

DIALOGUE PART I: REFORMING OUR EATING TO REFORM OUR HEALTH

BEVERLY EARLE: Our first panel is Reforming Our Eating to Reform our Health. Certainly a major part of transforming the way we live in order to prevent and fight disease is transforming the way we eat. The first panel will talk about how to make sure everyone has access to healthy food. Once you have that access, then how to prepare it and -- how we should proceed with that. In your binders, there is a bio for all of our presenters, so I'm not going to give detail; I'm just going to give a little flavor for each one of our panelists.

Donna Green-Goodman, founder and CEO of Still Shoutin'. Ms. Green-Goodman is a lifestyle educator promoting healthy living and eating. She recently joined the Susan G. Coleman Circle of Promise campaign as a National Ambassador. She is a breast cancer survivor and a cancer project cooking class instructor. Would the panelists come forward? And if you could take your seat in order, that way we can just -- you can present in the order that you're called. Lincoln Saunders and Lisa Cole are both representing Garden on the Go, which is a joint project between Green B.E.A.N. Delivery and Indiana University Health. Lincoln Saunders is the executive director of Garden on the Go. Mr. Saunders has a Master's in Public Affairs from Indiana University with a concentration in Food and Agriculture Policy. Prior to pursuing graduate work, Mr. Saunders served as finance director of the Democratic party of Virginia. Thank you. And received his B.A. from the College of William and Mary. Ms. Cole is manager of Indianapolis Community Research at Indiana University Health. Ms. Cole has over 34 years of healthcare program development and community research experience. Most recently, she is responsible for the development and oversight of IU's signature community-based obesity prevention program.

Garden on the Go is a mobile produce truck providing affordable fresh fruits and vegetables in the community. Angie Abbott. Ms. Abbott is a registered dietician and extension specialist with Purdue University Cooperative Extension. At Purdue, she directs the Family Nutrition program and the expanded Food and Nutrition Education program for the state of Indiana. The Honorable Dwight Evans is in the Pennsylvania House of Representatives. The Honorable Dwight Evans is a graduate of LeSalle University, hails from Northwest Philadelphia, where he has represented the 203rd district for over 30 years. As chairman of the House committee on Appropriations, Evans sponsored the Pennsylvania Fresh Food Financing Initiative, a public-private partnership that has served as a nationally recognized model for increasing access to fresh produce. Behind tab six you will find model legislation that you can take home and implement some of this, behind tab six. I want to thank our panelists and with that, we will start ...

DONNA GREEN-GOODMAN: Good morning. And thank you so much for this invitation. It was really hard for

me to get to sleep last night. I'll be sleeping on the plane going home. I got back to the room after the first meeting and I was just overjoyed to hear all of the things that were discussed in that meeting. And I told Representative Laura Hall, I tried to go to sleep and the Spirit kept talking to me, so I had to wake up, do what he was telling me to do, and then I was able to go to sleep.

All of you have binders. In the front pocket is a copy of Message magazine. This is a magazine that I write the recipe column for. And it's printed six times per month. I think it would be a wonderful tool for you and the people that you serve. As I sat and listened last night to the presentation, I was quite encouraged by what I heard, particularly the acknowledgment, the unapologetic acknowledgment of the pivotal role of the creator God, in solving the health crisis of our people. We are definitely in the worst of times with the economy tanking, unemployment, people do not have healthcare anymore, and the increasing rate of health disparities among our people. But when you think about it, in the worst of times is when God moves through those who he has placed in positions to shape law or to affect lawmakers.

I thought of Joseph, who interpreted the ominous meaning of the dream and then gave the solution. I thought of Daniel and his boys who modeled healthy living. And when laws were framed against them, they were fireproof and they used lions as pillows. I thought of Esther, who risked her life to uncover evil plots against her and she was able to save her people. And so I question each of you as representatives, if you are not at this point in time for such a time as this, I hope that by the time we are through you would be willing to fund healthy living campaigns that are skills building in nature; that you will also look at demonstrating pilot projects with train the trainer options that can be replicated throughout your districts; that you will promote health reform, which is improving, making better, showing the right way to do things as a way to save money in these economic times because so many of the diseases that we experience are totally preventable and definitely reversible. And much of the healthcare cost is carried by those of us who are disproportionately recognized or represented in all of these disease process.

I also encourage you to partner with churches as places where you can do this type of programming, but not necessarily to promote the agenda of organizations, but to promote the church as the place of healing. And then through Michelle Obama's efforts, Wal-Mart is one of those organizations that I think is a good place to go, as well as Eli Lilly and those who have that same philosophy, so that you'll be able to pull in partners who have funding and the same interests that you do.

So we're looking at a real paradigm shift. Where am I supposed to point this? It's not moving. Which button? My own paradigm shift came in 1996 when I was 37 years old and was diagnosed with invasive aggressive metastatic breast cancer. Forward one? I'm pressing the forward button, okay. Backward button. Okay. I was diagnosed with invasive aggressive metastatic breast cancer in 1996. Six of 17 lymph nodes were

positive. And while I was working, my husband was working, we had really great insurance, they offered me a procedure that cost \$100,000 that the insurance company did not pay for.

