention and management
- ✓ Can be tailored to culture, preferences, and readiness

Examples of Dietary Patterns

-  **DASH**
-  **Mediterranean**
-  **Whole-food plant-predominant**
-  **High-fiber, cardiometabolic-friendly eating patterns**
-  **Diabetes-friendly meal planning approaches**

These patterns emphasize fruits, vegetables, legumes, whole grains, nuts, seeds, and healthier fats.

Education & Organizations



-  American College of Lifestyle Medicine (ACLM)
-  Academy of Nutrition and Dietetics
-  American Diabetes Association
-  CDC nutrition and diabetes prevention resources
-  USDA MyPlate and Dietary Guidelines

Ways to build staff knowledge

- ✓ Continuing education
- ✓ In-service training
- ✓ Case-based learning
- ✓ Interprofessional education

Key takeaway: Food as Medicine helps clinicians identify the healthiest eating patterns to recommend and strengthens staff education to support better care.

Why the Difference Matters for Food Is Medicine

Food Is Medicine addresses more than hunger. It connects healthy food access with healthcare goals.



1



Identify the barrier

Screen for food insecurity and other barriers to obtaining and preparing nutritious foods.

2



Match the intervention

Connect patients with produce prescriptions, medically tailored food, MNT, community resources, or other supports.

3



Support better health

Improve access to foods that align with diabetes, cardiovascular disease, obesity, malnutrition, and other clinical needs.



Food Is Medicine shifts the goal from simply reducing hunger to ensuring people can consistently access foods that support their individual health needs.

Food in Medicine

Example: DASH + Antihypertensive Therapy

The DASH (Dietary Approaches to Stop Hypertension) eating pattern is often used together with antihypertensive medication. When coordinated with medication management, labs, and clinical monitoring, it becomes **Food in Medicine**.



DASH alone = Food as Medicine

DASH + medications, labs, and monitoring = Food in Medicine



WHY IT FITS

Illustrates how a dietary pattern interacts with clinical treatment.



Diet can enhance the effectiveness of antihypertensive therapy.



Nutrient intake (e.g., sodium, potassium) can influence blood pressure response and medication needs.



Integrates nutrition counseling with ongoing monitoring and follow-up.



CLINICAL APPLICATION

How it works in practice.



DASH emphasizes fruits, vegetables, whole grains, legumes, nuts, low-fat dairy, and reduced sodium intake.



Used alongside antihypertensive therapy to help improve blood pressure control.



Blood pressure, labs, and clinical status are monitored to assess response.



If blood pressure improves, the prescribing clinician may reassess medication dose.



Key Takeaway: Food in Medicine looks at how food interacts with medications, labs, and treatment to influence patient outcomes.

Integrated Nutrition Care

Right food + access + clinical coordination



**RIGHT
FOOD**
NUTRITION
FOR HEALTH

*Healthier
People
Brighter
Communities*



Recommendation without
access is **incomplete**.



Access without clinical
integration may be **insufficient**.



Integrated care brings
all three together.

Food as Medicine tells us what supports health;
Food Is Medicine creates the infrastructure to deliver it;
Food in Medicine connects nutrition to the rest of clinical care.



ACCESS
HEALTHY FOOD
FOR EVERYONE



**CLINICAL
COORDINATION**
NUTRITION AS A
CORE PART OF CARE

NUTRITION
BUILDS
HEALTHIER
TOMORROWS



HEALTHIER
PEOPLE
BRIGHTER
COMMUNITIES

FOOD
PEOPLE
STRONGER TOMORROWS

How to Get Started With Each Pillar

A practical starting point for applying all three pillars in care.

*Real Food.
Real People.
Real Change.*



Food as Medicine

Healthy eating pattern

What should we recommend?



How to get started:

- ✓ Choose an evidence-based dietary pattern (e.g., DASH, Mediterranean, or whole-food plant-predominant).
- ✓ Start with one or two realistic nutrition goals.
- ✓ Emphasize fruits, vegetables, legumes, whole grains, nuts, and minimally processed foods.
- ✓ Keep the message simple and practical.
- ✓ Tailor recommendations to the patient's culture, preferences, readiness, and health condition.

Example first steps:

Add a vegetable daily • Replace sugary drinks with water
Choose whole grains • Reduce sodium/ultra-processed foods

Increase Education for Staff:



Use trusted resources and continuing education:

- American College of Lifestyle Medicine (ACLM)
- American Diabetes Association (ADA)
- Academy of Nutrition and Dietetics (AND)
- CDC, NIH, and USDA resources
- In-house training, lunch & learns, and case-based learning



Food Is Medicine

Food access + nutrition intervention

How do we help the patient obtain it?



How to get started:

- ✓ Screen for food insecurity, transportation barriers, cost concerns, and cooking limitations.
- ✓ Connect patients to produce prescriptions, medically tailored meals, food pharmacies, SNAP/WIC, community food programs, or MNT.
- ✓ Build referral pathways between healthcare and community food resources.
- ✓ Make support practical, affordable, and culturally appropriate.

Example first steps:

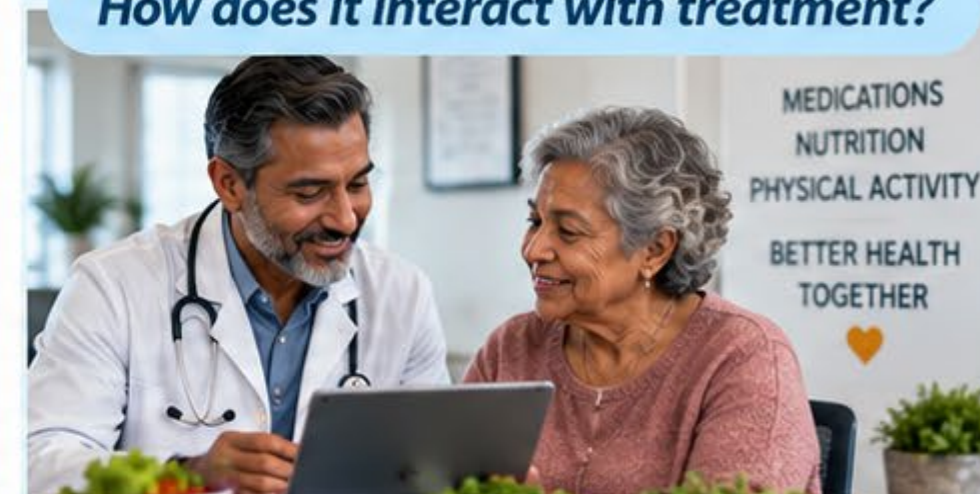
Ask about food access • Refer to a produce prescription
Provide a simple grocery list • Link with an RDN, CHW, or care team



Food in Medicine

Clinical integration

How does it interact with treatment?



How to get started:

- ✓ Review the patient's diagnosis, medications, labs, and nutrition risks.
- ✓ Consider effects on blood pressure, glucose, lipids, kidney function, and medication response.
- ✓ Coordinate nutrition with the care plan and monitor over time.
- ✓ Educate patients on disease-specific nutrition and food-drug considerations.

