

## **Resolution: Screening, Intervening, and Advocating to Address Food Insecurity**

Introduced by: Dr. Venis Wilder

**WHEREAS**, food insecurity is a social determinant of health;

**WHEREAS**, more than 42.2 million Americans live in food-insecure households in rural, urban, and suburban communities, and no state or county is immune from food insecurity;<sup>1</sup>

**WHEREAS**, food insecurity in adulthood is associated with diabetes, heart disease, hypertension, pregnancy complications, poor overall health status, poor sleep outcomes, functional limitations, depression and mental health problems, and obesity (primarily in women);<sup>2,3</sup>

**WHEREAS**, food insecurity in childhood is associated with poor overall health status, low birth weight, some birth defects, iron deficiency anemia, asthma, poor oral health, developmental risk, mental health and behavioral problems, and poor educational outcomes;<sup>4,5</sup>

**WHEREAS**, patients experiencing food insecurity – even at low levels - may engage in health-compromising coping strategies to stretch limited budgets, such as cost-related medication non-adherence, postponing preventative or needed medical care, forging the foods needed for medical diets, or making trade-offs between food and other basic necessities (e.g., housing);<sup>6,7</sup>

**WHEREAS**, health-compromising coping strategies used by patients struggling with food insecurity as well as food insecurity itself can exacerbate disease, compromise health, increase physician encounters, increase ER visits, and increase hospitalizations;<sup>8,9</sup>

**WHEREAS**, food insecurity is associated with some of the most costly and serious health problems in the U.S. the direct and indirect health-related costs of hunger and food insecurity in the U.S. are estimated to be \$160 billion annually;<sup>10</sup>

**WHEREAS**, patients experiencing food insecurity may be difficult to identify;

**WHEREAS**, the federal nutrition programs — including the Supplemental Nutrition Assistance Program (SNAP), the Special Supplemental Nutrition Program for Women, Infants, and

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<sup>1</sup> Coleman-Jensen, A., Rabbitt, M. P., Gregory, C. A., & Singh, A. (2016). Household food security in the United States in 2015. *Economic Research Report*, 215. Washington, DC: U.S. Department of Agriculture, Economic Research Service.

<sup>2</sup> Gundersen, C., & Ziliak, J. P. (2015). Food insecurity and health outcomes. *Health Affairs*, 34(11), 1830-1839.

<sup>3</sup> Hartline-Grafton, H. (2013). *SNAP and Public Health: The Role of the Supplemental Nutrition Assistance Program in Improving the Health and Well-Being of Americans*. Washington, DC: Food Research & Action Center.

<sup>4</sup> Gundersen, C., & Ziliak, J. P. (2015). Food insecurity and health outcomes. *Health Affairs*, 34(11), 1830-1839.

<sup>5</sup> Hartline-Grafton, H. (2013). *SNAP and Public Health: The Role of the Supplemental Nutrition Assistance Program in Improving the Health and Well-Being of Americans*. Washington, DC: Food Research & Action Center.

<sup>6</sup> Gundersen, C., & Ziliak, J. P. (2015). Food insecurity and health outcomes. *Health Affairs*, 34(11), 1830-1839.

<sup>7</sup> Hartline-Grafton, H. (2013). *SNAP and Public Health: The Role of the Supplemental Nutrition Assistance Program in Improving the Health and Well-Being of Americans*. Washington, DC: Food Research & Action Center.

<sup>8</sup> Gundersen, C., & Ziliak, J. P. (2015). Food insecurity and health outcomes. *Health Affairs*, 34(11), 1830-1839.

<sup>9</sup> Hartline-Grafton, H. (2013). *SNAP and Public Health: The Role of the Supplemental Nutrition Assistance Program in Improving the Health and Well-Being of Americans*. Washington, DC: Food Research & Action Center.

<sup>10</sup> Cook, J. T., & Poblacion, A. P. (2016). *Estimating the Health-Related Costs of Food Insecurity and Hunger*. In *The Nourishing Effect: Ending Hunger, Improving Health, Reducing Inequality (2016 Hunger Report)*. Washington, DC: Bread for the World Institute.

Children (WIC), school breakfast and lunch programs, summer and afterschool meals, and the Child and Adult Care Food Program (CACFP) – are key health interventions and supports for those experiencing food insecurity or at-risk for food insecurity;<sup>11,12,13</sup>

**RESOLVED**, that the American Academy of Family Physicians (AAFP) will support efforts to universally screen patients for food insecurity, using tools like the validated Hunger Vital Sign<sup>TM</sup>,<sup>14,15</sup> and connect patients to federal nutrition programs and resources;

**RESOLVED**, that the American Academy of Family Physicians (AAFP) will advocate for a strong and effective national nutrition safety net for vulnerable, low-income individuals by protecting and defending the federal nutrition programs<sup>16</sup> from block grants, structural changes, and budget cuts, and by ensuring all people in the U.S. have access to the nutrition they need to live healthy and productive lives;

**RESOLVED**, that the American Academy of Family Physicians (AAFP) will issue a policy statement to educate members on the health implications of food insecurity, health benefits of the federal nutrition programs, promising interventions to address food insecurity in health care settings, and advocacy opportunities to address food insecurity at the local, state, and national level.

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<sup>11</sup> Hartline-Grafton, H. (2016). *Breakfast for Health*. Washington, DC: Food Research & Action Center.

<sup>12</sup> Hartline-Grafton, H. (2013). *SNAP and Public Health: The Role of the Supplemental Nutrition Assistance Program in Improving the Health and Well-Being of Americans*. Washington, DC: Food Research & Action Center.

<sup>13</sup> American Academy of Pediatrics. (2015). Promoting food security for all children. *Pediatrics*, 136(5), e1431-e1438.

<sup>14</sup> Hager, E. R., Quigg, A. M., Black, M. M., Coleman, S. M., Heeren, T., Rose-Jacobs, R., Cook, J. T., de Cuba, S. A., Casey, P. H., Chilton, M., Cutts, D. B., Meyers, A. F., & Frank, D. A. (2010). Development and validity of a 2-item screen to identify families at risk for food insecurity. *Pediatrics*, 126(1), e26-e32.

<sup>15</sup> Gundersen, C., Engelhard, E. E., Crumbaugh, A. S., & Seligman, H. K. (2017). Brief assessment of food insecurity accurately identifies high-risk US adults. *Public Health Nutrition*, published online ahead of print.

<sup>16</sup> The federal nutrition programs include the following:

- Supplemental Nutrition Assistance Program (SNAP, formerly known as Food Stamps);
- National School Lunch and School Breakfast programs;
- Child and Adult Care Food Program (CACFP) (that provides nutritious meals for children in child care, Head Start, and afterschool programs and shelters as well as for older adults in qualifying adult day centers);
- Summer Meals programs;
- Special Supplemental Nutrition Program for Women, Infants, and Children (WIC);
- The Emergency Food Assistance Program (TEFAP) (which provides commodities to food banks);
- Food Distribution Program on Indian Reservations (FDPIR); and
- Certain nutrition programs for the elderly (e.g., the Commodity Supplemental Food Program (CSFP) and congregate and home-delivered meals).