And so that's when I decided to go back to what I know. The Bible says if there's sick among you, call on the elders of the church. And so I went to the elders of the church and I was anointed. And then I went about looking how I could get rid of seeking counsel from the ungodly and search for the godly physicians and healthcare practitioners who would align with what I believed in, knowing that Christ is the healer. It has been 15 years since then, I went to a facility in Wildwood, Georgia that has been in existence since 1946, managed by healthcare professionals who utilize healthy living and their medical training to reverse and prevent disease. And then because of my training as a health educator, I was burdened to get back to the Atlanta where I was living at the time and make a real dent in the lives of the people that I served, particularly the African-American population. Because, as an African-American, my own family was impacted by these diseases. My father had colon cancer. My brother later died of AIDS. And my mother died six years ago of endometrial cancer. And so I knew this personally and I was talking to people who were educated. And I'm sure if those of us who are educated and have all this resource are affected and impacted that way, those who have less of an opportunity are also affected.

So without any funding at all, I went back to Atlanta and I asked God to do some things for me. And He said that He would, and He did. We decided to meet the people where they were, find out what mattered to them, make it culturally relevant, and model what we teach them. I partnered with Glory 1340, the African-American station at the time. And we had a radio program with the main deejay there and every week we would go in and there would be call in, they would call us, we would answer questions, and then we would meet them in the community and teach them how to do. If we were talking about diabetes or hypertension, when we met them at the local Kroger or public, they were able to answer questions, we were able to show them how they could translate our information into healthy eating. In addition to that, we partner with other physicians and Glory 1340 to do what we love to do is have praise services or concerts. And the state -- the park in Atlanta, Olympic State -- Centennial Olympic Park, we actually participated in a music festival that they were having. And we did a health expo where we screened people and show them how through lifestyle change they can make a difference. And we use that as an opportunity to connect with other organizations in the community so that we could come and speak to them.

Five churches ended up partnering with us, one of them Greater Piney Grove Baptist Church, William Flippin pastor. And he, after the part that he agreed to do, invited us into his church, into his pulpit, and asked us to bring healthy eating options so that they could serve it between service. We were interested in bringing breakfast food because I originally spoke at the first service. They called me and said, don't bring breakfast

food. We want collard greens and cornbread and black-eyed peas and so on and so forth. So we had to back up, regroup, cook some more, and bring that. He preached. He told them go downstairs, if you want to get well, this is how you can do it. And he then shared that how he had embraced these lifestyle principles and had lost so much weight and was having some of the best sex that he had ever had in a long time.

Another one of our churches was the church where Carol Sonai Crawford, then-director of the Office of Minority Health, she also hosted four of our classes. We did a “None of these Diseases” class at the churches. And then when we would go to the churches, we would solicit people to come out to our lifestyle program, which was held at our clinic. One of the things that I wanted to do was have a center where people could access it. We were on the martyr line. We were able to get people there for our two and half day outpatient program in partnership with primary healthcare centers for people who had diabetes or who were at risk for diabetes. They came for the two and a half days. We cooked with them, we took them grocery shopping, we made all the things that were practical for them. They left on the last day with a bag of granola that they had made, that they would be able to take and continue their lifestyle. And then they came back for the following seven weeks for once a week cooking and health education classes.

That kind of morphed into, as we were sharing, from my first book, *Something to Shout About*, that was our manual that we use for this program. And as we were introducing new ways of cooking things, people started asking, but do you have a recipe for banana pudding? And my grandmama used to make such and such and so and so. And so what I was able to do was to go into the kitchen and create some other recipes that are now a part of the book, *Cooking Up Good Health*, that are demonstrated in the *Cooking Up Good Health* cooking show that I have created that show people how, especially our people, African-Americans, Caribbean Americans, how to take the food that we were intention -- it was intended for us to eat and eat those things and make our health turn around and go the opposite direction. All of these things were new to them. Many of them enjoyed them. One of the things that we don't eat in our culture is tofu. But we introduced tofu because it comes from a bean just like black-eyed peas and red beans and we use that in making banana pudding, ice cream, and pound cake, which you can see at the bottom of the screen.

In addition to that, we taught them simple lifestyle principles around this simple diet. Going to bed at night between nine and midnight, of course, helps your body to maintain its weight better, to fight disease. We know all the benefits of exercise. In addition to the vitamin D that you get from sunlight, you are also able to lower blood pressure, lower blood sugar. It's antibacterial, antiviral, all of those things. Just say no to a lot of the things that are coming your way if you really are not able to do it because, as was mentioned earlier, stress triggers so many things and exacerbates disease once we get it.

Water inside and out. When I went to my room last night, my husband called me. He's been working

with a family friend for the last eight weeks who was type II diabetic, was about to have an amputated toe. He called last night to say she went back to her diabetic doctor. She had embraced these principles; they have cancelled the amputation because the foot has been totally restored. And so we're talking about a lot to shout about when you are able to get somebody who can't go to church or go to work or whatever and it's not costing them a whole lot of money to do it. Making sure that you're getting good fresh air with a proper electronic charge to it. And then, of course, yielding to divine power.