Example first steps:

Hypertension: DASH + medication review
Diabetes: carbohydrate quality + glucose monitoring
CKD: potassium, phosphorus, sodium guidance
Warfarin: consistent vitamin K intake
GI disorders: symptom-trigger foods



Integrated Nutrition Care

Right food + access + clinical coordination

*Recommendation without access is incomplete.
Access without clinical integration may be insufficient.
Integrated care brings all three together.*

*Healthy People.
Healthier Communities.
A Brighter Future.*

Connecting Healthcare with Community Food & Nutrition Resources



Food Access

Helping Kentuckians get healthy, nutritious food

NOURISHING NEIGHBORS



Feeding Kentucky
Statewide network of 7 food banks serving all 120 counties



Dare to Care Food Bank
Serving 13 counties in Kentuckiana



God's Pantry Food Bank
Serving 50 counties in central and eastern Kentucky



Local Food Pantries
Hundreds of community partners across the state





Food Is Medicine / Produce Access

Connecting patients to healthy food

FOOD AS CARE



UK HealthCare
Medically tailored meals, grocery prescriptions, meal kits, and nutrition counseling



Kentucky Hospital Association (KHA) & Kentucky Department of Agriculture
Advancing food is Medicine across Kentucky hospitals



Community Farm Alliance – Fresh Rx / Kentucky Double Dollars
Produce prescriptions and increased purchasing power for SNAP, WIC, and Senior FMNP



KY-SPAN Food Is Medicine
Produce prescription programs and healthy eating initiatives across the state





Nutrition Education & Skills

Building knowledge for healthy lives

KNOWLEDGE FUELS HEALTH



University of Kentucky Cooperative Extension
Nutrition education, cooking skills, food safety, budgeting, and community programs



Kentucky Nutrition Education Program (KYNEP)
EFNEP + SNAP-Ed for limited-resource families



Food Bank Nutrition Education
Cooking Matters, healthy eating classes, and pantry-based education



Community Culinary Medicine Programs
Healthy cooking, meal planning, and hands-on skill building





Prevention & Workforce Development

Stronger systems. Healthier Kentuckians.

PEOPLE POWER CHANGE



Kentucky Primary Care Association (KPCA)
Supporting and connecting Kentucky's community health centers



Kentucky DPH – KY-SPAN
Statewide nutrition and physical activity initiatives



NACHC Center for Nutrition and Health / Food for Health
Training, technical assistance, and implementation support for community health centers



University and Dietetic Training Partners
Resident education, internships, and interdisciplinary learning opportunities



Partnerships create a pathway from nutrition recommendations to food access, education, and coordinated clinical support.

Integrated Nutrition Care

Right food + access + clinical coordination



Recommendation without access is incomplete. Integrated care connects nutrition guidance, community resources, and clinical follow-up.

Thank You!

FOOD FUELS HEALTH. PEOPLE MAKE IT POSSIBLE.

Food is Medicine: Addressing Food Access and Nutrition Security

Deanna Reinoso MD | Eskenazi Health

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Faculty Disclosure

I have no disclosures.



Eskenazi Health Center - Indianapolis

- Eskenazi Health Center Grande
- Eskenazi Health Center Grassy Creek
- Eskenazi Health Center Pecar
- Eskenazi Health Center Blackburn
- Eskenazi Health Center Primary Care
- Eskenazi Health Center Pedigo
- Eskenazi Health Center Westside
- Eskenazi Health Center W. 38th Street
- Eskenazi Health Center N. Illinois St.

