Farm to Families: Clinic-based Produce Provision to Address Food Insecurity During the Pandemic

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With rising rates of food insecurity (FI) during the pandemic, we implemented a clinic-based, community-supported agriculture program at 2 outpatient centers in low-income areas associated with an urban children's hospital and evaluated (1) the program's ability to reach FI families without preceding eligibility criteria, and (2) caregiver experiences and preferences for programming. Free boxes of produce were distributed weekly to caregivers of pediatric patients during a 12-week pilot period. Ability to reach the target population was measured by number of participating families and caregiver demographic information. We purposively sampled 31 caregivers for semistructured interviews on a rolling basis to understand program preferences. Content analysis with constant comparison was employed to code interviews inductively and identify emerging themes. Of 1472 caregivers who participated in the program, nearly half (48.3%) screened positive for FI, and 45% were receiving federal food assistance. Although many caregivers were initially "surprised" by the clinic-based program, they ultimately felt that it reinforced the hospital's commitment to "whole health" and perceived it to be safer than other food program settings during the pandemic. Several programmatic features emerged as particularly important: ease and efficiency of use, kindness of staff, and confidentiality. This advocacy case study demonstrates that a community-supported agriculture program in the clinical setting is an acceptable approach to supporting food access during the pandemic, and highlights caregiver preferences for a sustainable model. Furthermore, our data suggest that allowing families to self-select into programming may streamline operations and potentially facilitate programmatic reach to families who desire assistance.

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Authors: Brown R, Reilly G, Patel F, Freedman C, Virudachalam S, Cullen DL

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