OFFICIAL FEEDBACK FORM



DIALOGUE DATE	Wednesday, 13 July 2022 17:00 GMT -06:00					
DIALOGUE TITLE	Technology & Nutrition: Equalizing Maternal & Infant Health					
CONVENED BY	Harrison Rhodes Senior Product Manager Gainwell Technologies (Convener), Veronica Adamson Vice President Health and Human Services Gainwell Technologies (Co-Convener), Karen Shields Chief Client Engagement Officer Gainwell Technologies (Co-Convenor)					
DIALOGUE EVENT PAGE	https://goodfooddialogues.com/dialogue/51490/					

The outcomes from the Dialogues will be of use in developing the pathway to a healthier and hunger-free America. Each Dialogue will contribute in three distinct ways:

- Direct submission to the White House in advance of the Conference on Hunger, Nutrition, and Health (for events and feedback received prior to the July 15th deadline) Published as public facing and searchable documents on the Good Food Dialogues website
- Rolled into a final report that synthesizes the feedback, ideas, and challenges shared throughout all the Good Food Dialogues. This report will not only be submitted to the White House but will also be used to inform a movement for change well beyond the White House Conference.

1. PARTICIPATION

TOTAL NUMBER OF PARTICIPANTS 23											
PARTICIPATION BY AGE RANGE											
0	0-18 5 19-30	10	31-50		8	51-65	0	66-80	0 80+		
DADT											
	Male 15 Female 0										
8	Male 15 Femal	NON	-binary		D Prefer no	ot to say or Other					
PART	ICIPATION BY RACE										
0	American Indian or Alaska Native					Asian					
3	Black or African American					Native Hawaiian or Other Pacific Islander					
17	White										
PART	CIPATION BY ETHNICITY										
					22	Natilianania	orlot	ino			
0	Hispanic or Latino	23	Not Hispanic or Latino								
NUM	BER OF PARTICIPANTS IN EACH SECTOR										
0	Academia/education	0	Agricultu	Jre			0	Economic	empowerment		
0	Environment and ecology	0	Finance				0	Food cons	umer		
0	Food distributor	0	Food pro	oductio	on		0	Food proce	essing		
0	Food retail	2	Governn	nent			13	Healthcare	2		
1	Health insurance	0	Hunger				0	Livestock			
1	Nutrition	0	Public P	olicy			6	Other			
NIM	BER OF PARTICIPANTS FROM EACH STAKEHOL	NFR GR									
5	Academic/Expert	.DEII OI	1001		0	Advocate					
0	Corporation				0	Community Organization					
1	Direct Service Provider				0	Farmer/Food Producer					
0	Financial Institution				0	Impacted Individual					
0	Logistics provider				1	Non-Profit					
1	Policy Maker (current/former)					Small business					
3	Student					Supplier					
11	Other										

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2. PRINCIPLES OF ENGAGEMENT

HOW DID YOU ORGANIZE THE DIALOGUE SO THAT THE PRINCIPLES WERE INCORPORATED, REINFORCED AND ENHANCED?

During our dialogue introductions and purpose statements, we reviewed the Principles with all attendees to ensure agreement with the participants. As with any meaningful discussion, we encouraged openness, respect, honesty, and a safe space for diverse experiences. We organized our dialogue into three key sections focused on the Pillars: 1) Welcome 2) Group Discussion 3) Closing. For suggestions outside the scope of our defined topics, we provided points of contacts available for further discussion beyond the dialogue.

HOW DID YOUR DIALOGUE REFLECT SPECIFIC ASPECTS OF THE PRINCIPLES?

We were excited to see the diversity in the virtual discussion room with varying backgrounds, levels of experience and interests among the participants. We set the foundational Principles by acknowledging the shared goal of the evening: a motivation to end hunger, improve nutrition and physical activity and reduce diet-related diseases and disabilities. In each breakout room of smaller groups, we invited each participant to share their name, role/company and what excited them about the dialogue. This encouraged participants to build trust and connect over shared passions. By getting to know each other on both a professional and personal level, participants were able to complement the work of others and embrace multi-stakeholder inclusivity.