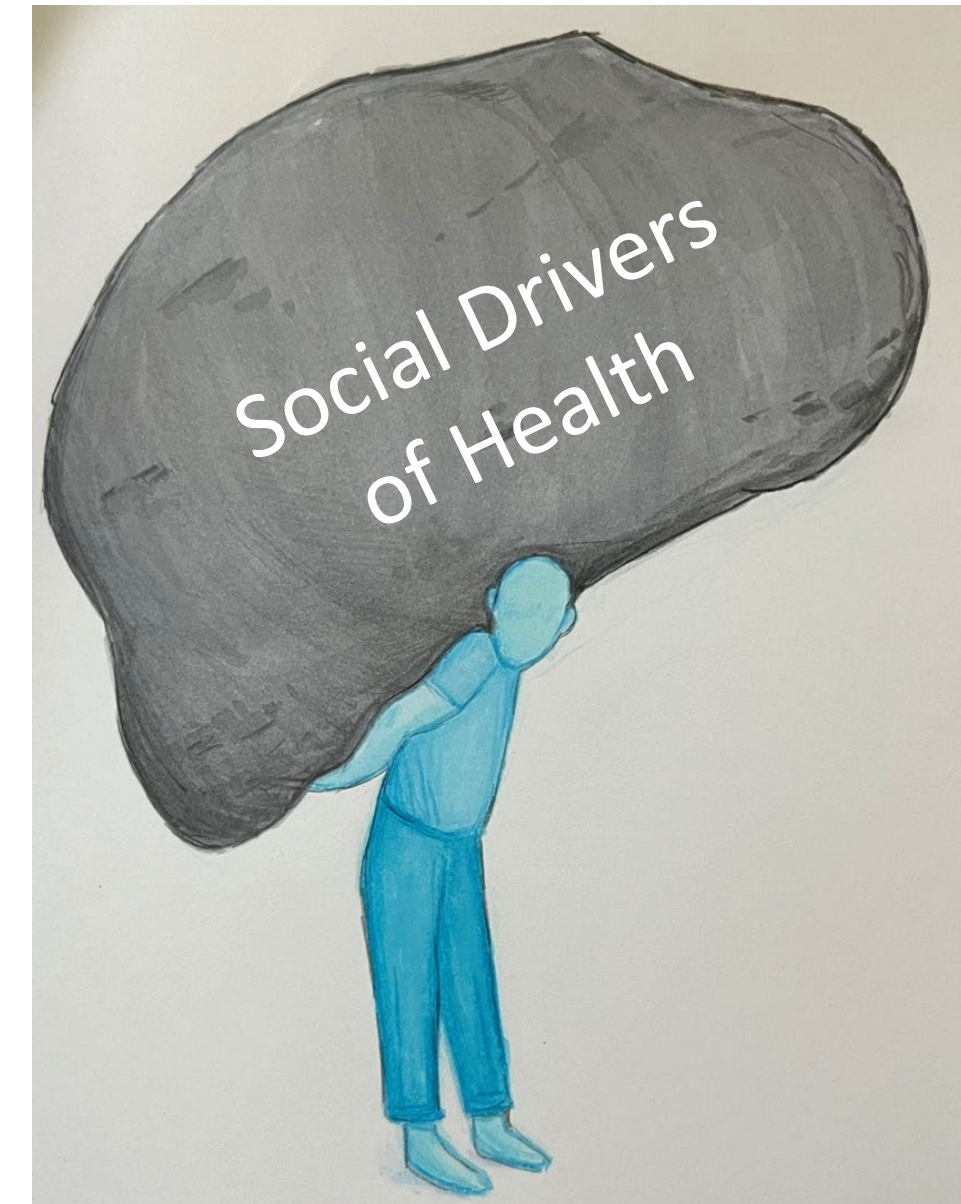




Universal Screening: System Wide SDOH Screening Infrastructure

♥ Social Determinants of Health ↗

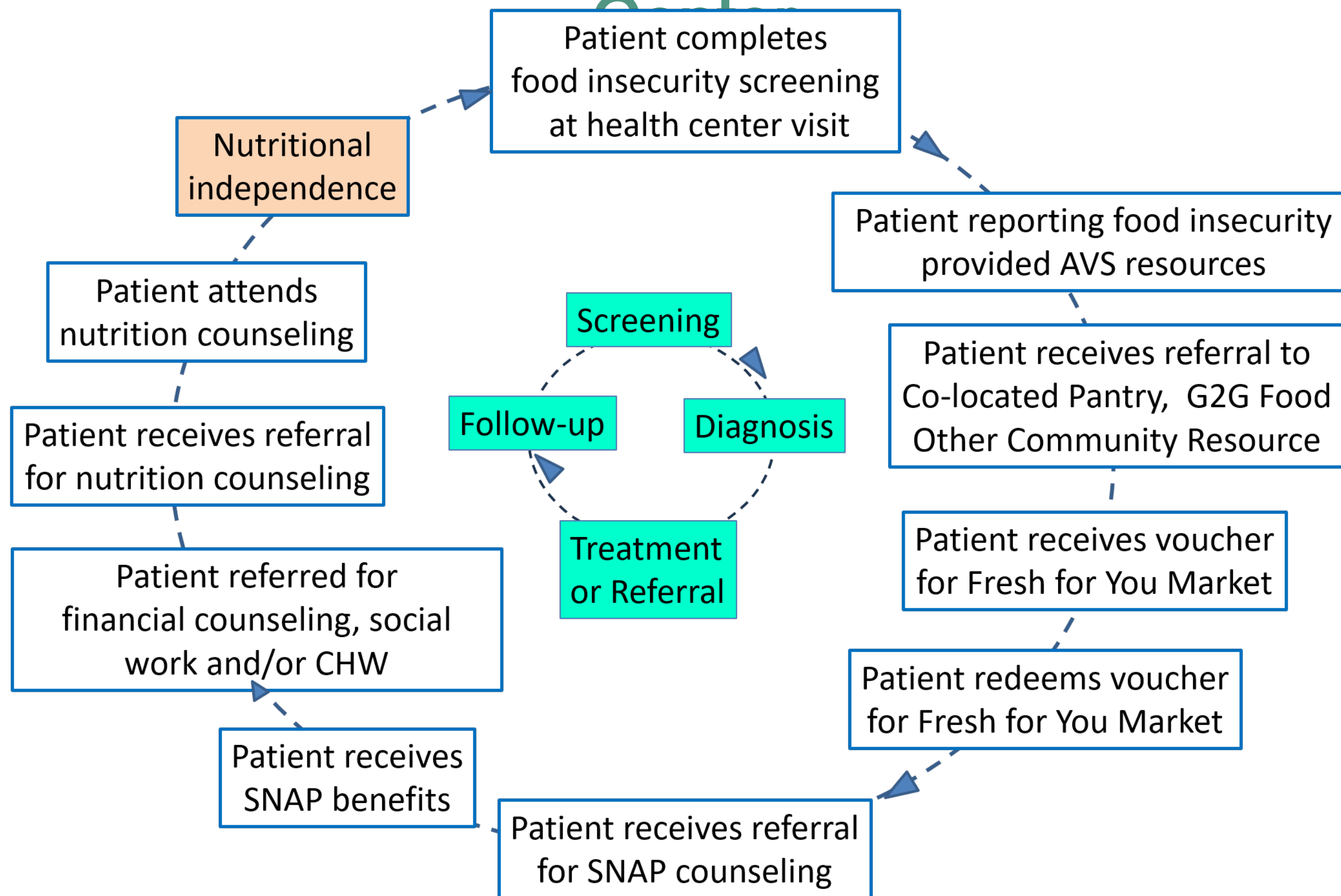
 Tobacco Use ↗ Mar 28, 2023: Low Risk	≡	 Alcohol Use ↗ Not on file
 Financial Resource Strain ↗ Mar 2, 2022: Medium Risk	≡	 Food Insecurity ↗ Mar 2, 2022: Food Insecurity Present
 Transportation Needs ↗ Mar 2, 2022: Unmet Transportation Needs	≡	 Physical Activity ↗ Not on file
 Stress ↗ Not on file	≡	 Social Connections ↗ Not on file
 Intimate Partner Violence ↗ Not on file	≡	 Depression ↗ Oct 11, 2022: Not at risk
 Housing Stability ↗ Mar 2, 2022: High Risk	≡	 Resources Needed ↗ Mar 8, 2023: NO
 Utilities ↗ Not on file		



*33 year old patient with severe hypertension, h/o aortic dissection and h/o cardiac arrest, and end stage renal disease who in the past 6 months has had 56 ED visits and 16 hospitalizations. What if we had screened for SDOH/HRSN earlier and fully supported their unmet social needs?



”Closing the Loop ” at Eskenazi Health





Food Is Medicine: Universal Screening

Food Insecurity Screening- “Hunger Vital Signs”

Food Insecurity

Within the past 12 months, you worried that your food would run out before you got the money to buy more.

[Sometimes true](#) taken yesterday

Never true

Sometimes true

Often true

Patient refused



Within the past 12 months, the food you bought just didn't last and you didn't have money to get more.

[Sometimes true](#) taken yesterday

Never true

Sometimes true

Often true

Patient refused



Do you or someone in your family receive SNAP (Supplemental Nutrition Assistance Program)?

