

FOOD INSECURITY

Learner Workbook



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This workbook was assembled by the Curriculum Pillar Workgroup of the Community Pediatrics Training Initiative (CPTI) of the American Academy of Pediatrics (AAP). The authors on this workbook are educators in the field of Advocacy and Community Pediatrics from programs around the country, with experience working across a wide range of US states and territories.

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Curriculum Overview

The goal of this workbook-based curriculum is to provide learners with resources, tools, and knowledge needed to understand the social and structural aspects of food insecurity (FI) and how it impacts pediatric health and healthcare, both directly and indirectly. The target audience for this workbook is pediatric residents; however it can also be used with medical students, fellows, faculty, or any child health provider who is interested in enhancing their knowledge around food insecurity in children. The curriculum is divided into four modules:

Part 1: The Epidemiology of Food Insecurity

WHAT is it and WHO is affected?

Part 2: The Social and Structural Determinants of Food Insecurity

WHY does food insecurity occur and WHY are some groups more affected than others?

Part 3: The Major Players

WHO is involved in addressing food insecurity?

Part 4: Addressing Food Insecurity in Your Patient Population

HOW do we help?

Structure

The workbook is a structured tool with several component sections and activities that can be used individually or as a whole. The general format is to provide fillable tables and pose reflection questions that can be used to guide learners in their own exploration of resources related to food insecurity. While suggested resources are included with each section, you may want to add to these with resources and links that are relevant to your local environment.

Each module starts with a set of learning objectives which are set at the level of what an undifferentiated pediatric resident should know about the topic. These are followed by a series of core activities designed to meet the stated learning objectives. An overall reflection section serves as the main form of evaluation for completion of this work. At the end of each module is a set of “Dig Deeper” activities for further exploration on the topic that extend beyond the learning objectives. The Dig Deeper activities are opportunities for learners with interest to extend their learning, and also allow for faculty to customize their curriculum with topics to explore that may be particularly relevant in their setting.

How to Use this Workbook

This workbook is designed for flexible implementation into a block or longitudinal experience in community pediatrics and advocacy. It can be used in its entirety, or individual sections or activities can be assigned. The embedded reflections can be used to frame written reflections or in person discussions/debriefs. Access to a “living document” facilitator guide with suggested answers and approaches to discussing the activities is available upon email request from the workbook editors.





PART 1

THE EPIDEMIOLOGY OF FOOD INSECURITY

WHAT is it and WHO is affected?

Goal: Describe the epidemiology of Food Insecurity (FI)

Learning Objectives

After completing this section of the workbook, learners should be able to:

1. Define the key terms including food insecurity, hunger, food desert/food apartheid, food swamp, and food equity as they relate to child health.
2. Describe current and historical trends in food insecurity nationally and in the local region.
3. Describe the disparities that exist between communities with regard to food insecurity.
4. Reflect on how providers' implicit biases regarding who is at risk for food insecurity might impact healthcare delivery.

Resources

This is a partial list of available web resources on this topic. Further resources can be found through web search. Part of the goal of this activity is to search for and identify relevant state and local resources on this topic that will be useful to your own clinical practice.

- Feeding America: [Article on Hunger and Food Insecurity](#)
- USDA: [Definitions of Food Insecurity](#)
- Data Resource Center for Child and Adolescent Health: <https://www.childhealthdata.org/>
- USDA 2021. Food Access Research Atlas (2019). United States Department of Agriculture Economic Research Service. <https://www.ers.usda.gov/data-products/food-access-research-atlas/>
- <https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-u-s/interactive-charts-and-highlights/#trends>

Part 1: Activity 1.1

Definitions and Terms

For the following activity, consider the following case: A 6-year-old presents for a well-child visit. The family was food insecure in previous visits and resources were provided. Today, the family again screens positive for food insecurity via a validated tool (more on screening tools in Part 3). In discussing this case with your preceptor you wish to review the definitions of Food Insecurity. Utilize the resources for this section to find definitions for the terms below.

Term

Definition

Food Insecurity
(Overall Definition)

Very Low Food Security

Low Food Security

Marginal Food Security

High Food Security

Hunger

Food Desert

Food Apartheid

Food Swamp

Food Equity

Reflection on Activity 1.1 - Definitions and Terms

Reflect on this exercise. What is the difference between the following terms:

Hunger vs. Food Insecurity:

Food Desert vs. Food Apartheid:

Food Desert vs. Food Swamp:

Reflect on some of the possible reasons why this family may be persistently food insecure? You will explore more about contributing factors in Part 2.



