

Community Action Guide

a PLACE AT THE TABLE

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MEDIA

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TABLE OF CONTENTS

- 1 Introduction
 - About ***A Place at the Table***
 - Take Your Place: A National Campaign*
 - A Brief Overview of Hunger and Obesity in America

- 3 Using Film to Spark Dialogue and Inspire Action
 - What a Film Can Do
 - How to Use This Guide
 - For Facilitators
 - Getting the Conversation Started

- 6 Themes and Issues Explored in ***A Place at the Table***
 - 6 Food Insecurity in the United States
 - 10 The Relationship Between Hunger, Poverty and Obesity
 - 14 Barriers to Food Access
 - 18 Hunger and Health
 - 22 Food Assistance in America
 - 26 The Role of Schools

- 30 Glossary

- 32 Resources and Suggested Reading

- 36 Innovative Models and Solutions

Introduction

About *A Place at the Table*

Fifty million people in the United States—including one in five children—suffer from hunger and do not get enough to eat on a regular basis to be healthy and active. In ***A Place at the Table***, directors Kristi Jacobson and Lori Silverbush follow three families struggling with food insecurity: Barbie, a single mother who grew up in poverty and is trying to provide a better life for her two kids; Rosie, a fifth-grader who often depends on friends and neighbors to feed her and has trouble concentrating in school; and Tremonica, a second-grader who suffers from asthma, obesity and related health issues, which are exacerbated by the poor quality of the food her hard-working mother can afford.

Ultimately, ***A Place at the Table*** shows us how hunger and obesity pose serious economic, social and cultural implications for our nation and how food access issues could be solved once and for all if the American public decides—as we have in the past—that making healthy food available and affordable is in all of our best interests.

A Place at the Table is a Participant Media presentation, released to theaters, On Demand and DVD in North America by Magnolia Pictures and available for nontheatrical screenings through ro*co films.

www.takepart.com/table

Take Your Place: A National Campaign

In conjunction with the 2013 theatrical release of ***A Place at the Table***, Participant Media, working with Active Voice and several nonprofit organizations working to end hunger and obesity, launched the *Take Your Place* Social Action Campaign. This effort brings together everyday Americans and a consortium of leading nonprofit organizations, experts and companies who are concerned about the high level of food insecurity in our country. The campaign's centerpiece is a first-of-its-kind National Action Center, powered by Share Our Strength, that provides national and local actions to engage people in solutions. Through this geo-targeted hub, the public can call (855-48TABLE [488-2253]), click (**takepart.com/table**) or text (FOOD to 77177) to access ways to drive systemic change around food insecurity and impact the interconnected issues of hunger, poverty and obesity in the city, county or state where they live.



A Brief Overview of Hunger and Obesity in America

More than 50.1 million Americans live in food-insecure households, meaning they are often unsure where their next meal is coming from. Each day, they face the possibility of going hungry. Even more distressing is that 16.6 million of these Americans are children. In ***A Place at the Table***, filmmakers Kristi Jacobson and Lori Silverbush explore many dimensions of hunger in America and its causes.

Often when people think of hunger, they think of an emaciated child in a developing country, but hunger looks different in America. Its effects are often subtler and easy to miss. Developing countries suffer from extreme food shortages, and there is simply no food to buy. But in the United States, we have plenty of food to go around. The problem? High-quality, nutritious food is very expensive.

Consider this: The price of soda has fallen 33% over the last 30 years while the price of fruits and vegetables has increased by more than 40%. Also, low-income neighborhoods often lack stores that carry a variety of healthy foods. The foods most readily available in these communities are often cheap, high in calories and low in nutrients. The result is a large number of Americans who are not only hungry, but also at greater risk for health problems like obesity and diabetes: a hungry child in the United States may actually be overweight instead of emaciated. In the past, food insecurity and obesity were viewed as separate public health problems, but experts now recognize that the issues are related.

How did we get here? ***A Place at the Table*** explores the many factors that have created this complex problem: rising poverty levels; a system of food production and subsidies that makes unhealthy food cheap and healthy food expensive; federal food assistance programs—like food stamps and free school lunches—that are often underfunded and subject to political whim; and the widespread lack of knowledge that this is a problem right here in our country, not just in countries thousands of miles away.

It can all sound pretty grim, but there are many bright spots. Communities are taking matters into their own hands. They are demanding nearby grocery stores and farmers markets as well as healthy produce in liquor and convenience stores. New school lunch guidelines require schools to provide more vegetables and whole grains and fewer foods high in salt and fat. Large-scale community food banks have taken up the charge and are creating innovative ways to bring fresh, whole food—instead of just packaged and canned donations—to the families they serve. And citizens, nonprofit organizations and policymakers all over the country are demanding changes to our current food system that will make it possible for all Americans to purchase healthy, affordable foods.

What can you do? Watching ***A Place at the Table*** and reading this guide is a good first step. Not only does this viewer's guide delve into many of the issues addressed in the film, but it also provides snapshots of good work happening throughout the country to prevent hunger and resources for taking action to help reverse the problem. Whether you can relate to the characters depicted in ***A Place at the Table*** or you were unaware that hunger and obesity was such a huge issue in our country, we hope both the film and this guide inspire you to take your place in the effort to end hunger and obesity forever.

Using Film to Spark Dialogue and Inspire Action

What a Film Can Do

A Place at the Table provides intimate perspectives of people grappling with hunger every day, and in doing so, it opens up new opportunities to engage in a dialogue about hunger and obesity in America. The personal stories put a human face on current policies, data and research.

After viewing ***A Place at the Table***, audiences are likely to feel a range of emotions, from anger to concern to hope. A well-planned screening of this film has the power to inspire and leverage those emotions into collective action. When it comes to social change, a film can't do it all, but it can set the stage—laying out the issues in a way that draws people in and builds interest in potential solutions.

How to Use This Guide

This guide was designed to provide background about ***A Place at the Table*** and spark meaningful discussions about the urgency of hunger and obesity in the United States. Although the guide doesn't necessarily provide a comprehensive overview of hunger and obesity in America, it does enable viewers to connect the issues in the film to things happening in their own communities, as well as offer potential actions they can take. We hope that by parsing out the complex themes in ***A Place at the Table***, this guide will enable a broad range of audiences—parents, students, teachers, health care professionals, nutritionists, local politicians, healthy food enthusiasts and more—to explore a vision that ensures all Americans have access to healthy affordable foods.



Adapted from "American Shame," *New York Times*, February 19, 2011.
www.nytimes.com/imagepages/2011/02/19/opinion/19blowcht.html?ref=opinion

Film Themes, Discussion Questions and Activities

This guide breaks the film into six main themes: Food Insecurity in the United States; The Relationship Between Hunger, Poverty and Obesity; Barriers to Food Access; Hunger and Health; Food Assistance in America; and The Role of Schools.

Under each theme, you'll find the following components:

- **The Facts:** Background information about the topic.
- **Discussion Questions:** A list of suggested questions about the theme to help spark meaningful dialogue after the screening.
- **Small Group Activity:** Some sections feature ideas for activities that will inspire deeper understanding and engagement with the themes.
- **Snapshot from the Field:** Examples of what's being done by various organizations to address the specific challenges raised in that section.
- **Take Action:** Ideas for addressing these issues in your community and the steps to put these ideas into action.

For Facilitators

The discussions and activities mapped out in this guide may raise some personal issues and sensitivities. Because of the profoundly personal nature of experiences with hunger, poverty and access to healthy foods, we highly recommend that discussions and activities are led by an experienced facilitator.

Setting Guidelines

Before delving into the conversation, it's important to establish guidelines and create a safe space where participants trust each other enough to share their experiences. A good way to do this is to conduct a whole-group brainstorming session around discussion guidelines before engaging in conversation. You or a volunteer should jot down guideline ideas on a flipchart or whiteboard to have as a reference. You may consider prompting participants with some commonly used dialogue guidelines.

1. **Let others speak.** If you speak a lot, step back so others can speak, and if you are quieter, feel empowered to share your experiences and opinions.
2. **All questions are welcome.** Ask questions and feel free to ask for more information or clarification.
3. **Stay positive.** It's hard to open up in a group. Make sure you support others in your group by focusing on the positive.
4. **One person speaks at a time.** The conversation will only work if people can hear each other!
5. **Use "I" statements.** Speak from your own experience as much as possible, and lead statements with "I think," "I feel" or "I believe."

For those conducting public screenings of *A Place at the Table*, download the full Event Planning Guide at www.takepart.com/table for tips and suggestions on putting together a great event.

See the Take Action sections to learn more about concrete things individuals can do to end hunger, and see Resources, p. 32, for additional information on hunger and obesity.

Getting the Conversation Started

1. What is your immediate response after watching *A Place at the Table*? What specific moment(s) stood out to you? Why?
2. Do you relate to any of the characters in the film? Why or why not? Was there a character whose story you found particularly moving? How so?
3. Were you aware that hunger is such a big problem in the United States? If not, what is your reaction to the statistics in the film and this guide?
4. What is easier to find near where you live, fresh fruit and vegetables or cookies and chips? How far do you have to travel to purchase healthy food? How does your experience compare with the families featured in the film?
5. In the film, Barbie says: "I feel like America has this huge stigma for how families are supposed to eat together at a table. But they don't think about what it takes to get you there and what's there when you're actually at the table." What do you think she means by this statement? Do you feel like food access and hunger is a subject people don't like to talk about openly in your community? Why or why not?

See a word or term you're not familiar with? Check out the Glossary on p. 30.

TAKE ACTION

To get involved in your community:

Log on to *A Place at the Table's* National Action Center at takepart.com/table to find out about organizations and efforts in your area that are combating hunger and obesity on a local level. Whether you are a concerned individual who wants to do something or the head of an organization that wants to get more involved in local efforts, there are many different ways you can help.

If you or someone you know is in need of food:

Call the National Hunger Hotline at 1-866-3HUNGRY (348-6479).
Spanish speakers call 1-877-8HAMBRE (326-6273).

Themes and Issues Explored in *A Place at the Table*

► Food Insecurity in the United States



“Sometimes we run out of food so we try to figure out something, probably ask friends for food. We get really hungry and our tummies just growl, and sometimes I feel like I’m going to barf cause it feels bad. I don’t really know what to do.”

