

Community Collaboration to Address Food Access on the Navajo Nation

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Objectives

- Learn about the rates of childhood food insecurity locally and nationally.
- Understand food insecurity's impact on health outcomes.
- Learn about different opportunities to increase access to healthy foods in rural and/or tribal communities



Frisbie, Charlotte. Food Sovereignty the Navajo Way: Cooking with Tall Woman. Albuquerque, 2018. Print.

HUNGER OR FOOD INSECURITY?

- *Hunger* generally refers to the physiologic effects of food deprivation
- *Food Insecurity* can typically **predict** hunger; it includes problems like poor access to food, poverty, and eating unhealthy food

A Conceptual Framework: Cycle of Food Insecurity & Chronic Disease



Adapted: Seligman HK, Schillinger D. N Engl J Med. 2010;363:6-9.

DEFINITION OF FOOD INSECURITY

“Limited or uncertain availability of nutritionally adequate and safe foods or limited or uncertain ability to acquire acceptable foods in socially acceptable ways.”

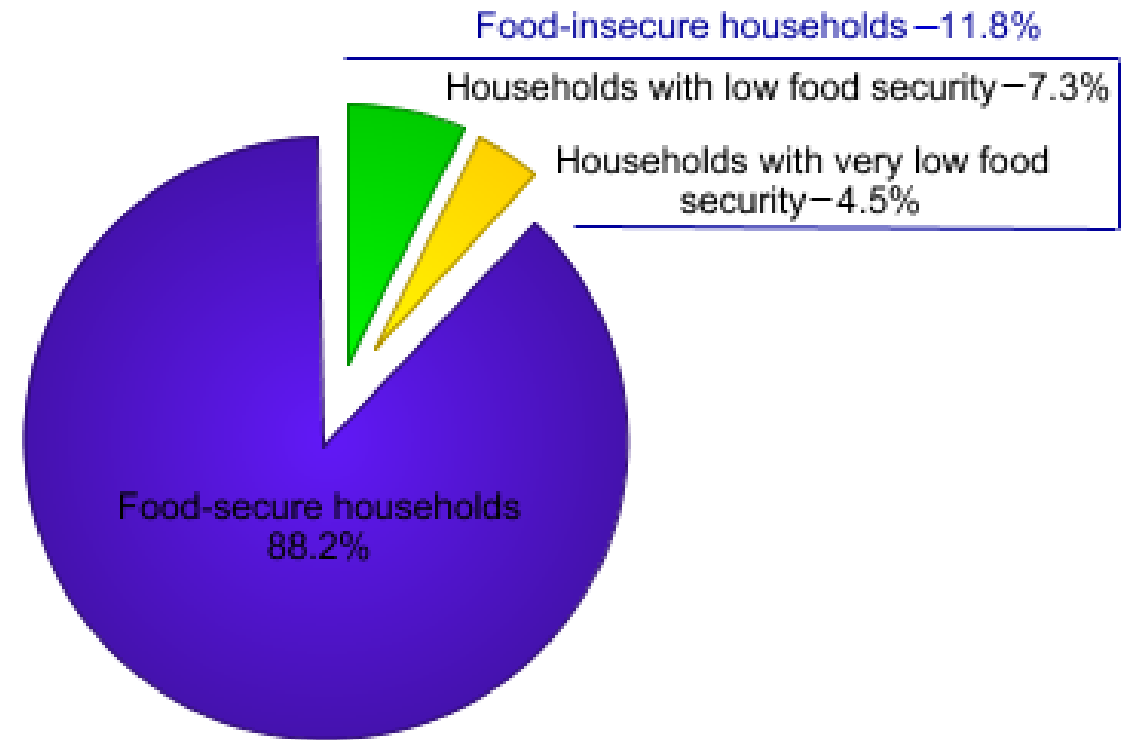


based on work for First Nations Health Authority at Gathering Wisdom VI

Drawing
change

FOOD INSECURITY IN THE U.S.

U.S. households by food security status, 2017



Source: USDA, Economic Research Service, using data from the December 2017 Current Population Survey Food Security Supplement.

FOOD INSECURITY IN CHILDREN

17.9%

Food Insecurity

The percentage of children under age 18 living in households that experienced limited or uncertain availability of safe, nutritious food at some point during the year. (Source: Feeding America)

28% of New Mexico children don't always get enough to eat

The percentage of children who are food insecure (2013)



Source: *Map the Meal Gap*, Feeding America, 2015
NEW MEXICO VOICES FOR CHILDREN

Navajo Nation Food Insecurity Survey (2012)

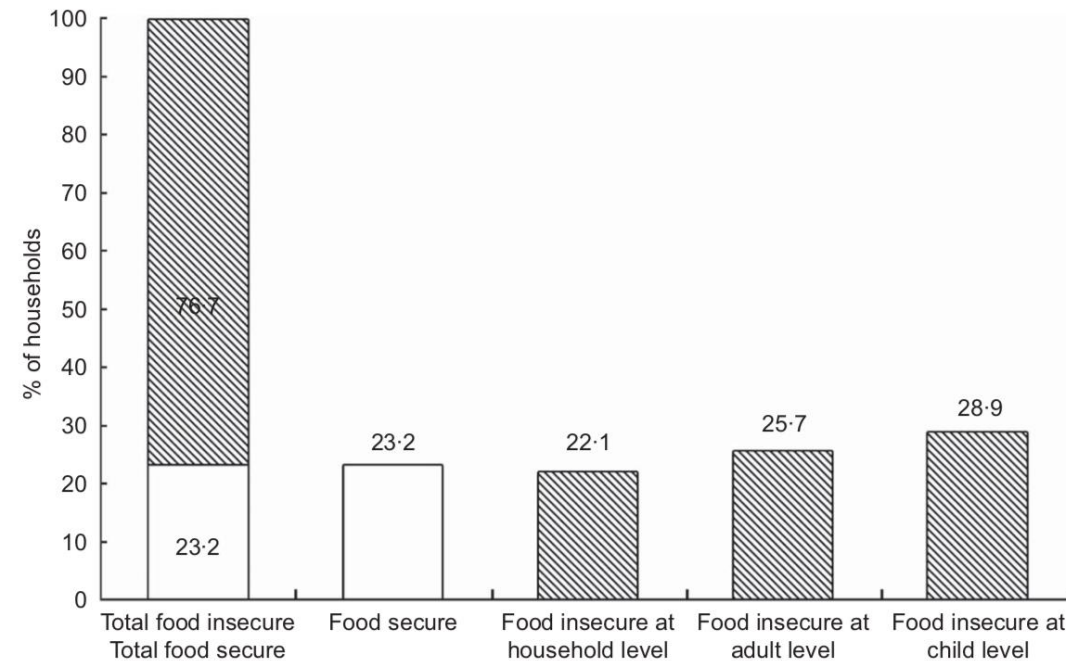
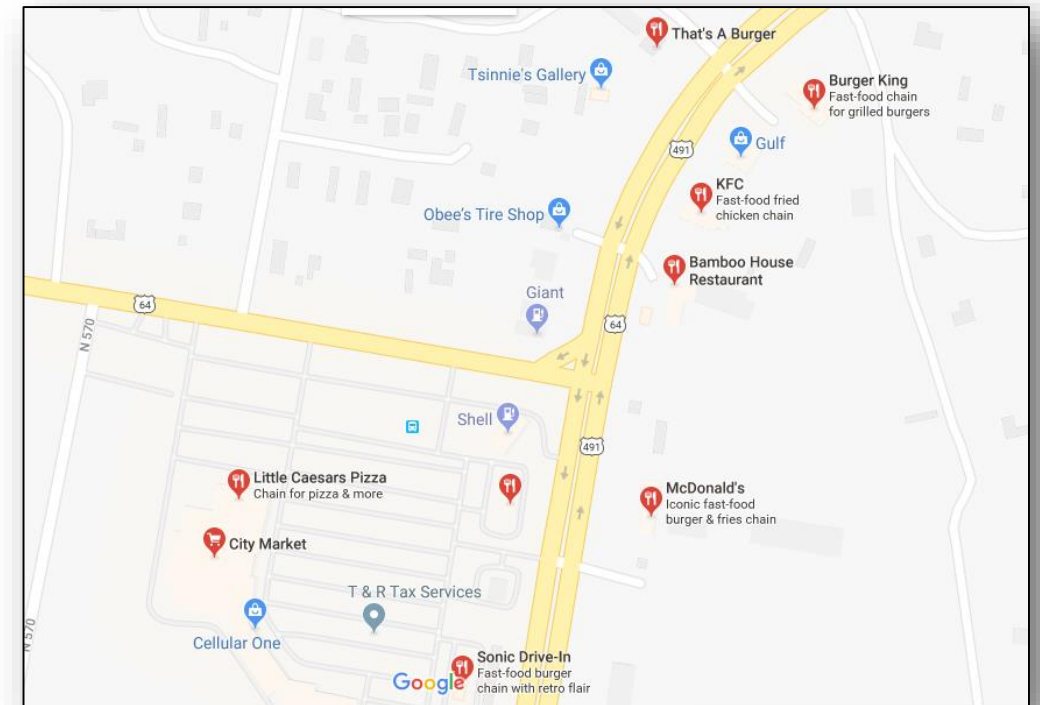


