"My health is better because I'm eating more fruits and vegetables. I have more energy, and I'm watching what I'm eating."

- Program Participant 2014

**Key Findings for All Participants:**

- Participant consumption of fruits and vegetables **increased by nearly one cup per day** from pre- to post-program (n=135; mean=0.7; p<.001)
- Participants showed an **increase in self-reported health**, with the average changing from “fair” pre-program to “good” post-program (n=138; p<.001)
- 81% reported that the program **helped them manage a health condition**
- 92% of participants reported knowing that a Bridge/EBT card (formerly food stamps) could be used at the farmers market post-program, compared with only 60% pre-program
- 93% of participants found it “very helpful” or “helpful” to have Community Health Workers at the market each week to greet them and talk about their experience, goals and progress (n=28)

**Participant Demographics:**

- 76% female
- 43% African American/black, 40% Caucasian/white, 5% Latino/Hispanic, 2% Asian American/Asian, 1% Native American/American Indian and 9% identified as two or more races or other
- Average age: 48 years; age range: 7 years – 85 years
- 42% reported having at least one child living in their household
- 36% reported that they had previously participated in the Prescription for Health program

**Participants Were at High Risk for Food Insecurity:**

- 61% had a yearly income of less than $15,000
- 64% had cut the size of meals or skipped meals within the past year because of a lack of money for food
- 62% use a Bridge/EBT card (formerly food stamps)
How the Program Worked:

Clinic staff identified patients for the program based on food access difficulties, chronic disease risk and interest. Peer-support program staff called Community Health Workers (CHW), scheduled referred patients for a group enrollment session, during which enrollees engaged in a discussion about the link between health, chronic disease and food choices. Patients set specific goals for healthy eating and received a "prescription" for fruits and vegetables. Patients “filled” their prescriptions at participating local farmers markets.

When participants came to the Prescription for Health (PFH) table at the farmers markets, CHWs reviewed the participants’ goals and assisted them in setting a weekly goal. After the educational support, the patient received $10 in tokens to spend on produce at the farmers market. Up to $100, or up to ten visits, was allocated for each participant.

PFH extended through December via the indoor winter market in Ypsilanti and a monthly fresh food box distribution in November and December ($20 worth of produce per box) in Chelsea. PFH partnered with the Ann Arbor Area Transportation Authority to provide a shuttle to the winter farmers market in Ypsilanti.

Since 2013, CHWs have been formally integrated into the program to provide more social support and to reduce costs. They assisted with enrollment and goal setting; called patients to offer support and reminders; provided referrals to other healthy eating resources, such as EBT/Bridge Card and Double Up Food Bucks; and administered post-program surveys.

Change in Fruit & Vegetable Intake

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<thead>
<tr>
<th></th>
<th>self-reported cups per day, pre- and post-program statistically significant each year (p&lt;.001)</th>
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<tbody>
<tr>
<td></td>
<td>Pre-Program</td>
</tr>
<tr>
<td>2011 (n=144)</td>
<td>1.8</td>
</tr>
<tr>
<td>2012 (n=166)</td>
<td>1.6</td>
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<tr>
<td>2013 (n=86)</td>
<td>1.9</td>
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<tr>
<td>2014 (n=135)</td>
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Post-Program Survey Results:

Post-program survey results were obtained from 62% of program participants. Almost all enrolled patients visited the market at least once (92%), and 60% of participants used seven or more of their allotted visits. The most common barrier to token redemption was transportation.

Regional Alliance for Healthy Schools Pilot:

PFH created a new partnership in 2014 with Regional Alliance for Healthy Schools, a school based health center program. Thirty-eight of their students (16% of overall participants) were enrolled in PFH. Of the 19 students who completed a post-program questionnaire, 10 indicated they lost weight because of their participation in this program, and 14 tried a new fruit or vegetable. One student reported that “Being able to eat healthy and try new things was my favorite part of the program.”

Prescription for Health Economic Impact:

Participants spent a total of $2,988 in PFH tokens at the Chelsea Farmers Markets (43% of all food access program dollars spent). PFH provided an additional $2,400 worth of produce through fresh food boxes.

Participants spent a total of $9,898 in PFH tokens at the outdoor Ypsilanti Farmers Markets (17% of all food access program dollars spent and 6.3% of all sales for the farmers May-October). Participants spent a total of $1,484 at the indoor winter market.