—Rosie Casey, Colorado fifth-grader

Food insecurity: having uncertain access to enough nutritious food to lead an active and healthy life.¹

THE FACTS

- Food-insecure households are those that struggle to put food on the table at some point during the year.² People who fall under the US Department of Agriculture (USDA) definition of “Low Food Security” have had to make changes in the quality or quantity of their food in order to deal with a limited budget. People who fall under the USDA definition of “Very Low Food Security” struggled with having enough food for the household, including cutting back or skipping meals on a frequent basis. People suffering from both levels of food insecurity frequently face the threat of being hungry—not eating or not eating enough.³
- 50.1 million people lived in food-insecure households in 2011 (up from 48.8 million in 2010). Of those, 33.5 million are adults (14.5% of all adults) and 16.6 million are children (22.4% of all children).⁴
- More than one in six Americans (18.2%) said in 2012 that there had been times over the past 12 months when they didn’t have enough money to buy food that they or their families needed.⁵
- Hunger affects all Americans, but it has a disproportionate impact on particular communities. Latino, black and rural households are especially hard-hit by hunger and poverty, as are families in large cities. In 2011, 26.2% of Latino households, 25.1% of black households and 15.4% of rural households experienced food insecurity.⁶ 25% of households with children in large cities are food insecure.⁷
- Poverty in the United States has been measured for decades; measuring hunger is a more recent phenomenon. Once annual food insecurity data began to be collected in 1995, it became clear

¹ “Household and Child Food Insecurity” by Children’s Health Watch. <http://www.childrenshealthwatch.org/page.php?id=165>

² “US Food Insecurity” by Bread for the World. www.bread.org/hunger/us/insecure.html

³ “A History of the Food Insecurity Measure” by Food Research and Action Center. frac.org/reports-and-resources/hunger-and-poverty/a-history-of-the-food-insecurity-measure/

⁴ “Hunger and Poverty” by Food Research and Action Center. <http://frac.org/reports-and-resources/hunger-and-poverty/>

⁵ “Food Hardship in America 2012: Data for the Nation, States, 100 MSAs, and Every Congressional District” by Food Research and Action Center (2012). http://frac.org/pdf/food_hardship_2012.pdf

⁶ “Disparities in Food Insecurity” by Food Research and Action Center. frac.org/reports-and-resources/hunger-and-poverty/disparities-in-food-insecurity/

⁷ “Hunger Facts” by No Kid Hungry. www.nokidhungry.org/problem/hunger-facts



Rosie Casey in *A Place at the Table*, a Magnolia Pictures release. Photo courtesy of Magnolia Pictures.

that the ups and downs in food insecurity were closely aligned with changes in poverty.⁸ Rates of food insecurity are substantially higher than the national average among households with incomes near or below the federal poverty line.⁹

- Children are particularly hard-hit by food insecurity—16.6 million Americans under the age of 18 live in households where they are unable to consistently access enough nutritious food necessary for a healthy life.¹⁰ That's nearly in one in five young people.¹¹
- The cost of hunger and food insecurity to the US economy is \$167 billion per year, including expenses associated with operating food banks, soup kitchens and shelters; the cost of treating illnesses and psychosocial problems; and costs related to diminished academic achievement for students and lower productivity for working adults.^{12, 13}

⁸ "Causes of Hunger in the US" by Bread for the World. www.bread.org/hunger/us/causes.html

⁹ "Hunger Facts" by No Kid Hungry. www.nokidhungry.org/problem/hunger-facts

¹⁰ "Hunger and Poverty" by Food Research and Action Center. <http://frac.org/reports-and-resources/hunger-and-poverty/>

¹¹ "Hunger Facts" by No Kid Hungry. www.nokidhungry.org/problem/hunger-facts

¹² "Hunger in America: Suffering We All Pay For" by Center for American Progress (2011). <http://www.americanprogress.org/issues/poverty/report/2011/10/05/10504/hunger-in-america/>

¹³ "Making the Connection: Linking Policies that Prevent Hunger and Childhood Obesity" by Leadership for Healthy Communities (2012). http://www.leadershipforhealthycommunities.org/images/stories/lhc_hunger_obesity_02.14.12.pdf

Food Insecurity in the United States

DISCUSSION QUESTIONS

1. Have you or someone close to you ever struggled to put food on the table? How do/did you deal with that? Where did you turn for help?
2. Public health expert Mariana Chilton said, "85% of those families that are food insecure have at least one working adult in the household." Do you find that surprising? Why or why not?
3. **A Place at the Table** follows people like Adam Appelhanz, the police officer from Colorado, who explains, "The stereotype of food banks is [that they're] always for the unemployed or the disabled, people [who] can't go out and get a job." Do you agree that this stereotype exists? How did the film change your perception of hungry people in America, if at all?
4. David Beckmann, executive director of Bread for the World, observes, "In our country we put a lot of emphasis on self-reliance, on everybody fending for themselves, on liberty. And those are all great strengths, but as a nation it has not been our strength to do what we can to reduce poverty." What do you think he means by this statement? Do you agree or disagree? In your opinion, how is self-reliance linked to poverty, if at all? And how do children fit into the equation?
5. In the film, the Witnesses to Hunger moms from Philadelphia traveled to Washington, DC, to advocate for better social policies for their families. In response to their testimony, Rep. James McGovern gushed, "We have a lot of lobbyists who come down here who get well paid and talk about other things....You are a dream come true for me." Why would a policymaker be relieved to hear directly from families?
6. Leslie Nichols, the elementary school teacher, explains that she is familiar with hunger and what some of her students are going through. "I didn't do well in school. I didn't have that great attendance and I just felt like I kind of lived under this umbrella of feeling inferior to others." Why do you think that, as a child, Leslie felt ashamed of something she couldn't control? Do you think this social stigma contributes to why the urgency of hunger in our society is so hidden?
7. The struggles endured by Rosie, Barbie and Tremonica can be seen as representative of those encountered by members of the rural, Latino and black communities who experience food insecurity at higher rates than other Americans. What factors do you think contribute to this inequity?

Small Group Activity (also for individuals)

Tell Your Story: Spend 20 to 30 minutes writing about your personal experience with hunger. Have you experienced it firsthand or know someone who has? Do you volunteer at a food bank or emergency kitchen? Do you see children or families in your neighborhood who are hungry or at risk? If you're part of a group, go around the room and have each person share his or her story, and then compare and contrast as a group.

SNAPSHOT FROM THE FIELD: COMMUNITIES MAKING A DIFFERENCE

In a Community Near You: Fighting Hunger at a Local Level

Healthy Kids, Healthy Communities, a national program of the Robert Wood Johnson Foundation, partners with 50 communities across the country to implement healthy eating and active living initiatives that support healthier communities for children and families, such as:

- **Introducing nutrition and exercise programs at childcare centers throughout Charleston, WV.** At Mom's Helping Hand child care center, parents have become advocates for their children's nutrition, bringing in fresh fruits and vegetables and 100% juice or milk, and they help cook dinner for the children. First Presbyterian Church Preschool serves food "family style," replaced sugary drinks with water, switched from whole to skim milk and introduced healthy celebrations to reduce the amount of unhealthy sweets.
- **Improving access to fresh fruits and vegetables among recipients of federal nutrition assistance in Benton County, OR.** Expanded Supplemental Nutrition Assistance Program (SNAP) benefits so families can use them to buy fresh produce at local farmers markets. This local partnership is also working to make the farmers market in Corvallis more accessible to Latina women and community members who have typically been less likely to redeem SNAP benefits.
- **Expanding community gardens in Kane County, IL.** 250 new garden plots are available in underserved communities. Additionally, the local "giving garden" network—made of local farmers, specialty growers and churches that provide surplus produce to the Northern Illinois Food Bank and local pantries—has grown.

TAKE ACTION

Find out if there is a Healthy Kids, Healthy Communities program in your area, and learn how you can get involved. For more information, visit www.healthykidshealthycommunities.org/communities

▶ The Relationship Between Hunger, Poverty and Obesity



“A lot of people think there is a yawning gap between hunger on the one end and obesity on the other. In fact, they’re neighbors....They are both signs of having insufficient funds to be able to [buy] the food that you need to stay healthy.”

— Raj Patel, author of *Stuffed and Starved: The Hidden Battle for the World Food System*

THE FACTS

- Although researchers are still studying the connections among hunger, poverty and obesity, evidence suggests that the additional risk factors associated with poverty make food-insecure and low-income people especially vulnerable to obesity.¹⁴
- Poverty affects not only the quantity, but also the quality of food to which people have access. Lower-income neighborhoods frequently lack full-service grocery stores and farmers markets where residents can buy a variety of fruits, vegetables, whole grains and low-fat dairy products.¹⁵ In addition, some experts argue that less-expensive foods have higher calories and fat and fewer nutrients, while foods that are lower in calories and have a higher nutritional value are more expensive. In order to keep a family fed, parents with limited means will often buy less-nutritious food because they can buy more of it.¹⁶ (For more on this, see “Barriers to Food Access,” p. 14.)
- The United States is experiencing an obesity epidemic: two-thirds of adults and nearly one-third of children and adolescents are overweight or obese.¹⁷
- The child obesity rate has tripled among school-aged children and adolescents over the past 30 years, and obesity is affecting children at younger and younger ages.¹⁸
- Although obesity is prevalent at all income levels, lower-income households are disproportionately affected.¹⁹ Nearly 45% of overweight or obese children ages 10–17 are poor.²⁰
- The medical cost of adult obesity in the United States is difficult to calculate, but estimates range from \$147 billion to nearly \$210 billion per year. Childhood obesity alone carries a huge price tag—up to \$14 billion per year in direct health care costs.²¹

^{14, 15} “Why Low-Income and Food Insecure People are Vulnerable to Overweight and Obesity” by Food Research and Action Center. <http://frac.org/initiatives/hunger-and-obesity/why-are-low-income-and-food-insecure-people-vulnerable-to-obesity/>

¹⁶ “Food Security, Poverty, and Human Development in the United States” by John T. Cook and Deborah A. Frank, *Annals of the New York Academy of Sciences* (2008). www.childrenshealthwatch.org/upload/resource/cook_frank_annals_08.pdf