Fig. 1 Percentage of food-secure (□) and food-insecure (▨) households (*n* 276) in ten communities on the Navajo Nation using the ten-item Radimer/Cornell food insecurity instrument, May–November 2007

WHY FOOD INSECURITY?

Increased risk of diseases or negative health outcomes may be related or a result of food insecurity:

- Increased risk for emotional distress
- Consumption of less expensive, less healthy foods
- Limited options of foods bought or received for free, leading to difficulty/impossibility of eating balanced meals.
- Experience time periods with no food, overconsumption when food is available.
- Greater risk for being overweight or obese.
- Increased likelihood for diseases, such as diabetes



IHS + AAP Food Insecurity Screening Tool

- “We worried whether our food would run out before we got money to buy more.”
- “The food we bought just didn’t last and we didn’t have money to get more.”

Answers (over the last 12 months):

- ☐ Often true
- ☐ Sometimes true
- ☐ Never true
- ☐ DK or Refused

Likely Food Insecurity: If client responds “often true” or “sometimes true” to either statement.

Food Insecurity Assessment Tool and Resource List

To help your patients and clients improve their health, it is important to understand food insecurity and provide them with resources to get more healthy food.

When patients/clients and their children cannot get enough healthy food, they have food insecurity. They:


- Are at greater risk for being emotionally distressed.
- Eat less expensive foods which are often unhealthy.
- Have little choice over what kinds of food to buy or receive for free, making it difficult or impossible to eat balanced meals.
- Have periods when they don't eat, then overeat when food is available. If they have diabetes, this makes it very difficult to manage blood sugar.
- Have a greater risk for being overweight or obese.
- Are more likely to get diseases like diabetes.

To help your patients/clients lessen food insecurity, take these three steps:

1. Read each statement* and ask your client if the statement is often true, sometimes true, rarely true, or never true.
 - Within the past 12 months, we worried whether our food would run out before we got money to buy more. ☐ Often True ☐ Sometimes True ☐ Rarely True ☐ Never True
 - Within the past 12 months, the food we bought just didn't last and we didn't have money to get more. ☐ Often True ☐ Sometimes True ☐ Rarely True ☐ Never True
2. If your client responds “often true” or “sometimes true” to either statement, they likely have food insecurity. Help them get more food by filling out the list of resources (see next page) and giving it to them.

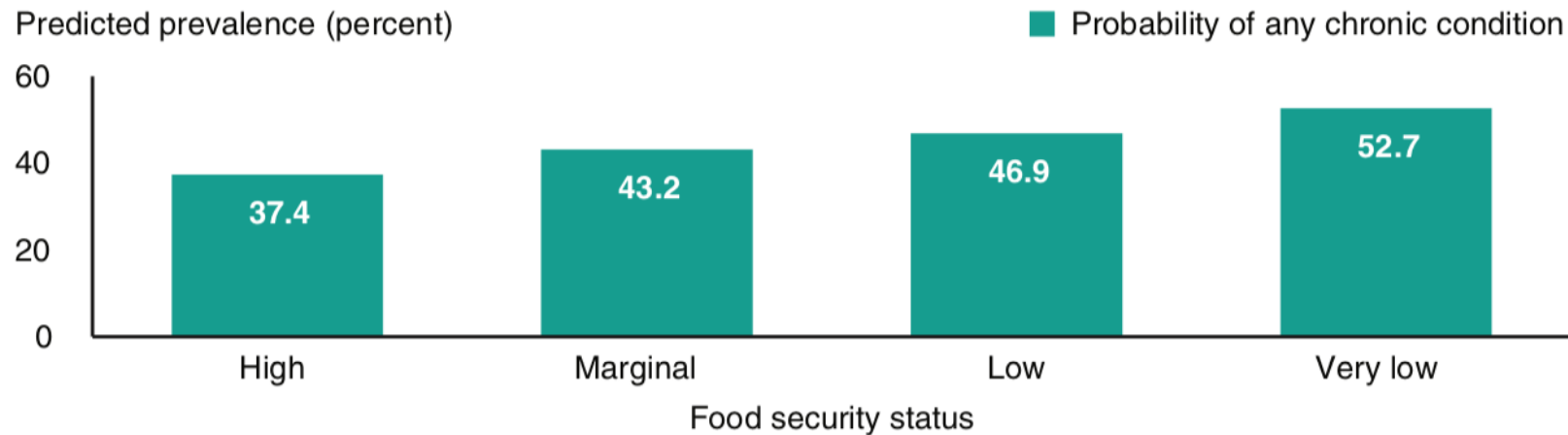
You can also fill out the list, make copies, and leave them in waiting rooms and other areas for community members to pick up.
3. Advocate for nourishing foods in your community. Take steps to increase the availability of nutritious, affordable food.

* Hager ER, Quigg AM, Black MM, Coleman SM, Heeren T, Rose-Jacobs R, et al. Development and validity of a 2-item screen to identify families at risk for food insecurity. Pediatrics. 2010 Jul 1; 126(1):26-32.

 Produced by the IHS Division of Diabetes Treatment and Prevention, 2015. To print this, go to www.ihs.gov/diabetes and search Food Insecurity using 'exact match' on the Education Materials and Resources (Online Catalog) webpage.

HIGHER FOOD INSECURITY LINKED WITH INCREASED RISK OF CHRONIC DISEASES

Adults in households with more severe food insecurity are more likely to have a chronic illness

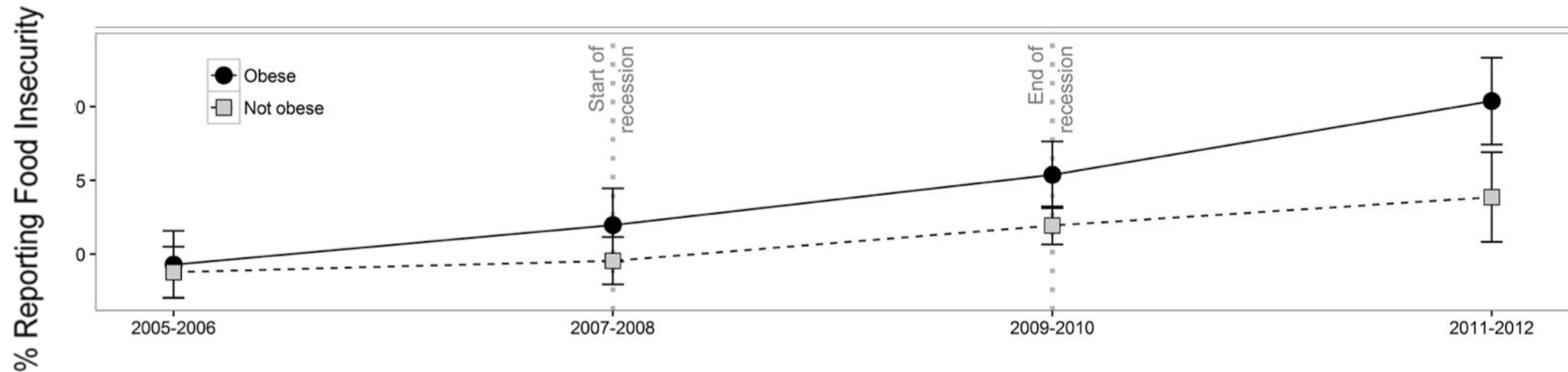


Source: USDA, Economic Research Service calculations using National Health Interview Survey data 2011-2015.

