

# **Appendix E-2**

## **Fact Sheet Farmers' Market Vendors**

## **NYC HEALTH BUCKS EVALUATION FACT SHEET FARMERS' MARKET VENDORS**

### **ABOUT THIS STUDY**

You are being asked to fill out a survey of New York City farmers' market vendors. We want to learn your thoughts about farmers' markets. We also want to learn what you think about the New York City Health Bucks program.

This program gives out \$2 coupons called "Health Bucks." Shoppers can use Health Bucks to buy fresh fruits and vegetables in some New York City farmers' markets. The Farmers' Market Federation of New York runs this program for the NYC Department of Health. Abt Associates, Inc., a research firm, is studying the Health Bucks program for the Centers for Disease Control and Prevention (CDC). We will use your answers to learn how this program affects New York City farmers' markets. We will also learn how to make the program better.

The survey should take about 7 minutes.

### **RISKS OF TAKING PART IN THE STUDY**

Filling out this survey has minimal risks for you. The main risk is that your response to this survey could be disclosed in a way that identifies you; however, many procedures are in place to lower this risk.

### **COSTS AND FINANCIAL RISKS**

There are no costs for filling out the survey.

### **POSSIBLE BENEFITS OF TAKING PART IN THE STUDY**

Filling out this survey will help improve New York City farmers' markets and the Health Bucks program. This could increase your sales.

### **DATA SECURITY**

Information collected as part of this survey will be maintained in a secure manner. Protections will be in place to safeguard your response to the maximum extent allowed by law. We will collect the name of the business that runs your stand on a cover sheet. This will be used only to track who has filled out a survey. We will keep cover sheets apart from the rest of the survey. We will store surveys and cover sheets in secure, locked rooms at Abt Associates. We will enter your answers into a computer file. We will store the file with a password on a secure server at Abt Associates. We will only report your answers combined with answers from 450 other surveys. We will not share your answers with CDC, the NYC Department of Health, or the Farmers' Market Federation of New York. Your business name will not be in any published reports. We will destroy all surveys and cover sheets at the end of the study.

### **TAKING PART IS VOLUNTARY**

You can choose not to fill out the survey. If you do not fill out the survey, there will be no penalty. Even if you agree to fill out the survey, you do not have to answer all the questions. Your choice will not change your relationship with CDC, the NYC Department of Health, or the Farmers' Market Federation of New York.

### **QUESTIONS**

You may call Lauren Olsho of Abt Associates Inc. (617-520-2326) to learn more. You may also call Teresa Doksum, IRB Administrator (617-349-2896), if you have other questions about your rights as part of this study. Calling these numbers will incur a toll.