



**Nourish**

# Food Prescribing

Field Scan:  
Executive Summary

By Joshna Maharaj, Jen Reynolds,  
and Shelby Montgomery

Illustrations by Alex Sawatzky,  
Arrell Food Institute

December 2024



# Executive Summary

Food prescriptions are a relatively new tool. With a food prescription, health care practitioners identify patients who are food insecure or at risk of diet-related chronic diseases, then offer them access to subsidized or free healthy foods.

Food prescribing offers transformative potential to the health sector - using food as medicine to promote health and combat food insecurity. This report dives into innovative food prescription programs across Canada, drawing on insights from the program leaders, funders, and advocates who are pioneering this approach.

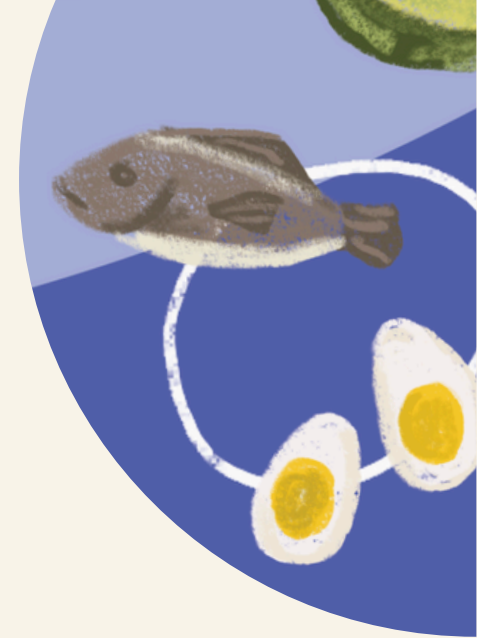
Research involved in-depth interviews with program leads from 11 food prescribing projects, two funders, and one advocacy organization. Interviews sought to understand their experiences, identify successful strategies, pinpoint challenges, and explore the potential for scaling food prescribing initiatives. Conversations were recorded, transcribed, and analyzed to draw out key themes and lessons learned.

## **Food Prescribing has Benefits Beyond Food Security**

One of the most significant insights this research surfaced is that, while the majority of current food prescribing programs focus on alleviating food insecurity, they often fall short of promoting sustained healthy eating habits or healthy food access. Interviewed program leaders asserted that food insecurity is, fundamentally, an income issue. Food prescriptions are a health-based tool; while they alone cannot solve health challenges, they play a crucial role in supporting individuals to develop food skills, knowledge, and healthier habits. Interviewees called for significant resourcing to bring food prescribing to scale, with dividends in improved health and reduced pressures on the health care system.

## **Gift Cards can Support Food Access and Autonomy**

A successful strategy interviewees highlighted for scaling food prescribing models is to use grocery gift cards, which provide recipients with the flexibility to choose foods that best meet their needs. This approach reduces recipients' stress, supports their autonomy, and improves their nutrition without the logistical challenges of delivering food packages, offering needed flexibility for diverse dietary needs. There are lessons to be learned from food prescription programs in the United States, particularly in relation to using pre-loaded cards for food access and integrating food supports into broader policies.



## **Effective Food Prescribing Builds Trust and Agency**

Trust and agency emerged as key themes for effective food prescribing. Supporting prescription recipients to make their own food choices fosters a sense of empowerment and self-management. Scaling models that offer food prescriptions through health care practitioners, including physicians, nurses, and dietitians, as well as program staff in non-health care settings, requires innovation in intake and prescription tracking. Interviewees noted concerns about the paternalistic nature of "prescribing" food and the importance of culturally sensitive language, particularly in Indigenous communities.