¹⁷ “Overweight and Obesity in the US” by Food Research and Action Council (2012). <http://frac.org/initiatives/hunger-and-obesity/obesity-in-the-us/>

¹⁸ “Policy Priorities: Childhood Obesity” by Children’s Defense Fund. <http://www.childrensdefense.org/policy-priorities/childrens-health/child-nutrition/childhood-obesity.html>

¹⁹ “Childhood Obesity: The Challenge” by Robert Wood Johnson Foundation. <http://www.rwjf.org/en/about-rwjf/program-areas/childhood-obesity/the-challenge.html>

²⁰ “Policy Priorities: Childhood Obesity” by Children’s Defense Fund. <http://www.childrensdefense.org/policy-priorities/childrens-health/child-nutrition/childhood-obesity.html>

²¹ “Childhood Obesity: The Challenge” by Robert Wood Johnson Foundation. <http://www.rwjf.org/en/about-rwjf/program-areas/childhood-obesity/the-challenge.html>

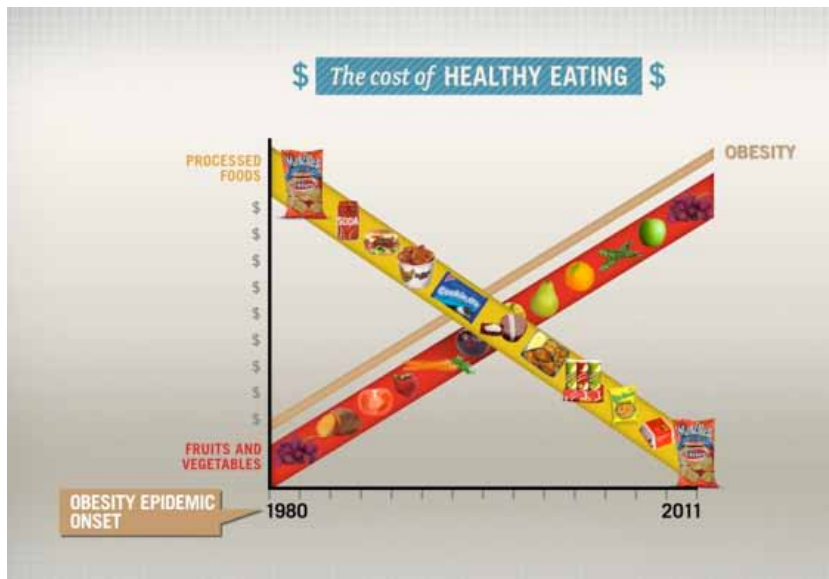


Barbie Izquierdo and kids in *A Place at the Table*, a Magnolia Pictures release. Photo courtesy of Magnolia Pictures.

- When healthy foods are available in lower-income neighborhoods, the foods are often of poorer quality, especially fresh produce. This diminishes the appeal of these items to buyers.²²
- Lower-income neighborhoods have fewer resources for engaging in physical activity than do higher-income neighborhoods, including fewer parks, green spaces, bike paths and recreational facilities, making it more difficult to lead a physically active lifestyle.²³
- Those who are eating less or skipping meals to stretch food budgets may overeat when food does become available, resulting in chronic ups and downs in food intake that can contribute to weight gain. Cycles of food restriction or deprivation also can lead to an unhealthy preoccupation with food and metabolic changes that promote fat storage, which is made even worse when combined with overeating.²⁴
- Lower-income youths and adults are exposed to disproportionately more marketing and advertising for obesity-promoting products that encourage the consumption of unhealthful foods and discourage physical activity (e.g., fast food, sugary beverages, television shows, video games). Such advertising has a particularly strong influence on the preferences, diets and purchases of children, who are the targets of many marketing efforts.²⁵

²²⁻²⁵ “Why Low-Income and Food Insecure People are Vulnerable to Overweight and Obesity” by Food Research and Action Center. frac.org/initiatives/hunger-and-obesity/why-are-low-income-and-food-insecure-people-vulnerable-to-obesity/

The Relationship Between Hunger, Poverty and Obesity



The relative price of fresh fruits and vegetables has gone up by 40% since 1980 when the obesity epidemic first began. In contrast, the relative price of processed, packaged food has gone down by about 40%.²⁶

DISCUSSION QUESTIONS

1. Is it surprising to you that there is such a strong correlation between hunger and obesity? Why or why not? Consider some of the contributing factors and discuss.
2. Are there obstacles to getting healthy food in your community? If so, what are they? If not, are there surrounding communities where it may be a challenge?
3. In the film, Secretary of Agriculture Tom Vilsack testified to Congress that only 25% of young adults in America today aged 19 through 24 are fit for military service. What do you think this means for our country? Do you think there are ways to reverse this trend? If so, how?
4. Dr. Booker, the family doctor from Mississippi, explains that obesity exacerbates diseases like high blood pressure and diabetes, which are growing at an alarming rate among children. He sees education as the only solution and says, "We need to start it very early on." What are some examples in the film of ways that young people are being educated in their communities about the importance of eating healthy food? Are there other factors in addition to education that you see as important in addressing childhood obesity?
5. The film cites Mississippi as having the highest rate of food insecurity and the highest rate of obesity of any state in the country. Considering some of the film's subjects from Mississippi (Miss Cherry, Ree, Tremonica and her mother, Kimberly), what are some of the daily challenges that they face in accessing healthy food? What are some examples of these women overcoming challenges in the film?
6. If junk foods were more expensive than fresh produce, do you think people would choose to eat healthier foods more regularly? How do you think price shapes the choices that we make about what we eat?

²⁶ "Sodas a Tempting Tax Target" by David Leonhardt, *New York Times* (2009).
http://www.nytimes.com/2009/05/20/business/economy/20leonhardt.html?_r=2

SNAPSHOT FROM THE FIELD: COMMUNITIES MAKING A DIFFERENCE

Playing in the Park to End Childhood Obesity

Park and recreation services represent a crucial outlet for physical activity. Unfortunately, many communities face a lack of parks, poor park infrastructure in the parks they do have, and crime and safety issues.

Community groups and local parks and recreation departments throughout the country are working to improve the availability and quality of parks in these underserved communities where children depend on them as places to play and be active.

In the primarily Latino population of South Corvallis, OR, for example, the Corvallis Parks and Recreation Department has implemented a culturally appropriate program for children to be active and play. *La Escuelita de Fútbol* (The Little Soccer School) is a soccer recreation program specifically designed for Spanish-speaking students. It is the county's first monolingual-Spanish organized recreation program offered to begin to close up the large gap in services available to the community's Latino families.

In Rochester, NY, a Rec on the Move van was implemented to increase city youths' access to recreation activities, equipment and facilities. The van meets kids where they are—in their neighborhood parks. Full of play equipment chosen by local youths, the Rec on the Move van tours the city, spending a couple of days in various parks during the spring, summer and fall.

TAKE ACTION

Are there free community or school programs that offer physical workouts for kids and adults in your community? If so, consider volunteering with them. If these programs don't exist, explore how you might identify the appropriate partners to help you establish one. Don't know where to start? The Strategic Alliance for Healthy Food and Activity Environments offers an online tool with a menu of strategies designed to help you select and prioritize methods for improving activity environments on a local level: www.eatbettermovemore.org/sa/enact/members/index.php

▶ Barriers to Food Access



“We have stores in Jonestown. We have about three grocery stores, but it’s hard [to get] some... things. Like when you want fruit... no stores sell fruit. Maybe one store will have a few bananas. They have vegetables, but in the can.... And so that’s why I go to Clarksdale sometime for grocery shopping, or Batesville, about a 45-minute drive. Those that doesn’t have transportation, it’s hard.”

— Ree Harris, Jonestown, MS

THE FACTS

- Many experts believe that one of the main reasons for the hunger and obesity epidemics is that many people in the United States lack access to healthy foods.
- In our country, 29.7 million people live in low-income urban areas more than one mile from a supermarket, often referred to as *food deserts*. These communities lack adequate access to fresh, healthy and affordable food choices. This is a particular challenge for those living in communities of color and rural areas.²⁷
- Low-income neighborhoods have half as many supermarkets as the wealthiest neighborhoods and four times as many smaller grocery stores, according to an assessment of 685 urban and rural census tracts in three states. The same study found four times as many supermarkets in predominantly white neighborhoods compared with predominantly black ones.²⁸
- The same communities without supermarkets and grocery stores often have many fast food, liquor and convenience stores selling unhealthy, high-fat, high-sugar foods.²⁹
- A nationwide analysis found there are 418 rural food-desert counties where all residents live more than 10 miles from a supermarket or supercenter. This is 20% of rural counties.³⁰
- As some experts in the film point out, our broken food subsidy system is one factor that contributes to food insecurity in the United States. However, a recent report by Public Health Watch found that simply doing away with payments to commodity farmers will not result in significant price changes for healthy or unhealthy foods. Instead, this report argues, it would be better to focus efforts on food processing and distribution mechanisms that would make healthy food more accessible to the urban and rural communities that need it the most.

²⁷ “Access to Affordable and Nutritious Food: Updated Estimates of Distance to Supermarkets Using 2012 Data” by United States Department of Agriculture, Economic Research Service (2012). <http://www.ers.usda.gov/publications/err-economic-research-report/err143.aspx>

²⁸ “Associations of Neighborhood Characteristics of the Location and Type of Food Stores” by Center for Social Epidemiology and Population Health, American Journal of Public Health (2006). <http://www.ncbi.nlm.nih.gov/pubmed/16380567>

²⁹ “Making the Case” by Healthy Food Access Portal. www.healthyfoodaccess.org/get-started/making-case

³⁰ “Food Availability and Food Deserts in the Nonmetropolitan South” by Southern Rural Development Center (2012). http://srdc.msstate.edu/publications/other/foodassist/2006_04_blanchard.pdf

How Do Food Deserts Come About?

There is no single agreed-upon cause of food deserts. The issue is a complex one, and although food policy researchers agree that these areas do indeed exist, the jury is still out on why.