Food insecurity has been linked with chronic health conditions.

13.3% of rural households faced food insecurity in 2017, compared to 11.5% of households in metropolitan areas.

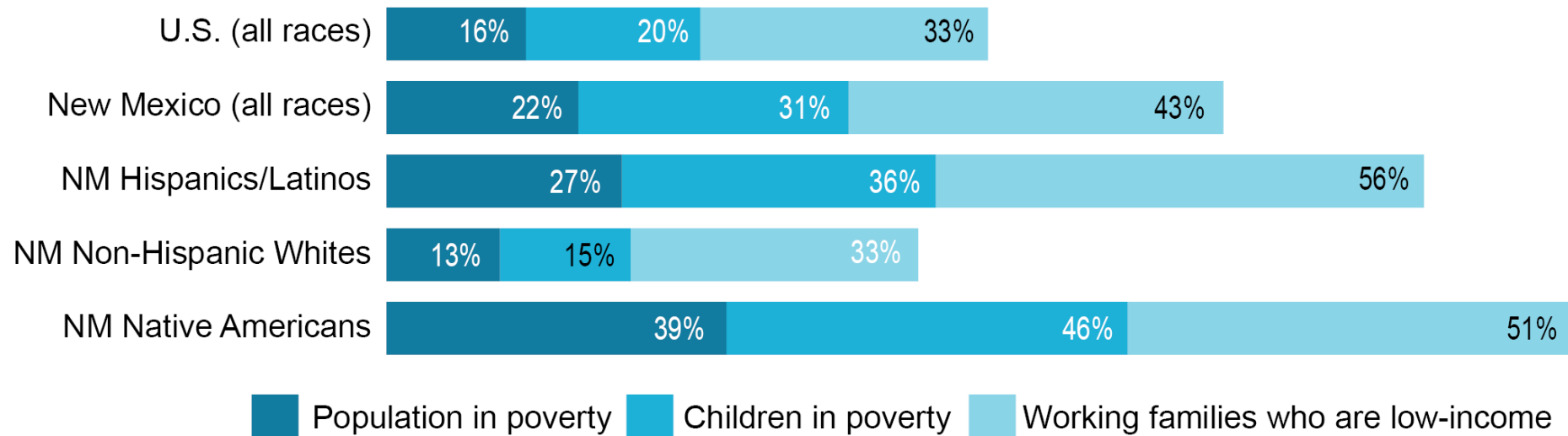
FOOD SECURITY & OBESITY



***“Coexistence of food insecurity and obesity is expected given that both are consequences of economic and social disadvantage”
(Frongillo & Bernal, 2014).***

New Mexico's Hispanic and Native American populations are more likely than non-Hispanic whites to be poor or low-income

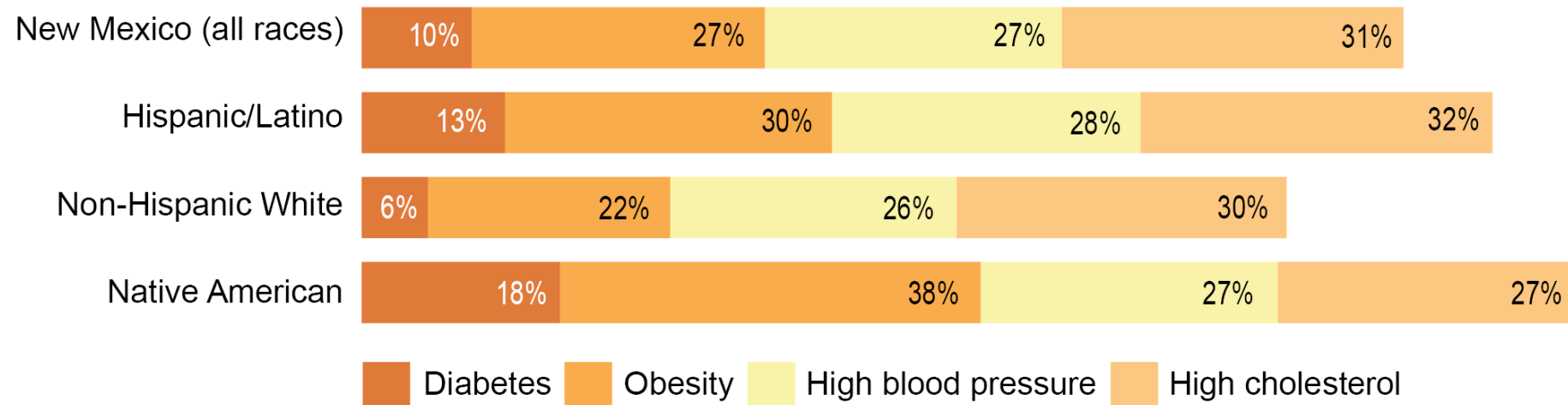
The percentage of adults and children in poverty and the rate of working families who are low-income (2013)



Source: US Census, American Community Survey, 2013
NEW MEXICO VOICES FOR CHILDREN

New Mexico's communities of color disproportionately suffer from a variety of chronic health conditions

The percentage of adults in New Mexico with chronic health conditions by race/ethnicity



Sources: Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia: U.S. Dept. of Health and Human Services, Centers for Disease Control and Prevention, with NM Dept. of Health
NEW MEXICO VOICES FOR CHILDREN