Part 1: Activity 1.2

Compare and Contrast Food Insecurity Rates

Accessing resources from the list above or those you find on your own, complete the table below. Compare current rates of food security/insecurity in various settings and populations across the counter. Note differences in trends over time. List what resources you used to complete the tables.

	Low Food Security	Very Low Food Security	Notes on Recent Trending	Resources Used
National				
State/Province/Territory				
Local				

In the next table, compare rates of food insecurity across demographic groups that are relevant to your local practice (e.g. racial/ethnic groups, age, immigration status, family composition, education, employment).

	Low Food Security	Very Low Food Security	Notes on Recent Trending	Resources Used
Group 1 _____				
Group 2 _____				
Group 3 _____				



Reflection on Activity 1.2 - Compare and Contrast

Reflect on this exercise. What differences did you notice, if any, between local, state, province, territory, and national rates and between demographic groups? Were you surprised?

Part 1: Activity 1.3

Biases and Beliefs About Food Insecurity

Scroll through “Facts and Faces of Hunger in America”. These are the stories of 4 individuals as they relate to hunger and food insecurity. The stories can be accessed through

<https://www.feedingamerica.org/research/hunger-in-america/facts-and-faces>

JESSICA

How old is she?

How is food insecurity impacting her life?

What might her parents do to help ensure they put at least some food on the table each night?

ALICIA

What percentage of food insecure households have someone with post-high school education?

What percentage of food insecure adults are students?

How might food insecurity impact higher educational attainment?

Facts and Faces of Hunger in America

MARTIN

What percentage of food insecure households have a member living with diabetes?

How might food insecurity impact health and access to medical care?

HAROLD

What percentage of individuals with food insecurity have served in the military?

How might food insecurity impact a person's ability to maintain their household?

Part 1: Overall Reflection

Review your completed tables and reflect with your faculty and peers. Identify and fill gaps in knowledge.

Was there anything that surprised you in this exercise?

Did you identify any of your own unconscious biases with regard to who is affected by food insecurity?

How might these biases impact your screening practices?

What steps can you take in your practice to incorporate cultural sensitivity/bias mitigation to address hunger/food insecurity?



Part 1: Dig Deeper

The “Dig Deeper” section has additional activities that allow learners to dig deeper into this topic. If you choose to explore them, use this table to take notes on your observations and resources located.

Dig Deeper Activity 1.1 - Impact of the COVID Pandemic

Evaluate the impact of COVID pandemic on food insecurity rates by specifically comparing rates from pre-, during, and post- pandemic.

Dig Deeper Activity 1.2 – Locate Food Deserts In Your Area

Utilize the USDA Food Access Research Atlas (aka Food Desert Locator) to locate food deserts in your area, particularly those that may be low income (LI) and low access (LA) at 1 and 20 miles or using vehicle access. What the identified zip codes, neighborhoods or communities?

Dig Deeper Activity 1.3 – How the Other Half Eats

Read the book or listen to the podcast—How the Other Half Eats: Book by Priya Fielding Singh, PhD; Code Switch Podcast (33 min author interview and overview of book). Reflect on the societal, cultural, and family values that are reflected in what and how parents feed their children.

Dig Deeper Activity 1.4 – Search Out Other Perspectives

Search for TedTalks, Podcasts and videos on food insecurity to broaden your perspective. Share what you find and your reflection on those materials with peers and faculty.

Dig Deeper Activity 1.5 – Your Lived Experience

Compare rates of food insecurity in two or more areas where you have lived, worked, or trained (e.g. where you grew up vs. where you went to medical school). What do you notice? Is there anything that surprised you?

“The first essential component of social justice is adequate food for all mankind. Food is the moral right of all who are born into this world.”

~Norman Borlaug





PART 2

THE SOCIAL AND STRUCTURAL DETERMINANTS OF FOOD INSECURITY

WHY it occurs and WHY some groups are more affected than others

Goal: Discuss the social and structural determinants of FI

Learning Objectives

After completing this section of the workbook, learners should be able to:

1. Discuss how social, environmental, and economic factors interact to affect a family's access to healthy and nutritious food.
2. Explain how disparities in other aspects of a child's life (e.g. education, parental employment opportunities, wealth and wage gaps, housing, etc) contribute to disparities in food insecurity.
3. Recognize the impact of structural racism and racist historical policies on present-day disparities in rates of food insecurity.
4. Review modern day policies and business practices that contribute to neighborhood disparities in access to healthy foods.