DO YOU HAVE ADVICE FOR OTHER DIALOGUE CONVENORS ABOUT APPRECIATING THE PRINCIPLES OF ENGAGEMENT?

While it can sometimes be difficult to engage larger groups, we recommend adding a quick icebreaker or 1-2 trivia questions to get participants excited early on. As facilitators, we also try to stay mindful of the duration of everyone speaking to ensure minimal interruptions and allow every participant a chance to speak. We also leveraged the chat feature of our virtual room to encourage those who may not feel as comfortable speaking up in a group discussion to share their opinions in a different medium.

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3. METHOD

The outcomes of a Dialogue are influenced by the method that is used.

DID YOU USE THE SAME METHOD AS RECOMMENDED BY THE CONVENORS REFERENCE MANUAL?

✓ Yes

No

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4. DIALOGUE FOCUS & OUTCOMES

MAJOR FOCUS

Our primary focus was increasing the use of technology to improve nutrition for better maternal and infant health outcomes. We discussed existing programs in states around the country, what barriers people may face and how to drive recipient engagement through technology integration. Technology is playing an increasingly important role in both connecting disparate programs and reaching targeted audiences on various channels.

WHITE HOUSE CONFERENCE PILLARS

1. Improve food access and affordability
2. Integrate nutrition and health
3. Empower all consumers to make and have access to healthy choices
4. Support physical activity for all
5. Enhance nutrition and food security research

KEYWORDS



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MAIN FINDINGS

Our primary findings include using technology to provide more education to new mothers on how to get the most out of their program benefits. For example, we could create an app that helps participants navigate the programs available in their states. This app could push personalized notifications for key milestones and baby growth needs for new mothers, and also become more accessible for elderly caregivers.

When we consider young mothers who may not have the support system they need in place to answer crucial questions about the nutrition their baby needs, they may be less likely to reach out to others – whether that's to family, friends or professionals – due to fear of judgement. A safe space in a community-based social media channel could allow them to share experiences and advice with other mothers who may be experiencing similar thoughts or have recently overcome these challenges.

Another key need around education is the importance of healthy eating and providing incentives for those who use their benefits to provide nutritious meals to their families. This solution could include an activity center where daily activities are logged for points and rewards. Smart scales could track weight loss, and this data could be shared with WIC clinics for monitoring improvements. This technology solution could also allow a partnership to overcome barriers to accessing food with existing structures like online platforms and meal delivery companies for recipes, nutrition tips and easy snacks.

The idea of using technology to provide a nurturing environment for vulnerable populations extend to pregnant and breastfeeding mothers in a similar way. Submitting questions, hopping on a video consultation and connecting with a local community can all contribute to ensuring new mothers are not facing their concerns alone.

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OUTCOMES FOR EACH DISCUSSION TOPIC

• Mobile app for each state that details the available programs, how to qualify, where to apply, services available and key contacts. The state would determine the information of the app, but the overall design, development and implementation could be a standardized process led by a third-party technology partner. The barriers we anticipate include ongoing funding for support, enhancements and integration updates.

• Educational videos that inform how to maximize benefits to support new mothers and ensure the health of the next generation. These videos could be designed at the federal level to provide the guidelines individual states require to adhere with program needs.

Community forum for mothers as a safe space to share experiences, exchange advice and receive community support. The federal government could develop and maintain this space to ensure ongoing updates (membership expirations, etc.).
Nutritional rewards program to help incentivize healthy eating habits and behaviors. A change in nutritional habits is often motivated by a change in personal mindset.

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AREAS OF DIVERGENCE

Funding emerged as a common theme – which party is responsible between the federal government and states. As we consider states with different populations, sizes and disparities, it's important to account for the many underlying factors. Another divergence is implementing technology for specific populations, such as an older generation raising their grandchildren or a rural community with a food desert. Lastly, there is a crucial need in providing access to specialists, such as breastfeeding or lactation consultants, to people who may not have the financial resources or knowledge to seek out.

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