Hunger & Homelessness

Operation CHOICES: Promoting Healthy Food & Fitness for Families in Emergency Housing

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Homeless Health Initiative
Objectives

• Increase understanding of the connection between hunger, homelessness, and obesity within families in shelter

• Learn how food insecurity and trauma impact hunger and homelessness

• Integrate knowledge into a workable plan for your community
The Problem

- 17% (12.5 million) children & adolescents (2-19 years) are obese

- Obesity prevalence among children & adolescents has almost tripled since 1980

- 1 of 7 low-income, preschool-aged child (2-4 years) is overweight or obese
  - Nearly 1.25 million
  - 541,000 obese

Problem: The Cost of Obesity

- Annual hospital costs related to obesity among children and adolescents increased from $35 million (1979) to $127 million (1999).

- In 2006, individuals that experience obesity spent $1,400 more on medical care costs.

- In 2007, approximately 300,000 deaths per year may have been attributable to obesity.

- In 2008, annual healthcare cost of obesity in the US was estimated to be as high as $147 billion.


Homeless Health Initiative

Goals:

• To provide comprehensive medical services to children in emergency housing.

• To assist families in accessing important services including health insurance, primary care, and specialty care.

• To enhance healthcare providers' knowledge of, and exposure to, homelessness and its impact on children’s lives and their health.

• To provide education and advocacy.

Collaboration, Partnerships & Replication
HHI Services

- Operation CHOICES
- Acute Care
- Health Education
- Autism Screening
- Staff Training
- Health Insurance
- Advocacy Projects
- Parenting Skills
- Special Events
- Donations
- Lactation Consultation
- Women's Health
- Developmental Screenings
2009 State Prevalence Among Low-Income Children Aged 2 to 4 Years

Prevalence of Obesity

U.S. children and adolescents aged 2–19

Prevalence of Obesity Among US Adolescents (12-19 years)

Boys

- 1988-1994: 0%, 5%
- 2007-2008: 10%, 15%

Girls

- 1988-1994: 0%, 5%
- 2007-2008: 10%, 15%

White: ●, Black: ■, Mexican American: ▲

Consequences of Childhood Obesity

Children experiencing obesity are more likely to have:

- High blood pressure and high cholesterol
  - Risk factors for cardiovascular disease
- Increased risk of type 2 diabetes
- Breathing problems
  - Sleep apnea
  - Asthma
- Joint problems and musculoskeletal discomfort
- Greater risk of social and psychological problems (e.g., discrimination, poor self-esteem)
- Fatty liver disease
- Gallstones
- Heartburn

Consequences of Childhood Obesity

Later in life –

– More likely to experience obesity as adults
– Obesity in adulthood is likely to be more severe
– Adult obesity is associated with:
  • Heart disease
  • Diabetes
  • Some cancers
– Decreased quality/length of life

Obesity & Homelessness

The New York Children’s Health Project, a program of The Children’s Health Fund, assessed obesity rates among a sample of 520 children experiencing homeless in NYC

Childhood Obesity Rates (2004)

Obesity & Homelessness

Researchers from Johns Hopkins University found a high prevalence of obesity and overweight in homeless Baltimore caregivers (77%) and their children (23%)

Obesity in Adults in the U.S.

- 34.2% overweight
- 33.8% obese*
- 5.7% extremely obese
- Minority and low-income populations have a disproportionate burden of cardiovascular disease

*35.7% (2009-10)


Obesity Trends Among U.S. Adults
BRFSS, 1986

Obesity Trends Among U.S. Adults
BRFSS, 1987

Obesity Trends Among U.S. Adults
BRFSS, 1988

Obesity Trends Among U.S. Adults
BRFSS, 1989

Obesity Trends Among U.S. Adults
BRFSS, 1992

Obesity Trends Among U.S. Adults

BRFSS, 1993

Obesity Trends Among U.S. Adults
BRFSS, 1994

Obesity Trends Among U.S. Adults
BRFSS, 1995

Obesity Trends Among U.S. Adults
BRFSS, 1997

Obesity Trends Among U.S. Adults
BRFSS, 1998

Obesity Trends Among U.S. Adults
BRFSS, 1999

Obesity Trends Among U.S. Adults

BRFSS, 2000

Obesity Trends Among U.S. Adults
BRFSS, 2001

Obesity Trends Among U.S. Adults
BRFSS, 2003

Obesity Trends Among U.S. Adults
BRFSS, 2004

Obesity Trends Among U.S. Adults
BRFSS, 2005

Obesity Trends Among U.S. Adults
BRFSS, 2006

Obesity Trends Among U.S. Adults

BRFSS, 2007

Obesity Trends Among U.S. Adults
BRFSS, 2008

Obesity Trends Among U.S. Adults
BRFSS, 2009

The Operation CHOICES Plan

• Conduct needs assessments & focus groups:
  – Mothers, Children, Staff
  – Readiness to Change
  – Environmental Context
    • Emergency Housing Facility
    • Neighborhood

