



## Webinar Summary

### Hunger, Nutrition, and Health Action Collaborative: Teaching Kitchens & Youth Empowerment

**Date:** October 2025

**Hosted by:** CDC Foundation's Hunger, Nutrition, and Health Action Collaborative

#### Speakers:

- **Rebecka Jerome**, Executive Chef, The Brotherhood Sister Sol (BroSis)
- **Katie Welch**, Executive Director, Teaching Kitchen Collaborative (TKC)

#### Overview

This month's webinar spotlighted teaching kitchens as evidence-based, hands-on environments that build culinary skills, nutrition knowledge, and life skills—advancing health equity in schools, communities, and healthcare settings. The session paired a national network perspective from TKC with on-the-ground practice by BroSis to show how culinary education drives health, identity, and resilience.

#### Program Models & Impact

##### Brotherhood Sister Sol (Harlem, NYC)

- **Social-Justice Youth Development, Not "Afterschool Only":** BroSis treats food as a social justice issue and "food empowerment" as core to youth agency.
- **Age-Tiered Curriculum:**
  - *Elementary:* "Cook the Rainbow"—fruits/vegetables, knife safety, tasting to reduce neophobia.
  - *Middle School:* Culturally relevant cooking to counter stigma around traditional foods and build pride.
  - *High School:* Life skills & workforce pathways (prep for NYC Food Handler's license; baking for the BroSis community farmers market; kitchen production support that fosters ownership and confidence).
- **Community Integration:** Partnerships with GrowNYC and local farms; Health Bucks utilization at the farmers market; large-scale meal distribution during COVID; seasonal grocery distributions supported by corporate and community partners.

## Teaching Kitchen Collaborative (National/Global Network)

- **Where Teaching Kitchens Live:** Schools and universities, healthcare systems, community-based orgs, museums/libraries, houses of worship, and pop-ups/virtual formats.
- **What They Solve:**
  - Loss of intergenerational culinary and nutrition education
  - Limited nutrition training for medical professionals; RDs often lack hands-on culinary practice; chefs may lack nutrition science grounding
  - Confidence and access gaps—making healthy eating doable, affordable, and culturally authentic
- **Trends & Funding:** Growing momentum for Food as Medicine in policy and healthcare; braided funding models (philanthropy, earned revenue, shared-use spaces, university/healthcare support, reimbursable shared medical appointments).

## Key Takeaways

- **Start Early, Stay Engaged:** No single “best” age—approaches should be age-attuned, from early exposure to advanced life/workforce skills.
- **Culture Is A Health Intervention:** Validating and teaching culturally rooted foods reduces stigma, boosts participation, and strengthens identity.
- **Meet People Where They Are:** Co-location (libraries, museums, houses of worship, clinics) lowers barriers and sustains programs.
- **Partnerships Multiply Impact:** Pair national expertise/data with local trust/infrastructure to scale reach, resources, and policy influence.
- **Critical Infrastructure Post-SNAP-Ed Cuts:** Teaching kitchens help families stretch budgets with skills (batching, beans/whole grains, flavorful techniques) and practical meal planning.

## Suggested Action Items for Attendees

- **Identify A Co-Location Opportunity** (library, clinic, museum, school, house of worship) to pilot a low-cost teaching kitchen or pop-up.
- **Braiding Funding:** Map 2–3 potential revenue sources (philanthropy + earned + public contracts).
- **Build A Culture-Forward Curriculum:** Start with foods families already love; add knife skills, budgeting, batch cooking, and food safety credentials for teens.
- **Engage Medical Partners:** Explore shared medical appointments or clinician referrals to teaching kitchens to align with Food as Medicine initiatives.

## What's Next

- **Next webinar: November 19, 3:30 p.m. ET.** Registration available at [ImpactHunger.org](https://ImpactHunger.org).