



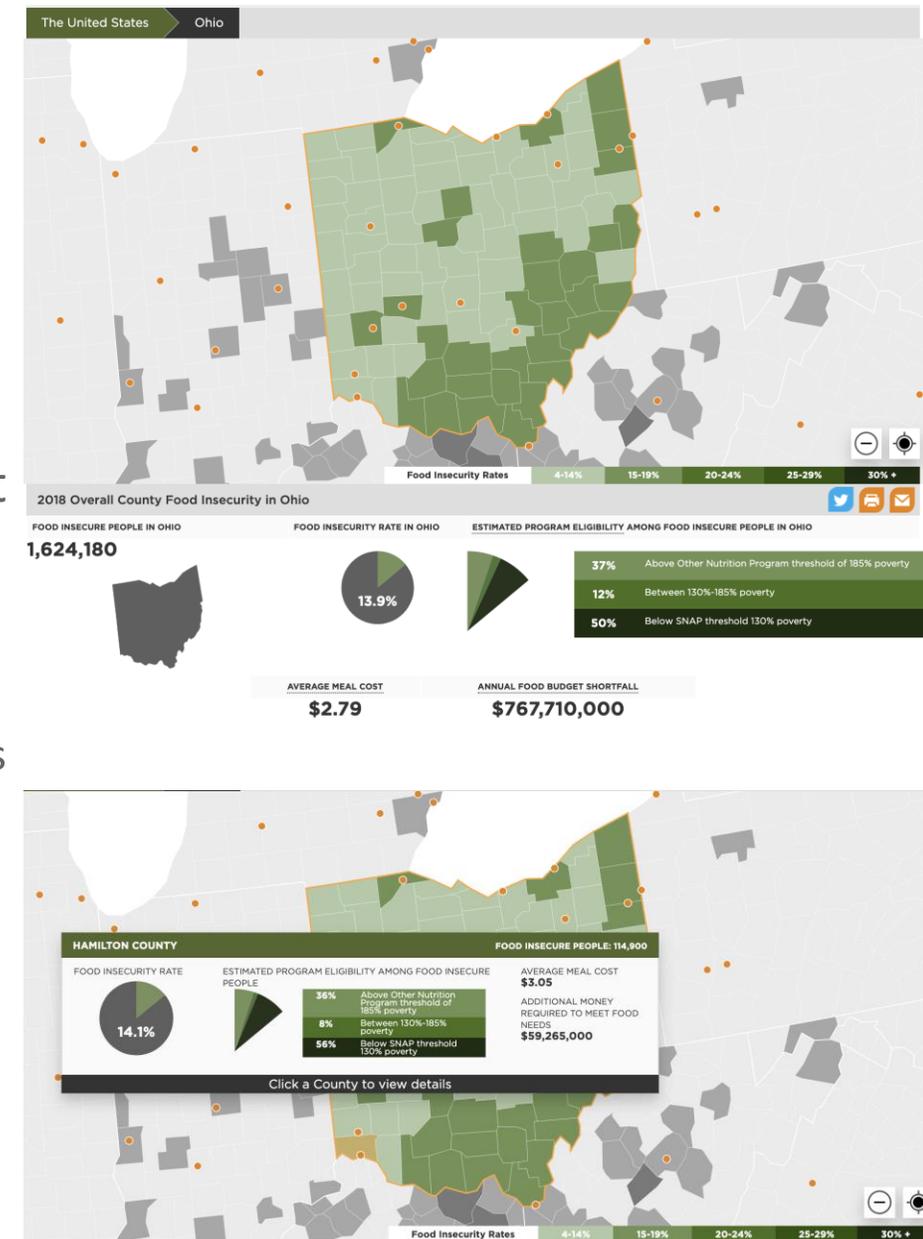
Assessment of Client
Opinions and Perspectives
of the Healthy Harvest
Mobile Market Initiative at 3
Locations in Cincinnati

LEARNING COMMUNITY 5

N. Ezeakudo, J. Fahmy, B. Fessler, T. Hicks, K. Mbah, C. McKenzie,
M. Orischak, T. Rayner, A. Springman, S. Treichel, H. Vester, J.
Youngs

Introduction

- Food insecurity: Lack of access to enough food for an active, healthy life for all household members
- An estimated 10.5% of U.S. households were food insecure at some time during the year 2019⁽¹⁾
 - In the Greater Cincinnati region more than 270,000 households are experiencing food insecurity ⁽²⁾
 - In Hamilton County specifically, an estimated 114,900 individuals are experiencing food insecurity ⁽³⁾
- Possible factors leading to food insecurity:
 - affordability of food items
 - distribution and location of places to purchase food
 - availability of healthy food options



