



# Health Care Food™

March 2025

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The significant and ongoing changes coming out of Washington, D.C., have many of us thinking about the impact on our work and communities. Here at the [American Heart Association](#), our longstanding [Guiding Values](#) anchor everything we do. These values are what we stand for and direct our intentional approach to implement proven solutions in science, policy and care for healthier people and communities.

For more than 40 years, our nationwide Advocacy team has played a mission-critical role in working with elected officials at the federal, state and community levels. We take a nonpartisan approach in support of science-backed public policies that lead to longer lives for everyone, everywhere.

Consistent with the Association's guiding value of "bringing science to life," Health Care by Food's [25 research studies](#) are critical to generate the evidence needed to validate food-based health care interventions and inform clinical practice. This innovative work, which is being conducted by research grantees nationwide, can now be viewed on [HCXF's dynamic new website](#) that was launched last month. The site includes a unique [Knowledge Hub](#)—a central repository of food is medicine (FIM) [research publications](#), [funded studies](#) and funding [opportunities](#), a [practitioner map](#) and more. We invite you to explore this curated content (details below) for insights, expert knowledge and to connect and collaborate with others in the FIM field.

Another of the Association's guiding values—"building powerful partnerships"—that, with your participation and support, helps to fuel our capacity to do this work. Together, we will navigate these uncertain times in support of the goal to identify and scale effective FIM interventions that help patients treat, manage and prevent chronic disease, leading to longer, healthier lives.



*Lisa*

Lisa D. Sanders, National Executive Director, [Health Care by Food™](#)

## New website and Knowledge Hub support FIM discovery and innovation

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Last month, Health Care by Food launched a dynamic new website with a unique asset—a food is medicine [Knowledge Hub](#) that serves as a ‘one-stop shop’ for researchers, health care professionals, community providers, funders and other stakeholders. Within this central repository of resources lie three individual hubs:

- The [Publication Hub](#) is a comprehensive library of evidence-based research articles (more than 150 curated publications) and is comprised of three components:
  - HCXF Science contains publications by the initiative’s research grantees and task force members that support its research agenda.
  - AHA Science Assets house the Association’s guidelines, scientific statements and presidential advisories related to food and nutrition. These assets are authored by volunteer scientists and health care professionals and are supported by research studies published in peer-reviewed scientific journals.
  - The Evidence Library includes peer-reviewed research articles related to the field of FIM including HCXF Science and AHA Science Assets.
- The [HCXF Research Hub](#) highlights the innovative ongoing work of our research grantees and includes an overview of active studies (clinical trials and secondary analyses) with details of the investigators and funding support.
- The [Practitioner Hub](#) is a directory for health care professionals, community leaders and advocates, working at the intersection of food systems and nutrition

security, to facilitate collaboration and enhance the overall reach and impact of FIM programs.

HCXF's new website has been re-designed for maximum accessibility. You'll want to check out the [Science of HCXF](#), [News](#) and [Events](#) tabs as well and refer back to the site for regular updates. We hope this new site and knowledge hub will be a valuable resource for your work and the entire FIM ecosystem.

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## HCXF research spotlight: Community health workers help to increase intake of fruits and vegetables among patients with diabetes

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HCXF research grantee, Dr. Rafael Perez-Escamilla, shares his ideas at a convening of funded grantees and community collaborators. (*Hoag Levins, Penn/LDI*)

Previous [research](#) has demonstrated that patients participating in a produce prescription program for an average of six months increased their consumption of fruits and vegetables, coinciding with reductions in blood pressure for those with hypertension, body mass index for those with overweight and obesity, and blood sugar levels for those with diabetes, as well as decreased food insecurity. Yet, many barriers remain to following a healthy dietary pattern -- including food and nutrition insecurity, which persists [among 1 in 10 U.S. households](#).

Health Care by Food is focused on [strategic approaches](#) to break down barriers to healthy eating while prioritizing human-centered design to achieve high rates of patient engagement and sustained behavior change. "Health Care by Food is a powerful initiative that focuses on the profound underlying relationship between healthy food

systems and access to high quality health care for all,” said research grantee Rafael Perez-Escamilla, PhD, professor of public health and director, office of public health practice, at Yale University.

Dr. Perez-Escamilla’s research involves assessing the impact of community health workers on improving behavioral and metabolic outcomes in targeted communities. The overall objective of his [study](#) is to design and evaluate a theory-informed, user-centered community health worker implementation strategy to improve uptake of produce prescriptions among Hispanic Medicaid-eligible patients with Type 2 diabetes.

The Produce for Our Health program by Dr. Perez-Escamilla’s team is seeking to improve the food and nutrition security of low-income people with Type 2 diabetes by providing quality nutrition education and counseling. The Association offers [diabetes tools and resources](#) (in both English and Spanish) to help patients manage their health and disease.

“This research is incredibly important because type 2 diabetes is incredibly prevalent,” said Pérez-Escamilla. “But when diabetes is properly self-managed [including a nutrient-dense diet] the quality of life for patients is great.” Study results are anticipated this year.

