**Food Insecurity, Perceived Access, and Dietary Diversity Among Produce Prescription Program Participants in South Georgia**

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**Objectives:** Investigate the relationships between food insecurity, perceived food access, and dietary patterns among Produce Prescription Program participants (n = 81) at baseline using regression analysis.

**Methods:** The Open Hand Atlanta Cooking Matters Produce Prescription Program adopts a holistic approach to nutrition intervention combining cooking classes, nutrition education, and weekly boxes of local produce over a six-month period. Baseline program data collected in South Georgia during 2021 were used to examine the impact of food security and perceived food access of dietary diversity, fruit and vegetable consumption, and dietary behaviors among participants. Regression analyses included food insecurity status dichotomized based on the USDA 6-item criteria, perceived fruit and vegetable availability, and perceived fruit and vegetable affordability. Outcome measures included the number of unique fruits and vegetables consumed in the previous 24-hours, a composite diet score based on a modified food frequency questionnaire, a composite healthy purchasing score, and a composite resource management score. All models controlled for sex, age, income, and education of participants.

**Results:** Neither food insecurity nor perceptions of fruit and vegetable availability and affordability had direct effects on baseline fruit and vegetable consumption or dietary patterns among participants. Food security had a moderate effect on resource management such that food secure participants endorsed a lower typical frequency of resource management behaviors ($\beta = -2.8, 95\% \text{ CI } [-5.4, -0.15]$). Similarly, food security had a moderate effect on healthy purchasing scores such that food secure participants endorsed a lower frequency typical frequency of healthy purchasing behaviors ($\beta = -4.1, 95\% \text{ CI } [-7.8, -0.44]$).

**Conclusions:** Prior to a Produce Prescription Program intervention, food secure participants had lower resource management and healthy purchasing scores than those who were food insecure.

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