Nearly the
entire
Navajo Nation
is considered a
food desert

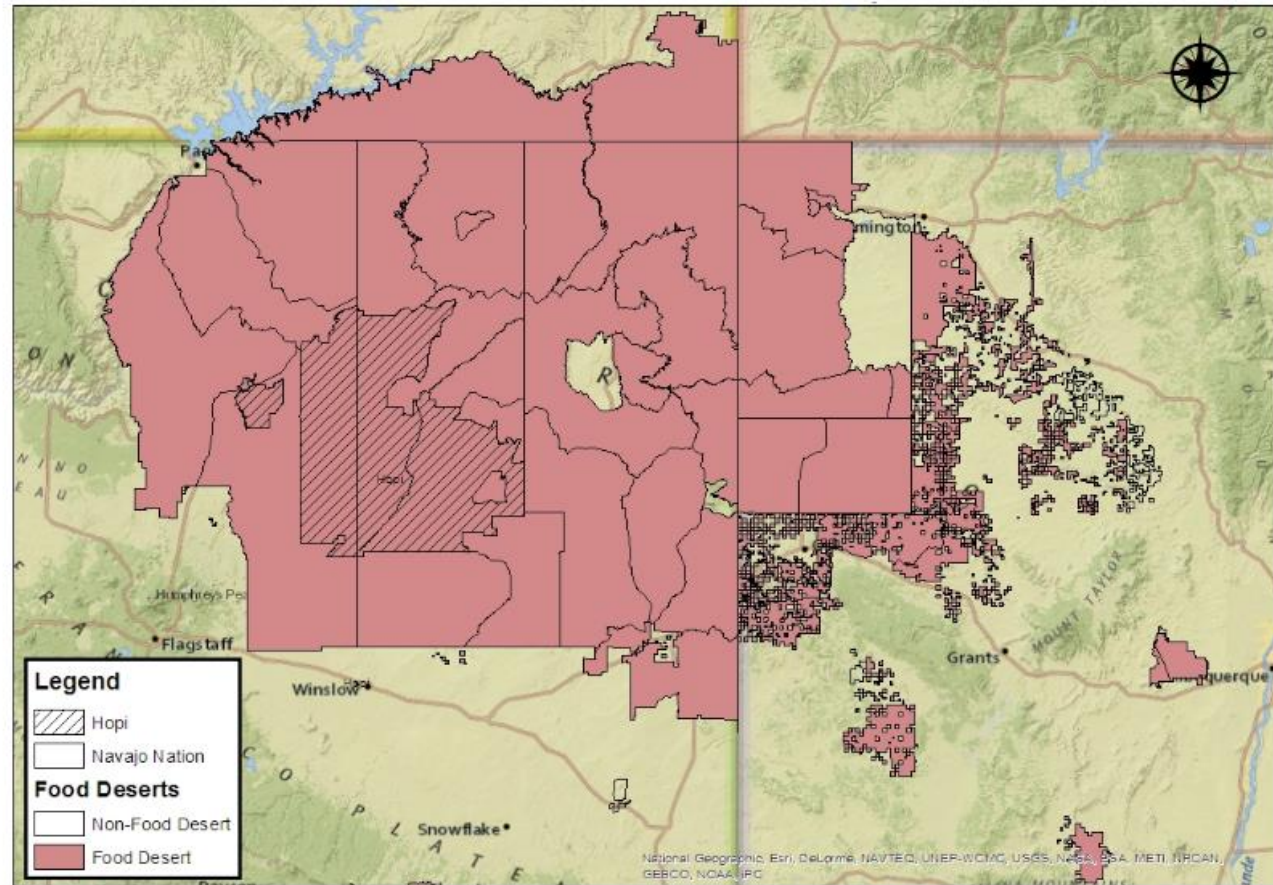


Figure 5.1 USDA Determined Food Deserts on the Navajo Nation. Data Source: ESRI Tiger Line, USDA Food Access Research Atlas. Author: Mariah Tso

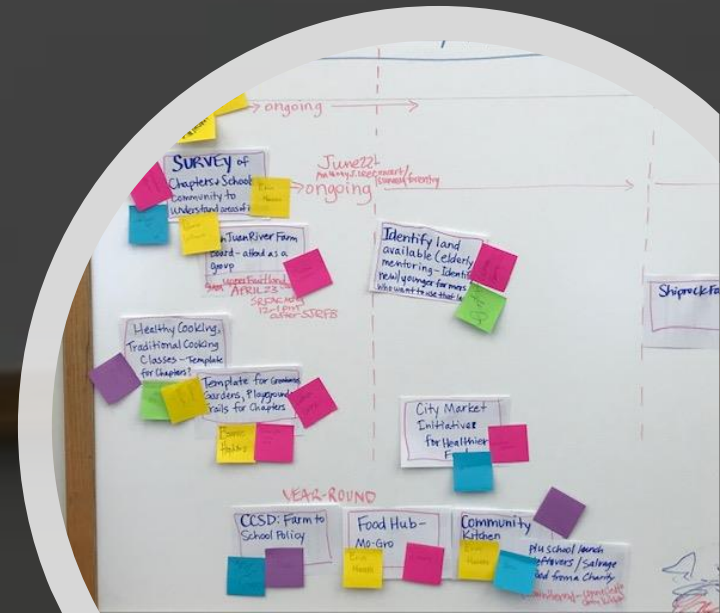
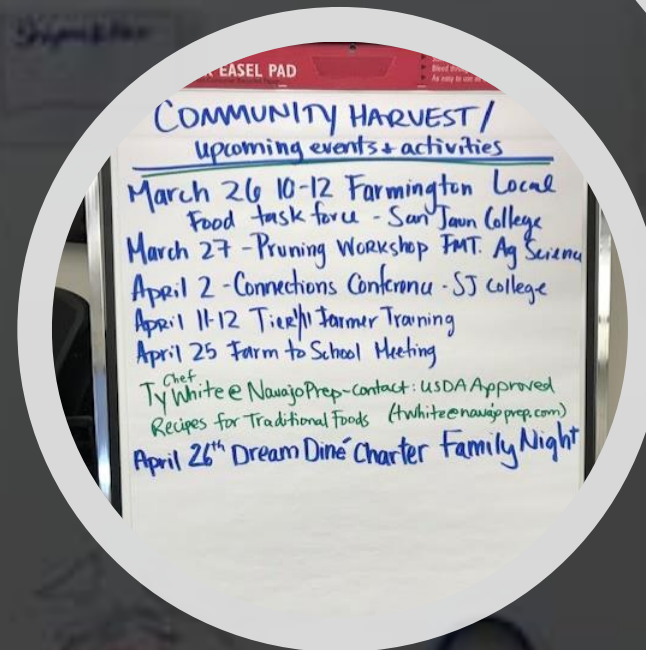
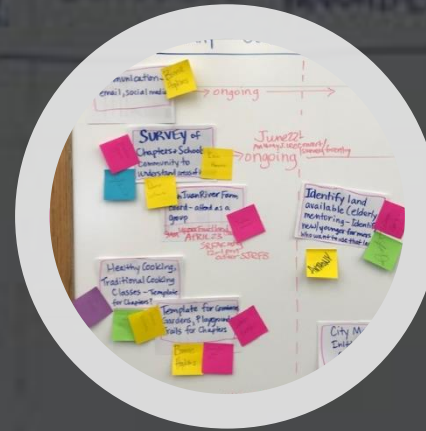
A photograph of Shiprock, a prominent butte in the Navajo Nation, New Mexico. The butte is a massive, jagged rock formation with vertical fissures, rising sharply from a flat, arid desert floor. The sky is a clear, pale blue. A semi-transparent white circle is overlaid on the left side of the image, containing text.

Shiprock, NM

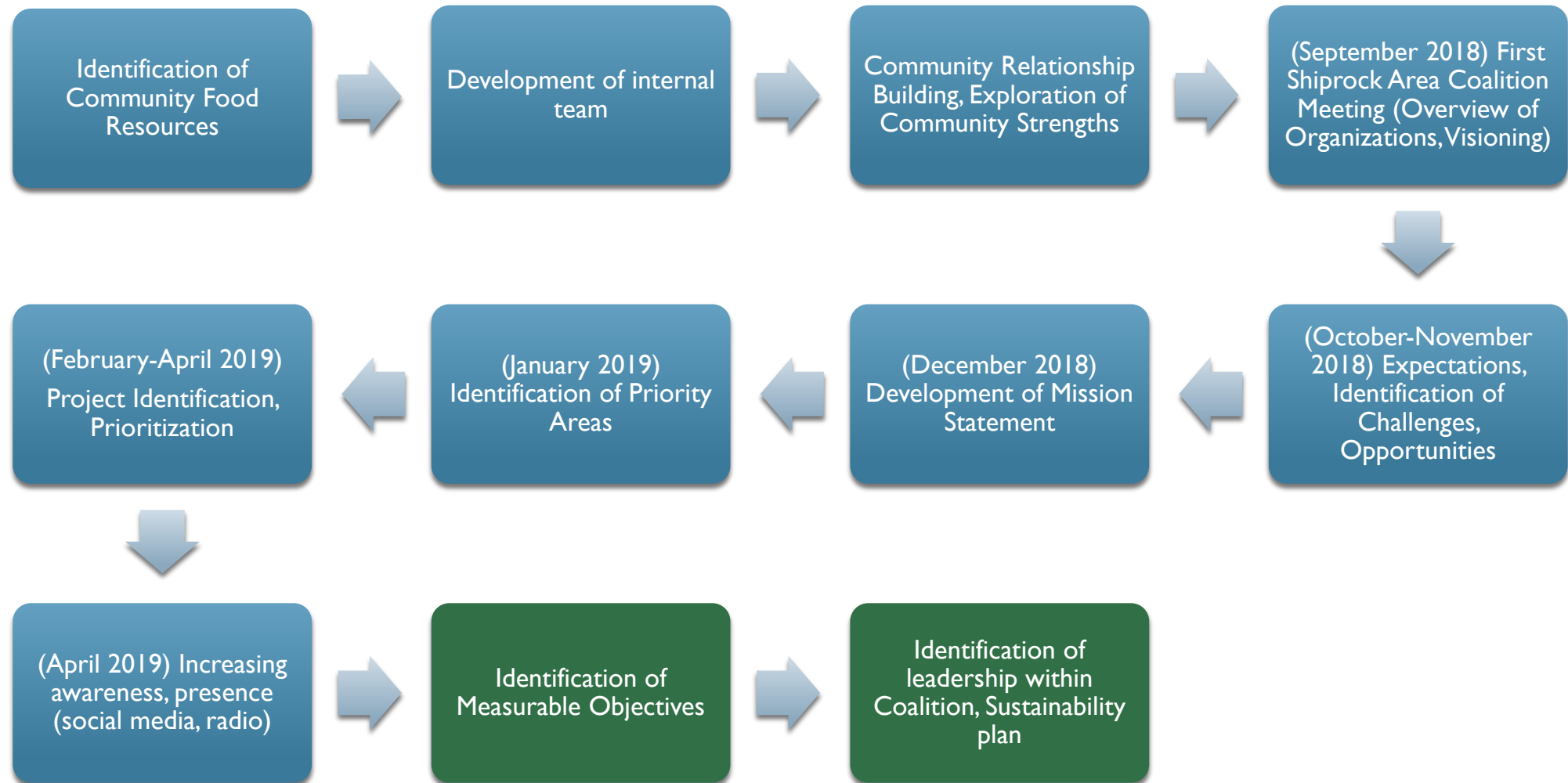
- Four Corners Region
- Hosts 1 of about 10 grocery stores in entire Navajo Nation.
- Elevated Food Insecurity
- High number of SNAP Recipients
- Sugar-sweetened drink consumption
- Large distances, challenges with transportation