Yes, I or a family member receive SNAP

No, do not need or qualify at this time

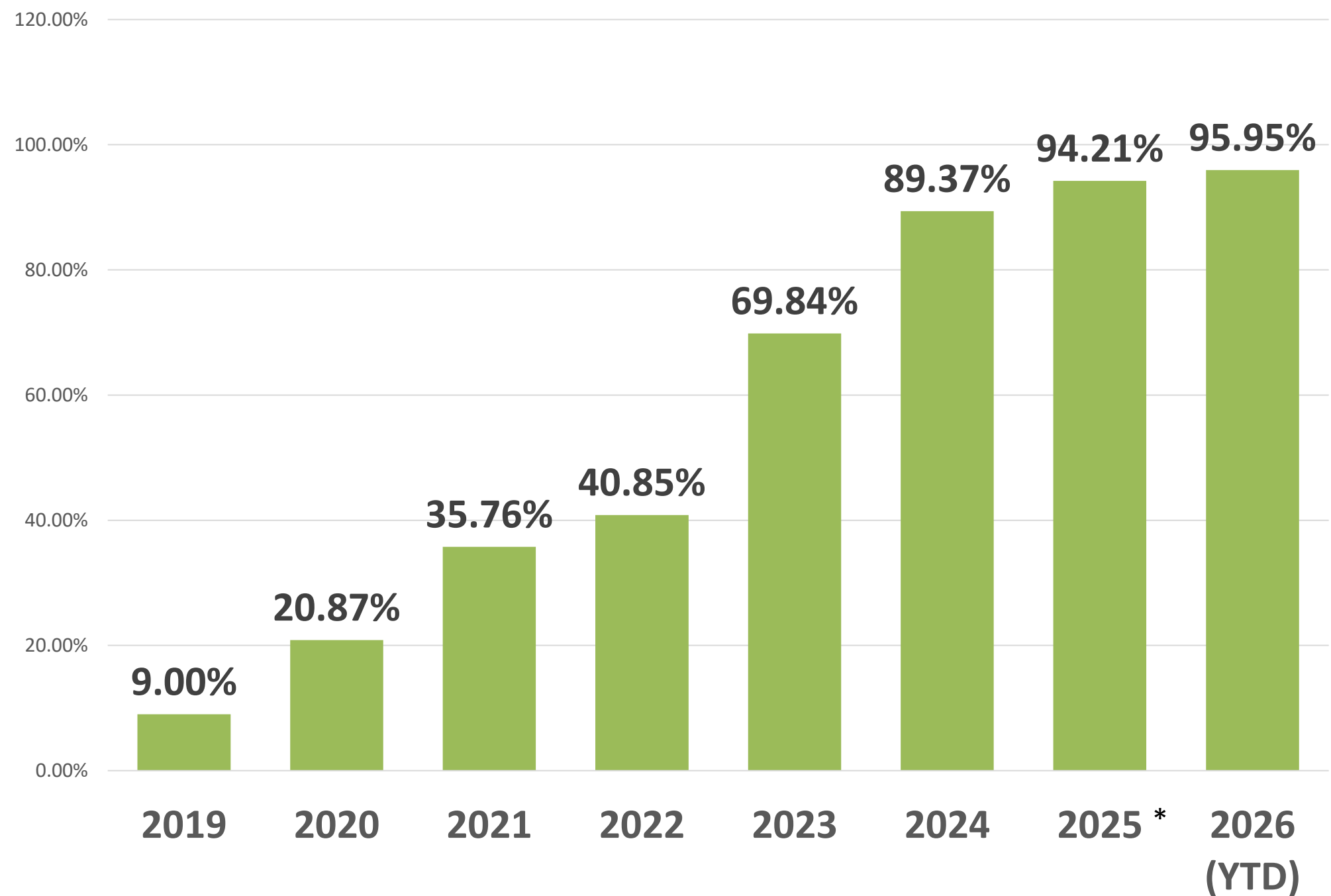
No, I would like additional information and assistance

Decline



Eskenazi Health Center Food Insecurity Screening

Percentage of Patients Screened for Food Insecurity



*118,449 patients screening
for food insecurity in 2025



Eskenazi Health Food is Medicine Timeline

Asking and Listening (Screening)-

- 2019 Food Insecurity Screening in EMR
- 2022 SNAP Enrollment Screening



Responding and Connecting-

- 1976- Meals on Wheels
- 2015- Crooked Creek Co-located Food Pantry
- 2015- Medically Tailored Meals
- 2017- Ingram Micro Mobility Marketplace
- 2019- Food is Medicine Group Visit Programming
- 2020- Corona Food Assistance Program (CFAP) Food Distributions
- 2020- Community Health Worker Home Food Delivery
- 2020- Aunt Bertha/Find Help! Launch
- 2021- Fresh For You Market/Pantry Hybrid Launch
- 2022- SNAP Outreach Coordinators Hired
- 2023- Fresh For You Market/Pantry Hybrid on Wheels Launch
- 2023- After Visit Summary Auto-Print Resources
- 2023- Fresh For You Market/Pantry Hybrid Voucher Auto-Print
- 2024- Gleaners 2 Go Food Distributions at Eskenazi Health Centers
- 2025- Gleaners 2 Go Home Delivery
- 2026- Indy Fresh Market Partnership Launch



Universal Response to Positive SDOH Screens

ESKENAZI HEALTH



Food Assistance and Resources

Food assistance and resources are available to individuals through Eskenazi Health SNAP Outreach and Community Compass.

Eskenazi Health SNAP Outreach Coordinators

- Please call 317.880.3316.
- Eskenazi Health SNAP outreach coordinators are available to provide free, confidential application assistance.

Community Compass

- Download the Community Compass app on your smartphone or text "hi" to 317.434.3758 to receive assistance with:
 - Free meal locations
 - Free groceries
 - Food-related events
 - Information on WIC, SNAP and other resources

Fresh for You Market

- The Fresh for You Market is located outside the Sidney & Lois Eskenazi Hospital on The Matthew R. Gutwein Commonground and accepts SNAP.
- Hours of operation are Monday - Friday, 10:30 a.m. to 6 p.m.

If these categories do not apply to you, please speak with a member of your health care team. For additional resources, please visit www.eskenazihealth.edu/neighborhood-resources or scan the QR code with your smartphone camera.



Passive referrals:

- AVS Resource Sheet
- FFYM market/pantry hybrid \$30 Voucher

Active referrals:

- Internal food resources (ProduceRX, Medically Tailored Meals, etc)
- Dietitians, CHW, SNAP Outreach, Nutrition Programming, Lifestyle Medicine ect
- FindHelp! Referrals or Direct CBO Referral
- Referral to EHC co-located food pantry or G2G Food

ESKENAZI HEALTH

Eskenazi Health Fresh for You Market at the Frank & Katrina Basile Pavilion

Hours
Monday - Friday
10:30 a.m. - 6 p.m.

Lunch served from
11 a.m. - 1:30 p.m.



Open to
the public



Eskenazi Health
Fresh for You Market

The Eskenazi Health Fresh for You Market is located on the Eskenazi Health downtown campus in the Frank & Katrina Basile Pavilion, directly outside the Sandra Eskenazi Outpatient Care Center. The market offers a variety of grocery items including fresh fruits and vegetables, pantry staples, kitchen utensils, pre-made meals, and a daily lunch menu featuring dishes made in collaboration with chefs from local restaurants.

ESKENAZI HEALTH

Grocery Coupon

You are eligible for up to \$30 in free grocery items at the Eskenazi Health Fresh for You Market at the Frank & Katrina Basile Pavilion. Please redeem this coupon upon checkout.