Resources

This is a partial list of available web resources on this topic. Further resources can be found through web search. Part of the goal of this activity is to search for and identify relevant state and local resources on this topic that will be useful to your own clinical practice.

Fast-Food Advertising

- <https://media.ruddcenter.uconn.edu/PDFs/FACTS2021.pdf>
- <https://www.apa.org/topics/obesity/food-advertising-children>
- <https://www.preventioninstitute.org/facts-junk-food-marketing-and-kids>

Maps and Locators

- [USDA Food Access Research Atlas \(aka Food Desert Locator\)](#)
- [Child Opportunity Map](#)
- [Mapping Inequality: HOLC/Redlining Maps](#) for major metropolitan areas

Health and Human Services: Poverty Guidelines

Kaiser Family Foundation

- [Demographics and the Economy](#)
- [Poverty Rates by State and Demographic Factors](#)

Budgeting Simulations and Tools:

- [MIT's Living Wage Calculator](#)
- [Economic Policy Institute's Family Budget Calculator](#)
- [Play Spent Simulation](#)

Part 2: Activity 2.1

Planning Meals on a Limited Budget

For this activity you will need to access the following information and make the following assumptions:

- Federal Poverty Level for a family of 4 - divide by 52 for a weekly income
- Living Wage for a Family of 4 (1 or 2 working adults) - multiply by 40 hrs for a weekly income
- Assume 10-15% of the total take home pay is available to spend on food based on best practices in financial planning)
- Each family member eats 3 meals per day

What is the federal Poverty
Guideline for Family of 4

What is the Living Wage in
your Area for a Family of 4

Weekly Income		
Weekly Food Allowance (10-15% of weekly income)		
Daily Food Allowance (family)		
Food allowance per family member per meal		

Now, using the amounts from the table above, you will plan a day's worth of meals for a family of 4 using pricing from an online circular or a visit to your local supermarket. Attempt to do this for both a family making the FPL and a family making the living wage for your area.



Using the **Federal Poverty Level** food allowance determined above for a family of 4, create a menu, including pricing, for a day:

	Breakfast	Lunch	Dinner
Meal			
Cost			

Using the **Living Wage** food allowance determined above for a family of 4, create a menu, including pricing, for a day:

	Breakfast	Lunch	Dinner
Meal			
Cost			

Reflection on Activity 2.1 - Meal Planning

Reflect on this exercise. What did you notice about the meals you planned using the two sets of circumstances?

Consider that rates of poverty and other SES factors vary between demographic groups. Take a moment to review local and national data using one of the resources above or one that you find on your own. How are the disparities in these other factors likely to influence the food that families have access to?

Part 2: Activity 2.2

Mapping Your Community: Assets, Swamps, and Deserts

For this activity you will need to identify two zip codes or neighborhoods in your community – one that is higher resourced and one that is lower resourced. Then, using online mapping tools, or (ideally) through visiting/driving around the neighborhood, locate, and mark the following:

- Grocery Stores and their varying selections of food and beverage – reflective of the quality and quantity of food access
- Parks/play areas/fitness facilities – reflective of areas where physical activity can safely occur
- Community resources (e.g.: Community centers/faith organizations/schools)
- Liquor/convenience stores
- Fast food/other restaurants

As you map, note what you see or don't see.

	Neighborhood/Zip Code 1	Neighborhood/Zip Code 2
Grocery Stores		
Parks and Recreation Areas		
Community Resources		
Liquor and Convenience Stores		
Fast Food and Other Restaurants		
Anything Else?		

Again focusing on the on the previous page, or if easier on your local area as a whole, overlay and compare the following maps using the resources below and/or additional local mapping resources that you find.

- Child Opportunity Maps (note ability to identify racial and ethnic trends in where children live on this map)
- HOLC (Homeowners Loan Corporation) Redlining Maps
- Food Access Research Atlas

What relationship did you note between historical restrictions in home buying practices (e.g. redlining) and modern-day food deserts? Areas of low child opportunity? Segregation?

