



GOD'S LOVE
WE DELIVER®

Expansion of a Medically Tailored Meal Program to Serve Veterans with PTSD

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Contents

- 01** God's Love We Deliver
- 02** Medically Tailored Meals
- 03** Veterans and PTSD
- 05** Program Development
- 06** Q&A

God's Love We Deliver

God's Love We Deliver



MISSION STATEMENT

Food is Medicine Food is Love

The mission of God's Love We Deliver is to improve the health and well-being of men, women and children living with HIV/AIDS, cancer and other serious illnesses by alleviating hunger and malnutrition. We prepare and deliver nutritious, high-quality meals to people who, because of their illness, are unable to provide or prepare meals for themselves. We also provide illness-specific nutrition education and counseling to our clients, families, care providers and other service organizations.

All of our services are provided free to clients without regard to income.

God's Love We Deliver is a non-sectarian organization.



Our Mission in Action:

Food is Medicine | Food is Love



2.5 MILLION MEALS



**10,000 CLIENTS,
CHILDREN AND
CAREGIVERS**



17,000 VOLUNTEERS



**SPECIAL TOUCHES
SUCH AS BIRTHDAY
CAKES AND
HOLIDAY MEALS**



**180 LINKAGE
AGREEMENTS with
other CBOs**



**30 HEALTH CARE
CONTRACTS**



**FOOD IS MEDICINE
MOVEMENT GAINING
GROUND**



**18,000 DONORS
SUPPORTING OUR
WORK**

Our Clients



2,396,229 meals
to
8,971 clients



94,236 meals
to
421 caregivers



58,710 meals
to
285 dependents

Diagnosis



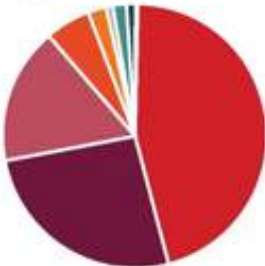
- 18.2% Cardiovascular Disease (1,606)
- 16.4% Other Diseases (1,446)
- 12.9% HIV/AIDS (1,138)
- 12.8% Cancer (1,125)
- 10.6% Kidney Disease (937)
- 8.8% MS/Musculoskeletal Disorders (773)
- 8.2% Diabetes (720)
- 7.0% Alzheimer's/Neurological Disorders (613)
- 5.1% Unknown remaining diseases (XXX)

71.7%
of clients age 60+

78%
with a secondary diagnosis

32%
with 4+ diagnoses

Age



- 44% 70+ (4457)
- 26% 60-69 (2653)
- 18.2% 50-59 (1,852)
- 5.8% 40-49 (595)
- 2.4% 30-39 (247)
- 0.07% 20-29 (67)
- 1.76% 13-19 (179)
- 1.4% 0-12 (139)

20%
with 5+ diagnoses

FY2010

FY2021

202% increase in meals delivered
since FY 2010

Who We Serve:

People who are too sick to shop and cook for themselves

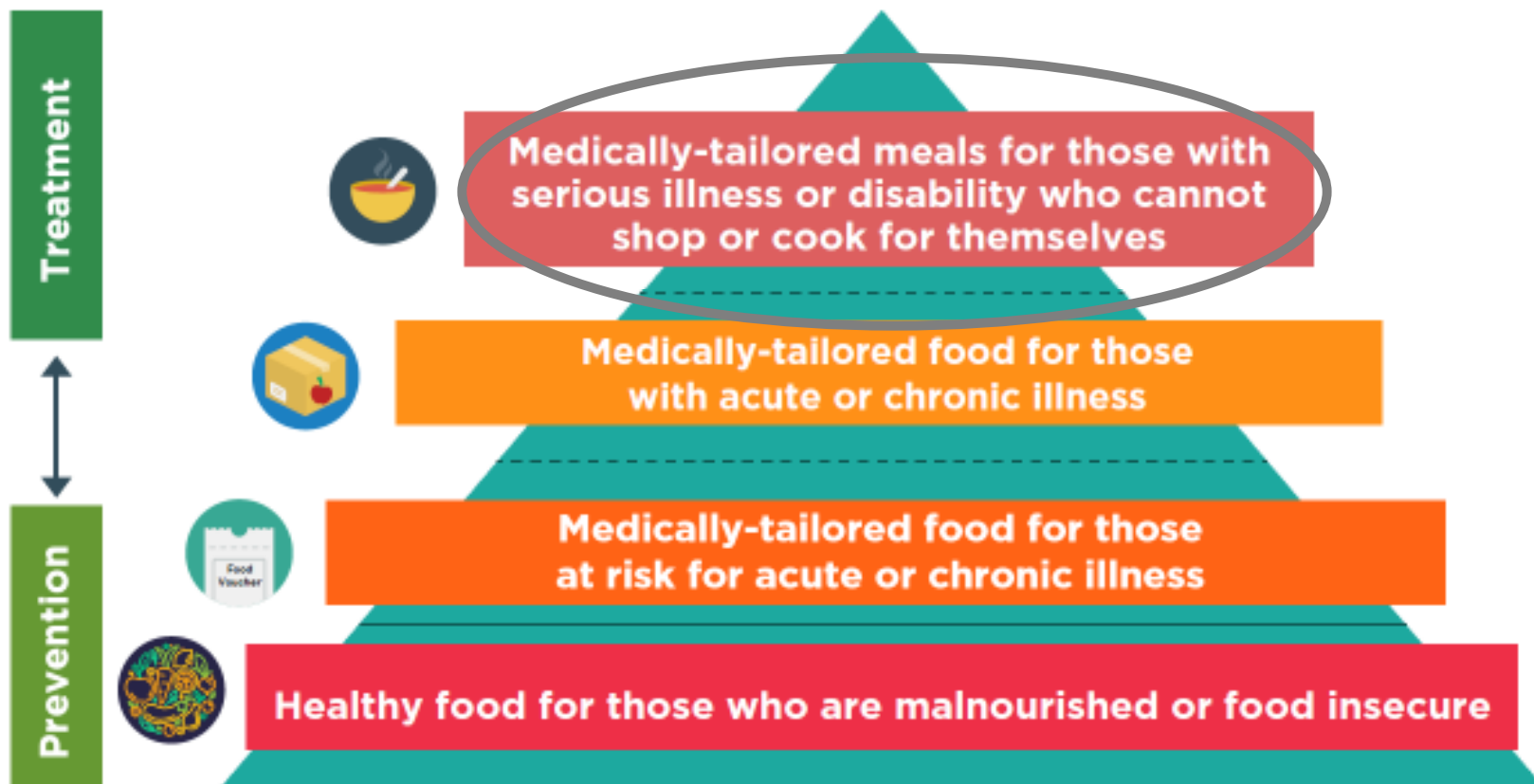
- A diagnosis that requires nutrition intervention, such as chronic kidney disease, cancer, congestive heart failure, COPD or HIV
- Potential to be **hospitalized**
- Limited relevant **activities of daily living**
- Progressive stages of **dementia** that require dietary modifications
- Developing **severe diabetes**, or recovering from diabetes-related complications; or
- Been discharged from acute care with **no supports in home**



Medically Tailored Meal Intervention



FOOD IS MEDICINE



Medically Tailored Meals

Medical Nutrition Therapy uses assessment and counseling to prevent, delay, or manage diseases and chronic health conditions.

