



Evaluating the Impact of a "Food is Medicine" Prescription Produce Programme on Glycaemic Control in Type 2 Diabetics: A Mixed Methods Study in Cape Town, South Africa

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Abstract

Type 2 diabetes is a major public health burden in South Africa, with diet being a key modifiable factor. 'Food is Medicine' interventions, which provide prescriptions for nutritious food, may improve outcomes, but evidence from low-resource settings is scarce. This study evaluated the impact of a prescription produce programme on glycaemic control in adults with type 2 diabetes in Cape Town. Its objectives were to quantify changes in HbA1c and to explore participant experiences and barriers to adherence. A concurrent mixed methods design was used. The quantitative component was a pre-post study measuring HbA1c at baseline and six months in 150 programme participants. The qualitative component involved 20 in-depth interviews with a purposively selected sub-sample. Quantitative data were analysed with paired t-tests; qualitative data were analysed thematically. A statistically significant mean reduction in HbA1c of 0.8% ($p < 0.01$) was observed. Qualitative themes included improved nutritional knowledge, the perceived dignity of the 'prescription' model, and logistical challenges such as transport to collection points. Financial strain was a major reported barrier to sustaining dietary changes after the programme. The programme was associated with a clinically meaningful improvement in glycaemic control. Qualitative findings indicate the model conferred dignity while also revealing systemic barriers to long-term healthy eating. Implementation should include strategies to mitigate transport barriers. Future programmes should integrate linkages to sustainable food access initiatives. Further research should investigate cost-effectiveness and long-term sustainability. Food is Medicine, type 2 diabetes, glycaemic control, mixed methods, South Africa, prescription produce, nutrition. This study provides evidence on the feasibility and impact of a 'Food is Medicine' intervention in a low-resource South African setting, highlighting both its potential benefits and the structural challenges to lasting dietary change.

Keywords: *Type 2 diabetes, glycaemic control, Food is Medicine, South Africa, mixed methods research, prescription produce programme, public health nutrition*

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