Veggie Rx: A Prescription for Partnerships in Healthy Eating and Education

Lauren Kraemer, MPH, Assistant Professor of Practice, Oregon State University Extension
Sarah Sullivan, Executive Director, Gorge Grown Food Network
ADDRESS FOOD INSECURITY

MOBILE MARKETS

VEGGIE PRESCRIPTION PROGRAM

SNAP FUNDS MATCHING

FARMERS MARKETS

WHO’S YOUR FARMER DIRECTORY

NUTRITION EDUCATION

LOCAL FOOD FIRST

Mobilize

FOOD SECURITY COALITION

COMMUNITY FOOD LEADERS

FARMERS MARKET NETWORK

FOOD BUSINESS SUPPORT & PROMOTION

ACTIVATE

SCHOOL GARDENS

FOOD BUSINESS INCUBATOR

www.gorgegrown.com
To build a resilient and inclusive food system that improves the health and well-being of our community.

541-490-6420
Linking our food system with healthcare

**PacificSource Community Solutions**

- **Community Advisory Council (CAC)**
  - > 50% consumer voting members
  - Steward of the Community Needs and Health Improvement Plan
  - Champions Community priorities

- **Clinical Advisory Panel (CAP)**
  - Co-chairs = Primary + Behavioral clinicians
  - Steward of best clinical practices
  - Clinical standards within community
  - Implementation of clinical priorities
Community Health Improvement Process (CHIP)

- Identifies communities' top needs
- 40 stakeholders collaborated
- The top two needs identified by community members in the Social Determinants of Health category were food insecurity and affordable housing.
- Set common agenda for organizations region-wide
Hunger in the Gorge

GORGE WIDE FOOD SURVEY RESULTS
May 2015 Columbia Gorge CCO Consumer Advisory Council

For more information on the results of this survey please contact:
Suzanne Cross, MPH: suzanne@gorgehealthcouncil.org

BASIC FINDINGS:
• 1 in 3 worry about running out of food
• 1 in 5 run out of food
• 1 in 7 skip meals
Food assistance programs are not enough

High Level of Food Insecurity

- Households on SNAP, WIC and/or School Lunch programs still experience HIGH levels of Food Insecurity

<table>
<thead>
<tr>
<th></th>
<th>Surveyed Population</th>
<th>SNAP/WIC/Free Lunch</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ran out of food</td>
<td>22%</td>
<td>34%</td>
</tr>
<tr>
<td>Went without a meal</td>
<td>15%</td>
<td>24%</td>
</tr>
<tr>
<td>Went without a meal so children can eat</td>
<td>10%</td>
<td>18%</td>
</tr>
<tr>
<td>Children went without a meal</td>
<td>3%</td>
<td>5.5%</td>
</tr>
</tbody>
</table>
When everyone has access…

Our region and those living here experience:

• Improved health
• A more productive society
• A stronger economy
• Lower healthcare costs
How Veggie Rx Works

Screening

Prescription Rx

Redemption

Refills
Screen for Food Insecurity

**Suggested Questions:**

For each statement, please tell me whether the statement was “often true, sometimes true, or never true” for your household:

A. “Within the past 12 months we worried whether our food would run out before we got money to buy more.”  □ often true  □ sometimes true  □ never true  □ don’t know, or refused

B. “Within the past 12 months the food we bought just didn’t last and we didn’t have money to get more.”  □ often true  □ sometimes true  □ never true  □ don’t know, or refused
# Building the Network

Distribution in 5 counties of the Gorge:

- Clinics / Health Departments / WIC / OCDC
- Headstart / DHS / Senior Services / Social Workers
- Housing Authority / Hospitals

## # of Veggie Rx distribution partners

<table>
<thead>
<tr>
<th>Phase</th>
<th># of partners</th>
<th>$ of Veggie Rx distributed to partners</th>
<th># of Veggie Rx retail partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phase 1</td>
<td>5</td>
<td>$8,000</td>
<td>10</td>
</tr>
<tr>
<td>(Aug 2015 – Sep 2015)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Phase 2</td>
<td>35</td>
<td>$68,260</td>
<td>31</td>
</tr>
<tr>
<td>(Oct 2015 – March 2016)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Phase 3</td>
<td>7</td>
<td>$34,920</td>
<td>33</td>
</tr>
<tr>
<td>(April 2016- May 2017)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# Snapshot: Screening and Redemption Pilot: August 2015 – Jan 2016