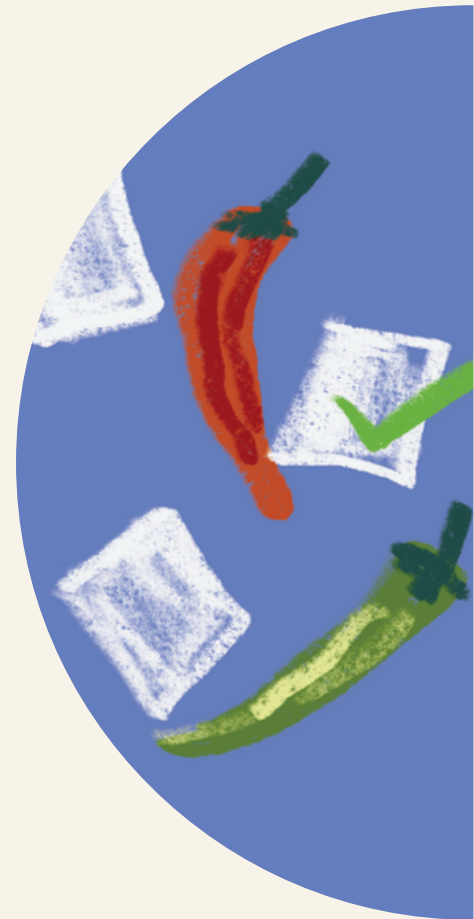
## **More Investment is Needed**

Despite the promise of food prescribing, insufficient financial resources is hampering its potential. Interviewees emphasized the need for substantial investments to integrate food prescriptions into health care systems in meaningful ways. This includes dedicated billing codes and incorporating food-based assessments into electronic medical records to both formalize food prescribing within health care and to capture its impacts on both recipients and the health care system.

With limited resources available for assessment, program leads are calling for innovative methods to generate more robust evidence to help secure funding and better demonstrate the value of these initiatives. Questions remain about how to best evaluate food prescribing programs.

## **Partnerships with Community and Agriculture are Vital for Scaling**

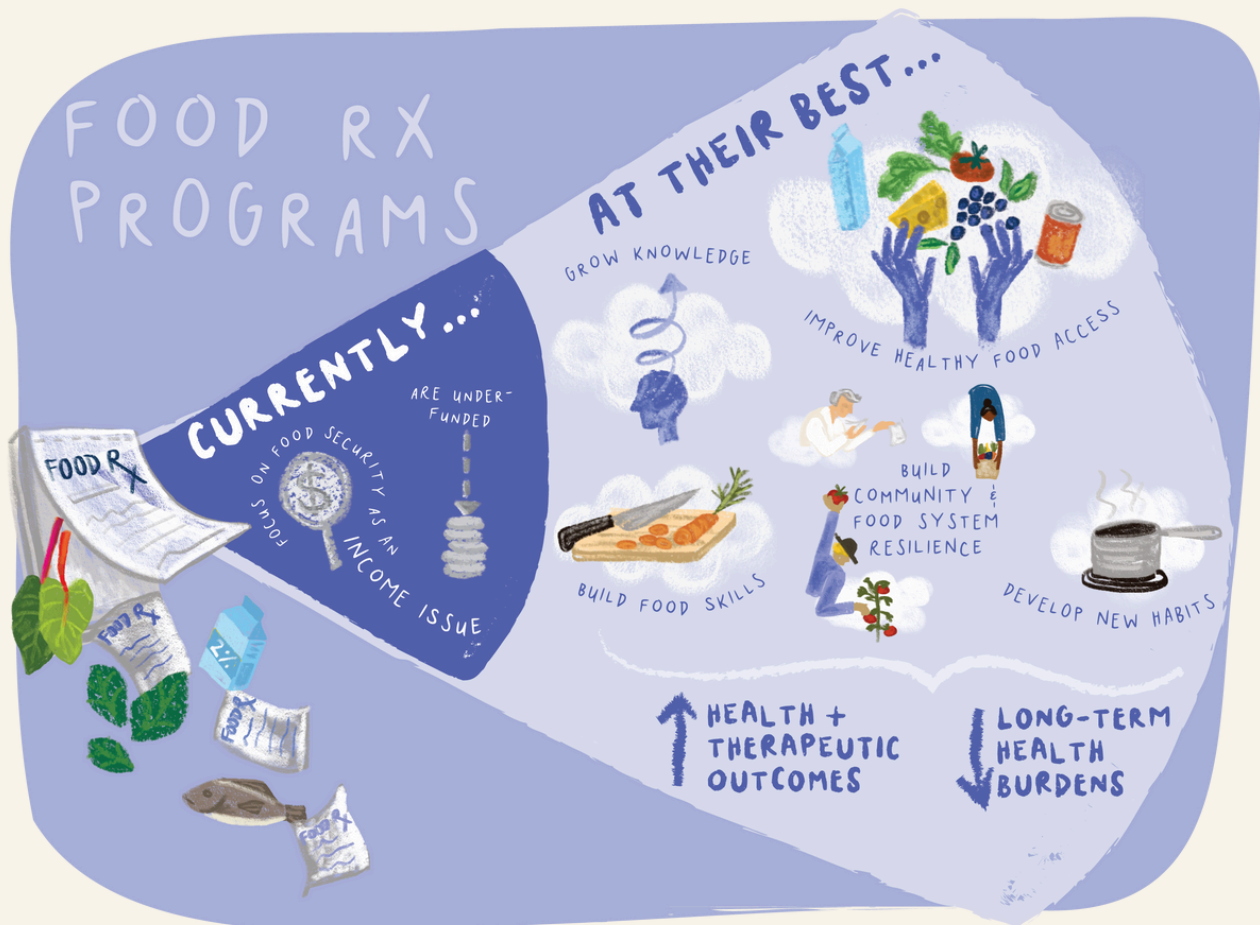
Scaling food prescribing nationally requires a coordinated approach involving government, health care, and community organizations. Case studies in this report showcase diverse implementations of food prescribing programs, highlighting successful partnerships with local farmers and markets. These collaborations ensure access to fresh, local, and nutritious foods, though challenges remain in sourcing affordable and sustainable options. Enhanced relationships with the agricultural sector will support the realization of food prescribing programs and their benefits.