Historically, beginning in the 1960s and 1970s, white, middle-class families left urban centers for homes in the suburbs, and supermarkets left with them. Once they left the city, grocers adapted operations to suit their new environs, building ever-larger stores and developing chain-wide contracts with large suppliers and distributors to stock the stores with foods demanded by a fairly homogeneous suburban population.

These supply and distribution structures don't always make sense for dense urban areas. Some food activists argue that grocery chains are worried about crime in low-income neighborhoods and so choose not to locate stores there. Others argue that it's simply economic: low-income communities don't have the buying power to keep these larger stores afloat. In rural areas, experts point to transportation issues—there may be little economic incentive for food distributors to bring a wide variety of foods to an out-of-the-way town.

Though causes and solutions are, of course, linked, most advocates for more equitable food access are focused on bringing healthy food options back to these communities.

Strategies include: attracting or developing grocery stores and supermarkets; developing other food retail outlets, such as farmers markets, public markets, cooperatives, farm stands, community-supported agriculture programs and mobile vendors while ensuring public benefits can be used at these venues; increasing the quantity and quality of fruits, vegetables and other healthy foods at neighborhood corner stores and small grocery stores; growing food locally through backyard and community gardens and through larger-scale urban agriculture; and improving transportation to grocery stores and farmers markets.

- Nearly one-third of the US population cannot easily access basic transportation to purchase food.³¹ These challenges disproportionately affect people of color and low-income individuals.³²
- Another food access issue is cost. A 2010 study by the University of Washington showed that nutrient-dense foods associated with better health outcomes tend to cost more per calorie than refined grains, sweets and fats and that the price disparity between healthful and less healthful foods appears to be growing.³³ Another recent study, published in the *American Journal of Clinical Nutrition*, found that a dollar could buy 1,200 calories of potato chips and cookies; spent on a whole food like carrots, the same dollar buys only 250 calories. In the beverage aisle, you can buy 875 calories of soda for a dollar or 170 calories of fruit juice from concentrate.³⁴
- The *Journal of the American Medical Association* reported that the inflation-adjusted cost of highly processed foods made from high-calorie commodities dropped 10% between 1982 and 2008. During the same period, the price of fruits and vegetables increased by 50%. Overall, the cost of food has risen the last few years because of market and environmental factors.³⁵

³¹ "At the Intersection of Public Health and Transportation: Promoting Healthy Transportation Policy" by American Public Health Association (2010). <http://www.apha.org/NR/rdonlyres/43F10382-FB68-4112-8C75-49DCB10F8ECF/0/TransportationBrief.pdf>

³² "Socioeconomic Differences in Household Automobile Ownership Rates: Implications for Evacuation Policy" by Institute of Business and Economic Research (2006). <http://urbanpolicy.berkeley.edu/pdf/raphael.pdf>

³³ "The Rising Disparity in the Price of Healthful Foods: 2004-2008" by Center for Public Health, Nutrition and the Nutritional Sciences Program, School of Public Health, The University of Washington (2010). www.sciencedirect.com/science/article/pii/S030691921000076X

³⁴ "Poverty and Obesity: The Role of Energy Density and Energy Costs" by *The American Journal of Clinical Nutrition* (2004). <http://ajcn.nutrition.org/content/79/1/6.abstract>

³⁵ "Obesity and the Economy From Crisis to Opportunity" by *The Journal of the American Medical Association* (2009). <http://jama.jamanetwork.com/article.aspx?articleid=183302>

Barriers to Food Access

DISCUSSION QUESTIONS

1. Are there obstacles to getting healthy food in your community? If so, what are they? If not, are there surrounding communities where it may be a challenge?
2. The film mentions the concept of food deserts, places where there is no access to healthy food. Did you know these existed? Were you aware that there are higher rates of obesity in food deserts? Why do you think this is? Given some of the institutional limitations that prevent access to healthy food in food deserts, what are some smaller-scale ways to make healthy, affordable food more available in such communities?
3. To reach a fully stocked grocery, Ree has to drive 45 minutes from her small town in Mississippi and Barbie has to travel more than an hour each way on a bus. How far do you have to travel for a fully stocked grocery store? How do you think proximity changes eating choices and behaviors?
4. Kimberly, a single mom in Mississippi explains, "Fruit [is] very high [in price] and you got chips that's 35 cents a bag, so I say, 'OK, I'm not going to get the fruit; I'm going to get some chips.'" Do you think that healthy food should be cheaper and more accessible than junk foods? If it were, do you think people you know would eat healthier foods or do you think they would just pay more for junk foods? What are some other steps that could encourage people to eat healthier?
5. In the film, Alfio Rausa, a district health officer in Mississippi, puts himself in the shoes of a large food retailer: "I can't afford to take my 18-wheeler and go through these back roads. They're off the beaten path. So you just don't fit our model, you know? Maximum delivery, minimum cost." What are some ways to encourage more healthy-food retailers in areas that don't have regular access to healthy foods?
6. The film lists a lot of examples of communities that are struggling with little to no healthy-food access. Are there examples in your community of innovative ways that people have made fresh produce more accessible?

Small Group Activity

The \$10 Grocery Challenge: Break the group into three small groups (or pairs, if your group is small), give \$10 to each group and then head to the grocery store. Each group must try to buy as many items as possible. Group #1 can only buy processed and packaged food, regardless of nutritional value. Group #2 can only buy fruits and vegetables. Group #3 can buy any kind of food. Once each group has shopped, calculate the total items and total calorie count of each group's groceries. Which shopping trip yielded the most items? Which yielded the highest amount of calories? How do your findings relate to the link between hunger and obesity?

Processed foods: Generally refers to foods that are repackaged in boxes, cans, cartons or bags. These foods have been processed, using methods such as canning, cooking, freezing or dehydrating. Although some processing of food does little harm (as with milk and whole-wheat bread), often the processing of food involves the addition of artificial ingredients and chemicals and removes important nutrients.

SNAPSHOT FROM THE FIELD: COMMUNITIES MAKING A DIFFERENCE

Collaborating for Equitable, Sustainable Food System Reform

In Cleveland, OH, there are 4.5 times as many fast-food establishments as full-service grocery stores, and only 21% of Cleveland adults report adequate fruit and vegetable consumption. About 26% of Cleveland's approximately 400,000 citizens live below the poverty line, 10.8% have been diagnosed with diabetes and 33.8% are obese.

Faced with these grim statistics, the Cleveland–Cuyahoga County Food Policy Coalition, a coalition of local government, nonprofits, farmers, researchers, food activists and citizens, has been directly involved in many initiatives that have dramatically increased healthy-food access in recent years, including:

- The development and successful implementation of policy recommendations to encourage local food production, such as an affordable water policy for urban gardens and farms, long-term leases for urban agriculture and the creation of community gardens within walking distance of every resident.
- The acceptance of SNAP benefits (often referred to as food stamps) at six of the nine farmers markets within Cleveland—compared with no markets in 2007.
- The creation of 50 new community gardens in Cuyahoga County. In 2009, community gardens in the county produced \$2.6 million to \$3 million worth of fresh fruits and vegetables on more than 56 acres.
- The creation of the Cleveland Corner Store Project, which helped increase the availability of fresh fruits and vegetables in convenience stores in underserved Cleveland neighborhoods.

For more information, visit www.cccfoodpolicy.org

TAKE ACTION

Join or Start a Food Policy Council

Food policy councils (FPCs), like the Cleveland–Cuyahoga County Food Policy Coalition, bring together stakeholders from diverse food-related sectors to examine how the local food system is operating and to develop recommendations on how to improve it. FPCs can take many forms, but are typically either commissioned by state or local government or are a grassroots effort. They have been successful at educating officials and the public, shaping public policy, improving coordination between existing programs, and starting new programs.

Joining or establishing an FPC in your area is a great way to improve access to nutritious food on a local and/or state level. Food First can help you find or found one: www.foodfirst.org/en/about/programs/policycouncils

▶ Hunger and Health



“If we don’t change the direction we’re heading, this generation will be the first to live sicker and die younger than their parents’ generation.”

— Todd Platts, former US Representative, Pennsylvania

THE FACTS

- Food-insecure children are 90% more likely to have their overall health reported by doctors as “fair/poor” (rather than “excellent/good”) compared with kids from food-secure homes.³⁶
- Low-income families, including children, may face high levels of stress because of the financial and emotional pressures of food insecurity, low-wage work, lack of access to health care, inadequate and long-distance transportation, poor housing, neighborhood violence, and other factors. Research has linked stress to obesity in youths and adults, including (for adults) stress from job-related demands and difficulty paying bills.³⁷
- Many low-income people lack access to basic health care, and if health care is available, it is generally lower quality. This results in a lack of diagnosis and treatment of emerging chronic health problems like obesity.³⁸
- Numerous studies have linked household food insecurity to poorer nutritional, physical and mental health among adults and children.³⁹ Children who struggle with hunger are sick more often and are more likely to be hospitalized. They are also more likely to experience headaches, stomachaches, colds, ear infections and fatigue.⁴⁰ They may be at higher risk for chronic health conditions, such as anemia and asthma, and may have more frequent instances of oral health problems.⁴¹
- Food insecurity is strongly linked to maternal depression, which in turn can affect a child’s development in a variety of ways. For example, depression may reduce a mother’s ability to provide needed care, impair mother-child interaction and attachment, and increase risk for child neglect and abuse.⁴² Mothers with depressive symptoms have a 169% greater chance of reporting household food insecurity.

³⁶ “Food Security, Poverty, and Human Development in the United States” by John T. Cook and Deborah A. Frank, *Annals of the New York Academy of Sciences* (2008). www.childrenshealthwatch.org/upload/resource/cook_frank_annals_08.pdf

^{37, 38} “Why Low-Income and Food Insecure People are Vulnerable to Overweight and Obesity” by Food Research and Action Center. frac.org/initiatives/hunger-and-obesity/why-are-low-income-and-food-insecure-people-vulnerable-to-obesity/

³⁹ “Food Insecurity and Risk for Obesity Among Children and Families: Is There a Relationship?” by Robert Wood Johnson Foundation (2010). www.childrenshealthwatch.org/upload/resource/rwj_fiobesity_jc_april10.pdf

⁴⁰ “Facts on Childhood Hunger” by No Kid Hungry (2011). www.nokidhungry.org/sites/default/files/2011-childhood-hunger-facts.pdf

⁴¹ “Child Development” by Feeding America. <http://feedingamerica.org/hunger-in-america/impact-of-hunger/child-development.aspx>

⁴² “Food Security, Poverty, and Human Development in the United States” by John T. Cook and Deborah A. Frank, *Annals of the New York Academy of Sciences* (2008). www.childrenshealthwatch.org/upload/resource/cook_frank_annals_08.pdf



Tremonica Simmons in *A Place at the Table*, a Magnolia Pictures release. Photo courtesy of Magnolia Pictures.