<table>
<thead>
<tr>
<th>Distribution Site</th>
<th>Amount Distributed</th>
<th>Amount Redeemed</th>
<th>% Redeemed</th>
<th>% Positive Screenings</th>
</tr>
</thead>
<tbody>
<tr>
<td>One Community Health Hood River</td>
<td>$4,320</td>
<td>$3,018</td>
<td>70%</td>
<td>15%</td>
</tr>
<tr>
<td>One Community Health The Dalles</td>
<td>$4,900</td>
<td>$3,094</td>
<td>63%</td>
<td>23%</td>
</tr>
<tr>
<td>Hood River County Health Dept</td>
<td>$9,880</td>
<td>$7,658</td>
<td>78%</td>
<td>30%</td>
</tr>
<tr>
<td>North Central Public Health Dist</td>
<td>$5,000</td>
<td>$3,122</td>
<td>62%</td>
<td>50%</td>
</tr>
<tr>
<td>Klickitat County Health Dept White Salmon</td>
<td>$6,080</td>
<td>$4,764</td>
<td>78%</td>
<td>50%</td>
</tr>
<tr>
<td>Klickitat County Health Dept Goldendale</td>
<td>$2,300</td>
<td>$1,164</td>
<td>51%</td>
<td>66%</td>
</tr>
<tr>
<td>Klickitat County Senior Services White Salmon</td>
<td>$2,020</td>
<td>$1,932</td>
<td>96%</td>
<td>26%</td>
</tr>
<tr>
<td>Klickitat County Senior Services Goldendale</td>
<td>$2,400</td>
<td>$2,130</td>
<td>89%</td>
<td>55%</td>
</tr>
<tr>
<td>Skamania County Senior Services</td>
<td>$2,160</td>
<td>$1,196</td>
<td>55%</td>
<td>90%</td>
</tr>
<tr>
<td>Skamania County Health Dept</td>
<td>$2,180</td>
<td>$1,710</td>
<td>78%</td>
<td>61%</td>
</tr>
<tr>
<td>Skamania County DSHS</td>
<td>$3,020</td>
<td>$2,562</td>
<td>85%</td>
<td>99%</td>
</tr>
<tr>
<td>Klickitat Valley Health Clinic</td>
<td>$2,060</td>
<td>$1,694</td>
<td>82%</td>
<td>69%</td>
</tr>
<tr>
<td>Mid Columbia Housing Authority</td>
<td>$1,000</td>
<td>$468</td>
<td>47%</td>
<td></td>
</tr>
<tr>
<td>Providence Internal Medicine Clinics</td>
<td>$1,600</td>
<td>$1,462</td>
<td>91%</td>
<td></td>
</tr>
<tr>
<td>Providence Family Medicine Clinic</td>
<td>$1,600</td>
<td>$1,334</td>
<td>83%</td>
<td></td>
</tr>
<tr>
<td>The Next Door</td>
<td>$500</td>
<td>$330</td>
<td>66%</td>
<td></td>
</tr>
<tr>
<td>MCMC</td>
<td>$5,000</td>
<td>$3,696</td>
<td>74%</td>
<td></td>
</tr>
<tr>
<td>Evergreen Family Services</td>
<td>$1,200</td>
<td>$658</td>
<td>55%</td>
<td></td>
</tr>
<tr>
<td>Mid- Columbia Children's Council</td>
<td>$4,740</td>
<td>$3,090</td>
<td>65%</td>
<td></td>
</tr>
<tr>
<td>CORE Evaluation Groups</td>
<td>$800</td>
<td>$556</td>
<td>70%</td>
<td></td>
</tr>
<tr>
<td>Deschutes Rim Clinic</td>
<td>$1,500</td>
<td>$350</td>
<td>23%</td>
<td></td>
</tr>
<tr>
<td>Oregon Child Development Coalition</td>
<td>$1,280</td>
<td>$386</td>
<td>30%</td>
<td></td>
</tr>
<tr>
<td>OSU Cooking Class</td>
<td>$380</td>
<td>$264</td>
<td>69%</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$69,100</strong></td>
<td><strong>$48,556</strong></td>
<td><strong>70%</strong></td>
<td><strong>31%</strong></td>
</tr>
</tbody>
</table>

Note: This does not include all distribution sites.
Veggie Rx Redemption Partners

All 9 Gorge Farmers’ Markets during market season and:

<table>
<thead>
<tr>
<th>Location</th>
<th>Markets and Stores</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hood River</td>
<td>Rosauers, Mercado Guadalajara, Farm Stand, Mother’s</td>
</tr>
<tr>
<td>The Dalles</td>
<td>Grocery Outlet, La Michoancana</td>
</tr>
<tr>
<td>Goldendale</td>
<td>Holcomb’s Sentry Market, Grist Mill</td>
</tr>
<tr>
<td>Stevenson</td>
<td>A &amp; J Select Market</td>
</tr>
<tr>
<td>Carson</td>
<td>Carson General Store</td>
</tr>
<tr>
<td>White Salmon</td>
<td>Harvest Market (Thriftway), Dickey Farms</td>
</tr>
<tr>
<td>Klickitat</td>
<td>Canyon Market</td>
</tr>
<tr>
<td>Odell</td>
<td>Mid-Valley Market, Cody Orchards Farm Stand</td>
</tr>
<tr>
<td>Parkdale</td>
<td>McIsaac’s Market, Kiyokawa Family Orchards</td>
</tr>
<tr>
<td>Cascade Locks</td>
<td>Columbia Market</td>
</tr>
<tr>
<td>Dufur</td>
<td>Kramer’s Market</td>
</tr>
<tr>
<td>Maupin</td>
<td>Maupin Market</td>
</tr>
<tr>
<td>Sherman</td>
<td>Huskey’s 97 (Moro), Wasco Market</td>
</tr>
</tbody>
</table>
Supporting our local farmers and economy

Summer use exclusive to farmers markets and farm stands

Working with grocery stores to source / promote local products
Early Feedback

“I feel so much better when I eat healthy foods, but I usually can’t afford them. This program is a blessing.” — diabetic patient

“Shopping at the farmers market for the first time made me feel like part of my community.” — senior citizen

“Having Veggie Rx to offer my patients gives me the confidence to talk to them more about food insecurity and nutrition.” — doctor
Connecting Veggie Rx recipients to other services

- Bilingual Gorge Food Access Resource Pages
- Food Hero Cookbooks & Food Hero Monthly Newsletters given to all recipients
- Offering Veggie Rx as incentives to attend OSU cooking and nutrition classes: Plan, Shop, Save, Cook; Cooking Matters™; Seed to Supper
- SNAP match promotion for markets
- Incentivize use of other food access points like gleaning, gardening and more
Partnerships to Increase Skills

- OSU Extension provided monthly Community Meal and Cooking Classes in Hood River and The Dalles.
- Utilized “Plan, Shop, Save, Cook” curricula and delivering bi-lingually in partnership with local Community Health Workers and SNAP-Ed EPAs.
Food Hero Resources & Reinforcements
Output Data

• Number of Veggie Rx recipients: ~3,160
• Average # of people per household: 3.1
• % of people screened positive: ~25%
• Redemption rate: Varies greatly by season/site. 64% average, 80-99% at senior centers, more like 85% lately.
• Total Veggie Rx Distributed: $111,180
• Total Veggie Rx Redeemed: $71,396
Emergency Department Usage

- One Community Health patients receiving Veggie Rx were more likely than the general U.S. population to use the Emergency Dept. during the course of the last year.

- This data is from PreManage, which captures data from most hospitals in our region (WA, OR, and CA)
Demographics
One Community Health Data

- Average Percentage of Federal Poverty Line: 97.75
- Average Family Size: 3.2
- Average Age of Recipients: 33.8
- English as Language of Preference: 61%
- Spanish as Language of Preference: 39%
- Largest Age Group: 0-4 YO
Harvesting Health: A Community-Based Participatory Evaluation of The Veggie Rx Program
CENTRAL TENETS OF PHOTOVOICE

**STEP 1**
Participants — NOT researchers — select themes

**STEP 2**
Participants take their own photos based on the theme

**STEP 3**
Broad, open-ended questions stimulate a participant-driven conversation
Key Takeaways

Participants’ diets have improved with access to more nutritious food

Participants have seen physical & mental health improvements

Economic benefits at the family level AND at the regional level
# What Did We Learn from Focus Groups?

Use of Veggie Rx vouchers saw improvements in:

<table>
<thead>
<tr>
<th>Diet &amp; Nutrition</th>
<th>Physical Health</th>
<th>Mental Health</th>
<th>Financial Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fresh produce is now affordable</td>
<td>Participants “feel better”</td>
<td>Symptoms of ADHD and anxiety are more manageable</td>
<td>Vouchers supplement household income leading to reduced stress for the head of household</td>
</tr>
<tr>
<td>Fresh produce is being consumed by participants AND their families AND friends AND neighbors</td>
<td>Better self-management of diabetes</td>
<td>Participants report improved stress levels</td>
<td>Use of vouchers stimulates economic growth in the region</td>
</tr>
<tr>
<td>Consumption of fresh produce improved weight control</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
“I feel better [emotionally] when I have fresh fruits and vegetables.”

“My child cries when the fridge is empty. It’s a lot of stress for me.”

“My kids are free to be kids.”

After a cold, “my kid went back to school quicker.”
TINA'S STORY

“It’s not just my kids that are hungry. There are a lot of kids in the neighborhood who are worse off, and no one is looking out for them.

