

COPE Webinar Series

COPE Feeding the Need, Developing Solutions Awards: Innovation Showcase  
4/13/22

Presenters:

Dara Dirhan, EdD, MPH, RDN, LDN  
Catherine McManus, PhD, RDN, LD  
Patrick Walsh,  
Eli Wenger  
Olivia Weinstein, MS RD, LDN

Moderators

Lisa Diewald and Mariah Smith

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00:00:10.080 --> 00:00:12.330

Lisa Diewald: Good afternoon, welcome to the April 2022

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00:00:13.590 --> 00:00:25.500

Lisa Diewald: COPE Feeding the Need Developing Solutions Award Innovation Showcase webinar. We're so excited that you joined us today for what promises to be an inspiring and informational sharing session.

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00:00:26.130 --> 00:00:33.870

Lisa Diewald: Today's webinar featuring initiatives spearheaded by our COPE Feeding the Need Developing Solutions award recipients

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00:00:34.200 --> 00:00:43.200

Lisa Diewald: Today is particularly special for COPE because it's the first time we sponsored an award and we feel so honored to have so many wonderful recipients.

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00:00:43.620 --> 00:01:00.660

Lisa Diewald: While this award is part of COPE's 10th anniversary celebration, we hope to make the Feeding the Need Developing Solutions award and annual event that recognizes ingenuity, commitment, service, and action in helping underserved populations or communities in need.

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00:01:02.220 --> 00:01:08.160

Lisa Diewald: During the next hour, we will be honoring our award recipients and hearing about the projects they submitted.

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00:01:09.300 --> 00:01:16.650

Lisa Diewald: Each award recipient will provide a brief project overview and, at the end of the session we will have a few minutes for questions with our panel

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00:01:17.070 --> 00:01:26.820

Lisa Diewald: of award recipients and invite your participation at that time. Feel free during the presentations to use the chat box if you'd like if you feel

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00:01:27.180 --> 00:01:38.100

Lisa Diewald: you'd like to send along a comment or question and use the Q and a box to send in questions specific questions for our panelists that will be answered at the end

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00:01:38.610 --> 00:01:47.490

Lisa Diewald: as time permits. We have about 80 professionals registered for today's webinar and we're so glad you chose to spend the next hour with us.

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00:01:48.000 --> 00:01:57.450

Lisa Diewald: My name is Lisa Diewald and I'm the program manager for the McDonalds Center for Obesity Prevention, Education at Villanova University's Fitzpatrick college of nursing.

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00:01:57.990 --> 00:02:04.860

Lisa Diewald: I have the pleasure of being the moderator for today's webinar. I'm also thrilled to welcome Mariah Smith, who you'll meet later

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00:02:05.340 --> 00:02:14.070

Lisa Diewald: who will be co-moderator. Mariah is a senior at West Chester University, plays on the rugby team, and will be graduating soon with a bachelor's degree in public health.

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00:02:14.760 --> 00:02:21.630

Lisa Diewald: Before we move on to introducing our first award recipient, I will take a minute to review some information about COPE, and the

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00:02:22.230 --> 00:02:34.710

Lisa Diewald: Villanova Fitzpatrick College of Nursing. Villanova University and Louise Fitzpatrick College of Nursing is home to the first college of nursing in the country to have a Center devoted to obesity, prevention and education.

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00:02:35.340 --> 00:02:44.010

Lisa Diewald: COPE's goals are to enhance nursing education and topics related to nutrition, obesity prevention, weight bias, and health promotion strategies.

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00:02:44.490 --> 00:03:02.670

Lisa Diewald: To provide continuing education programs, such as this webinar on obesity and obesity related diseases for health professionals, and educators and also to participate in research to expand and improve evidence-based approaches to obesity, prevention and education in the Community.

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00:03:09.750 --> 00:03:16.620

Lisa Diewald: The objectives of today's webinar are to learn about new nutrition initiatives addressing a variety of needs, including food insecurity,

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00:03:17.130 --> 00:03:33.420

Lisa Diewald: culinary nutrition based diabetes education for adolescents, expanding access to nutrition services, high school resources to enhance the diabetics profession awareness and diversity, and an APP based meal planning tool to reduce chronic disease risk.

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00:03:35.160 --> 00:03:42.630

Lisa Diewald: We also would like to have the opportunity to discuss these initiatives and how their used might be expanded in different populations and communities.

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00:03:44.490 --> 00:03:57.930

Lisa Diewald: If you used your phone to call into the webinar today and want CE credit for attending, please take a moment afterwards to email us at cope@villanova.edu and provide your name, so that we can send you a CE certificate.

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00:04:00.570 --> 00:04:11.220

Lisa Diewald: Villanova University and Louise Fitzpatrick College of Nursing is accredited as a provider of nursing continuing professional development by the American Nurses credentialing centers commission on accreditation.

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00:04:11.730 --> 00:04:22.770

Lisa Diewald: Villanova University College of Nursing, continuing education, COPE, is also continuing professional education CPE accredited provider, with the Commission on dietetic registration.

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00:04:24.330 --> 00:04:34.680

Lisa Diewald: A webinar this month awards one contact our for nurses and one CPEU for dietitians and DTRs. The suggested CDR performance indicators are listed on the slide.

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00:04:35.130 --> 00:04:51.630

Lisa Diewald: And the CDR level of this webinar is to you must attend the entire webinar presentation to receive continuing education credits. While everyone is encouraged to complete a post program evaluation in order to receive contact hours all nurses must complete the evaluation.

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00:04:53.340 --> 00:05:00.510

Lisa Diewald: I wanted to mention that afterwards everyone who has completed the full program will be emailed CE certificate within a week,

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00:05:00.930 --> 00:05:11.160

Lisa Diewald: and as a reminder nurses must complete the evaluation to receive a certificate. We greatly appreciate your feedback on evaluations and we use it on our program planning.

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00:05:12.930 --> 00:05:21.570

Lisa Diewald: While we are preparing for the presentation to begin, I just wanted to mention that neither the planners nor presenters of this webinar have any disclosures to report.

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00:05:22.200 --> 00:05:34.020

Lisa Diewald: Accredited status does not imply endorsement by Villanova University, COPE, or the American nurses credentialing Center of any commercial products or medical nutrition advice displayed in conjunction with an activity.

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00:05:36.600 --> 00:05:42.750

Lisa Diewald: Hope Barkoukis will be joining us on may 18 from 12 to 1pm to present culinary-centric

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00:05:43.380 --> 00:05:49.830

Lisa Diewald: counseling: good, better, and best practices. You are welcome to register for this free webinar on COPE's website.

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00:05:50.160 --> 00:06:00.300

Lisa Diewald: Dr. Barkoukis will help us move from the evidence-base to the kitchen table as we help clients and patients learn about the practical aspects of eating and ways to help treat medical conditions.

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00:06:03.120 --> 00:06:08.850

Lisa Diewald: Okay, and now, without further delay, we will move on to our presentations. Our first

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00:06:09.900 --> 00:06:15.900

Lisa Diewald: presenter is Dara Dirhan. And we're going to bring up here

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00:06:28.500 --> 00:06:29.160

Dara Dirhan

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00:06:30.510 --> 00:06:40.110

Lisa Diewald: EdD, MPH, RD, and LDN is a registered dietitian and associate professor of nutrition at West Chester University of Pennsylvania

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00:06:40.830 --> 00:06:47.460

Lisa Diewald: where she teaches a myriad of courses, such as professional skills and dietetics, and strategies and dietetics, and also

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00:06:47.880 --> 00:06:59.550

Lisa Diewald: The didactic program and dietetic director. In addition to her extensive teaching experience in a variety of settings, she's also been involved in work site wellness and health education programs.

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00:07:00.120 --> 00:07:10.440

Lisa Diewald: Dr. Dirhan earned her EdD in educational leadership and management from Drexel university, her master of public health and bachelor of science in nutrition and diabetics from West Chester university.

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00:07:10.860 --> 00:07:21.750

Lisa Diewald: She has presented professionally numerous times, nationally, internationally, and locally, and is also an author and co-author on multiple peer reviewed journal articles focusing on nutrition,

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00:07:22.260 --> 00:07:32.640

Lisa Diewald: education of health professionals. Dr. Dirhan has a passion for expanding diversity in the dietetic field and will be speaking to us today about innovation addressing that need.

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00:07:34.170 --> 00:07:34.590

Lisa Diewald: Hey.

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00:07:37.260 --> 00:07:47.940

Dara Dirhan, EdD, MPH, RD, LDN: Well, thank you Lisa for that very warm welcome, I appreciate it. Hello everyone it's so nice to be here with all of you today, and I just want to say what a great honor it is to have been chosen

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00:07:48.420 --> 00:08:00.600

Dara Dirhan, EdD, MPH, RD, LDN: for this inaugural feeding the need award through Villanova's COPE Center. Such an honor and I would really like to extend my thanks to the whole COPE team, including Lisa, Rebecca, Louisa, Mariah.

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00:08:01.230 --> 00:08:13.650

Dara Dirhan, EdD, MPH, RD, LDN: You've all been such a pleasure to work with, so thank you very much. So I'm here today to talk about my project that received one of these awards, and it was called the what does a dietitian do video series, and

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00:08:14.250 --> 00:08:18.930

Dara Dirhan, EdD, MPH, RD, LDN: this project really was sparked out of a conversation I was having with

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00:08:19.770 --> 00:08:26.160

Dara Dirhan, EdD, MPH, RD, LDN: The Board of the diversity Task Force, which falls under the Pennsylvania Academy of nutrition and dietetics.