Coalition Purpose:

- Form a coalition of public, private and non-profit organizations and community members to act as the champions, leaders, community representatives and a resource for food access in the Shiprock community.



GRASSROOTS COALITION FORMATION





FAC Meeting –
December 4, 2018

SHIPROCK AREA FOOD ACCESS COALITION

Mission: *Community stakeholders working together to improve access to healthy food and water that will build sustainable food systems change and improve generational health outcomes for Native American communities.*

Focus Areas:

Consumers



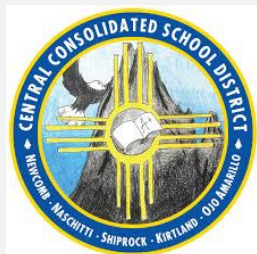
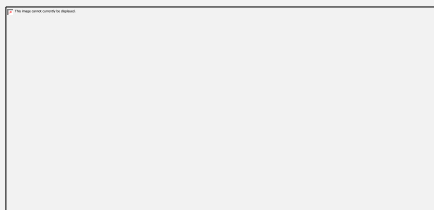
Communities



Growers



SHIPROCK AREA FOOD ACCESS COALITION



Christian
Reformed
Church



Indian Country
Grassroots Support



western sky
community care

Feed Shiprock



CAPACITYBuilders
transforming quality of life throughout Native America



First Born
Program

NEW MEXICO
DEPARTMENT OF
HEALTH



COALITION-IDENTIFIED PROJECT PRIORITIES

Short-Term / High Priority:

- Communication on Coalition, food access issues
- Survey of Chapter Houses, Schools & Communities
- Healthy Cooking of Traditional Food
- Greenhouses, Gardens, Playgrounds, Trails for Chapters
- Healthy food accessibility at local grocery store

Long-Term:

- CCSD Farm to School Policies, Food Donations
- Food Hub & MoGro
- Community Kitchen
- Identification of available land for farming
- Shiprock Fair 2019 & “Ag Days” 2020



SUGAR-SWEETENED BEVERAGES AT THE LOCAL GROCERY STORE

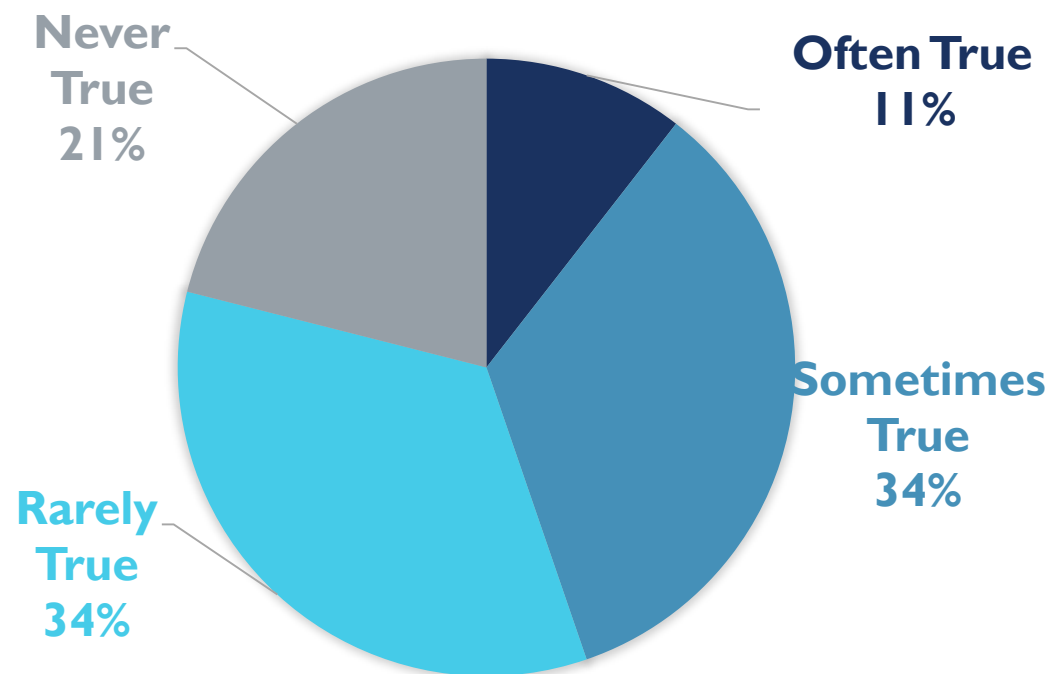


GROCERY STORE SURVEYS



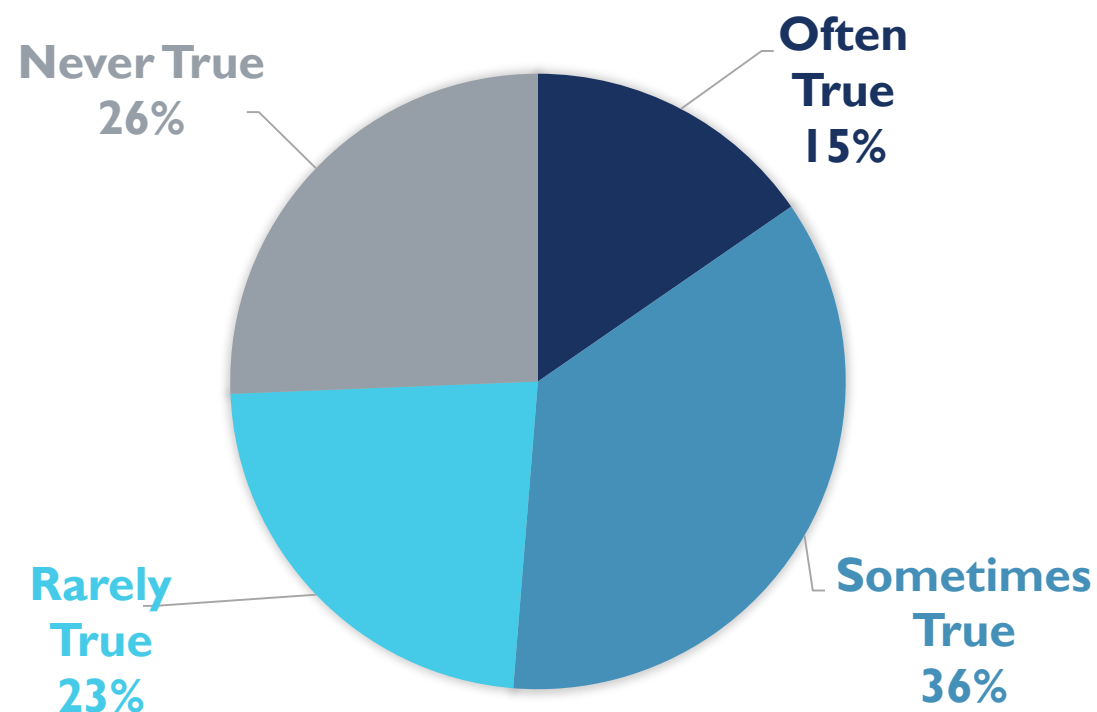
- Saturday, March 10, 2018
- 40 survey responses
- Food samples (salad packets, veggies + dip, fruits, seltzer water)
- Prize wheel (cutting boards, spatulas, oven mitts from COPE), healthy recipes, flavored water samples

FOOD INSECURITY 1: "WITHIN THE PAST 12 MONTHS, WE WORRIED WHETHER OUR FOOD WOULD RUN OUT BEFORE WE GOT MONEY TO BUY MORE."