*Not valid for grab-and-go foods or made-to-order meals.
Expires seven days after the date on your After Visit Summary.*



V8>B22



Eskenazi Health Center Food Access Resources

- **Crooked Creek Food Pantry**

FQHC site + Food Pantry 11 years in Operation

- **Gleaners Food Bank**

Gleaners to Go Food Distributions and Home Grocery Delivery

- **Eskenazi Health Fresh for You Markets**

(Market/Pantry Hybrid) Food Access Model

- **Neighborhood Market Model**

+ extensive collaboration with local food access partners





Crooked Creek Food Pantry

- Opened February 11, 2015
- Partnership of Eskenazi Health, Corteva AgriSciences, St. Luke's United Methodist Church and Gleaners Food Bank of Indiana
- Located at Eskenazi Health Center Pecar
- 3rd largest food pantry in Marion County
- Serving ~6,000+ families/monthly (75,000/yr)
- Utilizes over 180 volunteers per week
- Distributes around 40% produce



Food is Medicine



Crooked Creek Food Pantry
Address: 6940 N Michigan Rd
Indianapolis, Indiana
Phone: (317) 471-9064

Good nutrition is key to good health. Visit the food pantry for nutritious food to support an active, healthy lifestyle.

Date Issued: _____

Pantry Received Date: _____

Hours of Operation

Visit the pantry website at ccfpindy.org for more information, including days and times for shopping at the pantry.

This form is provided by Eskenazi Health Center Pecar to refer you and your household to services at Crooked Creek Food Pantry. Please present this form when you register at the food pantry.

**ESKENAZI
HEALTH**

0001

Referring Provider Signature _____



EHC Food Is Medicine with Crooked Creek Food Pantry since 2019



**Dieticians, Physicians,
Medical Assistants, Health
Coaches and Food Pantry
Volunteers come together for
FIM group visits inside
Crooked Creek Food Pantry.**



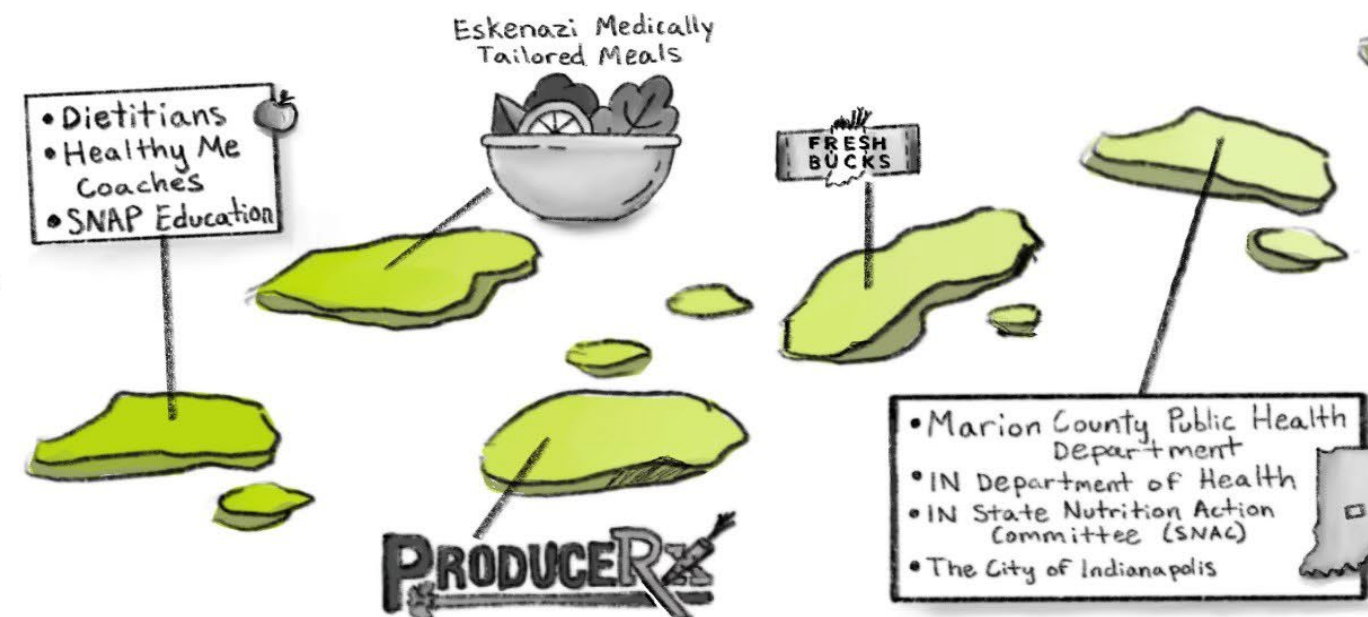
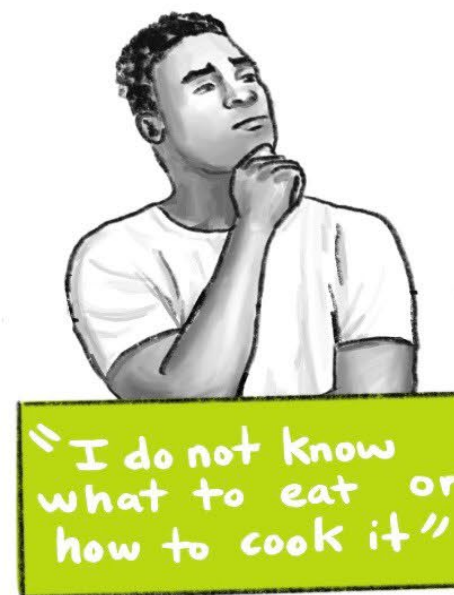
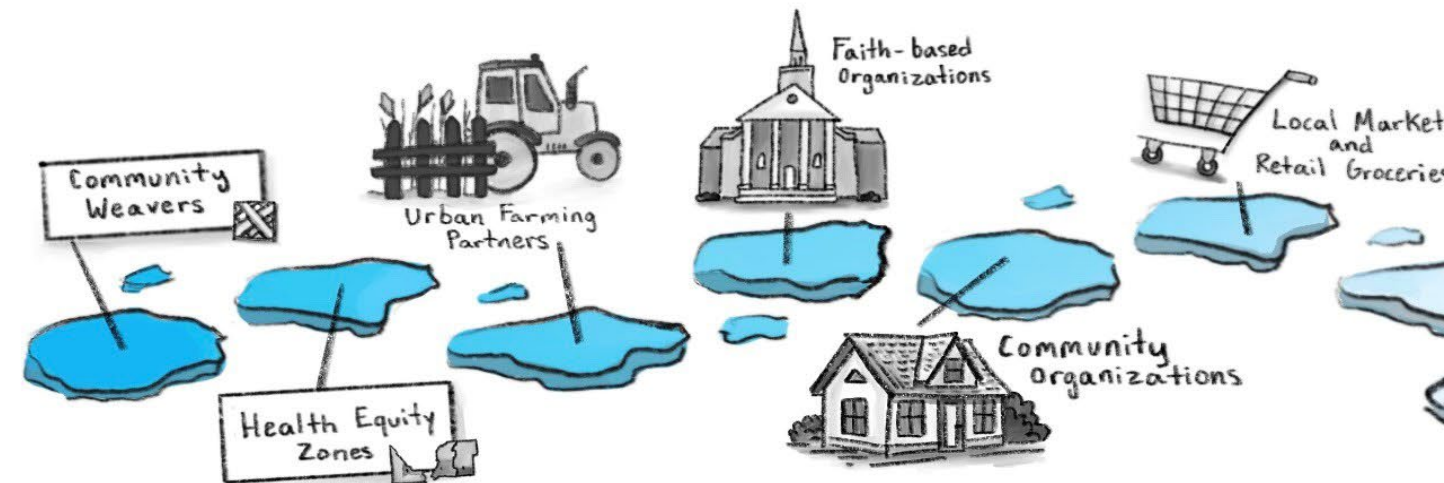
Gleaners Food Bank Partnership: Gleaners 2 Go Food Distributions