<https://map.feedingamerica.org/county/2018/overall/ohio>

Freestore Foodbank & Healthy Harvest Mobile Market

- Provides over 33 millions meals to Cincinnati residents every year ⁽²⁾
- Healthy Harvest Mobile Market initiative
 - Mobile grocery store created to increase access to healthy and fresh food options in the Cincinnati area
 - 12 neighborhoods, 1.5-2 hours per stop
 - Accepts EBT/SNAP, Produce vouchers, Produce Rx's, cash & credit
 - Recently started partnering with La Soupe to provide free fresh-frozen homemade meals at the Walnut Hills location
- Produce Rx's
 - Given out by physicians at UC Primary Care Clinics that are participating in a grant study with FSFB
 - Produce Perks (a separate non-profit) connects clients with physicians who also write "prescriptions" for healthy foods



Learning Objectives

- Assess subjective opinions from clients about the effectiveness of the HHMM program in terms of health outcomes
- Assess the barriers that current clients are facing in accessing HHMM locations in general and since the start of the COVID pandemic

Service Objective

- Provide meaningful data for Freestore Foodbank regarding the HHMM to assist with new program ideas and provide greatest benefit to clients experiencing food insecurity



Methods

- A single-page survey was prepared to assess client's frequency of utilization of HHMM, payment methods, ease of access, primary point of medical care, health conditions, and perceived improvement of conditions
- 3 open-ended questions were used to assess individual barriers to accessing HHMM in general and barriers due to Covid-19
- Basic demographic data were also collected



Methods

- Selection of Health Conditions: Diabetes & Hypertension
 - The USDA found that for each of the 10 chronic conditions targeted by the CDC, as food insecurity worsens, the likelihood of having the condition increases ⁽⁴⁾
 - Conditions targeted by CDC: HTN, Coronary Heart Disease, Hepatitis, Stroke, Cancer, Asthma, Diabetes, Arthritis, COPD, & Chronic Kidney Disease
 - Diabetes and hypertension are 2 conditions that can be tracked quickly and relatively easily over time. Both the glucose & blood pressure trends can be noticeably impacted when the patient's diet is altered ⁽⁵⁾