- Childhood hunger can have a negative effect on long-term health. One longitudinal study found that children who went hungry at least once in their lives were 2.5 times more likely to have poor overall health 10 to 15 years later compared to those who never had to go without food.^{43, 44}
- Brain development is most sensitive to a baby's nutrition between mid-gestation and two years of age. Children in this range who are malnourished—not just fussy eaters, but truly deprived of adequate calories and protein in their diet—do not adequately grow, either physically or mentally. Children with inadequate nutrition often suffer long-lasting behavioral and cognitive deficits, including slower language and fine-motor development, lower IQs and poorer school performance.⁴⁵
- Iron-deficiency anemia (low iron in the blood), a sign of a poor diet, affects nearly 25% of children from lower-income families and is linked with impaired ability to learn.⁴⁶
- Severe hunger is associated with higher reported anxiety/depression among school-aged children.⁴⁷

⁴³ "Study: Effects of Childhood Hunger Last for Decades" by Alice Park, *Time Magazine* (2010). <http://www.time.com/time/health/article/0,8599,2008240,00.html#ixzz2JHxHWXlb>

⁴⁴ "Child Hunger and Long-term Adverse Consequences for Health" by Archives of Pediatrics and Adolescent Medicine (2010). <http://archpedi.jamanetwork.com/article.aspx?articleid=383613>

⁴⁵ "How Does Nutrition Affect the Developing Brain?" FAQ by Zero to Three: National Center for Infants, Toddlers and Families. main.zerotothree.org/site/PageServer?pagename=ter_key_brainFAQ#nutrition

⁴⁶ "Nutrition and Cognitive Development" by American Academy of Pediatrics (1994). <http://aapnews.aappublications.org/content/10/11/2.1.abstract>

⁴⁷ "Food Security, Poverty, and Human Development in the United States" by John T. Cook and Deborah A. Frank, *Annals of the New York Academy of Sciences* (2008). www.childrenshealthwatch.org/upload/resource/cook_frank_annals_08.pdf

Hunger and Health

DISCUSSION QUESTIONS

1. What are some of the health problems that you and/or your family are dealing with? Do you believe these problems are linked at all to food insecurity?
2. If discussing in a small group, have participants raise their hands if they have one, two or three family members who struggle with diabetes, high blood pressure or obesity. Are you surprised by the number of hands? Why or why not?
3. Raj Patel says in the film: "Our legislators only think the cost of hunger in America is (what) they spend on food stamps, but the genuine cost of hunger of America is way, way higher." What do you think he means by this? What other costs are linked to hunger in America?
4. One in three children born in 2000 will develop Type 2 diabetes at some point in their lives. What are some of the factors shown in the film that contribute to the reasons why people are developing diet-related illness at such an unprecedented level? What are some potential solutions to slowing down the rampant numbers of diabetes?
5. In the film, Miss Cherry, the schoolteacher in Mississippi, explains that she developed Type 2 diabetes and set out to drastically change her diet in order to stay healthy. In her case she was able to change the school lunch menu to offer healthier options. What other institutions outside the home could play an important role in curbing nutrition-related health problems?
6. Barbie Izquierdo explains in the film that she didn't have enough food when her son, Aiden, was a small child, and he has since suffered from developmental problems. Think about the children in your own community that are struggling with these very problems. What steps can you, your faith group, your classroom or your public officials take to better meet the needs of these children?



Leslie Nichols in *A Place at the Table*, a Magnolia Pictures release. Photo courtesy of Magnolia Pictures.

SNAPSHOT FROM THE FIELD: COMMUNITIES MAKING A DIFFERENCE

Just What the Doctor Ordered: Food Pantry Prescriptions

For a lot of medical departments, the connection between healthy bodies and healthy food is an obvious one, and treating diet-related disease has everything to do with access to healthier food. Public health departments that work with low-income patients also recognize how difficult it is for their populations to access the kinds of food that can both prevent and treat diseases.

Innovative programs like the Preventive Food Pantry at Boston Medical Center work to address the problems of nutrition-related illness and minimally nutritious diets for low-income patients by creating a pathway of communication between doctors and nutritionists. In this model, primary care providers write “prescriptions” for supplemental foods that best promote physical health, prevent future illness and facilitate recovery. Families that receive prescriptions are able to visit the pantry twice a month and take up to three days’ worth of food to feed their families. The Pantry provides mostly perishable foods, like meats and seasonal fruits and vegetables. It serves an average of 7,000 patients per month. For more information, visit www.bmc.org/nutritionresourcecenter/foodpantry.htm

TAKE ACTION

Build Bridges Between Health Care Providers and Food Providers

The incredible work of the Boston Medical Center’s Preventive Food Pantry was the result of a handful of brave individuals who spent time defining the problem and making strategic partnerships to address it. Does your local emergency room or public health department partner with your local food bank, farmers market or community garden? If not, think about bringing these groups together around a screening of the documentary to explore building bridges across sectors. These new relationships can bolster mutually shared efforts to bring about a healthier, more equitable community for all.

▶ Food Assistance in America



“The assistance programs in the United States are very hard to qualify for. It’s like either you’re starving or you don’t get any help. But what defines starving? Like if you don’t eat for a day, are you starving? In their eyes no, but in your eyes and the way you feel, of course.”

— Barbie Izquierdo, member of Witnesses to Hunger

THE FACTS

- More than one in seven Americans use food stamps (now called the Supplemental Nutrition Assistant Program, or SNAP).⁴⁸
- Nearly half of all American children will receive SNAP assistance at some point in their childhood.⁴⁹
- Only one in four people are eligible to receive SNAP benefits.⁵⁰
- The average monthly SNAP benefit per person is approximately \$133.85, or \$1.50 per meal.⁵¹
- For a family of four, the USDA estimates it would cost \$627 per month to purchase a minimally nutritious diet.⁵² Based on the federal minimum wage of \$7.25 per hour, it would take 86 hours—more than two weeks of income—to earn enough to cover the current cost of this diet alone.
- A family of four must earn less than \$23,052 a year to be eligible for SNAP.⁵³
- In 1980, there were 200 food banks in the United States; today there are more than 40,000 food banks, pantries and soup kitchens. Fifty million Americans rely on such charitable food programs.⁵⁴
- In 2010, 20% of food-insecure households used food pantries at some time during the year.⁵⁵ This commonly used resource is meant to be a short-term solution, but more and more families are relying on food banks regularly for their food.⁵⁶

⁴⁸ “SNAP/ Food Stamp Participation” by Food Research and Action Center (2013). <http://frac.org/reports-and-resources/snapfood-stamp-monthly-participation-data/>

⁴⁹ “Facts on Childhood Hunger” by No Kid Hungry (2011). www.strength.org/pdfs/2011-childhood-hunger-facts.pdf

⁵⁰ “SNAP/ Food Stamp Participation” by Food Research and Action Center (2013). <http://frac.org/reports-and-resources/snapfood-stamp-monthly-participation-data/>

⁵¹ “SNAP (Food Stamps): Facts, Myths and Realities” by Feeding America. <http://feedingamerica.org/Home/how-we-fight-hunger/advocacy-public-policy/policy-center/federal-anti-hunger-programs-and-policies/supplemental-nutrition-assistance-program.aspx>

⁵² “Replacing the Thrifty Food Plan in Order to Provide Adequate Allotments for SNAP Beneficiaries” by Food Research and Action Center. http://frac.org/pdf/thrifty_food_plan_2012.pdf

⁵³ “Supplemental Nutrition Assistance Program: Eligibility” by United States Department of Agriculture, Food and Nutrition Service (2013). http://www.fns.usda.gov/snap/applicant_recipients/eligibility.htm

⁵⁴ *Sweet Charity* by Janet Poppendieck. (New York: Penguin, 1999); *How Hungry Is America* by Joel Berg. (New York: Seven Stories Press, 2008).

⁵⁵ “Food Insecurity and Risk for Obesity Among Children and Families: Is There a Relationship?” by Robert Wood Johnson Foundation (2010). www.childrenshealthwatch.org/upload/resource/rwj_fiobesity_jc_april10.pdf

⁵⁶ “Food Banks: Hunger’s New Staple” by Feeding America (2011). <http://feedingamerica.org/hunger-in-america/hunger-studies/hungers-new-staple.aspx>



Learn more about SNAP Alumni at www.takepart.com/place-at-the-table/snap-alumni

- Food banks rely on donated and surplus food. Healthier foods like fruits, vegetables and proteins often require refrigeration or spoil quickly. The result is that the food distributed by food banks to hungry families may be high in fat, packaged and processed and lacking in important nutrients.⁵⁷
- More than 60% of households participating in SNAP earn income that they contribute toward the family food budget—but their earnings are not enough to stave off hunger.⁵⁸
- President Obama’s economic stimulus plan (the American Recovery Reinvestment Act of 2009) provided tens of billions of additional dollars for food assistance programs. Studies show that every food stamp dollar spent actually generates at least \$1.74 in the broader economy. This is called a “multiplier effect.”⁵⁹
- According to the Food Research and Action Center, SNAP lifted nearly 4 million Americans above the poverty level in 2011 by boosting monthly income.⁶⁰

⁵⁷ “Food Pantries Request Healthier Donations Over Bulk Junk Food This Christmas” by Dinesh Ramde, AP (2011). http://www.huffingtonpost.com/2011/11/21/food-pantries-healthy-food-donations_n_1104973.html

⁵⁸⁻⁶⁰ “6 Essential Facts About How the Farm Bill Helps Hungry Americans” by Take Part (2013). <http://www.takepart.com/article/2013/03/04/how-farm-bill-affects-hungry-americans>

