

A SEAT AT THE TABLE: EXAMINING PRODUCE PRESCRIPTION PROGRAMS (PR_x) IN NV

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Introduction

Nevada (NV) Produce Prescription programs demonstrate how investment in agriculture-based health solutions can

- improve nutrition security,
- reduce chronic disease,
- build a resilient food system, &
- address health disparities.

University of Nevada Reno Extension researchers convened stakeholders to assess the existing programs, explore healthcare-agriculture partnership impacts, and plan for scaling up through federally funded initiatives.

Rationale

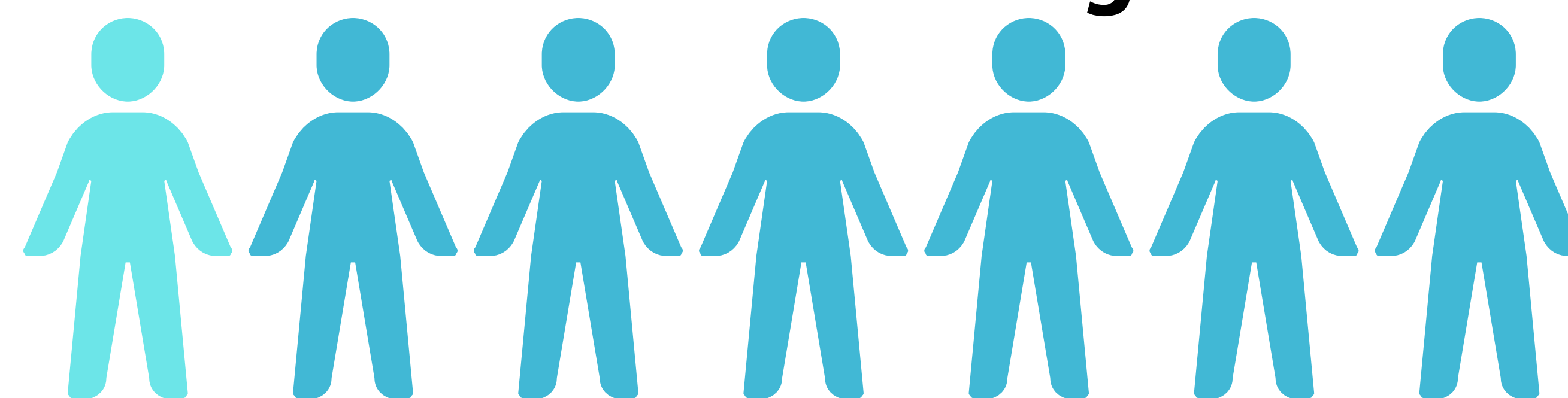
- Over **90%** of NV food is imported (2012).¹
- NV's rising food insecurity rates have surpassed the national average at 15.1%, ~**481,460** people (2023).²
- **32.8%** of NV adults had high blood cholesterol (2021).³
- **67.3%** of NV adults had a body mass index classification of Obese or Overweight (2021).³
- **42.2%** of NV adults consumed fruit <1x/day (2021).³
- **24.2%** of NV adults consumed vegetables <1x/day (2021).³
- Bringing small farmers to the table to support nutrition access programs provides sustained income to grow their farms and build a more resilient food secure state.
- A balanced diet rich in fruits & vegetables provides essential nutrients supporting overall health, reducing the risk of certain cancers and chronic illnesses (2023).⁴

Key Sources



"Food Is Medicine means that food and nutrition can help improve health, and that access to nutritious food is essential for well-being."⁵

1 in 7 Southern NV adults don't have access to fruits and vegetables



Results

Implementing Organization	Food Bank	HealthCare Organization	Academic Institution
Service Area	Northern NV	Southern NV	Clark County
Referral Source	Healthcare Organizations	Clinic serving limited resource individuals	Snowball recruitment
Eligibility Screeners	Hunger-Vital Signs	SNAP eligibility & Hunger-Vital Signs	Pre-Diabetes, at-risk for Type II Diabetes
Redemption Location	Food Pantry	Farmer's Market Voucher or Home Delivery	Food Pantry & Nutrition Class
Produce Source	Local farm, grants, existing partners	Local farm & Farmer's Market	Partnered Retailers
Nutrition Education	Supporting Wellness at Food Pantries (SWAP)	Weekly recipes, 1:1 consultation available	Cooking Matters, recipes & food demonstration

- Implementation Facilitators**
- Foodbank procurement
 - Program design
 - Program participation
 - Farm expansion

- Implementation Barriers**
- No outcome data
 - No impact data
 - No continued future funding
 - Transportation

Methodology

3 PR_x were identified & interviewed to:

- (1) Understand the NV PR_x landscape
- (2) Explore healthcare-agriculture partnership opportunities
- (3) Inform best practices for future efforts

Research was conducted through a

- Review of each program's web presence
- Semi-structured interview of program leadership
- Review of shared outcome data

Interviewed stakeholders discussed program scope, best practices, implementation strategies & lessons learned.

Interview Questions

1. What is included in the participant's referrals?
2. How is fruit & vegetable availability ensured?
3. Are educational opportunities/additional services offered?
4. How long can participants remain enrolled in the program?
5. How are participants supported after program conclusion?

Recommendations

- 01 Institutionalizing screenings and coding in Electronic Health Records in healthcare settings
- 02 Formalizing procurement process and expand partnerships with local farmers
- 03 Establishing standardized state health outcome metrics aligned with national initiatives (e.g. Food is Medicine, GUSNIP PR_x)
- 04 One-stop shop strategy of aligning services to ease participants' burden of attending multiple program components
- 05 Training for medical students in public health, food access, social determinants of health & chronic disease prevention

