

## Ease of access improves fruit and vegetable consumption

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Low-income communities have particular problems getting adequate fruits and vegetables because of limited access to supermarkets and farmers markets. A new study from Wake Forest Baptist Medical Center shows that community-supported agriculture (CSA) programs may be a feasible approach for providing fresh fruits and vegetables to underresourced communities.

Lead author Sara A. Quandt, Ph.D., a professor of epidemiology and prevention at Wake Forest Baptist, said that CSAs, which link consumers to a local farm's produce over a growing season, have been proposed as a solution for disparities in fruit and <u>vegetable consumption</u>, though evaluation of such efforts has been limited. The typical U.S. diet fails to meet daily recommendations for fruit and vegetable consumption.

This CSA program, Farm Fresh Healthy Living of Forsyth County, N.C., was developed, administered, and evaluated by a partnership of university researchers, Experiment in Self Reliance Inc., a community nonprofit agency, and Harmony Ridge Farms, a Forsyth County, N.C., farm using organic practices.

"Expanding access to healthful foods is an important step in reducing health disparities," said Quandt. "The objective of this study was to test the feasibility of a CSA program for low-income families in Forsyth County."



The study appears last month in the Centers for Disease Control and Prevention's journal *Preventing Chronic Disease*.

For a small randomized, controlled feasibility study, Quandt and fellow researchers recruited 50 low income women with children, then divided them into an intervention group and a control group of 25 each. The participants ranged in age from 24 to 60; most were African-American and unmarried.

Intervention participants received a free box of fresh produce for 16 weeks from May through August 2012. They were also offered five educational sessions, including cooking classes, a farm tour and a grocery store tour with a dietitian that focused on healthful eating on a budget. The control participants did not receive education or the produce boxes.

The researchers observed a significant increase over the summer in the number of different <u>fruits and vegetables</u> in the households of the intervention group compared with the control group. The intervention group also reported greater increases in fruit and vegetable consumption.

"Although the increases in fruit and vegetable consumption in the intervention group did not reach statistical significance, they did show a trend in the right direction," said Quandt. "In a larger group, we would expect that the CSA program would make a noticeable impact on quality of the families' diets."

Intervention participants reported a willingness to pay at least a portion of the CSA cost in the future. In an overall evaluation of the Farm Fresh Healthy Living program, the participants reported positively on the variety of the produce provided, the better flavor of the local produce compared with grocery store produce, the chance to expose children to new foods, as well as the chance to eat foods that were too expensive to



purchase at the grocery store. Some indicated problems with work schedules and transportation in picking up their produce box every week.

"This study shows that food from a CSA program has positive effects on recipient households," said Quandt. "CSA is a feasible approach and more study is needed. Altering some of the financial and operational aspects of traditional CSA programs will be necessary to improve the participation impact."

## Provided by Wake Forest University Baptist Medical Center

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