Food Assistance in America

DISCUSSION QUESTIONS

1. Barbie Izquierdo talks about how hard it is to qualify for food assistance programs in the United States. Throughout the film, we see her struggling to feed her family. When she finally gets a job, she is told that she makes \$2 over the required amount for assistance. Does this system seem fair to you? Why or why not? If not, what alternative approaches might you propose?
2. Leslie Nichols volunteers to drop food off at houses in her community, but she feels torn about the nutritional value of a lot of these foods. She says, "In a perfect world, you would want it to be as well balanced as you could make it, but the reality is you get what you can, and giving something is certainly more than nothing." What do you think she means by that? How do you feel about the quality of the food that is donated to the needy?
3. Toward the end of the film, Barbie tells her representatives, "Just because we live where we live and we come from where we come from doesn't mean that we're not smart. Doesn't mean we don't have potential...doesn't mean we want to depend on welfare for the rest of our lives." Can you relate to this statement? Why or why not? Why do you think Barbie feels the need to articulate this to her representatives?
4. In the film, we learn that in the 1960s, there was a huge push to end hunger that resulted in regular Americans demanding free breakfast and lunch programs, elderly feeding programs and the expansion of food stamps. As a result, by the late 1970s hunger was basically eradicated. Why do you think hunger has come back as such a pressing issue in our country? Based on what you know about our history, do you think ending hunger is a possibility today?
5. In the film, Jeff Bridges says, "Charity is a great thing, but it's not the way to end hunger." He then adds, "We don't fund our Department of Defense through charity. We shouldn't see that our kids are healthy through charity either." Do you agree or disagree with this statement? Why?

Small Group Activity

Take the Food Stamp Challenge:

The average daily food stamp benefit is \$4.20 per person. For one week, try living on this grocery budget and learn how difficult it is to avoid hunger and purchase nutritious foods. For more information on participating in and organizing a food stamp challenge, check out the Share Our Strength's Food Stamp Challenge <http://www.nokidhungry.org/blog/snap-wic/2012/12/take-food-stamp-challenge>

SNAP: Myths vs. Facts

- Myth:** People receiving SNAP benefits just need to get a job.
- Fact:** 40% of households receiving SNAP benefits have at least one working person.
- Myth:** SNAP is rife with waste, fraud and abuse.
- Fact:** SNAP fraud is at a historic low of less than 1%.
- Myth:** SNAP creates dependency.
- Fact:** The average length of time a new participant stays in SNAP is 8–10 months.
-

SNAPSHOT FROM THE FIELD: COMMUNITIES MAKING A DIFFERENCE

Farming for Food Assistance

Kingsbury Farm in Warren, VT was established as a unique partnership between the Vermont Foodbank and the Vermont Land Trust. In payment for the lease, Kingsbury Farm provides the Vermont Foodbank with fresh produce for food shelves and meal sites up and down the Mad River Valley. Along with providing high-quality fresh produce to families in need, the Kingsbury Farm project also preserves valuable Vermont farmland and a historic farmstead and protects the critical riverside habitat. For more information, visit <http://www.vtfoodbank.org/ourprograms/freshfoodinitiatives/kingsburyfarm.aspx>

Kingsbury Farm is not an isolated effort. Urban farms and community gardens across the country are also addressing this issue. Seattle's P-Patch Garden, the Food Project in Massachusetts, Urban Adamah in Berkeley, CA and Clean Greens in Atlanta, GA are just a few of the community organizations that donate a portion of the food they grow to the community and local food banks.

TAKE ACTION

Share Your SNAP Story

More people have received SNAP benefits than you think. People all over the country who have once been, but no longer are, on SNAP are speaking out to share their stories. If you experienced firsthand what it's like to live on food stamps, submit to TakePart's SNAP Alumni gallery by emailing snap@snapalumni.org. To see the SNAP gallery, read stories and learn more, visit <http://www.takepart.com/place-at-the-table/snap-alumni>

▶ The Role of Schools



“We are tying the arms behind the backs of children as they go into public schools. We’re making it so that we spend money for teachers and then we deliver to them a lot of children who can’t learn.”

— Larry Brown, author of *Living Hungry in America*

THE FACTS

- 62% of America’s teachers regularly see kids who come to school hungry because they are not getting enough to eat at home.⁶¹
- Poor children who attend school hungry perform worse on standardized tests than poor children who attend school well fed.⁶²
- Children aged 6–11 in households without enough food have lower math scores and are more likely to repeat a grade than similar children whose families have enough food.⁶³
- On a typical school day, 19.6 million children receive a free- or reduced-price lunch through the National School Lunch Program (NSLP).⁶⁴
- The NSLP reimburses schools at the rate of \$2.68 per meal per income-eligible child.⁶⁵
- Despite the low reimbursement rate, USDA research indicates that the nutritional intake of eligible children who participate in the NSLP is superior to the nutritional intake of those who do not participate.⁶⁶
- As part of the Healthy, Hunger-Free Kids Act, starting in 2012 new school lunch guidelines (which must be followed for schools to receive reimbursement) doubled the amount of fruits and vegetables, increased the amount of whole grains, set limits on trans fats and salt, and required schools to offer low-fat, rather than whole, milk.⁶⁷

⁶¹ “The Problem” by No Kid Hungry. www.nokidhungry.org/problem/overview

⁶² “Nutrition and Cognitive Development” by American Academy of Pediatrics (1994). <http://aapnews.aappublications.org/content/10/11/2.1.abstract>

⁶³ “Food Security, Poverty, and Human Development in the United States” by John T. Cook and Deborah A. Frank, *Annals of the New York Academy of Sciences* (2008). www.childrenshealthwatch.org/upload/resource/cook_frank_annals_08.pdf

^{64–66} “National School Lunch Program” by Food Research and Action Center. frac.org/federal-foodnutrition-programs/national-school-lunch-program/

⁶⁷ “Making the Connection: Linking Policies that Prevent Hunger and Childhood Obesity” by Robert Wood Johnson Foundation (2012). http://www.leadershipforhealthycommunities.org/images/stories/lhc_hunger_obesity_02.14.12.pdf

Q&A: The School Snack–Obesity Connection

A recent report by the Kids' Safe and Healthful Foods Project examined state standards for the types of snacks that can be sold in secondary schools. In this Q&A, Jessica Donze Black, the project's director, talks about the report's findings.

Q: You've just released a new report about school snacks—what did you find?

Jessica Donze Black (JDB): We found that the majority of our nation's students live in states where less-healthy snacks like full-fat chips and candy are readily available in snack bars, school stores and vending machines, but there is limited access to healthy snacks. What students are able to buy varies widely from state to state, with some offering healthy snacks and others primarily providing less-healthy snack options.

Q: Why should we care about the kind of snacks sold in schools?

JDB: What we know is that obesity rates have more than tripled among children and teens over the past three decades, leaving nearly one in three kids overweight or obese. Research also shows that 110 to 165 calories per day—the difference between eating an apple or a bag of chips for a snack—may be responsible for these skyrocketing obesity rates among children. And a study released this summer shows that strong nutrition standards for snack foods sold in schools may help reduce students' weight gain.

Q: Will healthier snacks in schools really make a difference when many other factors play into childhood obesity and chronic disease?

JDB: Many children get as many as half of their daily calories while at school, so what they eat and drink there does play a major role in contributing to their overall health and well-being. In addition, school is where many children learn dietary habits that will last them a lifetime, so it is beneficial to begin teaching them to choose healthier alternatives while they are young.

Q&A reprinted courtesy of the Robert Wood Johnson Foundation (2012).

The Role of Schools

DISCUSSION QUESTIONS

1. Leslie Nichols says of her student Rosie: "I felt that she just really didn't care about what I wanted her to learn or that school was that important. And what I realized when I brought her in one day was the main issue was that she was hungry." How do you think that hunger affects the behavior of young people?
2. Referring to the prevalence of hunger in the classroom, Larry Brown says, "We are tying the arms behind the backs of children as they go into public schools." What do you think he means by this?
3. Miss Cherry works with her students inside and outside the classroom to introduce healthy foods that they might not be familiar with. When her school instituted a new healthier menu for the cafeteria, she heard a lot of "I don't eat that" and "I don't like this." Do you think that encouraging young people to eat healthy foods would make a difference in the overall health of our nation? What is your experience with trying to shape young people's diets?
4. US Rep. James McGovern of Massachusetts testified to Congress: "Some of those kids could potentially be great scientists or go on to be leaders in our armed forces, but the impact that hunger has messes everything up, and as a result of that, we're weakening our nation." Do you have the sense that food access is causing lost potential among our nation's children? Why or why not? Whose responsibility is it to make sure that kids have better access to healthy food?
5. On the reality show, "Top Chef," Tom Colicchio created a challenge in which competitors had to create a delicious and nutritious meal for students with the same small budget that public schools get reimbursed from the government: \$2.68 per meal. Although schools are able to negotiate discounts because of the volume of food they purchase and making food for large numbers of people does drive the per-plate cost down, Colicchio's challenge underscores that feeding a lot of children healthy food on a limited budget is still difficult. What do you think this means for kids who eat a school lunch every day? What are some possible ways to ensure that kids who eat school lunches have access to healthier foods?
6. Research shows that school breakfast and lunch programs have a huge impact both on test results and on in-school behavior. Do the schools in your neighborhood have a breakfast or a lunch program? Is it available to all? What kind of food is served?