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00:08:26.490 --> 00:08:37.830

Dara Dirhan, EdD, MPH, RD, LDN: And I happen to sit on that board and, one day, we were all talking about how there's really a lack of diversity in the profession and from this, we kind of started talking additionally about how

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00:08:38.400 --> 00:08:47.790

Dara Dirhan, EdD, MPH, RD, LDN: there's not a great awareness among high school students that dietetics exists as first of all, a major in college and then second of all as a career someday.

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00:08:48.660 --> 00:08:52.110

Dara Dirhan, EdD, MPH, RD, LDN: And so that got me really thinking about what we could do about it.

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00:08:52.560 --> 00:09:04.140

Dara Dirhan, EdD, MPH, RD, LDN: And I also hold the role of career guidance coordinator on the board of the Pennsylvania Academy of nutrition and dietetic so I thought that that role was very appropriate for me to take on this

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00:09:04.620 --> 00:09:11.340

Dara Dirhan, EdD, MPH, RD, LDN: project and create a video series called what does a dietitian do to get high school students excited about

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00:09:11.970 --> 00:09:27.750

Dara Dirhan, EdD, MPH, RD, LDN: nutrition to increase awareness about nutrition, being a major in college and a career someday, and I wanted to further target the most diverse young individuals in the State of Pennsylvania, to be recipients of this great video series. So,

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00:09:28.800 --> 00:09:40.320

Dara Dirhan, EdD, MPH, RD, LDN: before I go into a little bit more about the project I first would like to take an opportunity now to thank the Pennsylvania Academy of nutrition and diabetics for their financial support of this project and also

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00:09:40.800 --> 00:09:49.200

Dara Dirhan, EdD, MPH, RD, LDN: The Academy of nutrition and dietetics who so graciously provided us with a diversity and inclusion mini grant to also help fund

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00:09:49.710 --> 00:10:04.890

Dara Dirhan, EdD, MPH, RD, LDN: the project. So what we did for this video series was we recruited 16 registered dietitians in all different specialty areas of practice and from all different backgrounds and diversity

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00:10:05.340 --> 00:10:16.920

Dara Dirhan, EdD, MPH, RD, LDN: And we have the dietitians in this video create three to five minute videos where they first described what a day in the life of a dietitian looks like for them in their particular role.

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00:10:17.430 --> 00:10:28.500

Dara Dirhan, EdD, MPH, RD, LDN: And then we asked them to go into well how does your role as a dietitian serve the Community and what does it mean in your role to outreach to the Community and give back.

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00:10:28.890 --> 00:10:33.720

Dara Dirhan, EdD, MPH, RD, LDN: And then, lastly, we asked her every dietitian in the video series to conclude with

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00:10:34.140 --> 00:10:45.990

Dara Dirhan, EdD, MPH, RD, LDN: encouraging the students and the viewers of the series to visit the academy's website at [eatright.org](http://eatright.org) for more information on finding an accredited nutrition and dietetics program and also

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00:10:46.350 --> 00:10:54.780

Dara Dirhan, EdD, MPH, RD, LDN: encouraging them to become a student member of the Academy, if this sounds like a career that they would be interested in embarking on in the future.

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00:10:56.130 --> 00:11:08.040

Dara Dirhan, EdD, MPH, RD, LDN: So after we gathered all of our videos and we put together this YouTube channel repository video series, what does a dietitian do what we did was we then scoured

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00:11:08.820 --> 00:11:13.440

Dara Dirhan, EdD, MPH, RD, LDN: the Internet for the most diverse high schools within the State of Pennsylvania.

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00:11:13.800 --> 00:11:27.000

Dara Dirhan, EdD, MPH, RD, LDN: And actually there is a list of public schools and they have diversity rankings and it turns out that there are 732 high schools in the State of Pennsylvania that are classified as the most diverse.

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00:11:27.420 --> 00:11:35.100

Dara Dirhan, EdD, MPH, RD, LDN: So we went after all those 732 high schools and we found out, who are the career guidance counselors, who are the

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00:11:35.670 --> 00:11:40.080

Dara Dirhan, EdD, MPH, RD, LDN: career individuals, who are the guidance counselors at those high schools.

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00:11:40.410 --> 00:11:50.820

Dara Dirhan, EdD, MPH, RD, LDN: And we reached out and emailed all of them our video series and encourage them to share this with their students that career days, one on one guidance counseling sessions,

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00:11:51.210 --> 00:11:58.590

Dara Dirhan, EdD, MPH, RD, LDN: And we also offer to be a source of contact and communication for them if they wanted more information, or if they wanted

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00:11:59.520 --> 00:12:12.540

Dara Dirhan, EdD, MPH, RD, LDN: a speaker to come in and talk to their high schoolers more personally over zoom about the field and about having this as a major in a career someday. So actually out of that work I received

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00:12:13.200 --> 00:12:24.690

Dara Dirhan, EdD, MPH, RD, LDN: dozens of emails from guidance counselors and career individuals at these high schools, asking for a more personalized one on one version of that with their high schoolers and I've been

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00:12:25.200 --> 00:12:36.330

Dara Dirhan, EdD, MPH, RD, LDN: gladly engaged in that project as well all spring actually now so that's been a really exciting part of the fruits of this Labor that we have kind of

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00:12:37.260 --> 00:12:49.410

Dara Dirhan, EdD, MPH, RD, LDN: had as a little added bonus here. So ultimately this project again was twofold what we wanted to get out of it. We wanted to number one increase awareness about our field among young people,

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00:12:49.830 --> 00:12:57.540

Dara Dirhan, EdD, MPH, RD, LDN: and number two we wanted to really go after recruiting and retaining diverse individuals into our profession.

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00:12:58.140 --> 00:13:05.790

Dara Dirhan, EdD, MPH, RD, LDN: So without further ado, I would really love it if I have the opportunity now to share with you one of the videos that is 16 and the series

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00:13:06.150 --> 00:13:17.940

Dara Dirhan, EdD, MPH, RD, LDN: And I'm going to go ahead and share my screen, so you all, can have a taste for what the video series looks like and I'm happy to put in the chat after I'm done speaking, the link to the complete video series.

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00:13:18.960 --> 00:13:23.850

Dara Dirhan, EdD, MPH, RD, LDN: Okay, I hope the sound works. Lisa, I'm going to look to you to tell me if the sound works.

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00:13:26.820 --> 00:13:27.060

Good.

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00:13:28.830 --> 00:13:39.120

Dara Dirhan, EdD, MPH, RD, LDN: hello, my name is trudy quarters and i'm a registered dietitian specializing in public health, nutrition, I was introduced to the field of nutrition diabetics in high school.

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00:13:39.720 --> 00:13:48.030

Dara Dirhan, EdD, MPH, RD, LDN: When I had the opportunity to intern at a local hospital there, I had the chance to shadow different doctors and nurses on different floors.

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00:13:48.720 --> 00:13:57.780

Dara Dirhan, EdD, MPH, RD, LDN: I knew that I definitely wanted to work in healthcare, because I love to help people, but during that internship I learned that I did not want to become a nurse or a doctor.

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00:13:58.620 --> 00:14:08.940

Dara Dirhan, EdD, MPH, RD, LDN: So, then, I had the opportunity to shadow the dietitians at the hospital and I remember being so intrigued by the fact they were using food to help their patients, health.

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00:14:09.570 --> 00:14:22.800

Dara Dirhan, EdD, MPH, RD, LDN: Food is something that is so basic because we have to eat to survive, but it's also so special because every time we eat, you have an opportunity to really impact our bodies and our health.

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00:14:24.480 --> 00:14:30.600

Dara Dirhan, EdD, MPH, RD, LDN: Once I decided to study nutrition in college I learned there's so many different things that you can do with nutrition.

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00:14:31.050 --> 00:14:41.100

Dara Dirhan, EdD, MPH, RD, LDN: Obviously you can work in a hospital, but you can also work in a school in a gym you go work at a grocery store and help people pick out their food all their food shopping.

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00:14:41.910 --> 00:14:47.010

Dara Dirhan, EdD, MPH, RD, LDN: You can even work for yourself by having a private practice where patients come to your office and see you.

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00:14:47.400 --> 00:14:53.940

Dara Dirhan, EdD, MPH, RD, LDN: And my time as a dietitian so far I have worked in a school overseeing the breakfast and lunch programs.

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00:14:54.360 --> 00:15:04.380

Dara Dirhan, EdD, MPH, RD, LDN: I have worked in long term care where I help seniors that the nutrition, they need to keep going, and I have worked in a rehabilitation Center.

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00:15:04.890 --> 00:15:11.820

Dara Dirhan, EdD, MPH, RD, LDN: helping those recover from drug and alcohol misuse now I work for the city of Philadelphia department of public health.

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00:15:12.270 --> 00:15:21.300

Dara Dirhan, EdD, MPH, RD, LDN: And I see patients, one on one to discuss their diet and their eating habits and come up with goals and recommendations for them to improve.