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## HCXF researchers present their study models at EPI | Lifestyle Scientific Sessions

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Health Care by Food research grantees Dr. Bunmi Ogungbe and Dr. Colleen Spees address audience questions at [EPI | Lifestyle Sessions](#) about their food is medicine research. (*American Heart Association*)

At the Association's [EPI | Lifestyle Scientific Sessions](#) held earlier this month in New Orleans, two of Health Care by Food's research grantees presented overviews of their ongoing clinical studies that are evaluating the impact of a food is medicine (FIM) interventions on diet-related chronic conditions. The Association's chief clinical science officer, Mitchell S. V. Elkind, MD, MS, FAHA, opened the session by emphasizing HCXF's fundamental goal of generating evidence and tools to help the health sector design and scale programs that increase access to nutritious food, improve health and reduce overall health care costs.

Colleen Spees, PhD, MEd, RDN, LD, FAND, FAHA, of The Ohio State University (OSU) presented her work as an investigator on the [SUSTAIN](#) research project, an engagement feasibility trial seeking to promote behavior change and nutrition security in Medicaid-enrolled individuals with stage 2 [cardiovascular kidney metabolic syndrome](#) (CKMS.) Spees and her co-investigators, OSU's Dr. Joshua Joseph and Dr. Dan Walker, chose to focus food is medicine interventions on stage 2 CKMS in an attempt to halt the progression of the disease. In several cases they supported subjects who were unaware of their condition.

According to Spees, preliminary results suggest that study subjects have an increased awareness of a food pharmacy and its benefits, leading to greater adherence to and engagement in the program. She also emphasized the success of food is medicine interventions when non-medical health related social needs were also addressed.

"There's no one-size-fits-all for diet and behavior change," said Spees. "Subjects report that nutrition counseling has made the most impact on their engagement and behavior change."

Oluwabunmi "Bunmi" Ogungbe, PhD, MPH, BNSc, RN, of Johns Hopkins University, shared progress of her [THRIVE](#) research testing the feasibility of combining produce prescriptions, adaptive messaging, personalized dietitian coaching and linkages to social resources to sustainably improve dietary behaviors among Black adults with hypertension living in communities that have poor access to healthy, affordable foods.

Ogungbe's observations led her to realize that "food is personal and food is cultural," she said. One of the subjects told her not to create programs for people without the participation of people in the planning process, which reflects the human-centered design aspect of HCXF's research. From the outset, Ogungbe recognized the importance of leveraging implementation science to quickly understand what keeps people engaged.

One of the many questions raised during the Q&A period addressed how FIM interventions, such as sustainable behaviors in participants, might influence other family members.

"People with diet-related diseases are attracted to FIM programs because they want to do what's best for themselves and their families," said Spees.

Following the research panel, Dr. Elkind interviewed Dr. Spees about ways to improve outcomes for patients with stage 2 [CKMS](#) through early FIM interventions focusing on [nutrition security](#) and [behavior change](#).



Dr. Mitch Elkind interviewed Dr. Colleen Spees at EPI | Lifestyle Scientific Sessions about her food is medicine research. (*American Heart Association*)

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## HCXF webinar series planned for Behavioral Science

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*(Hoag Levins, Penn/LDI)*

The science of Health Care by Food integrates rigorous research and guidance from experts in the field to address the complex relationship between food and adverse health outcomes. This research is supported by a network of multidisciplinary experts who collectively bring decades of scientific exploration, clinical experience and community engagement. Ten individual task forces lend expertise to every HCXF research project.

The initiative's [Behavioral Science Task Force](#) is preparing to launch a webinar series and would like to better understand the expertise level of the audience to tailor the webinar content accordingly. We invite you to take this brief [survey](#) to help us plan a stimulating, monthly Behavioral Science webinar series. Please complete the survey by Friday, April 18th. Thank you!

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## Food is medicine advocacy update

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FIM researchers and practitioners participate in Tufts University's [Food is Medicine Advocacy Day](#).  
*(Tufts University Food Is Medicine Institute)*

### On The Hill

- Congress passed a year-long continuing resolution (CR) on March 14th, averting a federal government shutdown and maintaining federal funding at FY24 levels through September. It's possible the administration will attempt to "impound" appropriated funds (not allocate them as Congress intended) as part of a broader effort to reduce federal spending.

