

Hunger is an equal opportunity employer

Malnutrition is usually associated with Third World countries. Not the United States and certainly not Boston. But in the South End, where the Boston Medical Center stands, Dr. Deborah Frank treats patients who suffer from malnutrition every day.

Frank, a professor of pediatrics at the Boston University School of Medicine, is the director of the Grow Clinic for Children, an outpatient multidisciplinary clinic at BMC. The clinic was established in 1984 after the results of a Massachusetts nutrition survey showed that one out of every 10 kids under the age of five demonstrated some evidence of undernourishment.

For the most part, Frank explains, afflicted children are suffering from two kinds of malnutrition.

“Primary malnutrition occurs in a child who would have been healthy had he had something to eat,” she said. “And secondary malnutrition happens with a child who has a physical problem that increases his nutritional needs, like a child who has food allergies.”

When the Grow Clinic came into existence, the state Legislature established WIC, a special supplemental nutrition program for women, infants and children, as a means of malnourishment prevention.

“It’s a food prescription program, and it provides vouchers for highly nutritious foods that are for pregnant and breast-feeding women,” she said.

In addition to prevention, the state allocated funds to the Grow Clinic to help treat already malnourished patients. Unfortunately, the BMC has the busiest clinic, which posed a problem when most of its money came from the state, and very little from federal funding.

“Very quickly the service needs of our patients outstripped the state money, so we got into the fundraising business,” said Frank, who along with her rabbi husband began fundraising at his synagogue, and later churches and schools.

A small emergency food program, run out of the old Grow Clinic office, was born thanks to those fundraising efforts, but it was still not enough to satisfy the needs of her patients. And it wasn’t just demand that was the problem — it was the food itself.

The thing about the emergency food network ... is that unfortunately what they have to give out often reflects the excess of the donor rather than the need of the recipient,” she said. “So if a nutritionist has just explained for an hour that people shouldn’t feed their kids potato chips, soda and marshmallows, and then they go to the local church basement and all they have [are those foods,] you’ve just wasted an hour of talking, but people will take what they’re given because they’re desperate.”

When the Boston City Hospital and the Boston University Medical Center merged 10 years ago, the idea of a fully functioning food pantry seemed like the next logical step. Endowed by a number of private donors, as well as the Greater Boston Food Bank, the hospital created a pantry in a large, clean space across from the WIC office.

For Frank, it was as if a weight had been lifted from her shoulders. “We had gone from a ‘mom and pop’ operation to a very large operation, but with the same mission — give out healthy food to people who couldn’t otherwise obtain food to promote their health,” she said.

The food pantry itself slightly resembles the Greater Boston Food Bank, though on a much smaller scale. Rows of tuna fish and peanut butter and apples abound, with nary a bag of potato chips in sight.

“It’s the only in-hospital food pantry in the entire country,” said Emile Kamadau, the pantry coordinator. And in a recent survey, he said, 99 percent of the pantry patients — around 4,000 of them — were very satisfied with the program. “They have been blessing our hospital,” he added.

Generously endowed by a number of donors, the food pantry even has a fully equipped demonstration kitchen, where nutritionists can show patients and their families the best way to prepare the food they are prescribed. Donors are awarded plaques, displayed in the hallway between the two rooms.

In the future, Frank suggests that donors and volunteers try to hold Valentine’s Day or May Day food drives because, unlike other holidays, everyone seems to forget that the need is always there.

The Grow Clinic food pantry is open Monday through Friday, 10 a.m. to 4 p.m. Donations can be made by visiting www.bmc.org



The Grow Clinic food pantry resides in a large room near the hospital’s WIC office. The pantry boasts only nutritional foods, such as tuna fish and peanut butter that are prescribed to malnourished children. Pictured here are pantry coordinator Emile Kamadau (left) and pantry assistant Miguel Medina (right). (Brian Mickelson photo)