I am the Lord who heals you. I have great plans to prosper you, not harm you. I come to give you life and give it to you abundantly. I can heal you of all your diseases. I won't put on you those diseases that I have put on the Egyptians, for I'm the Lord that heals you. My greatest wish for you is that you prosper and be in good health. And then it says, state legislators, that if my people who are called by my name, my legislators that I have put in the House of Representatives, as such a time as this, where the money is low and people are still dying, if you who are called by my name will humble yourself, pray, seek my face, turn from your wicked ways, I will hear from Heaven, I will forgive your sins, and I will heal your land. I know what it's talking about. I promised him that if he did it for me, and I'm talking 15 years, no chemo, no stem cell transplant, no tomoxifen, and the Lord has turned it around and given me the opportunity as I'm sure you will face many opportunities where simple adherence to these principles in a way that is culturally relevant will make all the difference in the world. Thank you for your time.

VIDEO: Far too many Hoosiers, especially lower-income neighborhoods, live in what we call food deserts. They don't have access to healthy foods, to local grocery markets. They rely on convenience stores, gas stations, fast food restaurants, meaning they're not getting healthy produce and fruits and vegetables. Garden on the Go wants to change that model by taking healthy foods to the people.

Garden on the Go's essentially a mobile grocery truck. About a dozen stops throughout the city. Runs Wednesday through Saturday, year round. They stop for an hour to an hour and a half, each location. Everyone, young and old, has been very supportive of the truck and of what we're doing and people say that God answered their prayers.

What I love is that when people come on the truck, they get a light in their eyes when they see how fresh and how tasty everything looks on the truck. And then their eyes light up again when they see how affordable everything is.

I think it's wonderful that we're able to get fresh vegetables right off the truck because if we don't get to the grocery store or someone don't take us, then we don't get to get the fresh vegetables. And I enjoy it. I try to make it every Wednesday.

Far too many Hoosiers have diabetes or are obese. That places them at greater risk for other diseases such as cardiovascular risk, diabetic complications. Oftentimes we see those individuals when they're entering the walls of our hospitals. We're looking to get farther ahead of the process to work with them to prevent that, if we can, by helping them make better decisions around living a healthier lifestyle both in physical activity perspective and from eating healthier foods.

A key part of our effort is a partnership with Green B.E.A.N. Delivery. We deliver world class care, but we realize we're not experts in operating a mobile grocery market. So that's why the partnership with Green B.E.A.N. Delivery was key. Likewise, we look to partner with local organizations, both municipalities, faith-based groups, community-based organizations, to get the word out, to get buy-in. We're getting consistent requests to open up new stops. Have gotten requests to share this model both here in Indiana and across the country, so it's something that's getting a lot of attention. I think deservedly so. And I think it's something then pretty soon will be replicated across the country.

LISA COLE: Good morning, everyone. It is really our pleasure and quite an honor to be speaking before you this morning. And I think the speakers before us and the introductory remarks are all so pertinent to what we're talking about and Garden on the Go is an example of, is taking that leap and making a transformative change that can do something more impactful in our community and really make that difference. And that's what Garden on the Go represents. I hope, too, by us having the chance this morning to share a little bit about our story that it empowers you to take that back into your own individual communities and show and encourage examples of partnerships that may not have been thought of in the past. I think as non -- or not-for-profit industries or organizations, we tend to look for grants or look for other not-for-profit partners when we want to make an initiative, make a difference in the community, and Garden on a the Go is an example for us of seeking out a for-profit partner that is enabling us to hit the ground running, or rolling as a truck, immediately. Because we went to an expert company, a company that has experience and the resources to bring fresh produce into the communities. They make their business delivering to homes. We just broadened that example a little bit more by taking it into low-income neighborhoods.

Why IU Health is doing this, it's part of our overall more comprehensive obesity and diabetes prevention model. We are starting with the concept of increasing access to healthy fruits and vegetables. We cannot continue to prescribe to our patients to eat a healthy diet, that that will make a difference in their health, if they can't access a healthy diet. These communities, we know that 68% of our low-income neighborhoods live in food deserts. Food deserts or grocery gaps are those areas in the community that do not have ready resources to affordable fresh, healthy foods. And affordable is really the key because what's also cropping up in these neighborhoods, gas stations are stepping to the forefront, bringing in some produce that

isn't necessarily the cheapest or the highest quality. And so we need to be looking at how do we increase that access into the neighborhood. So this is a partnership to do that, to take it into neighborhoods and bring affordable produce.

Another example of a partnership that IU Health has initiated has been with Keep Indianapolis Beautiful, our own local Keep America Beautiful chapter. And what we did with them was we partnered and went into ten IPS schools this past spring and built school gardens so that we can be teaching our youngest citizens how to raise healthy produce, what a carrot tastes like. Some have never tasted a carrot before. So we partnered with them to help us plant those gardens. Again, in the walls of IU Health, we're not necessarily expert gardeners, so we went to the experts to help us do that.

We also just last week unveiled an eight acre urban farm, an organic farm on the east side of Indianapolis off of 21st and Shadeland, in partnership with Indy Parks. It was unused land that the Parks Department had. We put the money to help hire a farmer. And the produce from that organic farm will now go to support Gleaner's Food Banks, a food bank, and other food pantries around our community, not just the local Indianapolis community, but we already got Tweeted that it's hit other smaller communities outside the Greater Indianapolis area because Gleaner's serves Indiana in a greater way.