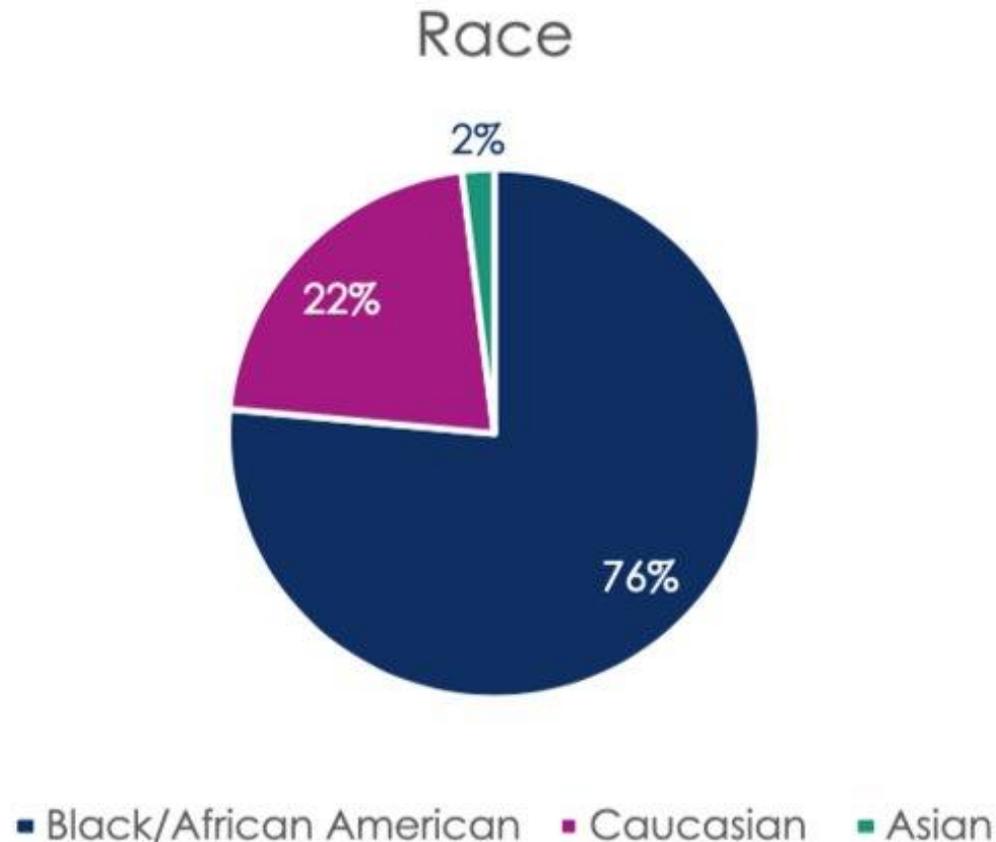


Methods

- Choosing neighborhoods
 - Looked at total \$ spent at each of the 12 HHMM locations as well as which location had the most the highest utilization of UC PRx's and chose the highest and lowest grossing locations as well as one location that fell in the middle of the pack
 - Avondale had highest total \$ and Walnut Hills was 2nd and had a higher utilization of UC PRx's so we chose Walnut Hills
 - Evanston had the lowest total \$
 - Bond Hill, College Hill, South Fairmont, & Price Hill were all very similar. Ultimately chose Bond Hill as it was the neighborhood assigned to us at the beginning of the project



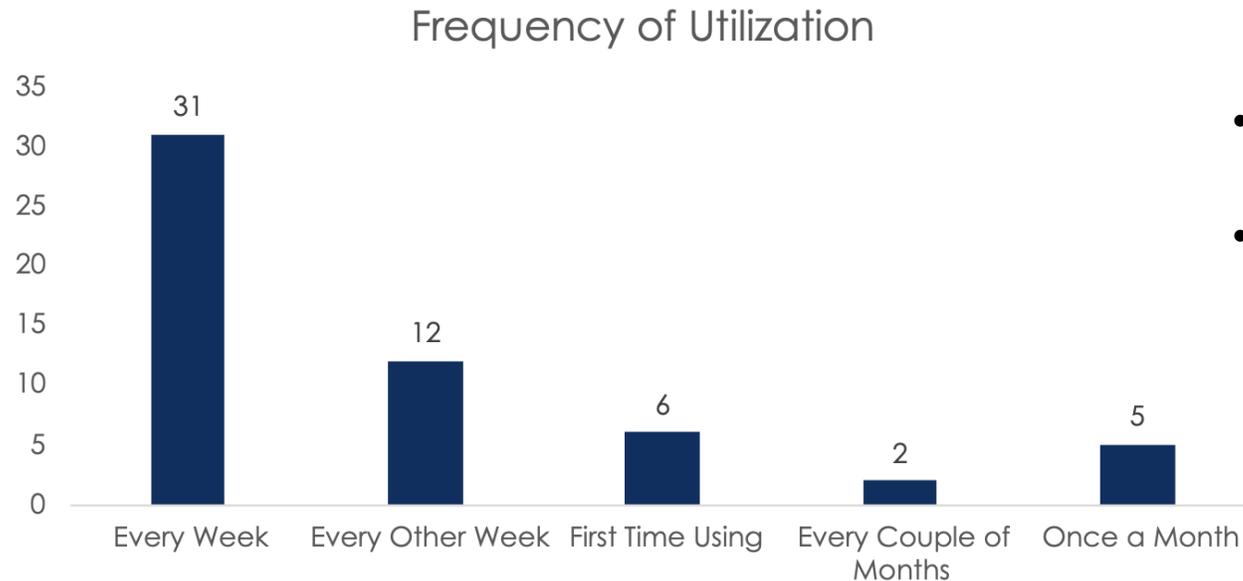
Results—Demographics



- Of the 56 people surveyed, a majority (76%) identified as African American.
- According to 2010 Cincinnati Census, Bond Hill (94.3%) and Evanston (69.3%) had a majority African American population, while East Walnut Hills (29.8%) had a minority.
- An explanation for the majority of people using the Healthy Harvest Mobile Market being African American could be explained by the fact that their neighborhoods are disproportionately affected by food deserts, increasing the need to acquire fresh produce through other methods.



Results – Frequency of Utilization

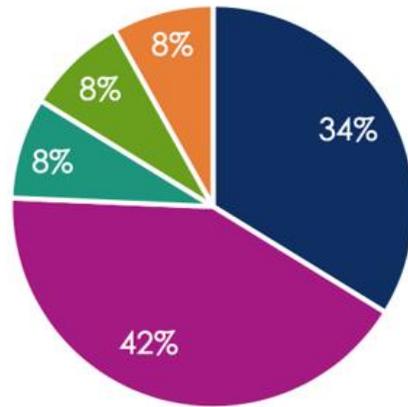


- Most people surveyed (76.8%) used Healthy Harvest Mobile Market either every week or every other week.
- People LOVE the market – as we will see later. It is clear this is a service that people utilize frequently, and a program such as Produce Prescriptions should work especially well if permanently implemented in a healthcare setting