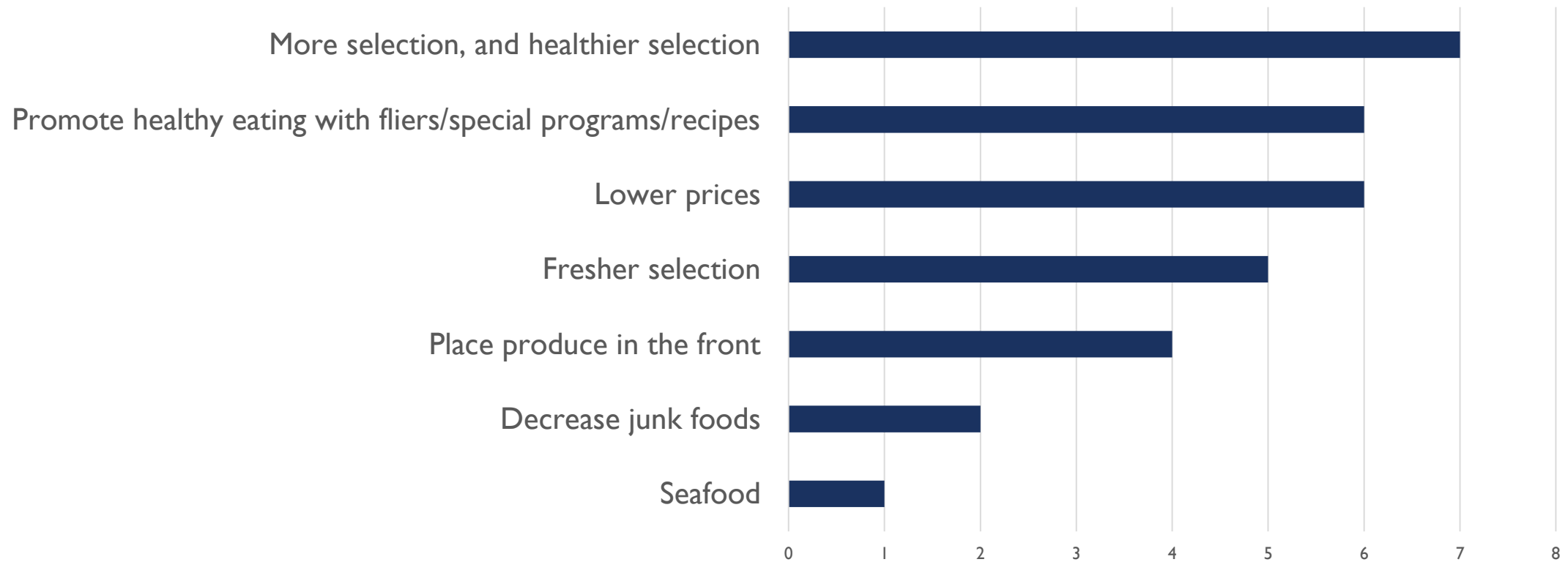
45 % of shoppers are Food Insecure according to Question 1.

FOOD INSECURITY 2: "WITHIN THE PAST 12 MONTHS, THE FOOD WE BOUGHT JUST DIDN'T LAST AND WE DIDN'T HAVE MONEY TO GET MORE."

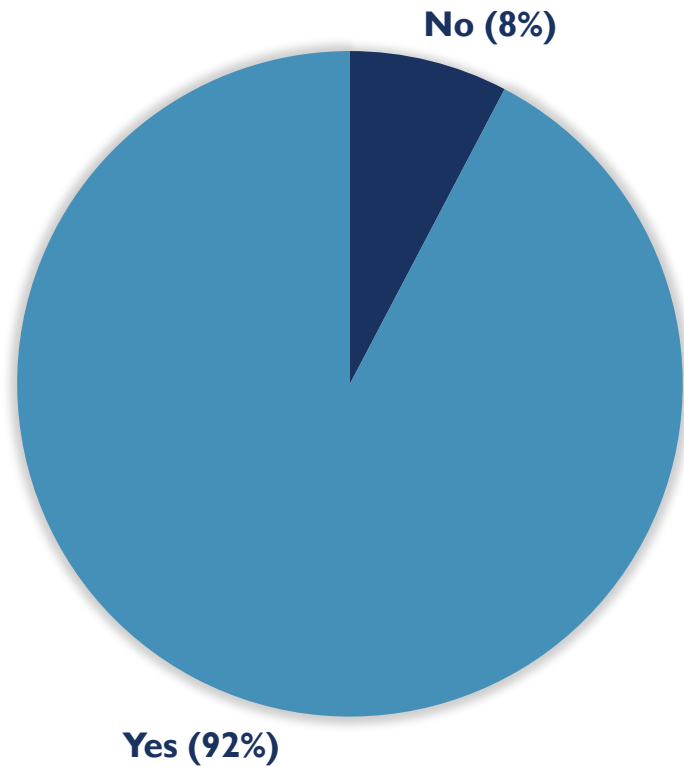


51% of shoppers are Food Insecure according to Question 2.

WHAT COULD THIS GROCERY STORE DO TO HELP YOU EAT HEALTHIER?



WOULD YOU BUY MORE FRUITS OR VEGETABLES IF THEY WERE LOCATED AT THE FRONT OF THE STORE?



GROCERY STORE INITIATIVE – BARRIERS

- Communication Channels
 - Survey vs. preference of community
- Marketing placements
- Shopper Consumption & Knowledge
 - Healthy Dine Nation Act – the “Junk Food Tax”
 - Healthy eating

*Healthy Diné Nation Act
of 2014*

TAX FREE

Tax is excluded from Fresh Fruits, Fresh Vegetables, Water, Nuts, Seeds, and Nut Butters.

However, this excludes such items as dried, pickled, or canned fruits and vegetables. This also excludes water, nut butters, and seeds that have added sugars or artificial sweeteners.

*Healthy Diné Nation Act
of 2014*

**JUNK FOOD
TAX**

A 6% sales tax is applied to “Junk Food”

Junk Food means sweetened beverages and prepackaged and non-prepackaged snacks low in essential nutrients and high in salt, fat, and sugar including snack chips, candy cookies, and pastries, excluding nuts, nut butters, and seeds.

IMPROVING ACCESS AT THE LOCAL GROCERY STORE: PROGRESS TO DATE

- FVRx Program
- Community Survey
- Piloting moving fresh fruits to front of store
- Increased discussion with store manager
- Expanded community interest → Food Access Coalition
- Fruit Stand
- Chapter House Resolution

Northern Navajo Medical Center Partners to Improve Access to Healthy Foods in Shiprock, New Mexico

by Lydia Soo-Hyun Kimm MD, MPH, Department of Health Promotion and Disease Prevention, Northern Navajo Medical Center in Shiprock

November 19, 2018



A permanent fruit stand was placed in City Market Grocery in Shiprock, New Mexico

Local support
of efforts to
improve
access to
healthy
options &
education



RESOLUTION OF THE SHIPROCK CHAPTER
SHIPROCK, NAVAJO NATION

07-15-18-073-SHIP



SUPPORTING HEALTHIER CHANGES TO SHIPROCK CITY MARKET

WHEREAS:

1. The Shiprock Chapter of the Navajo Nation acts on this resolution pursuant to the authority conferred on the Chapter through Navajo Nation Code Title 26, Chapter 1, Section 1, B. purpose, which states, "Through adoption of this Act, the Navajo Nation Council delegates to Chapters governmental authority with respect to local matters consistent with Navajo Law, including custom and tradition" and the inclusivity provided by the Diné Fundamental Law, in that "it is entirely appropriate for the government itself to openly observe these fundamental laws"; and
2. The Shiprock Chapter supports efforts by Shiprock City Market and Northern Navajo Medical Center Staff to make changes to support healthier eating in the community, and
3. The Shiprock Chapter supports a store remodel supported by customers to relocate fruits and vegetables to the front of the store, and
4. The Shiprock Chapter supports the promotion of healthier products and decreased marketing of soda and other sugar-sweetened beverages, and
5. The Shiprock Chapter supports labels that promote healthy foods as "tax-free healthy foods" and labels unhealthy foods as "junk-food taxable," and
6. The Shiprock Chapter supports the use of revenue from the Healthy Diné Nation Act to support health promotion activities such as cooking demonstrations at Shiprock City Market.

