

Challenges and Successes of a Pediatric Produce Prescription Program During COVID-19



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PEDIATRIC PUBLIC HEALTH INITIATIVE

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INTRODUCTION

In August 2018, researchers partnered with a large pediatric clinic in Flint, Michigan, to provide one \$15 prescription for fresh produce to every patient during office visits.¹ Patients could redeem prescriptions at a downtown farmers' market or local mobile market and food hub for fresh fruits and vegetables. On March 23, 2020, approximately 18 months after program introduction, the State of Michigan issued a "stay home, stay safe" executive order in response to the COVID-19 pandemic. Visits to pediatric offices in Flint, and across the country, plummeted.² This study is a qualitative examination of family experiences with the prescription program and perceived changes to the food environment during this time.

OBJECTIVE

To assess family experiences with the pediatric produce prescription program and perceptions of the food environment during the COVID-19 executive order.

METHODS

Data were collected between April 2020 and June 2020 through semi-structured telephone interviews with caregivers of children exposed to the fresh produce prescription program. An open-ended interview guide was developed based on existing literature, research questions, and the researchers' experiences with the topic and population. Two researchers independently conducted telephone interviews until data saturation was reached. The interviews were recorded and transcribed verbatim for textual analysis. Guided by thematic analysis, researchers uncovered and analyzed patterns across the transcripts, which ultimately formed illustrative themes.³



Produce Prescription Access & Utilization

Giving us free fruits and vegetables, it definitely helps me keep her (daughter) healthier.... It's just that we can't go to the doctor to get the (produce) prescriptions. Their last appointment, they did it over the phone.
(Female, Age 27)

Food Access Constraints

[Grocery store] didn't have meat. Vegetables was limited. They didn't even have cabbage or greens. And there's a limit of two cans on the vegetables, like the corn and the green beans. (Female, Age 46)

Food Shopping Adjustments

Everything is closed down, and grocery stores that are open are so overwhelming to where I have to wait until a certain time to go out and get groceries.
(Female, Age 51)

Food Security Stress

Do I pay a bill or do I shop for groceries? So, that was something I hadn't had to experience in a long time... I am watching how much I cook because sometimes I'll cook just enough. I'm starting to worry about how long food is going to last now, and if it's going to be affordable for us later.
(Female, Age 41)

RESULTS

A total of 56 caregivers participated in interviews (mean age, 41.3 ± 10.3 years). The majority were female (91%), African American (70%), and residents of Flint (75%). Four recurrent themes, centered around changes in the food environment resulting from COVID-19, emerged: 1) produce prescription access and utilization; 2) food access constraints; 3) food shopping adjustments; and 4) food security stress. Perceived consequences of COVID-19 included increased anxiety related to food shopping and food insecurity alongside challenges with access and utilization of a fruit and vegetable prescription program as pediatric clinics moved to virtual healthcare visits and farmers' markets closed.

CONCLUSIONS

The COVID-19 pandemic exacerbated and exposed the realities of increasing nutritional health disparities among children in the US. This study highlights stark ramifications of COVID-19, particularly among vulnerable families, many of whom were at elevated risk for food insecurity and hunger prior to the pandemic.

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