

# Sparking Solutions: Q&A With Jan Shaeffer, President of St. Christopher's Foundation for Children

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*As part of our partnership with the Delaware Valley Grantmakers, we are profiling individual issues. In an interview, Jan Shaeffer of St. Christopher's Foundation for Children breaks down the organization's work, its goals and solutions that are working to improve hunger and obesity in the greater Philadelphia region. Her answers have been edited for length.*

## **What is St. Christopher's Foundation for Children?**

We're a grantmaking public charity and we focus our work in north Philadelphia — the community served by St. Christopher's Hospital for Children. We focus on prevention-based initiatives, particularly with children and families.

We were born out of the hospital and we carry on the charitable tradition that the hospital began in 1875. We are a separate organization but we are committed to serving the community that the hospital serves.

## **Which of the foundation's programs focuses on hunger?**

Farm to Families is a food access program that was started approximately three years ago. We invest in organizations that create a distribution and deployment of this fresh food for families to purchase in north Philadelphia at about half of retail. A medium box is \$10 and a large box is \$15 and there's an entire complement of a la carte items consisting of non-processed type foods that are not produce: eggs, meats, cheeses and other products.

We started with one box and we've now surpassed over 11,000 boxes since the program's inception.

## **How did it start?**

We were already doing some investing in fresh food and looking at the high rates of obesity in north Philadelphia — where in some areas 70 percent of children are overweight or obese, which is a very high number.

We couldn't have the conversation about changing behavior until we had the actual vehicle for them to do that: fresh food. So about three years ago the foundation applied for one of 15 grants in the country that was awarded by the Convergence Partnership, made up of six of the largest health funders in the country. They pooled their assets together and said that they wanted to do a program around healthy eating and active living and that's how we got some funding to start this.

It was SHARE, a program in north Philadelphia, [that] actually started procuring fresh food for this program. They weren't doing fresh food before. They were doing a lot of non-perishable items but this actually allowed them to offer fresh food on a regular basis to their current customers and to the new group of Farm to Family sites throughout north Philadelphia.

## **How do you get the word out about Farms to Families?**

We have a program called Fresh Rx. Doctors are writing prescriptions for the fresh food when the child comes for a health visit. The prescription acts as a coupon for their first box of fresh food. The Fresh Rx program is really exciting because it allows us to connect with the participants from the macro level.

So a family might either receive a prescription from a physician or they might receive information about the program in their own community.

## **How does the program work?**

If I'm a resident in north Philadelphia and I'm interested in eating healthier and accessing fresh food, I would go to one of the four sites and sign up and pay for my first box of food in advance. I would take my Fresh Rx prescription that I was given by my physician and present it at the site. That prescription acts as my \$5 coupon for my first box.

Then I would come back a week later and pick up my box of fresh food, get recipes that pertain to the ingredients in the box and interact with 1812 Productions — a new pilot we've starting working on [that does] nutrition education from the framework of using comedy to teach. We also have people from the Health Promotion Council that come and do nutrition education with the families.

## **What's the criteria for participation?**

They must live, work or worship in north Philadelphia.

That's the criteria for the program right now but other health-related organizations throughout the region have expressed interest in this program. We've invested nearly three-quarters of a million dollars in this program over the last three years and we've built an infrastructure and we've been able to scale the model out at various sites in north Philadelphia. Recently, St. Mary's in Bucks County came on as a partner; it's a hospital that has embraced this program as a way for them to provide fresh food to a community of people that are in need and while that's not in our particular area, we have extended out to build sustainability for the program.

## **How often does Farms to Families happen?**

It happens every week, year round. The year-round component is a big deal because in order to have real behavior change it has to be there consistently. So although they can access farmers' markets in the summer, it's really important that they continue purchasing fresh foods throughout the year. Our program [uses mostly local food] in the summer months but when it hits the winter, we do go outside the area because we need to have things available.

## **What link do you see between hunger and obesity?**

I think there's a lot of connection. When there is a dearth of food, you are more likely to consume the highest-calorie food and it does not necessarily have nutrition density. When people don't have enough to eat, they often don't eat what they would if they had additional resources.

So they do walk hand-in-hand because the less money you have, the cheaper the food you purchase, which can lead to obesity. You're filling up with empty calories and you're continuing to feel hungry. Where you might say, "that person doesn't need to eat" or "they're not hungry," in fact, they are starving for nutrition. Malnourishment [can] be you don't have food or malnourishment can be having enough food but it's not nourishing you.

## **Why is there a gap between available nutrition services and those who participate in them?**

There are lots of challenges. There are people who are either right on the cusp or they don't have all the things that fill in the criteria and the system just doesn't work well. Even SNAP is not necessarily going to solve the problem. The whole SNAP system needs to be changed to help people get healthy and well.

And there are thousands of people who are eligible to receive the benefits that are not getting them either because it's too complicated, they don't have the materials when they go in [to apply] or they are not aware of the program. But even so, it doesn't necessarily mean it's going to work well for them.

## **What are some recent shifts in the foundation's approach to hunger?**

The comedy [program]. I'm so curious to see how that continues to work because I think it's very evident that nutrition education is not working in its present iteration. People need to be engaged in a different way than just having conversations. We're really looking forward to seeing how people [react] when they're in a conversation that feels light, more accessible and not so overwhelming.

## **What's next for the foundation?**

We just finished our Fresh Rx Symposium. We had people from around the country that were talking about the most promising practices, new innovations and how we can use technology to address some of these pressing issues around food access and nutrition.

We are working on doing the third iteration of that symposium in the future.

## **Any final words?**

People want to be healthy. Where there are fair-wage jobs, people can change the way they are consuming food. And there's also hope that we can help families learn to use the resources that they have — whether that's SNAP or [other] resources — in the best way possible. It's a very complex issue; it's not just about getting food. It's all the other factors that play into people being healthy in general; they all have to happen simultaneously.