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00:15:22.110 --> 00:15:34.590

Dara Dirhan, EdD, MPH, RD, LDN: My typical day for me looks like talking to patients, one on one asking them about their eating habits their diet coming up with goals and recommendations for us to work towards.

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00:15:35.160 --> 00:15:46.890

Dara Dirhan, EdD, MPH, RD, LDN: But there's actually a lot that goes into that besides those things, for one, have to try to build trust with my patients because food is something that is so personal.

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00:15:47.340 --> 00:15:53.220

Dara Dirhan, EdD, MPH, RD, LDN: or eating habits or something so personal and sometimes it can be difficult to talk about those things with the professional.

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00:15:53.790 --> 00:16:04.860

Dara Dirhan, EdD, MPH, RD, LDN: So building that trust is very important, I help patients see if they have access to healthful food options, because there are many people that I work with communities of color.

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00:16:05.220 --> 00:16:14.610

Dara Dirhan, EdD, MPH, RD, LDN: That live in food deserts where they don't have a grocery store nearby or maybe the one that they have doesn't have any quality fruits and vegetables available for them.

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00:16:15.120 --> 00:16:21.360

Dara Dirhan, EdD, MPH, RD, LDN: So looking for different options for them to get different fruits and vegetables, so they can make some healthier choices.

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00:16:22.230 --> 00:16:36.270

Dara Dirhan, EdD, MPH, RD, LDN: I also tried to work collaboratively with patients so i'm not the one telling them what to do, but together we come up with goals that they want to work towards, and together we plan out the steps to reach those goals.

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00:16:37.290 --> 00:16:46.860

Dara Dirhan, EdD, MPH, RD, LDN: I see a lot of patients who have different health conditions like diabetes or high blood pressure and I also see some patients who just want some general nutrition advice.

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00:16:47.490 --> 00:16:54.840

Dara Dirhan, EdD, MPH, RD, LDN: Just a little little bit healthier by being a dietitian working in public health in the city of Philadelphia, I have a unique role.

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00:16:55.410 --> 00:16:59.520

Dara Dirhan, EdD, MPH, RD, LDN: in helping those that I serve redefine what healthy eating looks like for them.

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00:17:00.390 --> 00:17:09.300

Dara Dirhan, EdD, MPH, RD, LDN: Many patients come in, they didn't have any to give up food, so they enjoy or foods that are part of their culture, in order to be healthy, but that's not the case.

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00:17:10.050 --> 00:17:18.270

Dara Dirhan, EdD, MPH, RD, LDN: at all as a dietitian especially working with communities of color is to help my patients and empower them to make healthy eating work for them.

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00:17:18.660 --> 00:17:33.210

Dara Dirhan, EdD, MPH, RD, LDN: in ways that represent their cultural identities, if you think a career interested in diabetics could be for you please visit the Academy of nutrition and diabetics website at [www dot eat right backward](http://www.doteatrightbackward.com).

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00:17:33.930 --> 00:17:41.010

Dara Dirhan, EdD, MPH, RD, LDN: and find an accredited institution inditex program consider becoming a student Member today thanks for watching.

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00:17:53.730 --> 00:17:57.480

Dara Dirhan, EdD, MPH, RD, LDN: Okay, so that just gave you a little taste of

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00:18:00.000 --> 00:18:01.620

Dara Dirhan, EdD, MPH, RD, LDN: Something else is playing sorry.

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00:18:03.150 --> 00:18:13.200

Dara Dirhan, EdD, MPH, RD, LDN: That was just a little taste of the video series. So I hope that you all enjoyed that and I'm happy to put the link to the full, video series in the chat and let me know if you have any questions, thank you.

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00:18:19.080 --> 00:18:31.620

Lisa Diewald: Thank you, Dara for that excellent presentation for really inspiring us to want to make these opportunities available for everyone. So next,

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00:18:32.670 --> 00:18:36.570

Lisa Diewald: we will be introducing Catherine McManus

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00:18:37.770 --> 00:18:40.440

Lisa Diewald: and hearing a little bit about her work.

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00:18:46.350 --> 00:18:48.690

Okay, and Catherine, let me

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00:18:51.600 --> 00:19:03.120

Lisa Diewald: So everyone can see you okay all right so Catherine McManus PhD, RDN, LD is a registered dietitian assistant professor at case Western reserve university

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00:19:03.450 --> 00:19:12.930

Lisa Diewald: and the vice chair for education in the department of nutrition. She earned her MS in nutrition from Case Western Reserve and a PhD in nutrition from the Ohio State University.

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00:19:13.950 --> 00:19:23.220

Lisa Diewald: She is principal investigator on multiple grants and culinary and lifestyle medicine and the groundbreaking use of culinary education in type one diabetes education.

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00:19:23.610 --> 00:19:34.290

Lisa Diewald: And she's also the author or co-author on several peer reviewed journal articles and book chapters on these topics so we're excited to hear from Dr. McManus today about her

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00:19:35.160 --> 00:19:45.510

Lisa Diewald: work with using the kitchen table using culinary education for helping teenagers learn about managing diabetes. Welcome.

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00:19:51.450 --> 00:19:51.900

Lisa Diewald: Nice.

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00:19:55.530 --> 00:20:09.870

Catherine Rogers McManus, PhD, RDN, LD: Thank you Lisa for that kind introduction and thank you for inviting me to be here today. It's really truly an honor to have opportunity to share this innovative approach that I developed on to really helped us with type one diabetes better manage their disease.

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00:20:11.730 --> 00:20:21.450

Catherine Rogers McManus, PhD, RDN, LD: So, as many of you know type one diabetes is a chronic lifelong autoimmune disease and what is really interesting is that really over the past two decades here in the US

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00:20:21.870 --> 00:20:26.460

Catherine Rogers McManus, PhD, RDN, LD: we have seen this steady rise and incidence of type one diabetes.

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00:20:26.910 --> 00:20:37.620

Catherine Rogers McManus, PhD, RDN, LD: And the cause of this steady rise is really yet unknown, which is very, very interesting, a lot of research going in, but we still don't know why we're seeing this trend, here in the US.

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00:20:38.160 --> 00:20:44.400

Catherine Rogers McManus, PhD, RDN, LD: And, although we have had many, many medical and technological advances with type one diabetes care.

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00:20:45.000 --> 00:20:53.100

Catherine Rogers McManus, PhD, RDN, LD: The primary goal with type one diabetes is still management, because we don't yet have a cure for this very all encompassing disease.

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00:20:53.730 --> 00:21:02.250

Catherine Rogers McManus, PhD, RDN, LD: And when we look at management of type one diabetes across the lifespan unfortunately we see our poorest outcomes consistently in youth.

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00:21:02.640 --> 00:21:14.250

Catherine Rogers McManus, PhD, RDN, LD: And, more specifically, among our adolescence. And this is really unfortunate and surprising, and I say it's surprising because there are many, many even endless

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00:21:14.730 --> 00:21:21.750

Catherine Rogers McManus, PhD, RDN, LD: different clinical and community based interventions that have been developed specifically for youth with type one diabetes.

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00:21:22.080 --> 00:21:34.530

Catherine Rogers McManus, PhD, RDN, LD: But what this really shows us is that there is significant room for improvement in this area and really a need for developing innovative and efficacious and sustainable interventions for youth with type one diabetes.

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00:21:35.880 --> 00:21:42.990

Catherine Rogers McManus, PhD, RDN, LD: So when we think about developing these interventions for youth with type one diabetes, we really want to target in on

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00:21:43.290 --> 00:21:49.410

Catherine Rogers McManus, PhD, RDN, LD: a variety of different lifestyle and behavioral factors, because they play such an important role in type one diabetes management.

129

00:21:49.890 --> 00:21:59.070

Catherine Rogers McManus, PhD, RDN, LD: and one that is especially critical to really hone in and intervene on his nutrition and dietary intake.

130

00:21:59.580 --> 00:22:10.290

Catherine Rogers McManus, PhD, RDN, LD: And there's really two big reasons why number one, we know that there is a direct relationship between what we're eating and putting in our mouth and our blood sugar levels for youth with Type one.

131

00:22:10.740 --> 00:22:15.330

Catherine Rogers McManus, PhD, RDN, LD: And also because, when we look at youth with type one diabetes, we actually see

132

00:22:16.260 --> 00:22:31.890

Catherine Rogers McManus, PhD, RDN, LD: increased prevalence rates of disordered eating and eating disorders among this population and we tend to see really sub optimal dietary intakes when we compare youth with type ones dietary intake with their healthy counterparts.

133

00:22:32.550 --> 00:22:39.870

Catherine Rogers McManus, PhD, RDN, LD: So really important to kind of intervene and address this area of nutrition and dietary and take them on this population.

134

00:22:40.620 --> 00:22:52.170

Catherine Rogers McManus, PhD, RDN, LD: And culinary medicine, which is a new evidence based field of medicine and it really involves the integration of food planning, food practice cooking with the science of medicine, really, with the goal of

135

00:22:52.530 --> 00:22:57.300

Catherine Rogers McManus, PhD, RDN, LD: enhancing health and producing more positive health outcomes in various populations.