So this is about partnerships, it's about looking beyond our walls. It's as a healthcare organization and these times of accountable care and looking at population health strategies, we have to open our doors outward to our citizens and looking at preventative health measure and acting like a healthcare organization, caring about the greater health of our community.

LINCOLN SAUNDERS: You know, the great thing about Garden on the Go and the program is the simplicity of the logic behind it. It's about getting more fruits and vegetables into the diets of Indianapolis families. And the strength that we have going into the program is the partnership that's between a healthcare organization that has embraced the model of prevention through transformative living and developed a program to provide that opportunity. And turning to a for-profit who also lives by those same ideals, has built their business model around providing people with healthy food alternatives, healthy fruits and vegetables.

And through that partnership, we have the opportunity to look at our Garden on the Go customers through a variety of lenses: as our customers, as our clients, as our patients. We're concerned about their health. As customers, in our experience with Green B.E.A.N. Delivery, you know, we have experience getting folks to purchase more fruits and vegetables and incorporate them in their diets. So we get to use those, you know, sales tactics if you will, to try and convince our Garden on the Go shoppers to use more of their food budget for fresh produce. And as our clients were responsive to their needs, their wishes, what they like to see

out of the program, we just expanded the Garden on the Go route from 12 stops to 16 stops based on the demand of our customers. And for many of our stops, we altered the time or location to make it more convenient for the residents in the community.

You know, there's just so many things you don't -- you just don't know about the challenges to healthy eating until you drive a truck of produce into a community and hear what the residents have to say, telling us about their challenges with budgeting their EBT dollars when it comes once a month. And by the end of the month, they're, you know, struggling to get by on the dry goods they still have in their storage. But their refrigerator is empty of fresh produce. Challenges with mobility or, as Lisa said, with the quality of the produce available in many of the retail outlets in their communities. You know, everything that we've learned through Garden on the Go is at your disposal. We would love to talk to each and every one of you about what we've learned, what we've seen, so you can take it back to your districts. Thank you.

ANGIE ABBOTT: Hello, my name is Angie Abbott and I'm with Purdue Extension. And I don't know about you all, but I'm hoping that for lunch we're having Donna's recipes. Because they looked great. I made a note about your book when you were speaking.

I'm going to talk to you today about nutrition education programs that run through the land grant university. Here in Indiana, the land grant university is Purdue. We have two programs that we service through Purdue Extension. One is the FNEP program, which is the expanded Food and Nutrition Education Program. And then we also work the SNAP Ed program, which is the supplemental nutrition assistance program and the education component that goes along with that program. And what we do with those two programs is we empower limited resource audiences to make healthy food choices, to prepare safe meals, use food dollars wisely, and to encourage people to engage in regular physical activity to enhance their quality of life. And what I think is one thing that's very unique about our programs is we are sort of the next step.

So they talked about getting access to food for individuals. And the job of the staff that work on the ground -- and we service all of the counties across the state of Indiana. And what our staff do is sort of that next step. When they work with clientele to think about if I go to that fresh produce aisle, you know, I see all these beautiful fruits and vegetables, but what do I do with them? You know, do you take the skin off of them? How do I cook them? If I choose these, what do I do with them? Because someone that has very limited resources, they want to make sure they get the best use out of everything. They can't afford to waste anything. And so we want to work with them to make for certain that they take their very limited food dollars and stretch them as far as they can. And they do that in getting quality food and getting the most nutrients out of those food that they are able to afford.

And so my staff work with individuals to think about preparing meals and making sure when they prepare those meals and they plan for those meals that they include things that, one, they already use what they have in their pantry. They, if they're on some sort of food assistance, that they use those foods wisely. And then they use whatever other resources they have to make smart choices. If that's not enough to get them through the end of the month, it's our job -- it's our staff's responsibility to help them think through other resources and other safety nets in the community.

And we can provide individuals with education materials and social media, but oftentimes what people need is a person to sit down with them and talk through what their challenges are. And I think that's really what's unique about our programs is we go into the homes and work with people. We have many elderly people that can't get out of the home. And so we help those individuals think about strategies to make smart food choices and to become physically active. And we also have individuals that have lots of challenges, food deserts, and other challenges that make it hard to do what we consider traditional. And so that's one thing that I think is really unique. We provide education in homes, but we also work with community and faith-based organizations and we also do programmings in the schools, in low-income schools. Schools that are 50% or more free and reduced lunch are our target schools.

And we -- our topic areas are things like how to make something grand from what's on hand, how to get more fruits and vegetables into your diet, how to prepare safe foods when you may not be living in an environment that makes that easy. Maybe hot water is a problem. Maybe they're living in an apartment complex where the refrigerator doesn't stay to temperature. So these are sort of the issues that our staff go in and help assess what the needs are. Maybe the first need is to help them figure out how to get a refrigerator that holds temperature. Maybe the first step is to help them think about finding a table that the whole family can sit down together at and have a meal. So what we do is we go in and do needs assessments with individuals, help them think about what the first steps are. And then we provide education around what those needs are. So it's not prescriptive, it's based on individual needs.