NOW, THEREFORE, BE IT RESOLVED THAT:

The Shiprock Chapter Membership hereby supports healthier changes be made by the management at Shiprock City Market.

Motioned by: Nate Ellison

Seconded by: Joe Ben, Jr.

CERTIFICATION

We hereby certify that the foregoing resolution was presented and considered at a duly called Special Chapter meeting at which a quorum was present and that the same was approved by a vote of 62 in favor, 0 opposed and 1 abstention on this 15th day of July, 2018.

Duane H. Yazzie
Duane H. Yazzie, President

Dr. J. Kalbah Begay
Dr. J. Kalbah Begay, Secretary/Treasurer

Nevina B. Kinlahcheeny
Nevina Kinlahcheeny, Vice President

Tom Chee
Tom Chee, Council Delegate

IMPROVING ACCESS AT THE LOCAL GROCERY STORE: ONGOING COMMUNITY WORK

- Partnership with the community and the Shiprock Area Food Access Coalition
 - Collection of community feedback
 - Postcard Initiative
 - Collaboration and discussions with store manager and staff
 - Shelf talkers / On shelf messaging (*in development*)
- Collection and sharing of data with FVRx



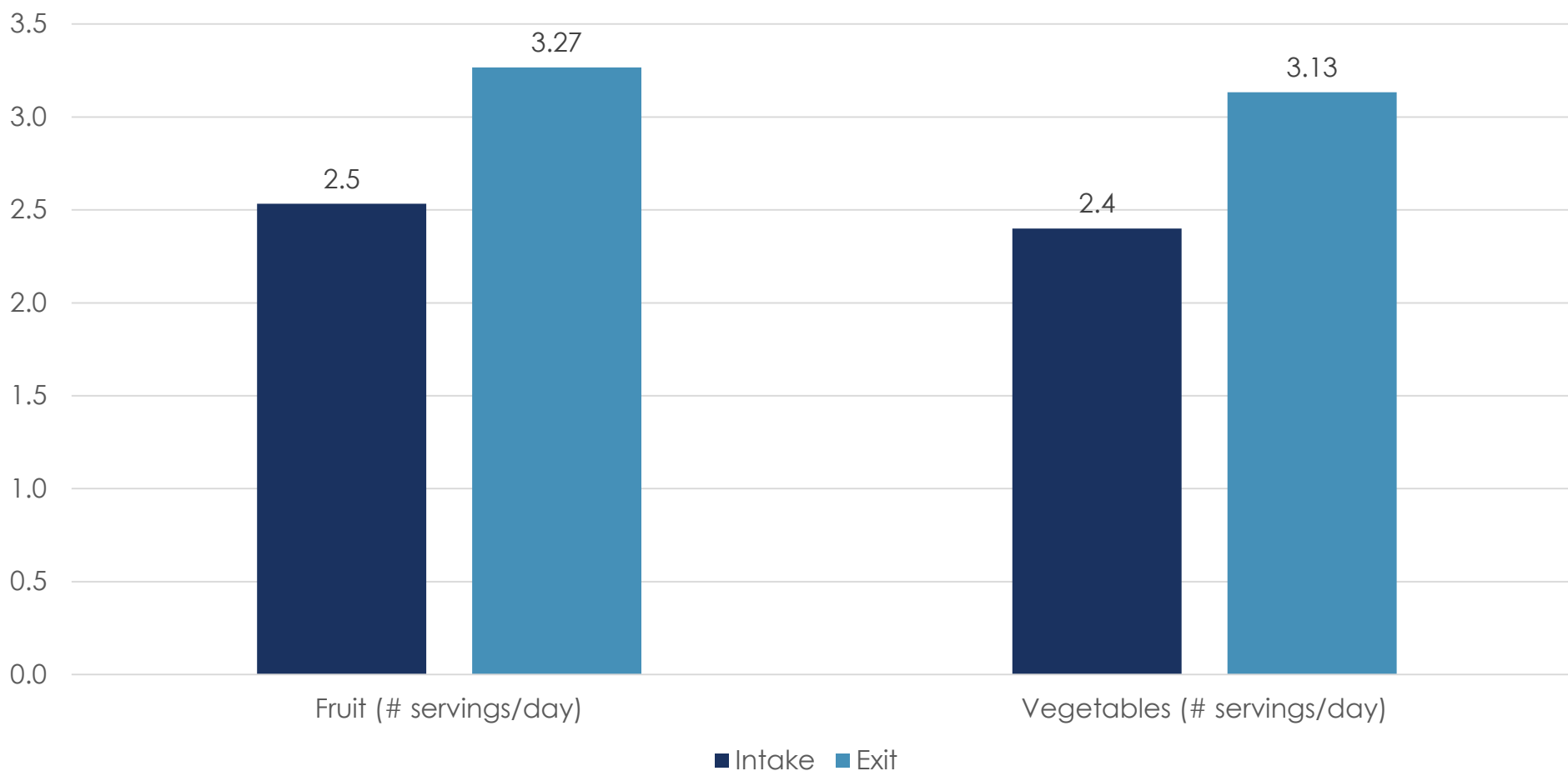
SHIPROCK/NNMC FVRX



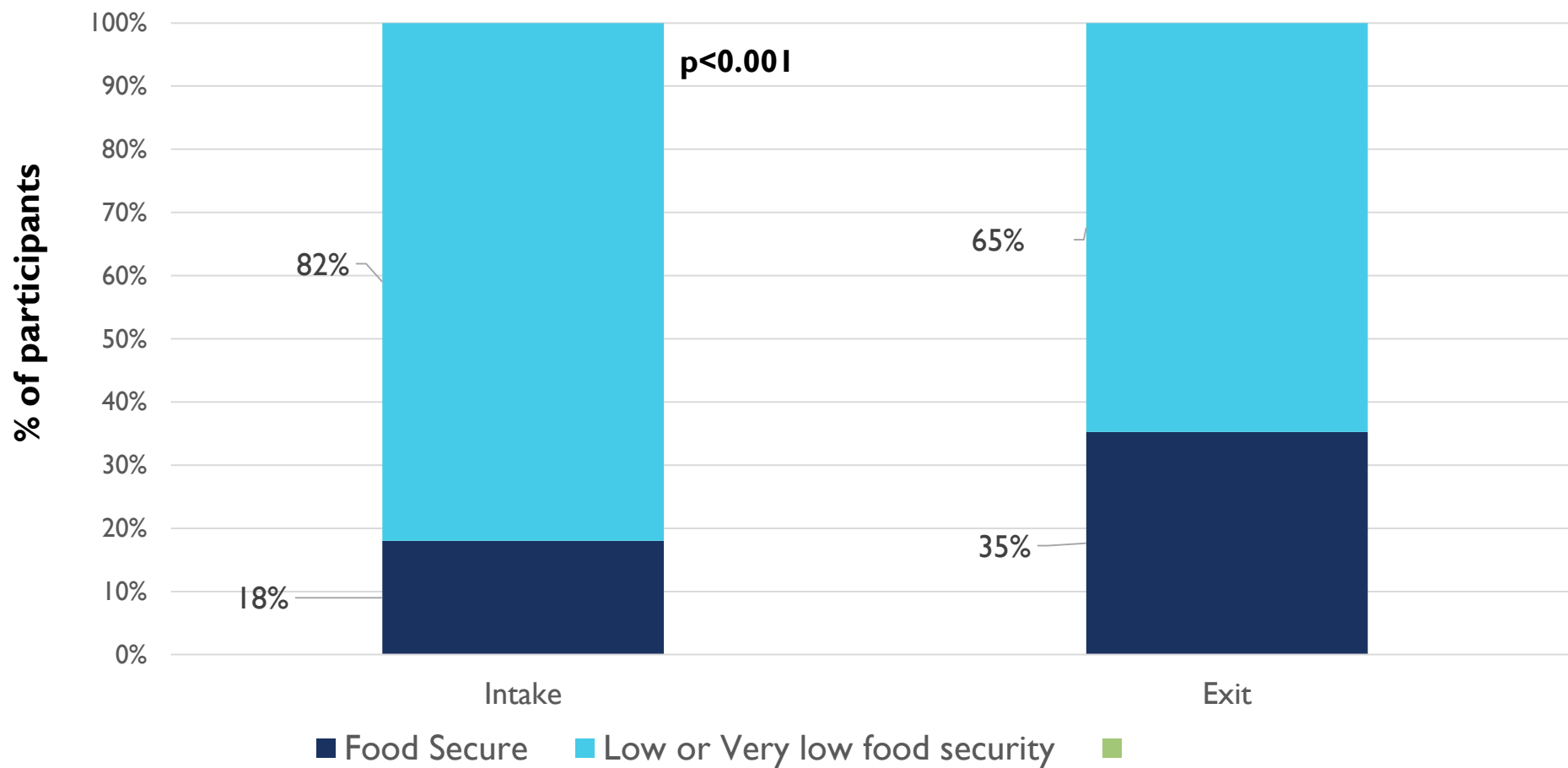
- Increase access to healthy foods among Navajo families;
- Increase consumption of healthy and locally grown fruits and vegetables;
- Improve health outcomes in people affected by diet related diseases; and
- Stimulate the economy and promote local sales of healthy foods on Navajo Nation