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00:22:58.050 --> 00:23:06.960

Catherine Rogers McManus, PhD, RDN, LD: It shows a lot of potential with intervening with youth with type one diabetes. And the reason I say that is early culinary medicine interventions

137

00:23:07.770 --> 00:23:13.830

Catherine Rogers McManus, PhD, RDN, LD: have been developed for adults with type two diabetes and they have shown to be very, very effective at producing

138

00:23:14.340 --> 00:23:22.590

Catherine Rogers McManus, PhD, RDN, LD: significant improvements in disease management, as well as dietary intake. And we've also seen culinary medicine interventions for healthy youth

139

00:23:23.040 --> 00:23:31.230

Catherine Rogers McManus, PhD, RDN, LD: improving a variety of different health outcomes. But even though there seems to be this great potential for

140

00:23:31.890 --> 00:23:41.400

Catherine Rogers McManus, PhD, RDN, LD: producing positive health outcomes in youth with type one diabetes, there is a complete absence of culinary medicine interventions for this population.

141

00:23:41.940 --> 00:23:48.900

Catherine Rogers McManus, PhD, RDN, LD: So, for this reason I developed the dice intervention, also known as diabetes inspired culinary education.

142

00:23:49.230 --> 00:24:03.180

Catherine Rogers McManus, PhD, RDN, LD: And it is an innovative and community and family based culinary medicine program that really aims to improve glycemic control and diabetes management behaviors amongst six to 14 year old youth with type one diabetes.

143

00:24:04.890 --> 00:24:16.710

Catherine Rogers McManus, PhD, RDN, LD: So the program itself includes 10 90 minute in person lessons and these lessons are delivered weekly over the dinner hour. You can see in this table picture here in the lower right hand corner of the slide.

144

00:24:17.310 --> 00:24:25.020

Catherine Rogers McManus, PhD, RDN, LD: Each of the 10 lesson topic so each lesson focused in on a specific nutrition and or diet type one diabetes

145

00:24:25.710 --> 00:24:33.240

Catherine Rogers McManus, PhD, RDN, LD: topic, and these have shown in the literature, to be topics that are barriers or challenges to type one diabetes management in youth.

146

00:24:34.020 --> 00:24:40.950

Catherine Rogers McManus, PhD, RDN, LD: So each lesson included three different parts. The first part was a youth and caregiver education, where we separated

147

00:24:41.400 --> 00:24:52.800

Catherine Rogers McManus, PhD, RDN, LD: the children and their caregivers and into different educational settings. So the youth are actually in our culinary kitchen and they were involved in hands on culinary education.

148

00:24:53.070 --> 00:25:03.900

Catherine Rogers McManus, PhD, RDN, LD: With a participating youth every single lesson would learn a new age appropriate culinary skill that week through hands on culinary activities and culinary engagement.

149

00:25:04.620 --> 00:25:12.420

Catherine Rogers McManus, PhD, RDN, LD: And you can see pictures of our our kiddos involved in our pilot study here. At the same time, the caregivers were in a discussion based

150

00:25:13.500 --> 00:25:20.910

Catherine Rogers McManus, PhD, RDN, LD: education educational session with Taylor type one diabetes education that really focused in on the topic of that specific lesson.

151

00:25:21.660 --> 00:25:32.250

Catherine Rogers McManus, PhD, RDN, LD: Then during part two of the program, we brought the families together and we had a family education that involves a very interactive type one diabetes game on the topic of that lesson.

152

00:25:32.700 --> 00:25:40.530

Catherine Rogers McManus, PhD, RDN, LD: We also during every single lesson have a family sit down and plan at least two healthy family meals for the upcoming week.

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00:25:40.860 --> 00:25:48.270

Catherine Rogers McManus, PhD, RDN, LD: And the reason we did this, is that parents consistently report that one of the biggest challenges to home cooking and eating at home as a family

154

00:25:48.600 --> 00:25:53.640

Catherine Rogers McManus, PhD, RDN, LD: Is that they don't have time and their children will not eat the foods that they prepare.

155

00:25:54.210 --> 00:26:08.370

Catherine Rogers McManus, PhD, RDN, LD: But what we've seen in the literature is that when kids are involved in cooking, which is why we're engaging them in that that hands on food prep as well as the planning of meals it significantly increases the likelihood of them actually eating those meals.

156

00:26:09.690 --> 00:26:21.810

Catherine Rogers McManus, PhD, RDN, LD: So, then, for the third part after we had that family, education and the family meal planning, we then would sit down in a dining setting together and the families would actually sit down and enjoy a group family meal together.

157

00:26:22.290 --> 00:26:32.460

Catherine Rogers McManus, PhD, RDN, LD: And the meal that would be enjoyed is actually the was the foods that they use had prepared during part one of the program so it kids were very proud to be serving the

158

00:26:32.910 --> 00:26:43.020

Catherine Rogers McManus, PhD, RDN, LD: their parents, the foods that they had prepared, and we really worked hard to establish a positive mealtime environment because we seen families with type one diabetes family. The family feeling

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00:26:43.710 --> 00:26:51.180

Catherine Rogers McManus, PhD, RDN, LD: meal environment can be very, very stressful and a point of a lot of contention in the family, so we try to establish helpful,

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00:26:51.840 --> 00:27:09.240

Catherine Rogers McManus, PhD, RDN, LD: mealtime behaviors, a positive healthy meal environment, and then at the conclusion of the meal, we would provide families with take home resources. So we would provide them with really pantry staples recipes as well as kitchen resources such as whisks, cutting boards,

161

00:27:10.440 --> 00:27:19.110

Catherine Rogers McManus, PhD, RDN, LD: kid friendly knives, to really overcome this as potentially being a barrier to cooking at home because we've seen it is often a big barrier for a lot of families.

162

00:27:20.700 --> 00:27:34.260

Catherine Rogers McManus, PhD, RDN, LD: And here are a few pictures of the part one of our session, where the kids were involved in a culinary hands on education. Just so you know, we do have media release and consent to pictures of all of our participants.

163

00:27:34.890 --> 00:27:49.140

Catherine Rogers McManus, PhD, RDN, LD: This was the same part one, but this is the caregiver education. So you can see, was very discussion based led by a registered dietitian and a Co taught by a dietetic intern some of the educational handouts, we developed for this caregiver education piece.

164

00:27:54.090 --> 00:27:56.850

Catherine Rogers McManus, PhD, RDN, LD: Yes, sorry one, second, I think the slides got.

165

00:27:58.170 --> 00:27:58.530

Catherine Rogers McManus, PhD, RDN, LD: back.

166

00:27:59.820 --> 00:28:07.080

Catherine Rogers McManus, PhD, RDN, LD: Here we go, so this is our our second component, where we had the family, education, where we were doing again we focused in on the lesson

167

00:28:07.410 --> 00:28:15.270

Catherine Rogers McManus, PhD, RDN, LD: topic every single lesson and had the kids really, really interactively involved in a variety of different type one diabetes and nutrition games.

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00:28:15.990 --> 00:28:23.550

Catherine Rogers McManus, PhD, RDN, LD: And then the last component was the group family meal again, where the family sat down and then actually enjoyed that meal that was prepared by the participating families.

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00:28:25.620 --> 00:28:34.890

Catherine Rogers McManus, PhD, RDN, LD: So in addition to having these in person lessons we also had a virtual component, which was a private Facebook page that had asynchronous virtual engagement.

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00:28:35.160 --> 00:28:42.930

Catherine Rogers McManus, PhD, RDN, LD: We would post daily recipes, we would have discussions, and activities to really help build a sense of community among our participants.

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00:28:43.200 --> 00:28:54.030

Catherine Rogers McManus, PhD, RDN, LD: As well as to provide an equip them with these essential resources for managing type one diabetes and improving its management, as well as the dietary intake. So the

172

00:28:55.020 --> 00:29:01.740

Catherine Rogers McManus, PhD, RDN, LD: feasibility and effectiveness of this program was assessed in a pilot study using a one group predisposed test design.

173

00:29:02.160 --> 00:29:10.230

Catherine Rogers McManus, PhD, RDN, LD: The intervention was implemented in a Community teaching kitchen at a local grocery store and it was implemented, as I said earlier, to six to 14 year old youth.

174

00:29:10.590 --> 00:29:18.990

Catherine Rogers McManus, PhD, RDN, LD: And we specifically targeted youth that had been diagnosed with type one diabetes within five years because we see that this is the

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00:29:19.590 --> 00:29:24.450

Catherine Rogers McManus, PhD, RDN, LD: timeframe that these families and youth really need the most intervention and help.

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00:29:25.170 --> 00:29:32.040

Catherine Rogers McManus, PhD, RDN, LD: As they said the program was delivered by a registered dietitian and assisted by dietetic interns and graduate and undergraduate students.

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00:29:32.490 --> 00:29:41.670

Catherine Rogers McManus, PhD, RDN, LD: And from this pilot study we were very fortunate in that we enrolled a very, very diverse sample with regards to race, sex and socio economic status.

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00:29:42.060 --> 00:29:49.170

Catherine Rogers McManus, PhD, RDN, LD: And we demonstrated from this pilot study that this program had very, very high program feasibility, accessibility, as well as retention.

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00:29:49.650 --> 00:30:00.210

Catherine Rogers McManus, PhD, RDN, LD: And among our participants, we saw actually significant improvements over the course of this three month study we saw significant improvements in child BMI we saw significant

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00:30:00.780 --> 00:30:10.140

Catherine Rogers McManus, PhD, RDN, LD: increase in caregiver self efficacy for healthy meal time behaviors as well as family engagement in home food preparation and cooking which was very, very encouraging.