The other thing is we work on a paraprofessional model, so we hire staff people that live in the communities that they're going to serve. So they're working with their neighbors and their friends and their family members. And that's when we see the highest impact because they can relate what they're educating about. One of the unintended consequences of our programs is we hire these individuals to do this work and they become empowered. We have several examples of where we've hired staff who have been empowered and encouraged about nutrition and food and then went to a community college and then on to get degrees at four-year colleges in dietetics, in nutrition. And that's really exciting, that's transformational. And that's sort of what we like to see.

At Purdue, we work really hard to hire and employ those people that represent the demographics of their community. And we assess that every year as we move through these programs. I think, as a registered dietician, I think nutrition and physical activity plays a key role in helping us meet our obesity and diabetes and health disease challenges that we have ahead of us. Our data shows that we are making a difference in the lives of our clientele. We have evaluation data that shows that our clients significantly increase their fruit and vegetable consumption after serving a series of lessons with us. They significantly increase their physical activity and they decrease their reliance on food emergency assistance programs and they also decrease their food insecurity in the home, which is our ultimate goal.

So I want to thank each and every one of you for your support of your local land grant universities and cooperative extension. The Snap Ed program and the F-net program, these programs are truly partnerships. It takes local government, it takes state government, and it takes our federal programs. And it takes all three of those things working together to make these programs work. In addition to that, it takes partnerships. We are actually working with the Garden on the Go program. We have staff that goes out with them that helps clients choose fruits -- fresh fruits and vegetables and then think about how they're going to use those once they get them home. And so that's what we do. We take those, all these partnerships, local, state, and federal governments, in addition to community and faith-based organizations, and make a difference in their lives. So thank you for your support of these important nutrition education programs.

DWIGHT EVANS: I'd like to say good morning to all of you. It is my pleasure. My name is Dwight Evans, I'm from the Commonwealth of Pennsylvania. I'm going to speak about a subject that is real personal to me and give you a little sense of how I got involved in this particular issue.

The Commonwealth of Pennsylvania is about 12 million people. Basically it's Philadelphia and Pittsburgh and it's rural Pennsylvania in between. And really, most people don't look at it because they think a lot about the city of Philadelphia. Basically Pennsylvania is a rural state. When you get outside of Philadelphia and Pittsburgh, all in between, basically is -- our number one industry is agriculture. So one, I want to thank you about speaking on this opportunity about the Pennsylvania Fresh Food Financing Initiative. And I want to give you kind of a brief overview of my vision and the creation of this initiative.

In my 30 years as an elected official, the Fresh Food Financing Initiative has probably been one of my most successful events since I've been in public life. Because basically it's a sustainable public policy initiative that I've championed. It's more than good policy, it's personal. I grew up in the city of Philadelphia in an urban neighborhood. And at that time, when I grew up in that particular neighborhood, they had supermarkets and grocery stores in the '60s all throughout the neighborhoods. Those supermarkets disappeared.

It was a gentleman by the name of Reverend Leon Sullivan who started an initiative called OIC and took over Progress Plaza. I learned a lot from him in observing how he had, in the African-American community, used the base of the church to do economic development. So I want you to understand, I started out with this initiative from economic development. I started from this initiative about job creation and building formation. That was the way I started. The idea was, I said to the Pennsylvania Legislator Black Caucus, that I wanted to do in each one of the areas a supermarket. Now, I knew full well that every neighborhood didn't necessarily need a supermarket, but I wanted to be able to design on this initiative.

I formed an alliance with what you call the farmer's -- the Food Trust organization that is in the city of Philadelphia. And in that organization, basically the Food Trust did what you call mapping of the community and showed basically where there were not supermarkets in rural or urban areas. They put a detailed mapping of supermarket access in Philadelphia. Access was unevenly distributed. Low-income residence was disproportionately affected. And there was a correlation between the lack of access and the incidence of death and disease. The Pennsylvania House committee on Health and Human Services held hearings on what you call the grocery gap. And as a result of them doing hearings on that particular area, it gave documentation to what we all knew, that basically supermarkets and grocery stores were not just in urban areas, but also was not in rural areas.

As a result of this, basically what I was able to do is set \$30 million aside, \$10 million over a three year period. I reached out to an organization called the Reinvestment Fund. This organization is what you call a CDFI. The CDFI, the deal I worked with CDFI, is that they would come up with matching money to the \$30 million. They would come up with \$90 million of private money. What I also did with that with the reinvestment from the food trust, I wanted to ensure that there were minority workers involved in this process. A broader organization today called the Urban Affairs Coalition that was about creating opportunities for minority workers. As a result of the Reinvestment Fund, which was like the banker, the Food Trust, which did the mapping, and the Urban Coalition which basically was responsible for trying to ensure the minority participation, those three organizations are brought together.