CHANGE IN FRUIT AND VEGETABLE CONSUMPTION (N=15)



CHANGES IN HOUSEHOLD FOOD SECURITY










LOCAL HOSPITAL EFFORTS TO INCREASE VISIBILITY AND EMPHASIS ON FOOD SECURITY

- Food Resource List
- FVRx Program
- Food Security In-Service with PHN team
- Referral System to local food resources (*currently in development*)
- Addition of Food Security as a code in EHR, beginning of coding
- Integration of USDA/IHS Food Security Screening Tool into clinics
- Increased interest and collaboration from and with providers
- Hospital Community Garden

HEALTH PARTNER
FOR WELLNESS

Food Resources near Shiprock

Not having enough food for yourself and your family is stressful. Lack of good food makes it hard for children to grow and adults to stay healthy. The thought of not having enough food can make you need food assistance. Please don't wait to contact the programs on this list.*

Program Name:	Address and Phone:	Other Important Information:
 SNAP - Supplemental Nutrition Assistance (Food Stamps)	Human Services Department Income Support 101 W. Animas Farmington, NM 87401 Phone: 505-566-9600	New Mexico: https://www.yes.state.nm.us Arizona: https://www.healthearizona.org "How to Apply" Video: https://des.az.gov/az-application
 Food Distribution (FDP/IR)	4080 Highway 64 Kirtland, NM 87417 Phone: 505-598-9736	Supplemental foods. Income required both.
 Women, Infants & Children (WIC)	P.O. Box 129, Shiprock, NM 87420 Phone: 505-368-1135 138 Suite A, Giles Street Farmington, NM 87401 Phone: 505-327-9951	Supplemental eligible food for parent. Breastfeeding. Income eligibility required.
 Farmer's Markets	Farmington Farmer's Market Farmington Museum Aztec Farmer's Market Shiprock Chapter House Farmer's Market	Farmington & Aztec Farmer's Markets doubling your local foods when you visit. Farmington Hours: Saturday June 9, 2018 through October 26, 2018: 8am-12pm Saturdays; Tuesdays from 4-6pm. Shiprock Chapter House—August 4th—October 13th or first freeze—9am-6pm Saturdays
 ECHO Inc. Food Bank	401 South Commercial Avenue Farmington, NM 87401 Phone: 505-326-3770	Hours: Monday-Thursday 7:00 a.m. – 12:00 p.m. & 12:30 p.m. – 5:30 p.m.; Closed Holidays and after 3 pm on last business day of each month. Free Food for Seniors: One time/season \$25 free produce at Farmington Farmer's Market (age 60+); monthly free food program (CSFP) - for income qualified NM Seniors 60+. TEFAP: Commodities, monthly supplemental food for income-qualified NM household.
 Bethel Christian Reformed Church	Pastor John Greydanus Junction of Hwy 491 & 64 Shiprock, NM 87420 Office Landline: (505) 368-4475	1. Income-Eligible Program: Bag of groceries, available at first come, first serve. Proof of income required. 2. Under 6 and Over 60 Program (CSFP): Bring ID, Social Security Card, number of people living in home, & income verification. 3. Fruit, vegetable, food distribution every Tuesday at 10am. No income requirements.
 San Juan Baptist Association	1010 Ridgeway Place Farmington, NM 87401 Phone: 505-327-4530	Non-perishable food and clothing Hours: Mondays from 11:00 am-1:00 pm

5 2 1 0 AZ Way To Go!

Does anyone in your family have any of the following?

Diabetes	<input type="checkbox"/> Yes <input type="checkbox"/> No
High blood pressure	<input type="checkbox"/> Yes <input type="checkbox"/> No
Overweight	<input type="checkbox"/> Yes <input type="checkbox"/> No
Heart Disease (heart attack, stroke, high cholesterol)	<input type="checkbox"/> Yes <input type="checkbox"/> No

Healthy Habits Planning Tool

CIRCLE THE NUMBER THAT BEST DESCRIBES THE PATIENT'S LIFESTYLE CHOICES

Servings of fruit and veggies per day	1 2 3 4 5+
Hours of screen time (TV, video games, computer or phone) per day	0 1 2 3 4+
Hours of play/exercise to the point of breathing hard per day	0 .5 1 2 3 4+
Days being active together as a family per week	0 1 2 3 4+
Glasses (8 oz.) of sugary drinks (juice, soda, sports drinks, energy drinks, flavored milk, lemonade, kool-aid, sweet tea/coffee) per day	0 1 2 3 4+
Meals together as a family at the table per week	0-1 2 3 4 5+
Days eating breakfast per week	0-1 2 3 4 5+
Hours sleeping per night	<6 7 8 9 10+

1) Within the past 12 months we worried whether our food would run out before we got money to buy more.
☐ Often true ☐ Sometimes true ☐ Rarely true ☐ Never true

2) Within the past 12 months the food we bought just didn't last and we didn't have money to get more.
☐ Often true ☐ Sometimes true ☐ Rarely true ☐ Never true

WHAT IS ONE THING YOU WOULD LIKE TO CHANGE OR HELP YOUR CHILD CHANGE?

<input type="checkbox"/> Eat more fruits and vegetables	<input type="checkbox"/> Eat less fast food / take-out	<input type="checkbox"/> Play outside more
<input type="checkbox"/> Drink less sugary drinks	<input type="checkbox"/> Eat breakfast every day	<input type="checkbox"/> Eat together as a family more
<input type="checkbox"/> Switch to low-fat or fat-free milk	<input type="checkbox"/> Spend less time in front of a screen	<input type="checkbox"/> Be active as a family together more
<input type="checkbox"/> Drink more water	<input type="checkbox"/> Eat smaller portions	<input type="checkbox"/> Get more hours of sleep at night
<input type="checkbox"/> Take the TV and/or computer out of the bedroom		

YOUR PERSONAL HEALTH GOAL

WE WILL MONITOR YOUR PROGRESS IN _____ WEEKS.

Patient/Guardian Signature: _____ Date: _____

Child's Signature: _____ Date: _____

© 2018 AZ Way To Go! is a program of the Arizona Chapter of the American Academy of Pediatrics

THANK YOU + AHEHEE. QUESTIONS?