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00:30:10.650 --> 00:30:22.350

Catherine Rogers McManus, PhD, RDN, LD: And really leads us to the next steps of this study. So we took a really informative quantitative and qualitative data that we gathered from the pilot study, where we really learned that

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00:30:23.460 --> 00:30:37.320

Catherine Rogers McManus, PhD, RDN, LD: there's a a subset of population that is really in most need of this type of programming, and that is our high risk youth with type one diabetes. And this high risk population were youth

183

00:30:37.920 --> 00:30:51.690

Catherine Rogers McManus, PhD, RDN, LD: racial ethnic minority or who came from low socio economic status households and we really saw that they were the most in need for this programming and they also benefited the most from this culinary medicine programming.

184

00:30:52.290 --> 00:31:03.570

Catherine Rogers McManus, PhD, RDN, LD: So what we did was we modified the original curriculum and the program will have logistics to really address the needs and the barriers that this subpopulation really faces.

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00:31:03.930 --> 00:31:12.600

Catherine Rogers McManus, PhD, RDN, LD: And then we will be assessing the efficacy in the sustainability of this modified dice program in an upcoming weightless randomized controlled study.

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00:31:13.020 --> 00:31:20.310

Catherine Rogers McManus, PhD, RDN, LD: Really, to determine its ability to increase health equity by really mitigating a lot of these unfortunate and undo

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00:31:20.790 --> 00:31:27.330

Catherine Rogers McManus, PhD, RDN, LD: Racial ethnic and socio economic disparities that really exist in the treatment and care of youth with type one diabetes.

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00:31:27.720 --> 00:31:41.010

Catherine Rogers McManus, PhD, RDN, LD: By providing really this culturally tailored and responsive intervention that is specifically designed so that it can be very easily incorporated and integrated into a coordinated health care model.

189

00:31:44.100 --> 00:31:51.780

Catherine Rogers McManus, PhD, RDN, LD: So thank you for your time and I would love to take any questions you have either through the chat or at the conclusion of everyone's presentation.

190

00:31:56.130 --> 00:32:11.520

Lisa Diewald: Thank you, Catherine, that was excellent. I especially liked your emphasis on community, and family, and practical hands on ways to improve diabetes management. So thank you appreciate that.

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00:32:14.040 --> 00:32:24.780

Lisa Diewald: Okay, we are going to move on. At this point to welcome Patrick Walsh and Eli Wenger, and my co moderator.

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00:32:26.220 --> 00:32:33.000

Lisa Diewald: who is on deck Mariah Smith will be welcoming them. I'm going to

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00:32:36.000 --> 00:32:38.400

Lisa Diewald: Ask Mariah to introduce

194

00:32:40.170 --> 00:32:41.190

Lisa Diewald: Patrick and Eli.

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00:32:42.030 --> 00:32:42.900

Mariah Smith: Thank you Lisa.

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00:32:44.550 --> 00:32:51.420

Mariah Smith: Patrick Walsh is the director of programs at Martha's Choice Marketplace. He is a former middle school educator.

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00:32:51.780 --> 00:33:01.230

Mariah Smith: Eli Wenger, is a director of operations at Martha's Choice Marketplace. Eli is a former business owner, entrepreneur, and an in artists.

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00:33:01.590 --> 00:33:04.860

Mariah Smith: Patrick and Eli have been operating Martha's for six years now.

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00:33:05.340 --> 00:33:13.950

Mariah Smith: Martha's Choice Marketplace is the largest food pantry in Montgomery county where they serve over 1000 families a month and about 3500 individuals.

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00:33:14.370 --> 00:33:22.530

Mariah Smith: Martha's is currently expanding and finding more ways to help the community of Norristown. Martha strives to build Community through access to healthy food.

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00:33:22.950 --> 00:33:30.150

Mariah Smith: Also, building relationships with all their clients. Patrick and Eli are here to explain more about their work and what they have in store.

202

00:33:34.020 --> 00:33:34.470

Patrick Walsh: Hello.

203

00:33:35.850 --> 00:33:38.130

Patrick Walsh: Thank you so much for for having us here. I'm Patrick. I'm Eli.

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00:33:40.740 --> 00:33:46.770

Patrick Walsh: We really appreciate the honor of being able to be with all of you and to share

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00:33:47.790 --> 00:34:02.760

Patrick Walsh: an environment of so many amazing people. It's been really inspiring to listen to the work that you guys have been doing and it's also been inspiring to work with Mariah. So thank you so much Lisa to be

206

00:34:03.750 --> 00:34:11.070

Patrick Walsh: making Mariah available to organization to help us do better for our Community. We appreciate it.

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00:34:12.810 --> 00:34:25.530

Patrick Walsh: So Martha's Choice Marketplace is the food pantry that we run the largest to Montgomery county. Since the start of the pandemic we've distributed a little over 3 million pounds of food to approximately 7000 families.

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00:34:26.910 --> 00:34:35.610

Patrick Walsh: And we try to provide a focus on fresh food, meats, dairy things like that are good for the families that we serve.

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00:34:37.650 --> 00:34:43.350

Patrick Walsh: Prior to the pandemic, it was a choice model which for those unfamiliar basically except with the grocery store

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00:34:44.070 --> 00:34:54.360

Patrick Walsh: where clients can come through and shop for the things that they and their families prefer with COVID and sort of having to sort of transition to a no touch drive through operation some of that choice has been lost.

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00:34:55.560 --> 00:35:03.810

Patrick Walsh: But we are working with online ordering and some other methods to kind of bring both the dignity of the choice model, as well as,

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00:35:04.530 --> 00:35:22.440

Patrick Walsh: simply the choice itself. which allows families to choose the things that they have their families prefer back to our operations. And being able to to kind of be coming out of COVID and being able to return to some of our our pre emergency operation

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00:35:23.610 --> 00:35:27.150

Patrick Walsh: has been really important to us as was shared earlier in

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00:35:28.560 --> 00:35:29.610

Patrick Walsh: the first video.

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00:35:32.100 --> 00:35:42.660

Patrick Walsh: The student now dietitian who was sharing about working with their patients. It was mentioned the importance of trust building and we've certainly found

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00:35:43.440 --> 00:35:54.120

Patrick Walsh: At Martha's that the trust building is a large part of our work. We're always continuing to figure out how to how to find more healthy food and make that available to people

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00:35:55.080 --> 00:36:09.510

Patrick Walsh: But I think that the real outcomes that we want, which are you know, food security, community health, positive relationships between all the different members of our community that intersect at Martha's Choice Marketplace.

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00:36:10.890 --> 00:36:19.170

Patrick Walsh: Trust is the first step towards towards providing the best quality service that's going to achieve that that's going to achieve hopefully and people

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00:36:19.890 --> 00:36:31.620

Patrick Walsh: choosing more healthy things because we can have a dialogue about what those needs are and and what what nutritious foods might be preferable to them. We serve clients from lots of different

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00:36:33.510 --> 00:36:40.110

Patrick Walsh: culinary traditions. We have a really large Spanish speaking population. Immigrant communities from all over Latin America.

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00:36:41.490 --> 00:36:54.600

Patrick Walsh: As well as people lots of other culinary traditions. And so we're trying our best to understand about our clients needs that's always been a really important part, and it used to be that we did that just talking one on one with people.

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00:36:56.280 --> 00:37:03.780

Patrick Walsh: Day in and day out over the course of years and we would we would ingest a lot of that information we gave we gave out surveys and we got responses.

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00:37:05.130 --> 00:37:06.630

Patrick Walsh: But, but now

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00:37:07.860 --> 00:37:15.360

Patrick Walsh: kind of having transition to a drive through model we've been having to be really intentional about how we maintain those relationships and how we invite

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00:37:15.930 --> 00:37:21.810

Patrick Walsh: hat information. So we still do one on one conversations with a lot of people through through car windows.

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00:37:22.500 --> 00:37:33.240

Patrick Walsh: But one of the methods that we've been using recently to be able to gather information, so we can better serve our clients is a health survey that we've developed with with Mariah

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00:37:33.900 --> 00:37:45.150

Patrick Walsh: which has been really, really helpful, so we again are super grateful said so Lisa and Mariah for helping put all that together there's a great deal of work and

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00:37:45.870 --> 00:38:04.560

Patrick Walsh: and resulted in a heck of a lot of outcomes. You want to talk about that success a little bit. So um we started as a texting service, I guess, about six months ago, with the intention of trying to kind of um a little being able to speak to people as often and as as as I don't know

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00:38:05.610 --> 00:38:12.810

Patrick Walsh: personally as we were able to in the past, a texting service came to our attention and we utilize it we signed up

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00:38:13.260 --> 00:38:21.480

Patrick Walsh: over 1000 of our clients to that service would allows for is for us to make you know broad texting available, where, if we want to you know

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00:38:22.050 --> 00:38:27.360

Patrick Walsh: there's a snow closure, for example, we can send it out to everybody, and everyone knows we're close but also we can have one way

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00:38:28.290 --> 00:38:34.950

Patrick Walsh: More kind of intimate kind of conversations with people where they they can express maybe their their their real needs and your struggles privately

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00:38:35.790 --> 00:38:43.200

Patrick Walsh: without necessarily being you know overheard or anything like that, and what it's allowed us to do is to really kind of maintain

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00:38:44.010 --> 00:38:52.080

Patrick Walsh: those relationships and and you know that that trust that comes over time and, and you know, Patrick and I've been doing this for six years together.