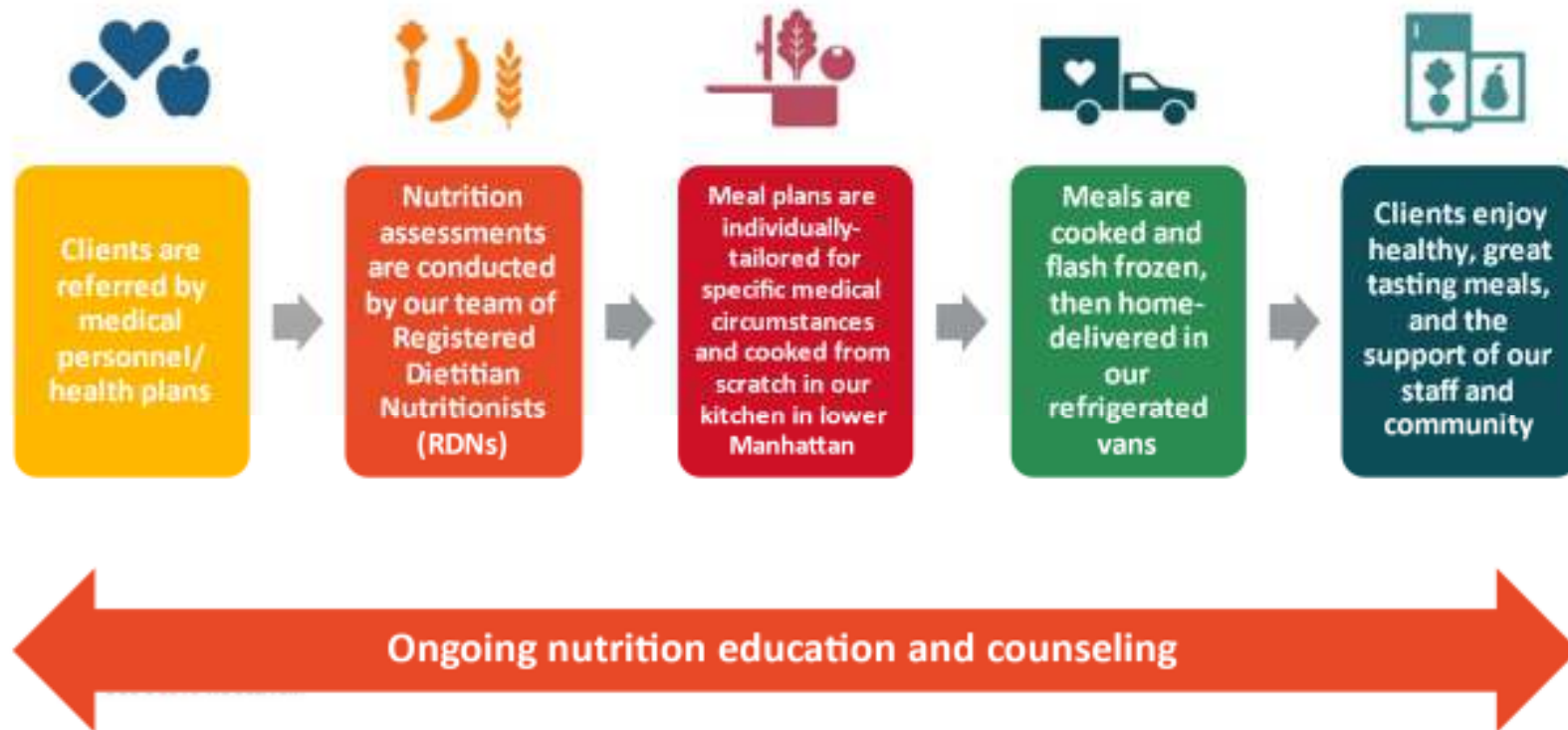
Medically Tailored Meals are delivered to individuals living with severe illness through a referral from a medical professional or healthcare plan. Meal plans are tailored to the medical needs of the recipient by a Registered Dietitian Nutritionist (RDN).

All meals are heart-healthy, low in sodium, made without additives, fillers or preservatives, and tested for taste and ease of use.

Medically-tailored meal intervention is evidence-based.



Medically Tailored Meal Intervention





The background features a dark red field with stylized, flat-colored elements in a lighter red shade. On the left is a tree with a vertical trunk and three horizontal branches. In the upper right is a flower with a bulbous base and a flared, multi-lobed top. In the lower right is a fish, shown in profile facing left, with a circular eye and a curved dorsal fin.

Veterans and PTSD

Behavioral Health

Behavioral Health refers to our emotional, social, and psychological wellness.

Post-Traumatic Stress Disorder is a psychiatric disorder that may occur in people who have experienced or witnessed a traumatic event such as a natural disaster, a serious accident, a terrorist act, war/combat, or rape or who have been threatened with death, sexual violence or serious injury. Symptoms may last months to years.