Reflection on Activity 2.2 - Mapping

Reflect on this exercise. What did you notice about the differences between these two areas? Include your map, photos, or other visuals that highlight these differences.

How might these differences affect child health particularly as they relate to nutrition?



Part 2: Activity 2.3

Food Advertising and Child Health

For this activity you will search the internet, social media, local TV stations, print media, or billboards for food advertisements that are targeted to children paying attention to the following factors. Optionally you can also visit a grocery store to see how items are positioned, advertised and promoted within the store. Jot down notes or capture images to address the following questions:

What is the typical nutritional content of foods advertised to children?

How are healthier vs. less healthy foods advertised?

Does food advertising differ between various racial and ethnic groups? How so? Compare cost, nutrition, accessibility, etc.

How are highly processed foods marketed specifically toward children placed in grocery stores?

Reflection on Activity 2.3 - Food Advertising

Reflect on this exercise. What did you notice about the differences between advertisements for healthy vs. less healthy food? Food targeted to one demographic group vs. another? If appropriate, include photos/visuals that highlight these differences.



Part 2: Overall Reflection

Review your completed tables and reflect with your faculty and peers. Identify and fill gaps in knowledge. Note remaining questions below.





Part 2: Dig Deeper

The “Dig Deeper” section has additional activities that allow learners to dig deeper into this topic. If you choose to explore them, use this table to take notes on your observations and resources located.

Dig Deeper Activity 2.1 - Pay Spent

Pay Spent simulation: Play this online simulation “game” and reflect on the challenges. This can be done individually or in a group setting. *Note that this activity compliments Activity 2.1 and can be assigned in conjunction or as an alternative to that activity.*

Dig Deeper Activity 2.2 – Historical Perspective

Examine post-Civil War era accessibility to land/agriculture and opportunities for black Americans recently emancipated from slavery and reflect on the implications of these policies on modern day disparities in food security and access.

Part 2: Dig Deeper cont.

Dig Deeper Activity 2.3 - Historical Perspective

Examine the history of federal land ownership of Tribal lands and federal food policies and reflect on how they have contributed to modern day food insecurity among Native communities. *Additional Resource for this topic: Bad Sugar Documentary*
<https://www.sylmarhs.org/apps/video/watch.jsp?v=195033>

Dig Deeper Activity 2.4 – Other Populations

Explore other populations who have currently and/or historically experienced structural causes of food insecurity that are relevant to the local population you serve. (e.g. children with special health care needs, neurodivergent children, immigrants and refugees, etc)

Dig Deeper Activity 2.5 – Beyond the FPL

Investigate the change of proportions of income spent on food vs. housing, how those costs factored into the establishment of the federal poverty level, and how those costs have changed relative to one another over time since the federal poverty level was set.

Dig Deeper Activity 2.6 – Geographic Variability

Investigate the impact of different geographic locations on food insecurity, considering for instance the impact of areas with high proportions of imported foods (e.g. island states, territories), rural areas, etc.

Dig Deeper Activity 2.7 – Personal Experience Comparison

Perform the community mapping tool (activity 2.2) on two or more areas where you have lived, worked, or trained (e.g. where you grew up vs. where you went to medical school) and compare the results. What do you notice? Is there anything that surprised you?

A photograph of a woman with long brown hair, wearing a white button-down shirt, smiling and looking towards a man. The man is seen from the side, wearing a light blue shirt. They are in a bright, modern interior with large windows in the background.

**“If we can conquer space, we can
conquer childhood hunger”**

~Buzz Aldrin



PART 3

THE MAJOR PLAYERS

WHO is involved in addressing Food Insecurity?

Goal: Identify federal and community-based food assistance programs available to support families with food insecurity

Learning Objectives

After completing this section of the workbook, learners should be able to:

1. Describe the key features of the major federal nutrition programs including SNAP, WIC, and the National School Lunch Program (NSLP).
2. Discuss the eligibility criteria and application process for SNAP, WIC, and school-based food assistance in your state/local area including programs that assist families in completing applications.
3. Describe common models for community-based food assistance programs including those that are integrated into the medical setting (e.g. Food Banks, Food Pantries, Therapeutic Food Pantries, Prescriptions for Food Assistance, Emergency Food pantries in Clinic).
4. Identify opportunities for advocacy and collaboration between providers and community-based food assistance programs to address food insecurity and its root causes.