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00:38:52.590 --> 00:38:59.160

Patrick Walsh: So over the course of six years we've gotten to know folks that we serve and they and they come to us with constructive criticism as opposed to

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00:39:00.060 --> 00:39:09.600

Patrick Walsh: oftentimes in the moment complaints. You know when you don't get to know someone sometimes people will complain about something and it might be very legitimate but it, it might not be taken with the

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00:39:10.290 --> 00:39:16.440

Patrick Walsh: the seriousness that it ought to be because it's in the form of a complaint, as opposed to like a real dialogue where we understand

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00:39:16.920 --> 00:39:22.440

Patrick Walsh: you know what's really behind it and how we can really kind of change and and how we can work together to bring about that change.

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00:39:22.920 --> 00:39:30.810

Patrick Walsh: So we started texting service and Mariah put together a survey that we were able to kind of let our clients know hey this is coming so

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00:39:31.380 --> 00:39:41.010

Patrick Walsh: it wasn't sort of sprung on them at you know, a moment's notice it was hey next week we're sending out a survey hey three days from now we're sending out a survey hey everybody tomorrow we're sending out the survey, please click the link and take it.

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00:39:41.310 --> 00:39:57.690

Patrick Walsh: And, as a result, we got more than 25% response over 1000 clients that we sent the link out to over 250 follow the link and completed the survey, which is awesome that was way better than we'd even hoped.

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00:39:58.710 --> 00:40:04.830

Patrick Walsh: And so Mariah she can maybe speak to it at some point I'm not sure if that's part of the agenda but

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00:40:05.820 --> 00:40:11.370

Patrick Walsh: we're able to kind of put together some some questions to kind of gauge the health of the folks that we serve,

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00:40:11.790 --> 00:40:17.880

Patrick Walsh: their needs, what they're doing about their health, what their needs are regarding specific you know aspects of their health.

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00:40:18.750 --> 00:40:29.550

Patrick Walsh: And then we can work to kind of address our programs to those needs, and then, once we've now also established that process, and they know it can be trusted we can do additional surveys

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00:40:30.000 --> 00:40:39.420

Patrick Walsh: down the road about more specific aspects of our programming that can again help us to make the changes in our programming that meets their needs.

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00:40:40.110 --> 00:40:51.840

Patrick Walsh: Our next survey will be in questions around an invitation to come out and grow food with us on our farm. So that's been the other exciting progression over the past two years. One being

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00:40:53.430 --> 00:41:00.690

Patrick Walsh: moving to a drive thru model where we double the food in a fraction of the time and we're working on fine tuning that and then

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00:41:01.110 --> 00:41:16.740

Patrick Walsh: Expanding over to to having a farm where our clients can come and grow food with us on the farm we're really excited about that and, certainly, I think that would that would encourage and expand interest in eating fresh locally grown produce.

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00:41:17.880 --> 00:41:25.530

Patrick Walsh: We've got we're going to have educational workshops to tell a quick people with knowledge about about gardening and

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00:41:26.340 --> 00:41:39.180

Patrick Walsh: and hopefully as much as people are willing to incorporate our clients into the planning and execution of of our farm we got about 5000 pounds out of it last year, where we we really just started

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00:41:39.750 --> 00:41:53.040

Patrick Walsh: in March. We learned how to farm between March and April, and last year and then those of you wondering it's really easy to fall yeah it's just it's really bad there's not a lot of variables.

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00:41:54.930 --> 00:41:55.410

Patrick Walsh: So.

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00:41:56.430 --> 00:42:08.820

Patrick Walsh: We actually have a farm manager over there was doing this full time who's done amazing work getting all that food out of the ground and learning about building a farm infrastructure and in 30 days and

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00:42:10.140 --> 00:42:18.990

Patrick Walsh: and going through our first summer growing season. And this season we've we've got an entire spring planting that's that's already been done for a lot of the cold weather

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00:42:19.770 --> 00:42:30.120

Patrick Walsh: spring vegetables and and we're we're we're looking forward to when we when we put this survey out again thank you guys, by the way, Mariah and Lisa for for helping us with all of that.

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00:42:31.560 --> 00:42:39.060

Patrick Walsh: We are really excited to see what the you know, on on paper interest is from people, although we certainly have had plenty of

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00:42:41.880 --> 00:42:49.350

Patrick Walsh: volunteer participation last year and already people have been reaching out so we're excited to see where that goes and certainly will move us towards

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00:42:50.940 --> 00:43:00.000

Patrick Walsh: offering our community, not only just healthy food and not only just the opportunity to build relationships from from people from all over

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00:43:00.990 --> 00:43:15.720

Patrick Walsh: many different backgrounds, but also to also to be able to grow food with us and get some food that's that's grown directly in their own community. And a key component is also there's a lot of things that we're able to access fresh food wise

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00:43:16.740 --> 00:43:17.490

Patrick Walsh: But you know

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00:43:18.780 --> 00:43:26.400

Patrick Walsh: Pre and post pandemic our Spanish speaking clientele went from about 30% to over 60% and so there's a lot of

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00:43:27.420 --> 00:43:34.020

Patrick Walsh: produce that were not able to access that as part of their culinary tradition, and we want to be able to grow that food.

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00:43:34.710 --> 00:43:46.260

Patrick Walsh: So, in terms of like the texting surveys that Mariah is helping us put together, one of the key components is asking these folks what you know what is part of your culinary tradition that we are not providing you.

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00:43:47.040 --> 00:43:55.080

Patrick Walsh: Things like tomatoes, peppers, cilantro, we can find these things out now and grow them at the farm and be able to better meet their needs.

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00:43:55.500 --> 00:44:04.200

Patrick Walsh: Yeah and we're finding that there are things I think that members of that community would like to grow that we don't even know about and we'd be excited if they would help us learn how to grow them.

267

00:44:05.730 --> 00:44:16.770

Patrick Walsh: You know mend our knowledge of the crops that we can grow there so we're very excited to see what that ends up looking like with the inclusion of some of those things. And Mariah I'll be sending you the new survey later on today.

268

00:44:18.420 --> 00:44:22.740

Patrick Walsh: Yeah I mean maybe you could like upload the whole thing you know tonight.

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00:44:26.340 --> 00:44:26.700

Mariah Smith: Today.

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00:44:27.630 --> 00:44:28.440

Patrick Walsh: No pressure, no pressure.

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00:44:29.670 --> 00:44:34.980

Patrick Walsh: But yeah so so that's that's some of the work that we've been doing and some of the things that we're looking forward to we really

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00:44:35.430 --> 00:44:46.980

Patrick Walsh: appreciate this opportunity to share with you and and to learn from from everything you, you were mentioning I I feel like we're already getting a lot of a lot of ideas, now I want to do a family cooking workshop so that's very exciting.

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00:44:48.300 --> 00:44:57.090

Lisa Diewald: That's that's actually what this is all about. It's our dream that there will be some idea generation and some collaboration that comes out of this.

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00:44:57.870 --> 00:45:08.370

Lisa Diewald: You may not know each other before now. Some of us may not know of the work that others have done, but collaboration really makes it makes it possible for us to kind of

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00:45:10.320 --> 00:45:16.890

Lisa Diewald: work in the garden together. So thank you Patrick and Eli. And Mariah, you want to take it from here.

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00:45:20.940 --> 00:45:25.500

Mariah Smith: I want to introduc our next speaker her name is Olivia Weinstein.

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00:45:26.850 --> 00:45:39.600

Mariah Smith: Olivia Weinstein, MS, RD, LDN is a registered dietitian in the culinary nutrition director at Boston Medical Center. She is also CEO and co-founder of the app Pursuit By You.

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00:45:40.140 --> 00:45:51.150

Mariah Smith: Olivia attended Framingham state college to receive her masters to become a registered dietitian. She specializes in culinary nutrition and promote nutrition counseling with culinary interventions.

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00:45:51.570 --> 00:45:58.020

Mariah Smith: Her research is geared to find the disconnect between what individuals may learn versus what they implement in a home setting.

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00:45:58.410 --> 00:46:09.780

Mariah Smith: Olivia has spent many years of experience in helping people manage and prevent chronic diseases. She's here to discuss her app Pursuit By You which she has created for people at home to make healthy decisions.

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00:46:12.720 --> 00:46:21.060

Olivia Weinstein, MS, RD: Mariah thank you so much for that warm introduction. Thank you COPE for having us and I want to thank Ben Franklin technology partners

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00:46:21.750 --> 00:46:30.660

Olivia Weinstein, MS, RD: who helped fund our APP. so I'm going to talk a little bit about my role, why I created the APP, and then I'm going to actually DEMO it which I'm really excited about.

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00:46:31.410 --> 00:46:42.390

Olivia Weinstein, MS, RD: So, like Mariah said I run a teaching kitchen in Boston during that pandemic we pivoted to a virtual model. And so I actually live now in Pennsylvania and

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00:46:43.380 --> 00:46:51.720

Olivia Weinstein, MS, RD: I've noticed a few different barriers in our teaching kitchen. So the way our teaching kitchen works is a physical teaching kitchens base in the hospital

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00:46:51.870 --> 00:47:00.960

Olivia Weinstein, MS, RD: where doctors prescribe cooking classes to patients to help manage a variety of different diseases. We also have a therapeutic food pantry which also works as a prescription.