As a result of bringing those organizations together, what were we concentrating on? Jobs, obesity, and community transformation. I championed the \$30 million, \$10 million in each of three years beginning in '04. As a result of that, TRF, which is the investment fund, generated \$146 million. From this pot of money, we generated 88 projects across the Commonwealth of Pennsylvania, 88, that provided access to a half a million people. In addition to that, we generated 5,000 jobs. The economic stimulus, and I know the word stimulus is not a popular word today with people, \$165 million in private investment, 5,000 in terms of jobs, healthcare, and fighting obesity. As a result of this particular idea, I then gave this idea to the White House. I passed this

idea on to the White House. They organized a meeting with a group of us from Pennsylvania there. And as you know, the First Lady, timing was perfect, talks about the Let's Move Initiative. In the federal budget this year and the federal budget next year, there is what you call the Healthy Food Financing Initiative, modeled on what we did in Pennsylvania.

In addition to that, I want to break down the numbers for you so you can understand exactly how the money was spent. Basically, what we did is we set up total grants was 12.1 million. 70.3 million was in total loans. Project costs was 194 million. 5,023 jobs. Real estate space was 1.6 and improved access to half a million people. In addition to that, basically what it does is one-third of the projects are in Philadelphia, two thirds are in small cities, towns, in rural Pennsylvania. And as you know, the rest it has taken off throughout the United States.

In closing, one of the things I wanted to ensure that this was there forever is what I did is I put it in state law. There's something called the First Industry Agriculture program, which now supermarkets are eligible for consideration under the loan program. So if you look at, I took a two-prong approach. I used the \$30 million as an incentive to drive the private market. And then in addition to that, I put it in state law. Now it has been a spinoff. We talk about farmers' market. As a result of I've watched what the First Lady did in the White House. I made the same suggestion in our state capitol. We now have a garden in our state capitol. From the garden in the state capitol to a farmers' market has now kind of been a spinoff in a lot of different ways. And now there's a whole new caucus in our state capitol that we are now focusing and being more focused on how we go about changing lifestyles. Thank you very much.

BEVERLY EARLE: I want to thank all of our panelists for sharing this information and these programs that we know that our constituents could benefit from. And Ms. Green-Goodman mentioned that stress contributes to many illnesses. And our job is very stressful, we know that. And especially if you do it right, it's very stressful. So this is good valuable information and we're going to hear even more valuable information as to how we can do a little bit of self-serving for ourselves.

At this point, we will have some questions and answers from our panel. Also, the folks that are viewing us have had an opportunity to also submit questions and we will take care of those too. So if you have questions, please come to the mic. Yes, over here. And if you have a question for a specific panelist, you can address -- say that. Or if you want all of them address it, that's up to you.

CATHERINE PUGH: Yes. I'm Senator Catherine Pugh from Baltimore, Maryland. I'd like to ask the Honorable Dwight Evans, could you talk to us a little bit about the process in terms of legislation? You know, what you had to go through and how long it took you to get you it done.

DWIGHT EVANS: Senator, in terms of the process, in Pennsylvania we have what's better known as a flexible process of moving money around. And at that time, when I was chairman of the appropriation committee and in the budget negotiations, this was an agenda that I wanted to achieve. And as a result of this agenda, and at that time the Democrats was in the majority -- well, we were not in the majority. We had a Democratic governor. I was able to say that in this negotiation that I want this \$30 million. And I had to back up for it. So I didn't use legislation. What I basically did is use my position as chairman of the appropriation committee to say this is my objective, this I what I'd like to accomplish. And was able to put it into the budget. The governor benefited a great deal by it. The state benefited and the citizens benefited a great deal by it. So at the first initial part, I would say to you there was some skepticism of the idea that I wanted to take \$30 million and use it this particular way, but now you cannot find any haters relating to the success of the program. So it was basically me using my position to say that this is what I wanted to accomplish.

CATHERINE PUGH: Okay, so there's nothing legislatively on the books as it relates to a --

DWIGHT EVANS: No, I just basically said that I wanted direct --

CATHERINE PUGH: Position and power.

DWIGHT EVANS: Exactly.

CATHERINE PUGH: Okay, thank you.

BEVERLY EARLE: We did something similar in North Carolina. At one point, I was one of the chairs of the entire budget. And so I had the opportunity to put \$5 million in the budget for our minority advisory committee. And when you have positions like that, you know, you are in a good position to go on and make those kinds of decisions without it -- without having to enact legislation. All right. Your question?

AUDIENCE MEMBER: Thank you. My question is to Lincoln Saunders regarding the affordability of the products that you're producing and how do you do that. Or have you set it up where they do take EBT cards?

LINCOLN SAUNDERS: Thank you for the question. Affordability and quality are our two highest priorities on what we bring on the truck. Affordability comes from a variety of strategies. Buying produce that's in-season from neighboring farmers when we can. Because Green B.E.A.N. Delivery has such a large customer base on its own, we were in some ways able to leverage our relationship with produce sellers to get the best value for our customers and buy the best products. And we get, you know, our shipments daily so that product that goes out is, you know, very fresh. We accept all forms of payment: cash, credit, debit, and food stamps, and have EBT benefits.

AUDIENCE MEMBER: Good morning and thank each of you. Oh, I'm sorry.

LISA COLE: I was going to add to that that one of the things that enables us to keep the price affordable is that we buy the produce in-season because we partnered with Green B.E.A.N. Delivery and didn't just look at local produce. Then that's what also ensures our ability to serve individuals year round and to serve them at an affordable cost because we can buy in season. We know that our average purchases right now are about seven dollars and on our truck, that will buy you a pound of green beans, a pound of bananas, three pounds of potatoes, a couple of apples, and a head of lettuce. So that's a fair amount of produce that you can buy and when you see these individuals going out with that, you know that there's going to be some good cooking going on that night.