Results – Method of Payment

Method of Payment



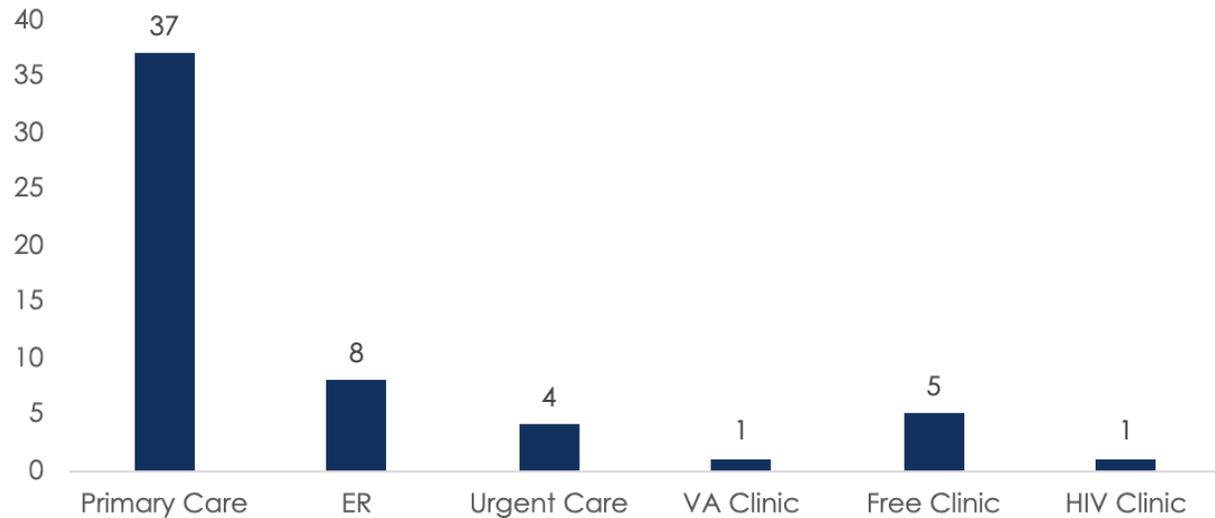
■ Cash ■ SNAP/EBT ■ Credit/Debit ■ Produce RX ■ Other Voucher

- The majority of clients surveyed used SNAP/EBT (42%), followed by cash payments (34%)
- Very few people (8%) used Produce Prescriptions or vouchers
- According to the data, greater awareness should be spread regarding Produce Prescriptions and their benefits.



Results—Point of Medical Care

Point of Medical Care



- 66.1% of respondents utilize a primary care office as their primary point of medical care
 - Although the lack of Produce Prescription use mentioned previously could (in part) be explained by the number of people who do not utilize a primary care office (we did not ask which health system they utilize so this measurement was not broken down into UC PCP vs other PCP), the utilization of PRxs was still much lower than expected.
- Based on the number of clients who utilize an ER or Free Clinic for their medical care, expanding the PRx program/information/services to local urgent cares, ERs, and free clinics in the area could increase the use of both PRx and HHMM overall.



Results—Feedback

Impact of COVID-19 on access to the mobile market:

- 49 (88%) said COVID-19 had no impact
- 3 (5%) noted at one point they were afraid to leave their home to come to the HHMM
- 1 (2%) noted that they relied more on the HHMM during the peak of the COVID-19 pandemic.

Barriers to accessing the HHMM:

- 43 (77%) had no boundaries to access
- 3 (5%) noted unreliable transportation
- 2 (4%) noted financial instability

Suggestions for Improvement:

- 4 (7%) suggested increasing the inventory
- 6 (10%) suggested expanding locations and/or hours
- 36 (64%) had no suggestions for improvement and instead commented that the market was, “perfect,” “great as it is,” and to, “please keep it going.”



Conclusions

- Learning Objective
 - 56 total surveys were distributed to HHMM locations at 3 different locations in Cincinnati
 - Obtained data on the demographics, frequency of utilization, payment methods, ease of access, primary point of medical care, health conditions, and perceived improvement of conditions
- Service Objective
 - Feedback on the HHMM was mostly very positive, demonstrating the importance of having accessible food in these communities
 - Several survey respondents emphasized that they would like more variety of foods and expanded access (more locations, longer hours)
 - Many survey respondents use more than one payment method (ex. SNAP and cash)
 - Produce RXs were used sparingly in lieu of other payment methods
 - This data can be utilized by Freestore Foodbank to better tailor their program to help the needs of the community



Conclusions

- Barriers & Solutions
 - **Barrier:** COVID-19 precautions required group members to read survey questions out loud to clients rather than having clients fill the surveys out individually. Coupled with the public nature of the HHMM locations, this limited the types of questions we felt comfortable asking clients.
 - **Solution:** Health condition questions were limited to diabetes and HTN. No questions related to income or level of education were asked.
- Next Steps & Future Directions
 - Administer survey at all HHMM locations & over a longer period
 - Additional health condition questions
 - Introduce Produce Rx's into local free clinics



Acknowledgements

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References

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