Behavioral Health

Details

Why Behavioral Health... and for US Military Veterans?

- **Behavioral health and food insecurity** have the potential to have a **cyclical effect**. Behavioral health issues can impact a person's nourishment, and food insecurity can contribute to stress, anxiety, and the exasperation of a behavioral health condition.
- Many individuals with a behavioral health diagnosis have a **co-morbidity** that would also benefit from Medically Tailored meals.
- **An estimated 30% of veterans in NYC are food insecure, and approximately 15,000 of NYC veterans live with PTSD.**

Veterans with PTSD

Some statistics

- 10-30% of combat veterans suffer from PTSD at some point in their lives
 - $\frac{3}{4}$ of Veterans in NYS served during wartime, mostly in the Vietnam War (may also have physical challenges)
 - Vietnam veterans with PTSD: 85% are moderately impaired
- Many also have TBI or major depression
- Risk of probable PTSD is 8 x higher for veterans compared to general population

Why PTSD and US Military Veterans

Veterans represent a high need population:

- Over 50% of Veterans in NYS are >65 years old
- Veterans face challenges transitioning to civilian life (entering work force, socializing, accessing food)
- PTSD may increase risk of medical conditions like gastritis, arthritis & CVD
- Greater trauma burden may be related to increased risk
- Many individuals with a behavioral health diagnosis have a **co-morbidity** that would also benefit from Medically Tailored meals
- Common medical diagnoses include: malnutrition r/t chronic disease, chronic kidney disease, COPD, cancer, CHF, and cirrhosis
- 210,000 Veterans in NYC - large populations in Brooklyn and Queens

Program Development

Veterans and PTSD

Program Development

- Service design
- Staff training and database modification
- Outreach/partnerships
- Evaluation
- Further expansion – next steps



Nutrition Service Details

Nutrition Assessment

- Provided by a Registered Dietitian Nutritionist (RDN) at start of program.
- Medical Nutrition Therapy along with the development of a treatment plan, diet individualization, and the provision of counseling and education.

Nutrition Reassessment

- Provided by RDN at specific intervals – typically every 6 months.
- Complete review of assessment elements, addressing disease progression previous goals, changes and/or concerns. Re-evaluation of treatment plan.