LINCOLN SAUNDERS: And it's definitely true that the partnership between IU Health and Green B.E.A.N. Delivery is set up in a funding mechanism that essentially allows us to somewhat to subsidize the cost of the produce. So the margins on the produce are, you know, as low as possible.

AUDIENCE MEMBER: The second question is you said you have six -- you've gone from 12 stops to 16 stops. How often do they expect the truck to come through? Is it once a week, every other week?

LINCOLN SAUNDERS: We have set stops, times, and locations. So we're there -- you know, we're at the same -- in the same community at one o'clock every Thursday. So they know where we're going to be, where to come. Many times they're often lined up, ready when we show up, so.

BEVERLY EARLE: You know, oftentimes we can do some public-private partnerships. I know in Charlotte there is a pilot program that we just -- that's just kind of been rolled out where the Compost Group has partnered with Meals on Wheels to do a similar produce truck. And so I mean, there's certainly opportunities for some public-private partnerships rather than having the government to do it.

HELEN MILLER: Good morning again and thank you all for coming by. My name is Helen Miller. I'm a state representative from the state of Iowa. My question relates to what each of you said today and I would just like maybe a brief comment from each of you as regards we're talking agriculture here. Not just human services and health. We're talking agriculture. And what I found in my experience is that many legislators, particularly minority legislators, are not approached by the lobbyists, the folks that represent these agricultural interests. And so obviously if we're going to make our country healthy, we're going to have to move forward in these minority communities and have these connections. I believe I heard you say, Representative Evans, something at the end about sustainability. You had a piece of legislation that was put through. So I'd really like to hear you address the agricultural component of this. Thank you.

DWIGHT EVANS: I said that when you look at Pennsylvania in terms of agriculture, you've kind of got to go where the consumers are. And obviously there's a lot of consumers in the city of Philadelphia and the city of

Pittsburgh. So I've really worked a good relationship in the General Assembly with the -- what I call the good old boys and the rural legislators, understanding the importance of agriculture and what it meant in terms of job creation. So what I did is, in addition to that \$30 million in the budget, the governor had an economic stimulus program in '04. And so what I did is tacked onto his economic stimulus program language that would ensure that supermarkets would qualify in his stimulus program. That was not his approach. His stimulus program was dealing with high tech. So what I did is in his stimulus program that he was passing is I put language in there.

So you can understand that simultaneously what I was attempting to do was to show that there was a market for the program by doing the \$30 million. Once I showed that there was a market for the program, then I tacked language onto his stimulus program, which basically put it in permanent law. So you now have it as permanent law of the commonwealth of Pennsylvania. So the \$30 million was more like an appetizer and then now you have it as long-term, which is now a state law. So that's the part when I talk about sustainability in public policy, that now supermarkets are now eligible under this particular program for low-interest loans. They're now eligible, where before they had never been eligible for any type of consideration of this nature.

BEVERLY EARLE: Are there any more questions here? Okay. No, well, he's going to -- we've got some questions coming in from the internet that Senator Richards -- okay, all right, go ahead. I'm sorry.

ANGIE ABBOTT: So speaking from the Cooperative Extension side, it's easy for us to connect with the agriculture here. Oftentimes in the local communities, in the local extension office, not only do we have the nutrition education programs, but we have the ag and natural resources programs. And what our staff on that side of things are doing are working with local farmers to help them connect to markets, of which they can get their produce in. And we are also working with local communities that don't currently have farmer's markets to develop a farmer's market system within a community. And then we work with, on the family and consumer sciences side of things, to work with consumers to get them to the farmer's markets and then buy the produce. We also are working with partners like the SNAP program to see that we can get EBT system at the farmer's market so that our low-income families can use their EBTs at the farmer's market.

So the great thing about the Cooperative Extension service in the local community is we have the folks that focus on the agriculture side that have the relationships with the local farmers. And then the family consumer science side, that provides the nutrition education and has the relationship with the SNAP office in order to connect with the EBT cards.

LINCOLN SAUNDERS: And for Green B.E.A.N. Delivery, agriculture's at the very center of, you know, what our company stands for and what we do. We work with more than 100 different local farmers and artisans in Indiana and across the Midwest. The company operates in six Midwest cities. You know, we have more than

5,000 customers in Indianapolis alone that get weekly or bi-weekly deliveries from us, so you know, we work with the farmers year-round to plan ahead for what they're planting. And we provide them a greater market share source for distributing their produce, so they can grow their farm, their operation, and be more successful as a business. And for Garden on the Go, we're able to take advantage of those relationships that Green B.E.A.N.'s already building with the farmers to provide those same local products or additional items for Garden on the Go shoppers.

LISA COLE: And I think it's also important to be looking at urban farming as an additional resource, and that's something that our own community here in Indianapolis is looking at in where we look at available, unused land, and how that can be converted to urban farms. And encouraging more educational programs at our universities to grow these young, urban farmers and look at that as a source of employment where they may not have in the past, or they didn't see themselves in that role because they didn't grow up on a farm.