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00:47:01.890 --> 00:47:12.660

Olivia Weinstein, MS, RD: And in my years of leading this program I've noticed a few things. The first one is it's not very scalable so we have classes of about five to 10 patients at a time.

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00:47:13.680 --> 00:47:23.670

Olivia Weinstein, MS, RD: Whereas we serve you know, thousands of patients in our hospital, and then the classes themselves have really small interventions, maybe four class series, six class

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00:47:24.930 --> 00:47:39.090

Olivia Weinstein, MS, RD: series and, as we know, for any behavioral intervention for it to be effective, there needs to be consistency, there needs to be practice, and so we don't always see outcomes with short interventions like a four part series cooking demonstration

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00:47:39.720 --> 00:47:50.400

Olivia Weinstein, MS, RD: or even experiential learning like cooking at home. So that was the first thing was scalability so number of patients are but then also how many times, a person could practice the skills. The second problem

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00:47:50.880 --> 00:47:59.430

Olivia Weinstein, MS, RD: was we serve a very diverse population were the largest safety net hospital in New England, and for that reason we do serve many different

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00:47:59.730 --> 00:48:10.980

Olivia Weinstein, MS, RD: patient populations from many different ethnic backgrounds. And so in one class I would present a recipe that would maybe speak to some patients but not others. So this need for culturally sensitive

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00:48:11.550 --> 00:48:21.540

Olivia Weinstein, MS, RD: nutrition recommendations or even classes, we teach in the teaching kitchen and then also socio economic considerations, so food access issues. So that was the second problem.

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00:48:21.810 --> 00:48:35.010

Olivia Weinstein, MS, RD: And the third problem was assessment. So I would believe people would come to classes be motivated learn skills and go home and do it, but I had no way of assessing it and so it's really hard with any sort of

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00:48:35.340 --> 00:48:41.820

Olivia Weinstein, MS, RD: interventional behavioral mechanism, like a teaching kitchen to understand your impact and are you asking people to do more work

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00:48:42.030 --> 00:48:53.550

Olivia Weinstein, MS, RD: and not being able to actually measure how effective it is, and so we did have surveys, but I wanted something more. So I set out to build a mobile application to really address those three functions. And so I'm going to go through the APP

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00:48:54.810 --> 00:49:04.410

Olivia Weinstein, MS, RD: talk about the functions and how they relate to those problems. I am going to do it on a different screen so bear with me as I make this transition.

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00:49:20.850 --> 00:49:22.830

Olivia Weinstein, MS, RD: Alright, you should be able to see it.

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00:49:26.100 --> 00:49:33.120

Olivia Weinstein, MS, RD: And so, this is a recipe on Pursuit APP will go through the whole recipe library, but I wanted it up ahead of time.

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00:49:34.260 --> 00:49:36.810

Olivia Weinstein, MS, RD: Just so we could go through a pretty quickly. So

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00:49:37.140 --> 00:49:43.980

Olivia Weinstein, MS, RD: every recipe is rated based on cognitive demand. So how much mental energy is needed for a person to complete the recipe.

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00:49:44.190 --> 00:49:56.130

Olivia Weinstein, MS, RD: And so, by organizing recipes this way we can accommodate what a person needs. If they just need a quick microwave recipe there's a recipe for that or if they're interested in developing more skills there's recipes for that.

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00:49:57.030 --> 00:50:03.420

Olivia Weinstein, MS, RD: Um the next bit is this dynamic recipe. So every recipe can be adapted for family size.

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00:50:04.080 --> 00:50:12.870

Olivia Weinstein, MS, RD: You can change out the protein which actually changes your ingredients and the recipe itself which I'll show you so we're going to you know let's do tofu.

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00:50:13.260 --> 00:50:20.850

Olivia Weinstein, MS, RD: And then we can change out the ingredients within the recipe, so the protein and then the other ingredients. And this is important for

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00:50:21.480 --> 00:50:23.190

Olivia Weinstein, MS, RD: basically foods that are preferred

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00:50:23.460 --> 00:50:35.610

Olivia Weinstein, MS, RD: And foods that are accessible. So rather than me deciding what a person should cook with they can decide for themselves what they have access to, or the types of foods that they like to eat. So if I don't like bell peppers or I don't have a bell pepper maybe I'll use carrots.

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00:50:36.660 --> 00:50:53.580

Olivia Weinstein, MS, RD: And so, one area is one area of interest for us is building this out to connect to local food pantries to be able to predict what pantries have in store and then generate recipes based on availability so that's one future goal of just this recipe swap it. So then we start cooking.

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00:50:55.260 --> 00:51:06.390

Olivia Weinstein, MS, RD: And every level or every skill or step here is its own micro scale and so on the back end we're measuring how many times, a person is exposed to one cooking micro skill. So this is

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00:51:06.690 --> 00:51:15.360

Olivia Weinstein, MS, RD: cook the rice so every time you cook rice it's the same video it's the same language, and we have this what we call the pursuit button, which is the bottom on the bottom left

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00:51:15.690 --> 00:51:26.160

Olivia Weinstein, MS, RD: And this is, step by step instructions in the video how to do it. And so on the back end we're measuring how many times a person would watch the video before they see cook rice and just know how to cook rice.

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00:51:26.430 --> 00:51:33.420

Olivia Weinstein, MS, RD: And then, our predictions are that we can use that mastery of skill to help inform meal planning, later on. So based on

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00:51:34.200 --> 00:51:47.310

Olivia Weinstein, MS, RD: skills a person's already accomplished, can we make menu planning easier, or are they interested in learning new skills, can we pull new micro skill. So every step is like that and you go through pursue this way.

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00:51:48.420 --> 00:51:50.340

Olivia Weinstein, MS, RD: And then, once you finish

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00:51:52.110 --> 00:51:58.710

Olivia Weinstein, MS, RD: it goes into a composite score of number of recipes practice. And so this is the recipe library.

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00:51:58.980 --> 00:52:08.280

Olivia Weinstein, MS, RD: And so today what exists is what you see, and we are piloting it at YMCAs across Pennsylvania and Boston. We also have one study within a hospital

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00:52:08.670 --> 00:52:19.440

Olivia Weinstein, MS, RD: that just finished. That we're analyzing our data. And we're looking to see if we can measure mastery of skill, if we can better adapt recipes to the foods people have or prefer.

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00:52:19.800 --> 00:52:24.570

Olivia Weinstein, MS, RD: And then the big question is, can you impact health. And so that's where the research is really coming in.

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00:52:24.930 --> 00:52:38.850

Olivia Weinstein, MS, RD: And then, based on this user data we're building machine learning models to help with prediction. So if a person answers a few questions in the beginning, can we set them up with a meal plan that is feasible, that they like and that they can grow into new skills.

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00:52:40.590 --> 00:52:49.650

Olivia Weinstein, MS, RD: So I want to be mindful of the time I, I know I think there's one more speaker potentially and then question, so I don't want to keep rambling but that's my quick DEMO.

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00:53:06.600 --> 00:53:13.260

Lisa Diewald: Thank you Olivia that was fantastic. You know the words to kind of come to mind to me are respect, dignity,

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00:53:13.860 --> 00:53:31.890

Lisa Diewald: cultural sensitivity, and powering skill acquisition. This is a common thread I'm seeing throughout all of your presentations today and it's just so inspiring so so thank you so much for that wonderful presentation. I did want to

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00:53:33.120 --> 00:53:45.210

Lisa Diewald: let you know that, unfortunately, Nicole Chenard has a conflict and is not able to present today, but I did want to read a little bit about her and and her work.

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00:53:45.840 --> 00:53:54.930

Lisa Diewald: Nicole is a registered dietitian and licensed dietitian nutritionist in Massachusetts and Florida. She has an extensive background in health and wellness coaching.

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00:53:55.260 --> 00:54:00.240

Lisa Diewald: she's a former competitive college athlete and founded Major League Nutrition several years ago.

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00:54:00.840 --> 00:54:07.290

Lisa Diewald: She consults with all levels of athletes from high school through professional levels. Works on a variety of research teams, including

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00:54:07.800 --> 00:54:17.010

Lisa Diewald: at tufts university and Dana Farber Cancer Institute. She's also active in the food is medicine coalition in Massachusetts.

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00:54:17.340 --> 00:54:24.660

Lisa Diewald: And advocated and continues to advocate for improving access to nutrition services and nutrition education.

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00:54:25.110 --> 00:54:33.480

Lisa Diewald: She earned her BS degree in nutrition and diabetics from Simmons college and her MS in nutrition and fitness from Northeastern University. And we were just very

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00:54:33.840 --> 00:54:44.130

Lisa Diewald: impressed by Nicole's ability to partner with the Food is Medicine Coalition provider coalition and get the word out that there are services

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00:54:44.550 --> 00:55:01.500

Lisa Diewald: for nutrition services for accessing food available and but it required a little bit of a little bit of work to make that help that message get out so we thank Nicole, for her her contributions.