Nutrition Counseling

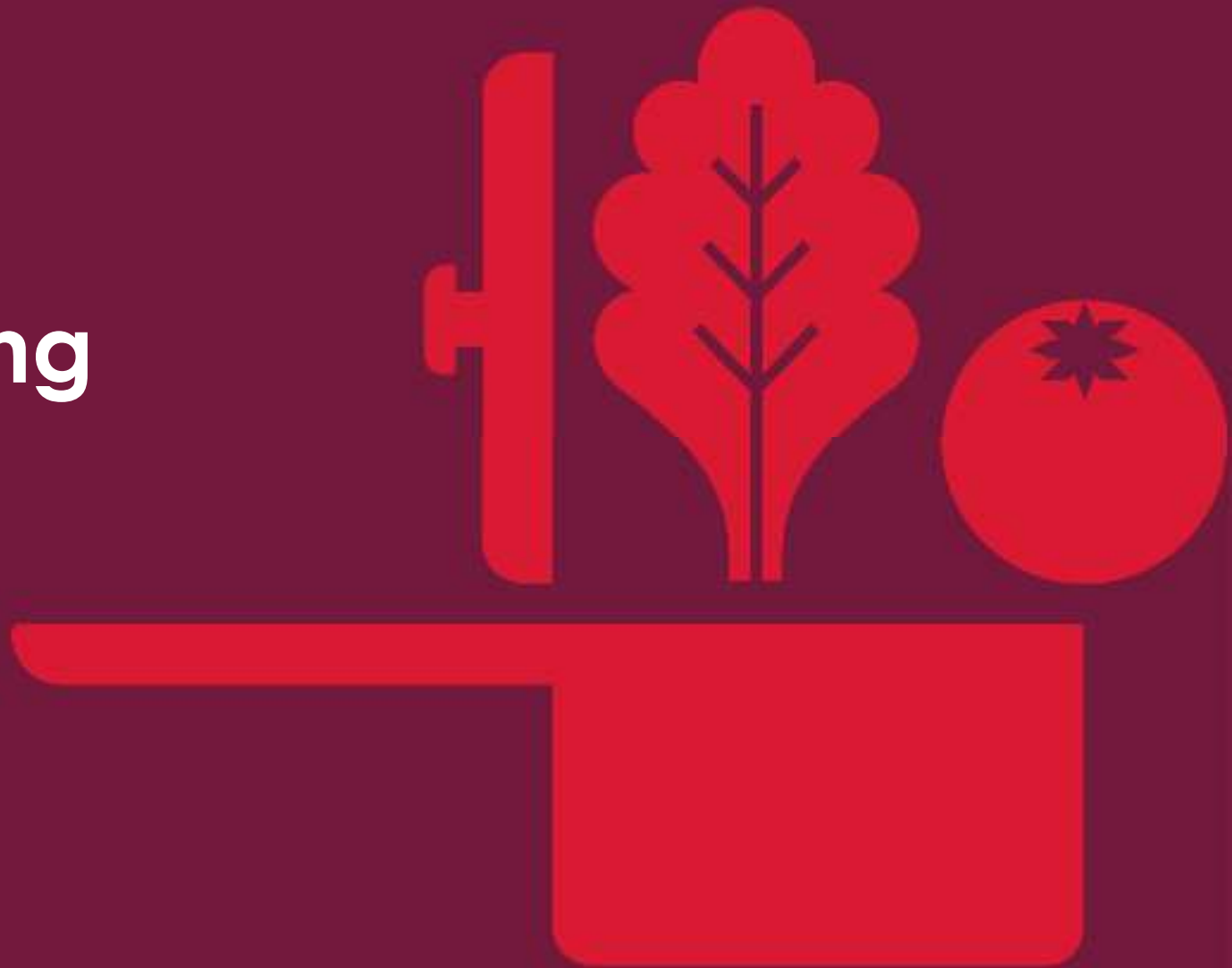
- Provided by RDN to address a nutritional issue(s) through education and to promote behavior change

Meal Plan Structure

- 10 meals per week (lunch/dinner)



Staff Training



Staff Training Overview

- Client Services and Nutrition Services staff trained in **veteran cultural competency and communications** by PsychArmor, a non-profit that provides technical assistance to service organizations. Topics included:
 - Communication skills with Veterans
 - 15 things Veterans want you to know
 - How to talk to someone with a disability
- Nutrition staff received **clinical training** from RDN working within the VA System and **trauma-informed care** from the California Academy of Nutrition and Dietetics and other providers.

RDN Training: Learning to Work with Veterans with PTSD

Areas of focus:

- Communication techniques
- Nutrition Care Process
- Trauma Informed Nutrition



Learning to Work with Veterans with PTSD

Emphasis on **communication**

General communication considerations:

- Provide S.P.A.C.E
- Avoid roadblocks to listening
- Use O.A.R.S in conversation
- Use motivational interviewing principles
- Be ready for an emergency



Training for RDNs

Communication

Motivational interviewing:

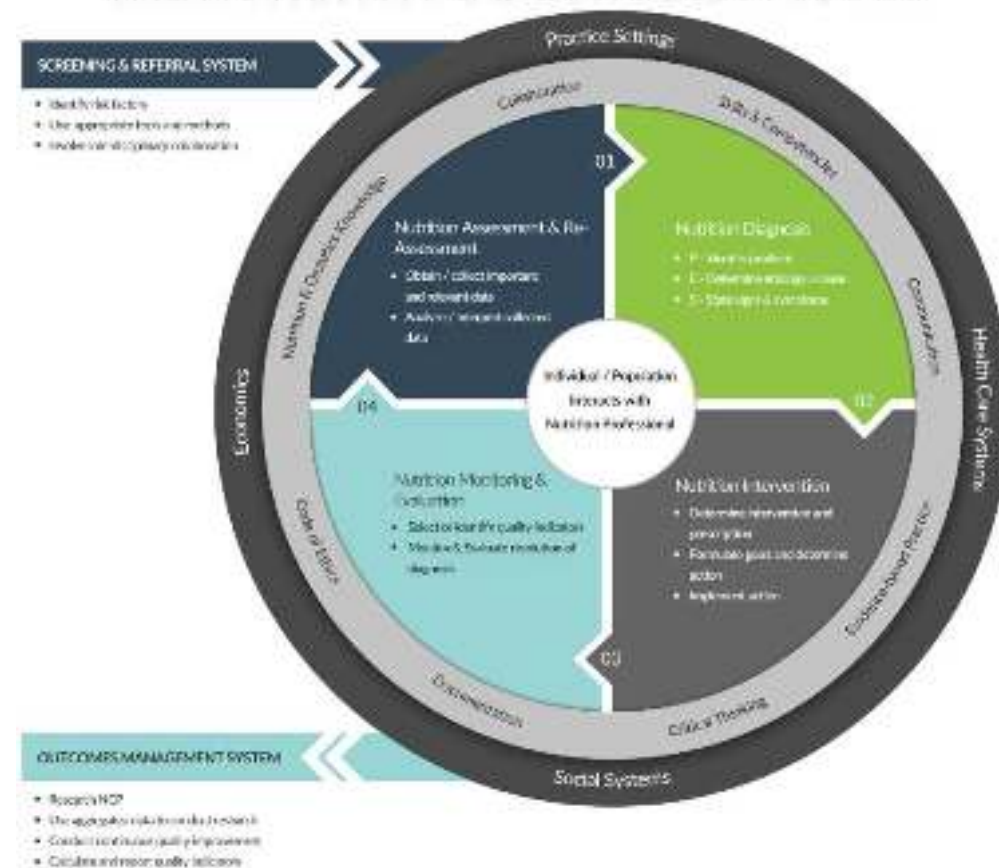
- **Acceptance** - I allow client to be who he/she is in that moment, not trying to advice
- **Partnership** - I disagree but it's not about being right, focus conversation on mutual understanding
- **Compassion** - I accept your right to make choices and respect you for it

Learning to Work with Veterans with PTSD

Applying the Nutrition Care Process Process:

- Understand the common nutrition diagnoses within the population
- Plan interventions with client – what do they want?
- Thoughtful goal setting
- Monitor & discuss with client

THE NUTRITION CARE PROCESS MODEL



Training for RDNs

Trauma-Informed Nutrition

Recognizes the relationship between adversity, chronic disease, and nutritional health

- Exposure to trauma can increase risk of many medical conditions
- Experience of trauma can exacerbate an unhealthy relationship to food

An integrated approach with six components of care

- Balanced nutrition
- Physical activity
- Mindfulness
- Nurturing caregiving
- Quality of sleep
- Supportive relationships and concrete support

Training for RDNs

Applying Trauma-Informed Nutrition

- Keep a holistic focus
- Acknowledge strengths
- Inspire a healthy relationship with food
- Reduce shame & anxiety
- Practice cultural humility
- Do not overemphasize personal behavior change
- Identify willingness or ability of clients to try new behaviors

RDN creates a safe, transparent, collaborative, and supportive experience

California Department Of Public Health | California Department Of Social Services Essentials For Childhood Initiative | June 2020

Database Modification

Considerations:

- Medications
- Treatments
- Vocabulary/language
- Questions asked



Partnerships & Evaluation

Partnerships

- VA Hospital Systems in NYC – outreach to RDNs and Social Workers
- NYC Department of Veterans Services
- Veteran social service agencies
- NYS Health Foundation

Evaluation & Further Expansion

Evaluation methods

- Baseline and 6-month follow-up questions
 - Self-rate health question
 - Food security – NYCDOHMH questionnaire

Next Steps

- Evaluation
- New behavioral health specialist on staff
- Group education modules & additional educational materials
- Other types of wholistic support
- Research other BH diagnoses for further expansion

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Questions?



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- California Department Of Public Health | California Department Of Social Services Essentials For Childhood Initiative | June 2020

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Thank You