- The American Heart Association previously advocated for increased support for FIM initiatives in FY25 in a [letter](#) to appropriations committee leadership.
- Senate committees held confirmation hearings for two administration officials who will have significant influence on FIM policy. During Dr. Jay Bhattacharya’s confirmation hearing to serve as the next director of the National Institutes of Health (NIH), he responded to a FIM-focused question from Senator Roger Marshall (R-KS) – FIM champion and founding member of the Make America Healthy Again (MAHA) caucus. Dr. Bhattacharya indicated support for increasing FIM research at NIH as part of his vision to address diet-related chronic diseases and expand the agency’s research priorities.
- The following week, Dr. Mehmet Oz mentioned during his confirmation hearing to serve as Centers for Medicare and Medicaid Services (CMS) administrator that while some Medicare Advantage plans are offering food, beneficiaries do not receive advice on how to use that money wisely. He suggested that CMS work with supermarkets and other businesses to provide better support with food assistance but did not elaborate as to what that support could look like.
- On March 12, the American Heart Association participated in the Tufts University [Food is Medicine Advocacy Day](#) as a member of the organizing committee. More than 200 FIM researchers and practitioners attended approximately 160 meetings with congressional offices to advocate for:
  - Increased federal funding for FIM research at NIH
  - Coordination efforts at HHS
  - Pilot programs at the VA and the Indian Health Service
  - Legislation, yet to be reintroduced, that would establish a medically tailored meals demonstration program through Medicare.

On March 10-11, Dr. Kevin Volpp, HCXF scientific lead, participated in The Rockefeller Foundation’s “Food is Medicine in the Veterans Health Administration: Insights, Learnings & Collaboration” convening, which included a congressional event focusing on FIM programs at the Veterans Health Administration.



VHA staff and patients discussing FIM insights at the Rockefeller Foundation FIM insights at the Rockefeller Foundation convening in Washington, D.C. (American Heart Association)

## In the Administration

- On March 27th, the Department of Health and Human Services (HHS) announced a major restructuring to comply with the administration's Reduction in Force (RIF) directive that will amount to laying off approximately 10,000 employees. Combined with the estimated 10,000 who accepted early retirement and buyout offers, HHS's total workforce has reduced from 82,000 full-time employees to 62,000. HHS plans to consolidate its current 28 agencies and offices into 15 as part of this effort, which includes combining a number of agencies into a newly established Administration for a Healthy America (AHA). The plan also proposes decreasing the Food and Drug Administration (FDA) workforce by 3,500 full-time employees; the Centers for Disease Control and Prevention (CDC) by 2,400 employees; the National Institutes of Health (NIH) by 1,200 employees; and the Centers for Medicare and Medicaid Services (CMS) by approximately 300 employees. More details can be read in the [HHS Fact Sheet](#).
- President Trump [established](#) the Make America Healthy Again (MAHA) Commission in February, chaired by HHS Secretary Robert F. Kennedy, Jr., directing health agencies to prioritize "reversing chronic disease," including by supporting research through NIH on the root causes of chronic conditions and allowing flexibility in health insurance coverage to incentivize disease prevention. The first Commission meeting was held in [private](#) and the outcome of that meeting is currently unclear. The Commission has until May to conduct an initial assessment and then another 80 days to produce a strategy. The HCXF advocacy team is monitoring updates from the MAHA Commission for any implications for FIM.

## In the community

- The [Consumer Federation of America National Food Policy Conference](#) featured a keynote address on food is medicine and a plenary session on food and health care policy collaboration. Speakers across sessions called for greater funding for nutrition research at NIH to address the rising burden of diet-related chronic conditions.
  - CMS has [rescinded](#) its 2023/24 Medicaid health-related social needs (HRSN) guidance. State Medicaid programs have been working to address HRSN over the years through a variety of authorities, most notably including section 1115 demonstrations or waivers, which are currently all under [review](#). The effects of this rescission remain unclear, but the HCXF advocacy team is monitoring any impact it may have on 1115 waivers and specifically concerning FIM.
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# Recent publications by Health Care by Food researchers

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['Food is Medicine' to advance mental health and build resilient food systems globally | Nature Food](#). Ronit Ridberg, PhD, MS

[PERSPECTIVE – The Growing Global Benefits of Limiting Salt Intake: an urgent call from the World Hypertension League for more effective policy and public health initiatives | Journal of Human Hypertension](#). Yvonne Commodore-Mensah, PhD, MSN, FAAN

[Food Is Medicine In The US: A National Survey Of Public Perceptions Of Care, Practices, And Policies | Health Affairs](#) Ronit Ridberg, PhD, MS

[Food Insecurity, Health, and Health Care in the US | Nutrition | JAMA | JAMA Network](#) Hilary Seligman, MD, MAS

[Leveraging principles of behavioural economics to encourage patient engagement with population health screening programmes](#). Kevin Volpp, MD, PhD

[\(PDF\) Leveraging principles of behavioural economics to encourage patient engagement with population health screening programmes 3.7.25 Kevin Volpp, MD, PhD](#)[Food insecurity and cardiovascular disease risk factors among U.S. adults | BMC Public Health | Full Text](#) Lisa G. Rosas, PhD, MPH

[Medicaid Spending and Health-Related Social Needs in the North Carolina Healthy Opportunities Pilots Program | Health Care Economics, Insurance, Payment | JAMA | JAMA Network](#) Seth Berkowitz, MD, MPH

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Last bite: [Subscribe now or access newsletter archives](#).

Thanks for reading! Until next time, "Let food be thy medicine..." –Hippocrates