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00:55:03.150 --> 00:55:24.540

Lisa Diewald: Okay, at this point, I think we will, for the last couple minutes, we will bring everybody back. So if you wouldn't mind putting your videos back on everyone is, I know that Derek Duran had to had to leave for another commitment. So

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00:55:25.650 --> 00:55:32.640

Lisa Diewald: thank you, thank you all, really, really appreciate your work. I just had a couple questions.

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00:55:33.990 --> 00:55:45.810

Lisa Diewald: So Olivia do you, maybe you mentioned this, but I'm just seeing so many so many possibilities in terms of the you know language

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00:55:47.130 --> 00:56:07.650

Lisa Diewald: you know language abilities and the the opportunities available to translate Pursuit By You into different languages. So what is your dream from that regard I know you're doing a lot of testing and a lot of work with the YMCA what's what's next steps in terms of language?

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00:56:08.310 --> 00:56:15.240

Olivia Weinstein, MS, RD: Yeah so as for literally translating into language, it is translatable to 10 different languages.

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00:56:16.230 --> 00:56:21.480

Olivia Weinstein, MS, RD: The issue is we don't have someone to check it. So part of the research is also having

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00:56:22.320 --> 00:56:29.850

Olivia Weinstein, MS, RD: people with with a native understanding of the language go through, and making sure that what we're saying is accurate and translatable.

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00:56:30.270 --> 00:56:37.860

Olivia Weinstein, MS, RD: And the the next use cases for us, will be to integrate it into Nubian square market, which is a market in Boston

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00:56:38.460 --> 00:56:45.510

Olivia Weinstein, MS, RD: which creates and hosts cuisines from five different African countries from like fresh ingredients to prepare foods.

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00:56:45.810 --> 00:56:52.770

Olivia Weinstein, MS, RD: And using the APP to connect people to prepare foods first and then using gamification to encourage people to do more scratch cooking

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00:56:53.400 --> 00:57:11.040

Olivia Weinstein, MS, RD: because that's where the real skill building happen. So that's will be an interesting assessment of how it's both functional in the clinical setting how it makes sense in a business setting and then culturally how effective, is it are we are we meeting the needs of that specific demographic.

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00:57:12.450 --> 00:57:26.550

Lisa Diewald: And there's a question Olivia that just came in what grade level is your recipes geared towards and are they or could they be adapted for individuals with intellectual disabilities who want to learn to cook.

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00:57:27.390 --> 00:57:30.930

Olivia Weinstein, MS, RD: Yes, so it's written at a fifth grade reading level.

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00:57:32.640 --> 00:57:40.860

Olivia Weinstein, MS, RD: The I'll be honest, the recipes are ones I've created I've created about 300 recipes and so they are a little bit more sophisticated in

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00:57:41.220 --> 00:57:46.590

Olivia Weinstein, MS, RD: hopes that people from like the YMCA general community will like them they'll find them engaging and delicious.

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00:57:47.220 --> 00:57:58.980

Olivia Weinstein, MS, RD: My partner is a neuro psychologists and so he's also has an idea of working with people with traumatic brain injuries and using it as a rehab tool. And so I think there's a lot of

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00:57:59.880 --> 00:58:13.440

Olivia Weinstein, MS, RD: growth within the skill level and using Level one of basic like gripping skills and kind of moving along that way. So I haven't built that content, yet, but the contents actually the easiest part in the development. So I would be happy to do that.

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00:58:16.230 --> 00:58:18.480

Lisa Diewald: Question for Patrick and Eli.

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00:58:20.160 --> 00:58:31.830

Lisa Diewald: COVID has certainly presented huge challenges and the food mark the food pantry world has really been rocked by

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00:58:33.390 --> 00:58:43.290

Lisa Diewald: by the impact of COVID. I'm just wondering if you can tell us, I kind of see it throughout your presentation, but what's one good thing that you saw come out of

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00:58:44.310 --> 00:58:47.940

Lisa Diewald: the COVID pandemic for your population.

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00:58:48.480 --> 00:58:54.060

Patrick Walsh: Well, I think one of the more interesting tonight I'll let you speak but I'm one of the things that

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00:58:55.140 --> 00:59:00.870

Patrick Walsh: happen with COVID is you all experienced something together. That doesn't always happen where

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00:59:01.950 --> 00:59:08.040

Patrick Walsh: everyone goes through something. And we all experienced it our own way, but nonetheless, we all went through this

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00:59:09.150 --> 00:59:11.370

Patrick Walsh: And so there's a there's a shared

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00:59:12.960 --> 00:59:20.250

Patrick Walsh: frustration, exacerbation, fear all the different you know emotions that we all went through and trying to kind of

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00:59:20.820 --> 00:59:29.250

Patrick Walsh: you know at first come to terms with what this was coming at us when we didn't understand it, and then adapting all of our lives, you know every one of us went through that.

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00:59:30.210 --> 00:59:37.170

Patrick Walsh: So there's something about that share common experience that gives a little bit of leeway to how we interact with each other. A little bit

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00:59:37.620 --> 00:59:45.810

Patrick Walsh: of kindness, maybe a little bit more of a patience a little bit more of an understanding that we're all going through something challenging right now.

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00:59:46.620 --> 00:59:48.870

Patrick Walsh: And so I think that brought out

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00:59:49.560 --> 01:00:03.030

Patrick Walsh: some interesting kind of connections with people that that that that may not have happened, otherwise, and then we also you know ran into any number of people that that never in a million years thought they would ever need to you know access to food pantry.

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01:00:03.810 --> 01:00:09.300

Patrick Walsh: And then COVID hit and all of a sudden, they got laid off and and that was not expected you know they're not one of them.

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01:00:10.800 --> 01:00:16.290

Patrick Walsh: All of a sudden, they are one of them, you know, at least in their own mind and all of a sudden, they have to kind of maybe rethink

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01:00:16.620 --> 01:00:24.180

Patrick Walsh: you know wow this really isn't necessary part of the world like I didn't understand it before and now here I am needing it. So there's there's a little bit of an understanding

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01:00:24.930 --> 01:00:36.450

Patrick Walsh: that came from a lot of people that that may you know in their previous life that have not had a relationship with us, or an understanding of what we go through them with the clients that we serve go through. Yeah yeah.

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01:00:36.480 --> 01:00:49.440

Lisa Diewald: I think yeah and I know, Patrick I don't want to cut you off there I know we're running short on time, but what a great message for all of us that when we go through things together we're so much better.

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01:00:50.520 --> 01:00:56.790

Lisa Diewald: Much better when we're working together and this lived experience that people have gone through, although they may have gone through it differently

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01:00:57.450 --> 01:01:05.340

Lisa Diewald: does enable us to have some kind of common common experience that can be built on.  
Just real quick Catherine

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01:01:06.120 --> 01:01:20.040

Lisa Diewald: I just wondered I get this these kinds of questions all the time when you see a very innovative program like your DICE program available, can you tell us if those resources are available yet, or are they still in the testing phase Can somebody use them

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01:01:20.880 --> 01:01:23.970

Lisa Diewald: as part of their own sort of you know class or.

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01:01:24.540 --> 01:01:28.920

Catherine Rogers McManus, PhD, RDN, LD: It's a it's a great question that is actually the next steps toward testing its efficacy like I said

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01:01:29.640 --> 01:01:38.310

Catherine Rogers McManus, PhD, RDN, LD: this upcoming year and the following year and then the plan, the goal is to make them widely available. There's type one diabetes camps all over the country

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01:01:39.000 --> 01:01:46.470

Catherine Rogers McManus, PhD, RDN, LD: there's so many pediatric endocrinology clinics are really hoping to be able to disseminate and, as far as these resources and materials, because again

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01:01:46.830 --> 01:01:53.760

Catherine Rogers McManus, PhD, RDN, LD: this is a population and so we need and we're also looking at ways that we can modify and tweak the curriculum so it's appropriate for other populations.

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01:01:54.120 --> 01:02:00.540

Catherine Rogers McManus, PhD, RDN, LD: I've talked with several clinicians about making kind of tweaking their curriculum, so that it could be applied for childhood obesity prevention,

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01:02:00.840 --> 01:02:14.640

Catherine Rogers McManus, PhD, RDN, LD: type two diabetes, other forms of chronic disease that we see in youth, especially but also possibly even extending it into the adult population so absolutely in the very near future, it will be widely available.

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01:02:16.260 --> 01:02:16.920

Lisa Diewald: Thank you.

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01:02:18.060 --> 01:02:32.010

Lisa Diewald: So gosh that our went quickly we're just really grateful for all of you for your you know for sharing your time your enthusiasm your innovation contributions you make a difference and we appreciate it.

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01:02:33.000 --> 01:02:44.310

Lisa Diewald: As we as we continue on we, as I said, plan to make the Feeding the Need Developing Solutions award hopefully an annual occurrence so

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01:02:45.060 --> 01:02:58.470

Lisa Diewald: so that we can continue to receive inspiration from the professionals around us. I want to I want to thank you. I also want to thank Mariah for doing an outstanding job as co-moderator and we look forward to

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01:02:59.250 --> 01:03:15.090

Lisa Diewald: you know hearing from Mariah about all of her successes in the future as she begins her career. So thank you to all our our attendees today, and we wish you all, good health and a good rest of your week. So thanks everyone.

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01:03:15.750 --> 01:03:16.290

Patrick Walsh: Thank you.

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01:03:16.560 --> 01:03:16.950

Lisa Diewald: bye bye.