

# Prescription for Health

## 2012 Outcome Report



### PRESCRIPTION *for* HEALTH

Prescription for Health connects the medical system and the food sector by creating a relationship between clinic staff, their patients and the local farmers' market.

Health care providers write "prescriptions" for their patients to eat more fruits and vegetables. In 2011 and 2012, Washtenaw County Public Health led the partnership with funding from the Kresge Foundation.

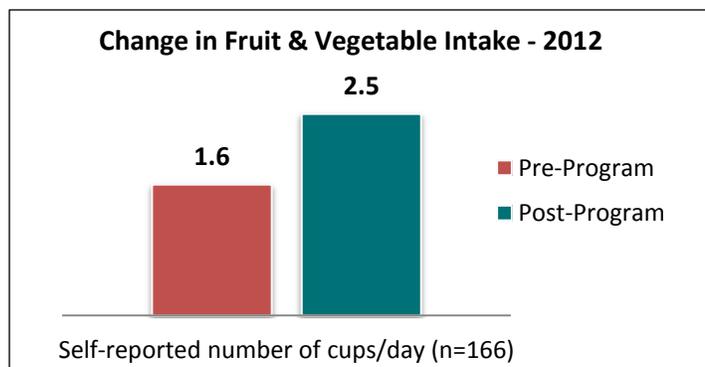
Participants received \$40 in coupons to exchange for tokens to spend like cash at local farmers' markets, as well as nutrition education and support.

Through the two-year program, over 870 patients from health clinics serving low-income residents participated. A total of \$26,246 was spent on fresh fruits and vegetables, improving participants' access to healthy foods and supporting local food systems.

**Special thanks to our partners:**  
*Neighborhood Family Health Center, Packard Health, Hope Clinic, Corner Health Center, New Hope Outreach Clinic, U of M Chelsea Family Practice, Faith In Action, Downtown Ypsilanti Farmers' Market (run by Growing Hope), Westside Farmers' Market, Chelsea Bushel Basket Farmers' Market and Food Gatherers.*

### Key findings:

- Both years of the program, patient consumption of fruits and vegetables **increased by nearly one cup per day** from pre- to post-program (mean=0.7 Year 1; 0.9 Year 2;  $p<.001$ )



- Participants overwhelmingly agreed that visiting the farmers' market helped them or their family members eat more fruits and vegetables (96% Year 1; 94% Year 2)
- Among participants working to manage a chronic illness, the vast majority (96%) said that participating in the program **helped them manage their health condition(s) better**
- Both years, **awareness of healthy food resources**, such as knowing that Bridge or electronic benefit cards (food stamps) can be used at local farmers' markets, increased by more than 40% among participants from pre- to post-program
- Almost everyone interviewed Year 2 "agreed" or "strongly agreed" that through the program, **they did something that will help them eat more fruits and vegetables** in the future (96%)

### Participant demographics:

- 73% female
- 52% white, 35% black, 5% Latino/Hispanic, 1% Asian/Asian American and 7% identified as two or more races or other
- Average age 47 years
- 56% (Year 1) and 35% (Year 2) reported having at least one child living in their household

### Participants were at high risk for food insecurity:

- Both years, the majority of participants reported yearly household incomes of less than \$15,000; over 80% were under \$25,000
- Approximately 60% of participants said they cut the size of meals or skipped meals because they did not have enough money for food

## How the program worked:

Clinic staff enrolled patients using a “prescription” card to discuss health or food access issues and set goals for healthier eating. At the farmers’ market, program staff offered support through healthy recipes, nutrition education and orientation to the market.

In Year 2, staff also hosted monthly special events focused on chronic disease prevention and management. Events highlighted the connection between food and health, with an emphasis on taking small steps toward positive changes. Total attendance at these events was over 360. During post-program interviews, many patients cited specific strategies they learned, shared or confirmed.

Both years, many participants also noted positive health changes as a result of the program, including weight loss, increased physical activity and healthier eating.

*“I have been getting vegetables on my kids’ plates. [It] stems from coming to the farmers’ market. It wasn’t an everyday thing prior to that.”*

- Prescription for Health Patient

## Market outcomes:

Local farmers’ markets reported significant increases in revenue and said the program helped bring new customers to the market. Over 60% of patients reported using other forms of payment at the market, contributing to the local economy and supporting local farmers.

Both years of the program, most participants said they would likely visit the farmers’ market again (98%).

*“[We’re seeing] people that wouldn’t normally shop at the farmers’ market and buying foods they wouldn’t normally buy... I wish I could get to others to tell them they can go to clinics and get connected with these resources.”*

- Farmer

## Clinic outcomes:

Clinic staff reported that the program was easy to administer and personally rewarding. Clinic partners appreciated the ability to provide “tangible” access to healthy food and cited an increased capacity to address the nutritional needs of their most vulnerable patients.

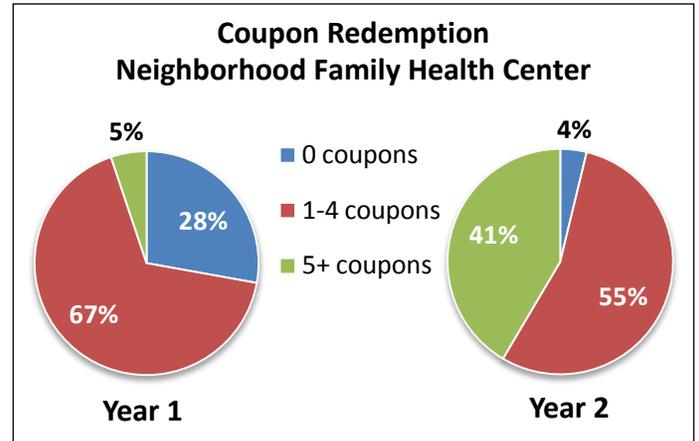
*“[It] is a good opportunity to start talking about weight loss, mental health and the many other benefits of eating more fruits and vegetables. It’s a gateway.”*

- Clinic Staff Member

## Highlights from Year 2:

A major challenge identified in Year 1 was the high percentage of patients who enrolled at their clinic, but never visited the farmers’ market to redeem their coupons.

In Year 2, one clinic piloted a group enrollment process and dramatically increased participation rates and patient interest in healthy lifestyle changes. Many of these patients continued meeting weekly to share ideas and support each other.



Also in Year 2, the Corner Health Center worked with Prescription for Health staff to offer group walks to the market. Over 40 patients visited the market more than 100 times, dramatically increasing participation in the program.

The other commonly reported barriers to participation included transportation and conflicts with market days or times. In response, a fresh food box pilot program was launched Year 2.

The local food bank Food Gatherers and partner clinic Packard Health offered monthly produce boxes for patients to pick up at the clinic. Patients participating in the box program reported increases in fruit and vegetable consumption similar to those participating in farmers’ market visits. The majority (70%) also said they would be willing to pay out of pocket or to use food stamp benefits to participate in the future.

Moving forward, these Year 2 changes illustrate the importance of increased social support and accessible, year-round sources of fresh produce for low-income residents.