Resources

This is a partial list of available web resources on this topic. Further resources can be found through web search. Part of the goal of this activity is to search for and identify relevant state and local resources on this topic that will be useful to your own clinical practice.

Congressional Research Service

- [Domestic Food Assistance Programs](#)

Feeding America: <https://www.feedingamerica.org>

- [Federal Hunger Relief Programs](#)
- [Food Banks and Food Pantries](#)

Food Research and Action Center: <https://frac.org/>

- [AAP Food Resource and Action Center Toolkit](#)
- [FRAC/AAP Top 10 Advocacy Actions](#)

Hunger in Action: [Federal Food and Nutrition Programs](#)

USDA Food and Nutrition Service

- <https://www.fns.usda.gov/programs>
- <https://www.fns.usda.gov/nap/nutrition-assistance-program-block-grants>

Video: [Historical Perspective on Federal Programs \(You Tube\)](#)

Part 3: Activity 3.1

Federal Nutrition Programs

For this activity, complete the table below using the resources provided above and others that you find doing your own web search.

Program	Key Features	Eligibility Criteria	Application Information	Resources
Snap				
WIC				
NSLP				
Other(list)				

Reflection on Activity 3.1 - Federal Nutrition Program

Reflect on this exercise. What are the impacts of different funding models for benefits in US Territories and Commonwealths (e.g. Block Grant Funding)?

Compare and contrast the funding models for SNAP, WIC, and NSLP.



Part 3: Activity 3.2

Community-Based Food Assistance Programs

For this activity, complete the table below using the resources provided above and others that you find doing your own web search.

Program Type	Definition/Description	Local Examples (with website)
Food Bank		
Food Pantry		
Soup Kitchen		
Clinic/Hospital Based <ul style="list-style-type: none">• Therapeutic Food Pantry• Food Shelves• Grocery Bags• Gift Card Programs• Prescriptions for Food Assistance		
Other <ul style="list-style-type: none">• Mini Pantry• Little Free Pantry• Food Backpack programs• Other		



Reflection on Activity 3.2 - Community-Based FAP

Reflect on this exercise. What programs are available in your local area? How accessible are these programs to those areas identified in Part 2 as being food insecure or under resourced?

Compare and contrast the benefits, barriers, and/or drawbacks of the various types of local programs.

Part 3: Activity 3.3

Advocacy and Collaboration Brainstorming

From the table above and/or in discussion with your clinical colleagues (co-residents, attendings, nurses, SW), identify 2-3 community-based groups/agencies that are involved in advocacy or assistance around food insecurity in your local area. Search their websites for relevant points of contact and engagement opportunities (e.g. tours, open meetings, events). List those below.

Brainstorm about opportunities for advocacy and collaboration between your clinical setting and the community-based food groups/agencies you identified. If existing connections exist, think about how those might be sustained and bolstered. Record your ideas below.

What strategies can you use to ensure that any proposed collaborations meet the needs of your community partners in addition to your own and those of your patients?

Part 3: Overall Reflection

Review your completed tables and reflect with your faculty and peers. Identify and fill gaps in knowledge. Note remaining questions below:



Part 3: Dig Deeper

The “Dig Deeper” section has additional activities that allow learners to dig deeper into this topic. If you choose to explore them, use this table to take notes on your observations and resources located.

Dig Deeper Activity 3.1 – Additional Assistance Programs

Explore other USDA programs, e.g. Child and Adult Care Food Program, School Breakfast Program, Summer Food Program, Emergency Food Assistance, etc.

Dig Deeper Activity 3.2 – US Territories and Commonwealths

Compare and Contrast impact of different funding models for benefits in US Territories and Commonwealths (e.g. Block Grant funding).

Dig Deeper Activity 3.3 – Community-Based Programs

Explore other types of community-based programs that help families meet their nutritional needs such as how to prepare healthy meals on a budget.



PART 4

ADDRESSING FOOD INSECURITY IN YOUR PATIENT POPULATION

HOW Do We Help?

Goal: Identify best practices for screening and referral for resources and programs to address food insecurity.