- Eskenazi Health Partnership with Gleaners Food Bank
- 3 participating Health Centers
- Weekly food distributions at Health Centers
- Weekly home deliveries (all Health Centers)
- Custom ordered groceries

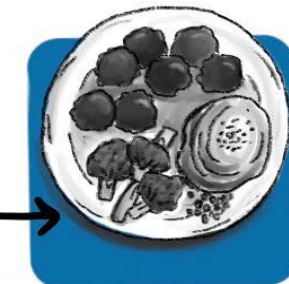


FOOD AS MEDICINE

Better Nutrition For Better Health



Neighborhood Nutrition Access and Food Sovereignty



Food Security and Nutrition Independence



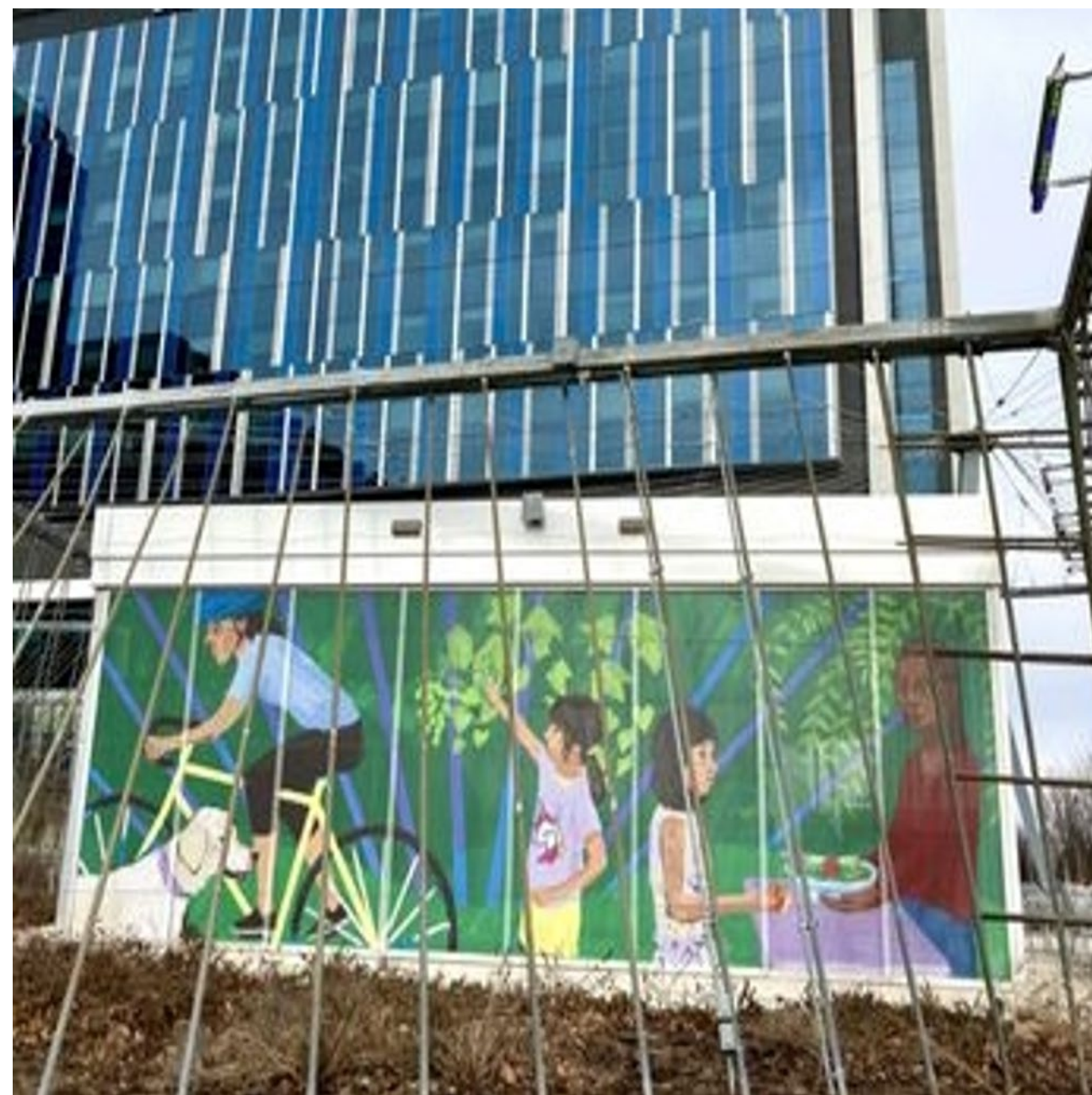
Nutrition and Cooking Confidence



Food is Medicine: Responding

Fresh for You Market

- **Pantry-** \$30 dollar vouchers for patients that screen positive for food insecurity
- **Market-** Traditional market grocery sales contribute to fund voucher program
- **Nutrition-** Nutrition education and programming opportunities



- Accepting SNAP
- Accepting “Fresh for You Market Vouchers”



