

The University of Texas at Austin College of Pharmacy

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BACKGROUND¹⁻⁵

- Rates of obesity and chronic diseases have increased dramatically with a decline in physical activity
- Children ages 8-18 have increased non-active time from 6.33 hours per day in 1999, to 7.66 hours in 2009
- Despite evidence that increased physical activity reduces obesity, chronic disease, and stress, healthcare teams under utilize resources available to patients
- American Journal of Preventive Medicine revealed that fewer than 14% of primary care providers regularly gave forms of counseling on exercise
- The Golden Gate National Parks Conservancy introduced the Parks Prescription movement in 2010, aimed at strengthening the connection between healthcare systems and the outdoors
- Numerous programs have been developed nationally to promote wellness through increased park use

OBJECTIVE

The purpose of this project is to analyze current Parks Prescription Programs in the United States and current barriers in Austin, TX. This will be used to create an implementation plan for the Austin Parks and Recreation |Department (PARD) Prescription Program.

METHODS • Standard questionnaire was developed for the purpose of interviewing six existing Parks Prescription Programs within the United States California, Colorado, Maryland, North Carolina, Pennsylvania, and Washington • This questionnaire included: Program's Budgeting Barriers Research Goal

Outcomes

Measured

Partnerships

Successful

Strategies

Analysis of Parks Prescription Programs within the United States: Tools for Implementation in Austin, Texas

RESULTS IN PROGRESS

Table 1. Selected Parks Prescription Program Questionnaire Results Parks Westminster, CO San Francisco, CA Philade **Prescription** Program • To reduce the rates of • 60 min • Increase accessibility obesity within the city for all daily a for kid • Prescribing nature as Goal of a preventative Increa intervention for parks, Program chronic illnesses green • No extensive budget • Regional Park Funds Schuylk • Kaiser Permanente from the city for Env Budgeting • The diabetes program Educat Utilized is funded through (found CDC/ADA prograi • Community • Patients do not know • Lack of where to begin when acceptance of the time/k a health care provider & inpu project Barriers • Persistence recommends Lack of increased activity of the prescr • "Effect of park • Head of program was • Intervie prescriptions with brought on from a health and without group different parks provide **Research or** visits to parks on Childre department in Oregon Immersion stress reduction in Hospit Experiences Philade low-income parents: SHINE randomized familie trial" • Childre The Water District • Partnered with 12 • Save the Red Woods medical providers in Hospit Samuel Merritt Philad the area (CHOP University Partnerships • Ethnic Health Schuyll • U.S. Fo Institute (EHI) Tiburcio Vasquez Health Center Follow up with patient Tracked • Surveys after physician of peop Outcomes prescribes exercise attende and after a set period prograi Measured of time utilized service Media coverage • Targeted families Surveys • Programs for specific popula Successful disease states figure Strategies • Designed a workflow best m intervention provid Utilized inform • Partne

naire Results			
elphia, PA	Frederick County, MD	Bellingham, WA	New Hanover County, NC
nutes of active play ds ased use of trails and spaces	 Decreased burden of chronic disease, increase health & happiness, & foster environmental stewardship 	 Provide simple resources that have a big impact Connect more patients with positive outdoor experiences 	 Reduce obesity by encouraging people to use the parks for exercise
lkill Center vironmental tion ders of the am)	 Local businesses sponsor events and prizes 	 Donation based 	• None
of provider knowledge ut of utilization	 Development of community awareness of the resources Financing the programs/events 	 Community awareness Establishing physicians 	 Lack of organized programs No formal way of checking patient progress
riewed h care ders at the ren's tal of lelphia & es	 The State of Obesity report is one of the main drivers of this program 	 Two years of needs assessment, partner development, & data collection 	 Work with the county health department & county strategy office to identify population needs
en's tal of lelphia o) lkill Center orest Service	 Frederick County Health Department City of Frederick Parks & Recreation Department 	 Local health care providers 	 County health department Internal health clinic for county employees
ed number ople that ded parks ams and ed the e	 Participants fill out surveys at events Results are used to assess the program's impact 	 Surveys and following up with patients 	 Plan to measure impact through initial and periodic surveys of participants
ys target ation to out the nethod of ding nation erships	 Create promotional information Reach out to local media Designate a contact person for physicians 	 Media coverage Word of mouth 	• N/A

DISCUSSION IN PROGRESS

- Preliminary results from the interviews highlighted the intention to connect patients to outdoor experiences
- Common barriers included community awareness and provider advocacy
- Establishing local partnerships with key organizations, as well as media coverage has helped break some of these boundaries
- In continuing to provide such service, surveys are key indicators used to monitor progress

CONCLUSIONS IN PROGRESS

- Obtained results have provided a template to proceed with the redevelopment of the PARD Prescription Program
- A community needs assessment survey is being conducted to determine barriers in Austin, TX including seeking out green spaces, recreation centers, and transportation
- It has been distributed to residents at local grocery store pharmacies and a library
- Results will be analyzed to determine resource gaps of current PARD resources
- With the knowledge from other programs and the resources gaps identified in Austin, a proposal for the implementation of a program in Austin will be created

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