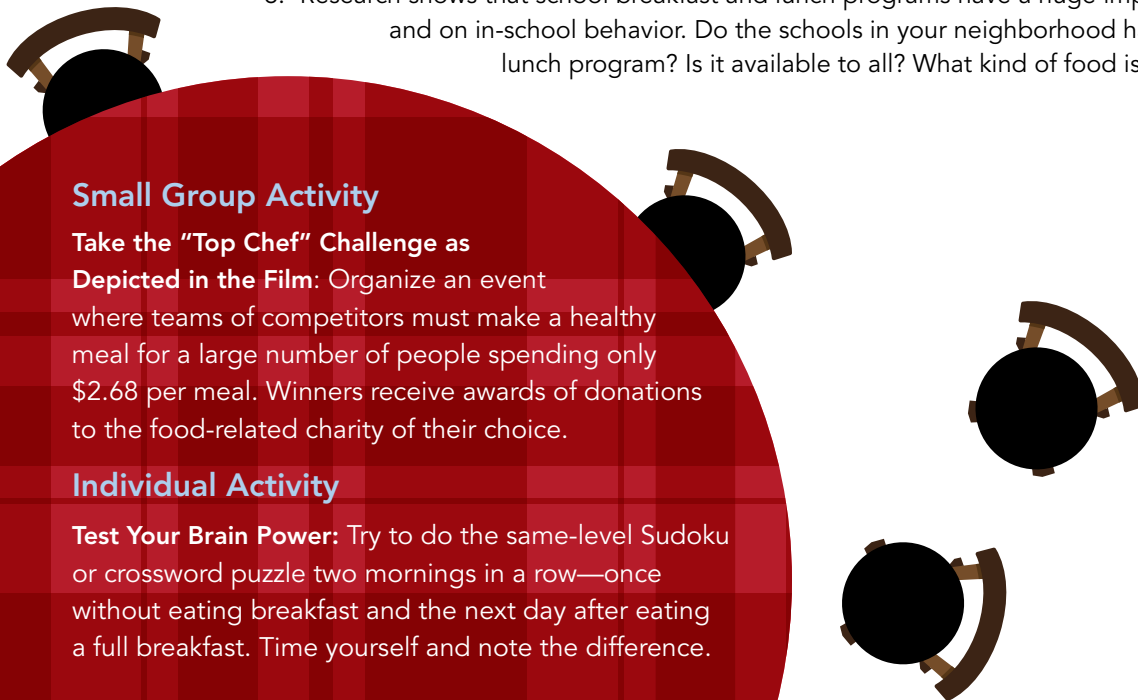
Small Group Activity

Take the "Top Chef" Challenge as

Depicted in the Film: Organize an event where teams of competitors must make a healthy meal for a large number of people spending only \$2.68 per meal. Winners receive awards of donations to the food-related charity of their choice.

Individual Activity

Test Your Brain Power: Try to do the same-level Sudoku or crossword puzzle two mornings in a row—once without eating breakfast and the next day after eating a full breakfast. Time yourself and note the difference.



SNAPSHOT FROM THE FIELD: COMMUNITIES MAKING A DIFFERENCE

Dishing Out Healthy Food at School

The cafeteria at Cleminson Elementary School in El Monte, CA is no ordinary cafeteria. Nowhere else can ordinary students eat “X-ray vision carrots” or an “ironman spinach salad.”

Cleminson Principal Lillian Prince takes great pride in the health and well being of her students and goes to great lengths to make sure the students at her school embrace the healthier choices that the staff provides. At Cleminson, physical activity and nutrition are incorporated throughout the entire curriculum and the entire school day. Celebrity chefs demonstrate nourishing recipes to the kids and teachers lead a minute of exercise in every class. The school also offers programs in soccer, football and other team sports, a large selection of books on health and wellness in the school library, and plenty of physical education offerings to help keep the kids on track.

Cleminson, in fact, is one of two schools in the country that the Alliance for a Healthier Generation recognized with a Gold National Recognition Award in 2012. The alliance is a national initiative dedicated to creating healthier school environments that promote healthy eating and physical activity and recognizing schools that succeed.

For more information on the Alliance for a Healthier Generation’s Healthy Schools Program, visit www.healthiergeneration.org/programs

TAKE ACTION

Bring Fresh Foods to Your School District

The National Farm to School Network’s programs connect K–12 schools and local farms with the objectives of serving healthy meals in school cafeterias; improving student nutrition; providing agriculture, health and nutrition education opportunities; and supporting local and regional farmers. Check out the Farm to School Network’s website to see how you can include your school or district: <http://www.farmtoschool.org>

Glossary

Agricultural subsidies: Government funds paid to farmers to supplement their income, manage the food supply, and influence the cost and supply of crops.

Child Nutrition and WIC Reauthorization Act: Federal legislation that authorizes all federal school meal and child nutrition programs, including the National School Lunch Program.

Commercial farming: Large-scale production of crops for sale, intended for widespread distribution and profit.

Commodity crops: Crops like corn, soy, wheat and rice that are common raw ingredients in our food supply. Farmers typically receive subsidies for commodity crops, which keeps the cost of these crops low.

Farm Bill: A major bill that Congress debates and passes about every five years that sets the course of US farm and food policy, including crop subsidies and food assistance.

Food Assistance Program: An intervention program used to address hunger, such as WIC (see below), SNAP (see below), subsidized school lunches and food bank distributions.

Food deserts: Areas in the United States, predominately in lower-income neighborhoods and communities, with limited access to affordable and nutritious food.

Food insecurity: Having uncertain access to enough nutritious food to lead an active and healthy life.

Hypertension: Another term for high blood pressure, when the force of blood against the heart's artery walls is hard enough to cause heart problems. Being overweight or obese is a major risk factor for hypertension.

Obesity: An excessively high amount of body fat or adipose tissue in relation to lean body mass. An adult is considered obese if his or her body mass index, a calculation based on an individual's weight and height, is 30 or higher. Obesity increases risk for diseases and health problems such as heart disease, diabetes and high blood pressure.

Processed food: The definition of processed food can vary, but in general refers to foods that are prepackaged in boxes, cans, cartons or bags. These foods have been processed, using methods such as canning, cooking, freezing or dehydrating. Although some processing of food does little harm (think milk and whole-wheat bread), often the processing of food involves the addition of artificial ingredients and chemicals and removes important nutrients. Soda, chips, candy bars, cereal, hot dogs and TV dinners are all common examples of this kind of processed food.

SNAP: The Supplemental Nutrition Assistance Program. This federal program, which replaced the federal food stamp program, provides funds to help low-income households pay for food. The amount of monthly benefits is dependent on family size, income and expenses. Families eligible for SNAP benefits receive an electronic card that looks like a bank card or credit card that they can use at the supermarket to buy food.

Type 2 diabetes: A life-threatening condition caused when the body does not produce enough insulin or the body's cells ignore the insulin. Being overweight or obese is a major risk factor for Type 2 diabetes.

USDA: The US Department of Agriculture is responsible for developing and executing national policy on farming, agriculture, forestry and food. Its goals are numerous and include meeting the needs of farmers and ranchers, regulating food safety, protecting natural resources and providing food assistance to low-income families.

WIC: The Special Supplemental Nutrition Program for Women, Infants and Children is a USDA program that, through grants to states, provides nutritious foods, nutrition education, and referrals to health and other social services to lower-income pregnant, postpartum and breastfeeding women as well as infants and children up through age 5 who are at nutrition risk.

Resources and Suggested Reading

The following is a sample of resources to help you dig deeper into some of the themes raised in *A Place at the Table*.

General Background on Hunger

Organizations

Alliance to End Hunger www.alliancetoendhunger.org

Bread for the World www.bread.org

Feeding America www.feedingamerica.org

Food Research and Action Center www.frac.org

Share Our Strength www.nokidhungry.org

Suggested Reading

A Place at the Table: The Crisis of 49 Million Hungry Americans and How to Solve It. Ed. Peter Pringle. (Los Angeles: Participant Media, 2013.)

The Cathedral Within: Transforming Your Life by Giving Something Back by Bill Shore. (New York: Random House, 2001.)

Growing Up Empty: The Hunger Epidemic in America by Loretta Schwartz-Nobel. (New York: HarperCollins, 2002.)

Sweet Charity: Emergency Food and the End of Entitlement by Janet Poppendieck. (New York: Viking, 1998.)



For a general overview of all the themes in the film, check out the companion book *A Place at the Table: The Crisis of 49 Million Hungry Americans and How to Solve It*. Available on Amazon.

Food Insecurity in the United States

Organizations

Food Policy Action www.foodpolicyaction.org

The Food Trust www.thefoodtrust.org

New York City Coalition Against Hunger www.nyccah.org

PolicyLink, The Food Trust, and The Reinvestment Fund's Healthy Food Access Portal
www.healthyfoodaccess.org

Suggested Reading

Cultivating Food Justice: Race, Class and Sustainability by Alison Hope Alkon and Julian Agyeman. (Cambridge, MA: MIT Press, 2011.)

Food Insecurity and Risk of Obesity among Children and Families: Is There a Relationship? by Nicole Larson and Mary Story. (Robert Wood Johnson Foundation, 2010.) <http://www.rwjf.org/content/dam/farm/reports/reports/2010/rwjf58903>

Hunger: Food Insecurity in America by Michael Wilson. (New York: Rosen Publishing Group, 2010.)

Recipe for America: Why Our Food System Is Broken and What We Can Do to Fix It by Jill Richardson. (Brooklyn, NY: Ig Publishing, 2009.)

The Relationship Between Hunger, Poverty and Obesity

Organizations

Environmental Working Group www.ewg.org/goodfood

Healthy Eating Research www.healthyeatingresearch.org

Healthy Kids, Healthy Communities www.healthykidshealthycommunities.org

Suggested Reading

The American Way of Eating: Undercover at Wal-Mart, Applebee's, Farm Fields and the Dinner Table by Tracie McMillan. (New York: Scribner, 2012.)

Food Politics: How the Food Industry Influences Nutrition by Marion Nestle. (Berkeley: University of California Press, 2002.)

Stuffed and Starved: The Hidden Battle for the World Food System by Raj Patel. (Hoboken, NJ: Melville House, 2008.)

Weighing In: Obesity, Food Justice and the Limits of Capitalism by Julie Guthman. (Berkeley: University of California Press, 2011.)

Why Calories Count: From Science to Politics by Marion Nestle and Malden Nesheim. (Berkeley: University of California Press, 2012.)

Hunger and Health

Organizations

American Heart Association www.heart.org/HEARTORG

Children's Health Watch www.childrenshealthwatch.org

Wholesome Wave www.wholesomewave.org

Suggested Reading

Appetite for Profit: How the Food Industry Undermines Our Health and How to Fight Back by Michele Simon. (New York: Nation Books/Random House, 2006.)

Fair Food: Growing a Healthy, Sustainable Food System for All by Oran B. Hesterman (Los Angeles: PublicAffairs, 2011.)