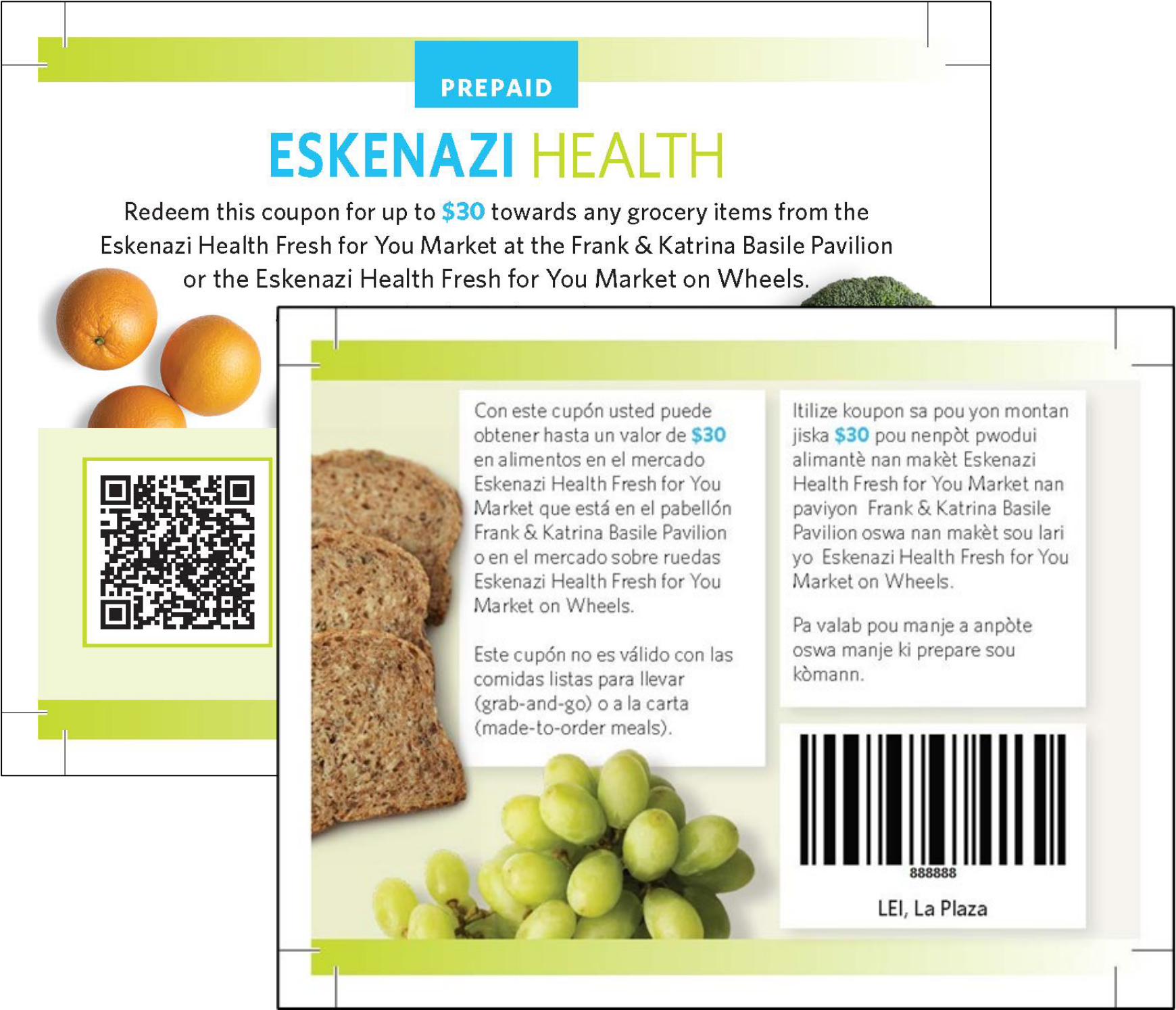


Food is Medicine: Eskenazi Health FFYM on

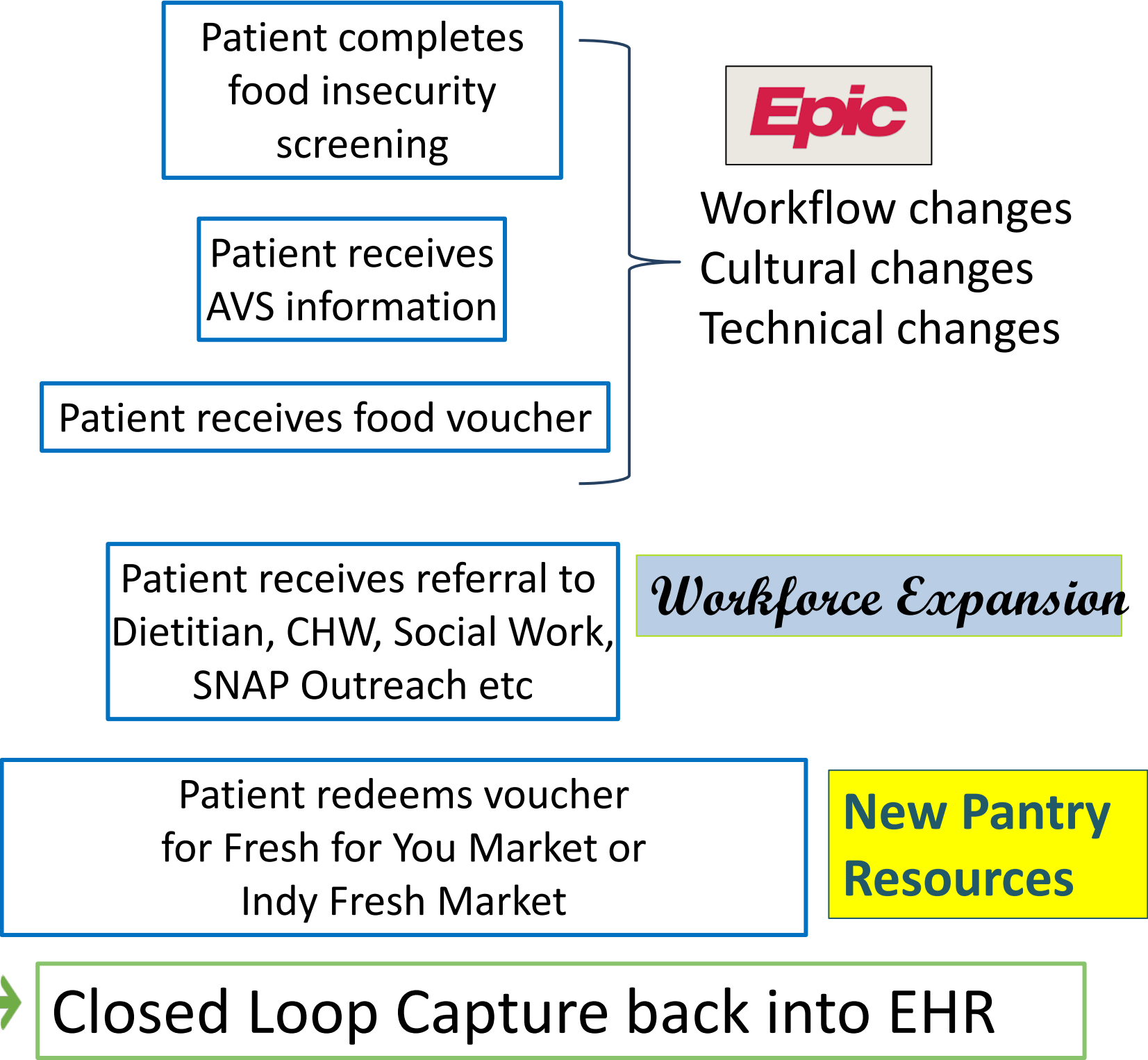
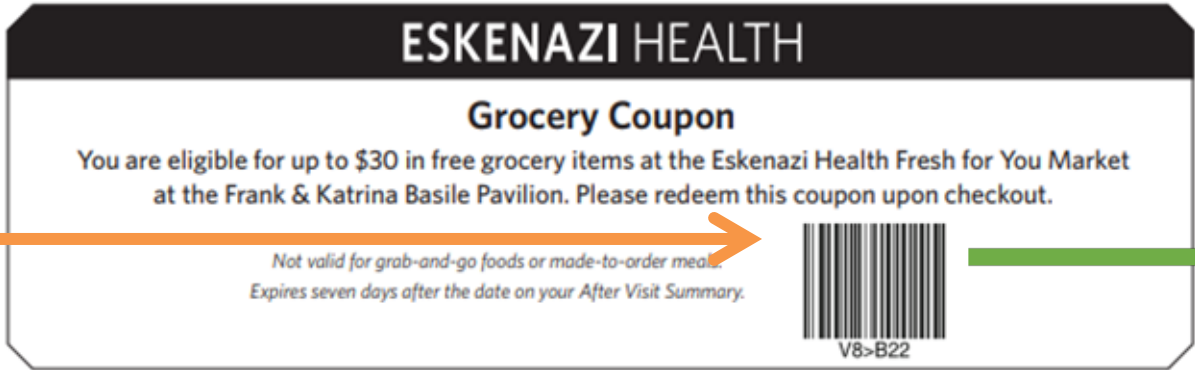