**Looking Forward**

Ultimately, food prescribing models should aim to address food insecurity and improve health outcomes. By viewing food prescriptions as long-term health supports rather than temporary solutions, health systems can reduce diet-related chronic health conditions and lessen health care system burdens - while simultaneously addressing social determinants of health. This work goes beyond providing food: it is about creating the conditions for individual autonomy and empowerment, fostering community connections, and recognizing food as a vital component of health and well-being.

**Nourish looks forward to engaging our community of practice to explore how to secure greater investment in the therapeutic use of food for human and planetary health. If you have feedback or ideas stemming from this field scan and/or are interested in being part of this conversation, please get in touch with us at [info@nourishleadership.ca](mailto:info@nourishleadership.ca).**



**Table 1: Food Prescribing Programs in Canada - A Snapshot**

Organization	Current (CU) / Historical (H)	Prescriber(s)	Target	Offer	Standardized (S) / Choice (C)	Pickup (P) / Delivery (D)
<b>Apple-a-Day, Saskatchewan Health Authority (SK)</b>	CU	Dietitians & Nurses	Food Insecurity	Produce	S	Both
<b>Black Creek Community Health Centre (Toronto, ON)</b>	H	Health centre Professionals (on-site)	Food Insecurity	Culturally Appropriate Food Package	C	D
<b>CFCC's Market Greens (Canada)</b>	CU	Health care Professionals (varied)	Food Insecurity & Health Screenings	Shopping Vouchers for Subsidized Markets	C	P
<b>CIUSSS Centre-Sud, Hôpital Solidaire (Montréal, QC)</b>	CU	Health care Professionals (varied)	Food Insecurity (emphasis on food is medicine)	Prepared Meals (eat on-site or to-go)	C	P
<b>Compass Community Health Food Prescriptions (Hamilton, ON)</b>	CU	Community Health Centre Practitioners (occasional outside referrals)	Food Insecurity (large diabetic population)	Produce	S	Both
<b>Department of Education (NL)</b>	CU	Family Resource Centres' Staff	Food Insecurity	Grocery Gift Card	C	P
<b>Farmers' Market Nutrition Coupon Program (BC)</b>	CU	Community Partner Organizations	Food Insecurity, Seniors & Pregnant	Farmers Market Coupons	C	P

Table continued on following page...

Organization	Current (CU) / Historical (H)	Prescriber(s)	Target	Offer	Standardized (S) / Choice (C)	Pickup (P) / Delivery (D)
<b>FoodShare (Toronto, ON)</b>	H	Health Care Professionals / Self-referral	Food Insecurity	Good Food Box	S	D
<b>I Can 4 Kids (Calgary, AB)</b>	CU	Social Service Agencies	Food Insecurity	Grocery Gift Card	C	P
<b>Nourishing Communities Food Coupon Program (NS)</b>	CU	Community Partner Organizations	Food Insecurity, Low-income households	Farmers Market Coupons	C	P
<b>Parkdale Health Center (Belleville, ON)</b>	H	Physicians	Food Insecurity	Food Bank Access	C	P
<b>Research Trial, University of Calgary (AB)</b>	CU	Physicians	Food Insecurity (People w/ Type 2 Diabetes & their Families)	Grocery Gift Card	C	P
<b>The Seed (Guelph, ON)</b>	CU	Health care Professionals (varied)	Food Insecurity	Shopping Vouchers (online or in-person market)	C	Both



Let's work together to redefine the value of food for health.



# Nourish Leadership in health care.



@nourishleadership



@nourishlead



www.nourishleadership.ca



**Nourish**