So I want them to know that if you come to my house, you’re gonna get fed.

I try to buy fresh fruit for the kids’ snacks, but they go so fast. Towards the end of the month they’re — and I’m ashamed to say it— they’re getting Goldfish or something.

It’s been so great to have the vouchers, because now I can put a big old bowl of fruit up there, and all the kids can pick something.”

BRITTANY'S STORY

“My kids came with me to the market. I feel like for the first time they are learning that food doesn’t come from the refrigerator.

People work so hard to grow this food for us, and we live in a special place.

The food there is just better. It’s in season. With the vouchers, I tell my kids to pick anything they want.

My son got to try a fresh peach for the first time. His eyes got so big— peaches are fuzzy, you know. It’s such a privilege to be there with a person when they try something for the first time.”
Participants in both cohorts insisted that the vouchers “aren’t a handout.” Unlike a “band-aid” — which hides larger problems — the voucher program treats the cause of their ailment (hunger). Participants saw vouchers as an acceptable alternative medicine. Spanish-speaking participants described doctors as non-responsive when they had suggested “natural remedies,” and were pleased that Veggie Rx used fresh food as a treatment. The photo to the left is of the green smoothies used as a remedy in one participant’s family.

**RAUL’S STORY**

“Local businesses are benefitting from this program.

To get more businesses involved, we need to spread the wealth across all participating stores.

This way no one store will benefit more than others. And stores that aren’t currently participating will become interested and will join.

This will start a domino effect until most region stores welcome the use of Veggie Rx creating a full circle of economic development.”
In order for people to be food-secure...

- Food must be available
  - Sustainable global food economy capable of producing lots of low-cost, high-quality food
  - Sustainable infrastructure to manage access and cost

- Food must be of good quality
  - Fresh enough
  - Sanitary
  - Variety meets nutritional needs

- Food must be affordable
  - Food is so inexpensive that everyone can afford it, OR
  - Food is "expensive," but everyone has enough money to afford it, OR
  - Those who can't afford food receive some kind of subsidy

In order for the subsidy to work...

- We must be able to identify those who qualify
  - Find them
  - Screen them
  - Give them the subsidy

- Recipients must have knowledge to use the subsidy
  - Know what the subsidy is for and how to use it
  - Know how to get enough value from the subsidy (budgeting, storing, preserving)

- Recipients must have access to places they can use the subsidy
  - Transportation
  - Physical ability to select and carry home food

Process Outcomes

- Recipients must have knowledge to use the subsidy
  - Number of screening sites
  - Number of participants screened
  - Diversity of participants screened

- Recipients must have access to places they can use the subsidy
  - Number of retail partners
  - Geographic spread of retail partners
  - Variety of retail partners

Impact Outcomes:

- Reduced risk of chronic disease
- Better chronic disease self-management
- Physical health

- Reduced health care costs
- Improved mental health
- Biological pathways by which food affects mental health
- Reduced financial worry/anxiety
- Reduced feelings of stress, shame, and hopelessness

- Improved food security
- More people report having enough food as well as better dietary habits (the right foods)

Byproducts

- Improved individual psychological outcomes
- Improved economic outcomes

- Improved food security
- More energy/time available for career development
- More energy/time available for supporting others
- More energy/time available for civic engagement
- Better outcomes in school

Logic model was developed in collaboration with Hannah Cohen-Cline at CORE.
Challenges

• Long term funding
• Tracking vouchers: Need a card or scanner system
• Transportation to farmers markets
• Stigma/Shame
• Funders want in-depth quantitative data
• Funders want to end hunger in a short period of time; hunger is chronic
Who’s on board now?

$30/month ‘dosage’ per person

PacificSource CCO
EOCCO
Hood River Health Dept.
Columbia Gorge Family Medicine
One Community Health
Next Pilot: 50 Low-Income, Pregnant Mothers

- 50 Women and their families
- 15 months total: ~9 months pregnancy, 8 months post-partum
- $30/month per family member up to $90/month
- Built in evaluation through WIC data i.e. A1C (blood sugar), mental health, food security
- Optional nutrition education, cooking classes, group exercise
- Seeking tandem pilot programs...
Healthy Corner Store Project

Funded by The Knight Cancer Institute
Culture of Health Prize

Columbia Gorge Region, OR & WA
2016 RWJF Culture of Health Prize

"We firmly believe food is medicine."

The VeggieRx prescription program makes fresh food accessible to those who’ve gone hungry, and are looking for healthful nourishment.
Thank you!

Lauren Kraemer  Lauren.Kraemer@oregonstate.edu
Sarah Sullivan  Sullivan@gorgegrown.com

www.gorgegrown.com