• Create intervention based on above findings
Focus Group Findings: Children

• Consume high fat, calorie dense foods, especially at school
• Don’t enjoy many meals at the shelter
• Parents make decisions about the food they eat, but children know how to influence parents
• Some familiarity/introduction to nutrition & fitness concepts
• Want to learn more about nutrition & physical fitness with their moms

“Our brain is smarter than our stomach. The brain makes the decision to eat healthy food.”
Focus Group Findings: Mothers

• Do not believe the food being served in shelter is nutritious & balanced
• Not accustomed to food served
• Sneak food into shelter
• When families eat outside the shelter, they usually eat fast food
• Toddlers are served same food/quantity as adults
• Force children to eat or go to bed hungry
• Want to give their children 100% juice
• Want to learn more about nutrition & fitness

“We don’t make any decisions now.”
Focus Group Findings: Mothers

• Barriers:
  – No choice
  – No fresh options
  – Little to no money
  – No access to kitchen
  – Shelter rules
  – When children are sick, moms “can't even go out and get some ginger ale and crackers.”
Shelter Staff Concerns

- Fresh options
- Healthier culture
- Empower families
- Creative meals
- Change menus
Shelter Environment Strengths

- Garden
- Children’s cooking classes
- Community food pantry
- DVAEYC trained education coordinator
- On-site nurse
Shelter Environment Challenges

- Policies
- Menu restrictions
- Stress
- Trauma
- Neighborhood
Ecological Perspective

- Mothers & Children
- Shelter
- Family & Friends
- Neighborhood
- Society
CHOICES

• Created a leadership team
• Recruited volunteers
• Created/piloted nutrition lessons
• Created/piloted fitness lessons
• Advocated on City level
Pilot Project, 2010

• 1 Shelter
• 4 weekly nutrition sessions (moms & children)
  – 2 volunteers
  – 20 participants
• 5 weekly fitness sessions (moms & children)
  – 4 volunteers
  – 52 participants
Nutrition for Moms

• Six week series (1 hour sessions each week)
• FUN, INTERACTIVE!
• Lessons:
  – Basic Food Groups
  – Nutrition Labels & Serving Sizes
  – Vitamins & Minerals
  – Go, Slow, Whoa Foods
  – Health Consequences of Obesity (Hypertension, Diabetes, Cardiovascular Disease)
  – Grocery Shopping
Nutrition for Children

• Six week series (1 hour sessions each week)
• FUN, INTERACTIVE!
• Pre-school Lessons:
  – Being Healthy
  – Fruits
  – Vegetables
  – Milk Builds Strong Bones
  – Healthy Food & Not-so-Healthy Food
  – Making Healthy Meals
• School Age Nutrition Lessons
  – Being Healthy
  – Go, Slow, Whoa Foods
  – Food Pyramid
  – Read it before you eat it
  – Sugar
  – Restaurant
Fitness

• FUN!
• Moms & children, together
• Lessons:
  – Flexibility
  – Strengthening
  – Endurance
  – Balance, Coordination & Agility
• DANCE!
• Yoga
# Impact

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<tr>
<td>52 participants</td>
<td>120 participants</td>
<td>786 participants</td>
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Advocacy

- Families
- Shelter Kitchen Staff
- Health Promotion Council
- Public Health Management Corporation
- Office of Supportive Housing
- Child & Adult Care Food Program
Challenges

• Volunteers
• Consistent Participation
• Coordination with shelter staff
• Program Evaluation
• Navigating Systems
Increasing CHOICES

• Families
  – Increasing physical activity
  – Making & buying healthy snacks

• Shelter
  – Food tastings
  – Food committee
  – Healthy snacks at meetings

• City
  – Menu planning: offering options, more culturally appropriate, more child-friendly
  – Empowering kitchen staff
Everyone wants and deserves CHOICES!
Questions
What created the Success?

• Building relationships
• Being consistent
• Developing cross system collaboration
• Empowering **ALL** stakeholders
Hunger & Homelessness Reflection Questions

• How does homelessness contribute to obesity in families experiencing homelessness?
• How does food insecurity intersect with obesity?
• What is the connection between trauma and obesity?
• Where can you make an impact in addressing the issue of hunger & homelessness?
Developing Your Plan

• Share where your communities are struggling with the issue of hunger & homelessness?

• Identify the level at which you might make an impact
  * families
  * shelter
  * neighborhood
  * society
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