LINCOLN SAUNDERS: And really briefly, prior to coming to Garden on the Go, when I was pursuing my Master's degree, I worked with the city's Office of Sustainability to develop an urban agriculture pilot program, which is now a full-fledged program that provided vacant property -- vacant city properties for five-year leases for urban farmers or urban gardeners who wanted to start up for no cost. We just went through an application process and a lease.

DONNA GREEN-GOODMAN: The only thing I would add to that is if you're connecting to farmers and incentivizing them in some way, promote. In Georgia, when I lived in Georgia, we talked about Georgia produce. And I'm sure in Alabama there's a commission that promotes Alabama produce. Somehow connect those producers with ways to make the food healthy when it's cooked by the consumer. And when I did a project in Georgia, we actually worked with public supermarkets. And that was our go-to for the people that we were teaching. And so if you're connecting those places with the producers, then the consumers go there to get it and they learn how to cook it healthfully.

BEVERLY EARLE: Senator Richards has a question that has come in over the Internet.

SENATOR RICHARDS: Good morning to everyone, and let me begin with Ms. Green-Goodman and ask for the other three panelists to respond. Now that we've heard all of the good ideas relative to healthy foods and access to food, the subject matter that one of the persons on the Internet wanted to share with you is, what can be done to be able to bring these foods to the lower-income, underserved, underprivileged constituents that we serve, particularly when we have businesses in these low-income neighborhoods that don't actually sell fresh food and have the position that it's not a profitable issue for them to bring that sort of food to the community? Ms. Green-Goodman? And you could work your way back up.

DONNA GREEN-GOODMAN: The way that we did it in Atlanta was to go where the people were. And our office

was located where the people could come on bus. In Atlanta, there was a farmer's market that wasn't far, so some of those things were accessible to them, but getting them there -- so as a part of our intervention, we actually took the people with us to the places that were nearby to them so that they could access the food. I'm sure partnering with organizations such as this who have the capacity to take the food to the people would be another excellent way of doing it, but we had the advantage in Atlanta of our location so that we could take people literally to the places where they could get it.

LINCOLN SAUNDERS: It's very important that you're able to address the issue of access at the same time you're trying to address the issue of education, of the importance of healthy eating, importance of changing diets. You have to find that avenue to improve access. Representative Evans has found a unique way to reach, you know, countless families in Pennsylvania. Here in Indianapolis, we found another avenue through a mobile produce truck. I think it comes down to the partnerships and to finding groups that are committed to the premise of this conference: prevention through transformative living. Bringing them to the table and working out whatever is that unique program to solve the needs of your community.

LISA COLE: In IU Health's case and I alluded to this earlier, this is part of our more comprehensive strategy through the Department of Community Outreach and Engagement. So we budgeted this money to purchase the produce truck and to pay for the first year of operations and supplement the produce. That's all part of our year-long investment. And it gives us this opportunity to not only build the truck and its capacity that way, but also to allow us to do a little bit of reverse engineering and figure out what we're doing. You know, so many times when we go and seek grant funds, we have to have all the answers before we go and apply for that grant.

We modeled this truck, actually, off of a program in Albany, New York called The Veggie Mobile. It's been around for three years. They got grant funding. They're on target to reach 40,000 customers a year. I got to ask them a few questions as far as then bringing it back to Indianapolis and looking at how we could apply it here. We worked very closely with the mayor's Office of Sustainability to start to look at what kind of data points could we start to draw out a map and look at going to where the people are. And I think that that's the kind of common theme that we've been hearing today too is we've got to get it to the people.

With our truck, though we come to 16 different stops a week, what we really encourage is that people look at this as almost taking the produce aisle out of the grocery store and taking it into a neighborhood near them. The truck doesn't have to stop right in front of them. We don't want them comparing us to, god forbid, the ice cream truck, where we just randomly roam the neighborhoods and we play a silly song and you come out and get ice cream. We have a scheduled route that you can count on, and you should be considering making this your regular stop, regular part of your shopping. And I think one of the things to consider in this produce truck concept is that even though we look at answers in our grocery stores and look at filling in some of those grocery gaps, the reality is still there is a lot to tempt one to spend their limited dollars on. You cannot

buy cigarettes on our truck. You cannot buy chips on our truck. You can only buy fresh produce. And so often too in our grocery stores, that is some of the most expensive items in the grocery store. So to know that this is all you can buy here and it's in a convenient location to you really helps move that dial.

But I think again it's all about getting to those areas where the people are. And now what we've done with this expanded route is we've reached out farther into the community and looked at partnering with community organizations such as Flanner House and Southeast Community Center and Shepherd Community Center so that those are trusted resources in the community. We can use them to cross-communicate. We also are very fortunate in that our local public allies chapter, we have been awarded -- Garden on the Go is one of the designated team service projects for this year. And so we will have nine public allies, young individuals who are being grown and groomed to serve in community service. They are going to go out and hit the streets for us and really help us penetrate much more into the community to get the word out and get people recognizing this resource in their own community.

SENATOR RICHARDS: I wanted to thank you for your responses. I think we are almost out of time. Madame Chair?

BEVERLY EARLE: Let's give our panel a round of applause. Thank you.