- Approximately 1,400 redemptions/month
- Voucher Spend per month approximately 44K for food alone
- ~25% redemption rate

Technical Innovation- Automated Food Vouchers



A unique serial number identifier for a specific patient visit or encounter





Indy Fresh Market Partnership

- Indy Fresh Market is a small independent grocery adjacent to a health center located in a “food desert”
- EHC Grassy Creek and EHC Grande Voucher Recipients have additional voucher redemption location option
- Increased Indy Fresh Market community utilization
- Increased voucher utilization rates (doubled)
- Closed-Loop data model



KPCA Conference Food is Medicine

September 29, 2026

Dr. Swannie Jett, DrPH, MSc, MHA

Chief Executive Officer

Park DuValle Community Health Centers

Past President for National Association of County and City Health Officials



Dr. Swannie Jett

- Doctor of Public Health with an emphasis in Preventative Medicine
 - University of Kentucky
- Master of Science in Bio-Systems Engineering
 - University of Tennessee
- Master of Health Care Administration
 - Suffolk University
- Bachelor of Science in Agriculture Statistics/Engineering
 - Tennessee State University

Recent work history

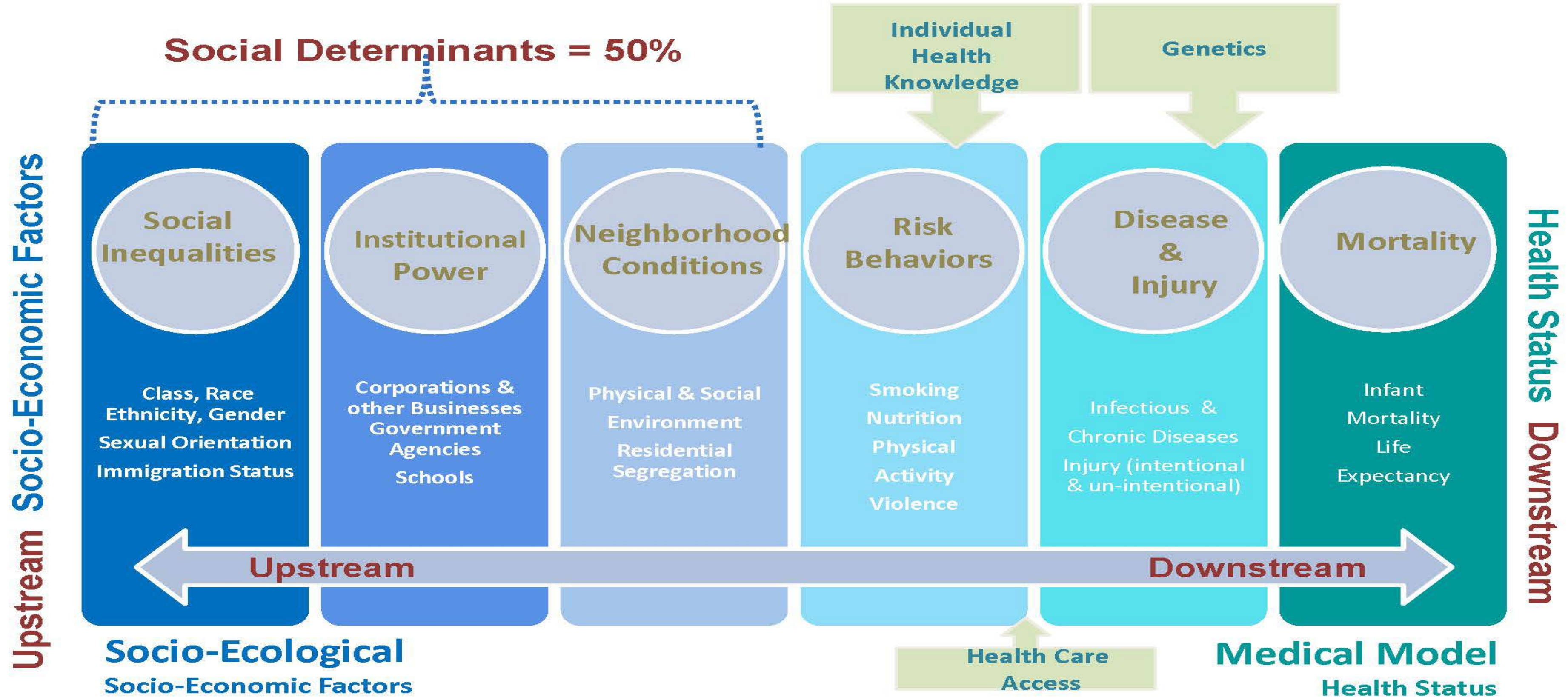
- In 2021, became CEO of Park DuValle CHC
- In 2017, Brookline Public Health in MA.
- In 2015, appointed President of the National Association of County and City Health Officials (NACCHO).
- Appointed as Health Officer for the Florida Department of Health in Seminole County (DOH-Seminole) in April 2013. Dual appointment with the county.
- 2009-2013, Health Commissioner, Bullitt Co. KY
- Retired LTC in the Arkansas Air National Guard, leading the Public Health and BIO Office.

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Framework For Public Health & Equity



CASH SAVER GROCERY 2023



Food is Medicine

- **MacKenzie Scott Donation**
- **My dream to the board**
- **Purchased the cash saver**
- **No plumbing, no HVAC, no electrical**
- **Renovations**

Food is Medicine

- **Food pantry**
- **Farmer's space leased (12,000 sq ft)**
- **Commercial kitchen**
- **Local events**
- **RX scripts/Chronic Disease Management Program**

Food is Medicine







FARMERS MARKET • FOOD PANTRY • TRAINING KITCHEN



Food is Medicine

- **Food pantry collaboration with Dare to Care**
- **Collaboration with local chefs and the American Heart Association**
- **Collaboration with Feeding America**
- **Over 2,000 people served since the July 18th opening**

INNOVATION



COLLABORATION



RESPONSIVENESS



EXCELLENCE



COMMUNITY



The citizens who needed the greatest assistance were fragile. The burden of Health Care and Public Health for the disadvantaged populations in our society does not just lie within a community or a state, but, within our Nation.

THANK YOU!

**Dr. Swannie Jett, DrPH,
MSc, MHA**

Chief Executive Officer

Sjett@pdchc.org

502-439-0409