Food, Inc.: How Industrial Food Is Making Us Sicker, Fatter and Poorer—And What You Can Do About It by Karl Weber. (New York: PublicAffairs, 2009.)

Lunch Money: Serving Healthy School Food in a Sick Economy by Kate Adamik. (New York: Food Systems Solutions LLC, 2012.)

The Real Cost of Cheap Food by Michael Carolan. (London: Routledge, 2011.)

Barriers to Food Access

Organizations

The Food Trust www.thefoodtrust.org

PolicyLink www.policylink.org

The Reinvestment Fund www.trfund.com

Suggested Reading

"Barriers to Buying Healthy Foods for People with Diabetes: Evidence of Environmental Disparities," by Carol Horowitz, Kathryn Colson, Paul Hebert and Kristie Lancaster. (*American Journal of Public Health* 94.9 [2004]: 1549–1554.)

Cultivating Food Justice: Race, Class and Sustainability by Alison Hope Alkin and Julian Agyeman. (Cambridge, MA: MIT Press, 2011.)

The Grocery Gap: Who Has Access to Healthy Food and Why It Matters by Sarah Treuhaft and Allison Karpyn. (Oakland, CA and Philadelphia, PA: PolicyLink and The Food Trust, 2010.)
<http://www.policylink.org/atf/cf/%7B97C6D565-BB43-406D-A6D5-ECA3BBF35AF0%7D/FINALGroceryGap.pdf>

Health Policy Snapshot: Childhood Obesity. Do All Americans Have Equal Access to Healthy Foods? by Robert Wood Johnson Foundation, 2012.
http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2012/rwjf71327

Healthy Food for All: Building Equitable and Sustainable Food Systems in Detroit and Oakland by Sarah Treuhaft, Michael Hamm and Charlotte Litjens. (Oakland, CA, Ann Arbor, MI and East Lansing, MI: PolicyLink, Fair Food Network, and the C.S. Mott Network, 2009).

Food Assistance in America

Organizations

Feeding America www.feedingamerica.org

Food Research and Action Center www.frac.org

Share Our Strength www.nokidhungry.org

Why Hunger www.whyhunger.org

Suggested Reading

All You Can Eat: How Hungry Is America? by Joel Berg. (New York: Seven Stories Press, 2008.)

Exodus from Hunger: We Are Called to Change the Politics of Hunger by David Beckmann. (Louisville, KY: Westminster/John Knox Press, 2010.)

The Role of Schools

Organizations

FoodCorps www.foodcorps.org

Kids Safe and Healthful Foods Project www.healthyschoolfoodsnow.org

Moms Rising www.momsrising.org

National Farm to School Network www.farmtoschool.org

Share Our Strength www.nokidhungry.org

Suggested Reading

Free for All: Fixing School Food in America by Janet Poppendieck. (Berkeley: University of California Press, 2010.)

Lunch Lessons: Changing the Way We Feed Our Children by Ann Cooper and Lisa Holmes. (New York: William Morrow, 2006.)

Lunch Wars: How to Start a School Food Revolution and Win the Battle for Our Children's Health by Amy Kalafa. (New York: Jeremy P. Tarcher/Penguin, 2011.)

School Lunch Politics: The Surprising History of America's Favorite Welfare Program by Susan Levine. (Princeton, NJ: Princeton University Press, 2008.)

Innovative Models and Solutions

Below are promising and successful examples of different approaches toward ensuring food security. When working toward ensuring food security in your community, it's a good idea to have models that fall into each of the three categories below—Food Resources, Food Access and Availability, and Food Use—in order to create a strong program.

Food Resources (such as income, CalFresh, SNAP etc.)

- Double Up Food Bucks Program – connects SNAP with farmers markets. www.doubleupfoodbucks.org
- Renaissance Entrepreneurship Center – a nonprofit that helps individuals achieve financial self-sufficiency through entrepreneurship. www.rencenter.org
- Slow Money – an investor network devoted to creating a sustainable food system. www.slowmoney.org

Food Access and Availability (such as in-kind food, urban agriculture, community gardens, corner store conversion etc.)

- Boxcar Grocers – small grocers working directly with local farmers. www.boxcargrocer.com
- California Association of Food Banks: Farm to Family – connects food growers and packers with food banks; developed innovative concurrent picking program to create a market for cosmetically inferior produce. www.cafoodbanks.org/Farm_to_Family.html
- Farm to Freezer – saves produce from spoiling by freezing it until a recipient is identified. <https://farmtofreezer.wordpress.com>
- Feeding America's Fresh Rescue Program – partners with grocers and retailers to distribute food to food banks. www.feedingamericasd.org
- Food Shift – creates jobs while diverting food “waste” to the hungry. www.foodshift.net
- Food Star Partners – alerts consumers to closeout sales and discounts on fresh produce at local retailers. www.foodstarpartners.com
- People's Community Market – a market in a low-income community that has partnered with a larger chain to leverage purchasing power and processing facility. www.peoplescommunitymarket.com
- Stockbox Grocers – small format grocery stores. www.stockboxgrocers.com

Food Use (such as workable kitchens, culturally appropriate food use etc.)

- DC Central Kitchen and LA Kitchen – community kitchens engaged in food recycling and meal distribution programs. www.dccentralkitchen.org and www.lakitchen.org
- La Cocina – an incubator kitchen for food entrepreneurs. www.lacocinasf.org
- People's Grocery – provides education and community through food. www.peoplesgrocery.org

Other

- Hunger Free Minnesota – statewide, multi-stakeholder effort to close the meal gap across the state. www.hungerfreemn.org

HUNGRY & HEAVY

Do you think it's impossible for a kid to be, **hungry AND hungry**? Think again. Hunger in America looks different than ever before, especially because obesity is a direct result of the same sad misadventure. Why and how is this happening? Here are a few of the key factors.

& HEAVY

in 15

In 2012, 1 in 5 kids in the United States lived in food insecure households. Source: USDA

The price of food has dropped more than 20% in the last 20 years due to the 20% subsidy given to government subsidies. The result is that up to 50% of the food we eat is subsidized. At the same time, the price of meat and vegetables has increased by 50%. Source: IAGWG, US Department of Commerce

\$277B

There are 6,000 "food deserts" in the U.S. - Americans without access to the fresh and affordable foods needed to live more healthily. Source: USDA

6520

4.1% of the US population (equivalent to the size of Kentucky) lives more than 1 mile from a supermarket. Obesity in low income neighborhoods, food is harder to find as neighborhood convenience stores where healthy options are both expensive and hard to come by. Source: USDA

Hungry and Heavy, Participant Media 2013.

UNDERFUNDED SCHOOLS

School districts in low-income neighborhoods are frequently underfunded and under pressure to supplement their funds by permitting the sale of less healthy foods in competition with the School Breakfast and Lunch Programs. A study by the National Academy of Sciences estimates that about \$2.3 billion worth of snack foods and beverages are sold annually in schools nationwide. Source: National Academy of Sciences

the consequences

As a Child	As a Citizen	As an Adult	On the System
<p>Childhood obesity leads to chronic conditions including diabetes, liver disease, asthma, high blood pressure, depression, anxiety and learning disabilities. <small>Source: CDC</small></p>	<p>Only 25% of youth ages 17-24 are fit for military service in America today, primarily due to our nation's obesity problem. <small>Source: Military Personnel</small></p>	<p>If states' obesity rates continue on their current trajectory, the number of new cases of type 2 diabetes, coronary heart disease and stroke, hypertension, and arthritis could increase to three between 2010 and 2020—and double again by 2030. <small>Source: Robert Wood Johnson Foundation</small></p>	<p>Medical costs associated with treating preventable obesity-related diseases could increase by up to \$60 billion per year by 2030, and the loss in economic productivity could be as high as \$90 billion annually. <small>Source: Robert Wood Johnson Foundation</small></p>

TAKE YOUR PLACE

TAKE ACTION

Get involved in the fight to end hunger. fighttostayable.com

Acknowledgments

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Active Voice Staff

Shaady Salehi

EXECUTIVE DIRECTOR

Ellen Schneider

AV FOUNDER & DIRECTOR OF AVLAB

Barrie McClune

PROGRAM COORDINATOR

Jillian Garcia

TECHNOLOGY & OPERATIONS
MANAGER

Nicole Wong

PROGRAM & COMMUNICATIONS
COORDINATOR

Participant Media Staff

Alden Stoner

VICE PRESIDENT,
SOCIAL ACTION FILM CAMPAIGNS

Christian McGuigan

DIRECTOR,
SOCIAL ACTION FILM CAMPAIGNS

Kelsie Testa

COORDINATOR,
SOCIAL ACTION FILM CAMPAIGNS

Guide Contributors

O'rya Hyde-Keller

WRITER

Barrie McClune

WRITER

Ali Hart

CONTRIBUTOR

Allison Hagey

POLICYLINK REVIEWER

Elizabeth Goodman

BURNES COMMUNICATIONS
REVIEWER

Tracy Fox

FOOD, NUTRITION &
POLICY CONSULTANT
REVIEWER

Joan D. Saunders,

Jillian Garcia,

Nicole Wong

COPY EDITORS

Carole Jeung

DESIGN



Active Voice tackles social issues through the creative use of film. We believe that real progress requires real connection and that film has a unique power to bring people together in meaningful ways. Every day, Active Voice helps filmmakers, funders and communities start the conversations and relationships that lead to lasting, measurable change. Since our inception in 2001, Active Voice has influenced local, regional and national dialogue on issues including immigration, criminal justice, health care and education. www.activevoice.net



Participant is a global entertainment company founded in 2004 by Jeff Skoll to focus on feature films, television, publishing and digital content that inspire social change. Participant's more than 40 films include *Good Night, and Good Luck*, *Syriana*, *An Inconvenient Truth*, *Food, Inc.*, *Waiting for "Superman"*, *The Help*, *Contagion* and *Lincoln*. Participant's Social Action campaigns and its digital network, **TakePart.com**, continue the conversation and connect audiences to a wealth of content and actions. Its new millennial television network Pivot (pivot.tv), launching this summer in 40 million-plus homes, is TV for The New Greatest Generation. www.participantmedia.com



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