Learning Objectives

After completing this section of the workbook, learners should be able to:

1. Describe best practices with regard to screening for food insecurity including the use of evidence-based screening tools.
2. Explain how screening practices that are trauma informed and culturally sensitive are critical to ensuring the success of a screening program
3. Locate resources and community partners to support families with food insecurity e.g. community based food assistance programs, programs to assist with federal applications, programs that teach families skills related to food budgeting and healthy food preparation.
4. Identify practices that will facilitate referral and follow through on referrals to food assistance programs for patients in your clinic/hospital

Resources

This is a partial list of available web resources on this topic. Further resources can be found through web search. Part of the goal of this activity is to search for and identify relevant state and local resources on this topic that will be useful to your own clinical practice.

AAP FI Toolkit - Screen and Intervene:

- <https://frac.org/aaptoolkit>

AAP Poverty and Child Health:

- <https://www.aap.org/en/patient-care/poverty-and-child-health/>

CDC Principles of Trauma Informed Care:

- https://www.cdc.gov/orr/infographics/6_principles_trauma_info.htm

Children's Health Watch Hunger Vital Sign:

- <https://childrenshealthwatch.org/public-policy/hunger-vital-sign/>

Feeding America:

- <https://www.feedingamerica.org/our-work/nutrition-health>

National Resource Finder:

- <https://www.findhelp.org/>

USDA Survey Tools:

- <https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-u-s/survey-tools/>

Part 4: Activity 4.1

Screening Tools

- 1. Explore the USDA Economic Research Service US Household Food Security Survey (originally derived in 1995), and other USDA ERS surveys available at:
<https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-u-s/survey-tools/>
- 2. Review the Hunger Vital Sign Screening Tool available at:
<https://childrenshealthwatch.org/public-policy/hunger-vital-sign/>

Screening Tools Comparison

Tool	Description	Advantages	Disadvantages
USDA ERS Household Food Security Survey			
USDA ERS Surveys (choose 1 or more)			
Hunger Vital Sign Screening Tool			



Reflection on Activity 4.1 - Screening Tools

Compare and contrast the tools referenced above. What are some of the advantages and disadvantages of each?



Part 4: Activity 4.2

Local Screening in Your Organization

Become familiar with food insecurity screening in your clinic, hospital, and/or organization. If you are not familiar with this already, you may need to ask your colleagues, attendings, and/or clinic staff.

How often do you or does your clinic/hospital/organization screen for food insecurity?

What screening tool is used?

What screening tool is used?

If different from the screeners in 4.1, how does it compare?

If no current screener, have further conversation to understand why not.

How is screening implemented?

Where is it administered?

Who administers it?

Is it on paper or electronic?

Is it available in multiple languages?

Where is it documented?

Is everyone screened?

What happens in the case of positive screens?

How is a positive screen flagged?

Who responds to positive screens?

What resources are provided, by whom and how?

Is there follow up if the resources were utilized?

If possible, observe a food insecurity screening in your setting. Note observations about if the process occurs as intended and how the screening is received by your patients.

Referrals - If possible, meet with your clinic or hospital social worker (or other resource) to discuss food insecurity screening and referral options in more detail.

What resources are available in your setting?

What partnerships already exist?

Observe how the social worker (or who responds to a positive screen) interacts with a family around an FI referral or follow-up call.

Reflection on Activity 4.2 - Local Screening

Reflect on this exercise. What is your clinic, hospital, or organization doing well? What are some barriers and challenges related to screening? Where can improvements be made?

Part 4: Activity 4.3

Community Partners Visit

Visit one (or more) of the community agencies and/or local partners you identified in activity 3.2 to visit. Complete the Planning, Visit, and Reflection sections below. Time permitting, you can repeat this for multiple sites.

4.3.A. Planning the Visit

Strategize with your team (co-residents, faculty, clinic leadership) about which agency would be most beneficial to visit. Consider where residents have visited in the past and what current patient/practice needs are for expanding community connectedness. Contact the agency to explain the purpose of your visit and arrange a mutually convenient time for a visit. In planning the visit, be sure to ask what educational services/material you, as a pediatric resident, could offer to the agency during the visit to make it a mutually beneficial endeavor. When traveling to the organization, consider how your patients would likely access this resource (i.e. public transportation, walking, taxi). Note plans/ observations below.

4.3.B. Planning the Visit

Complete the checklist for each community agency/partner visited.

Agency/Partner Name:

Contact Information:

Mission/Priorities:

Population Served:

Eligibility:

Programs Offered:

Referral Process:

Agency/Partner identified needs and opportunities for mutually supportive relationship:

Agency/Partner identified needs and barriers to continue providing the services they do (e.g. funding, space, staffing, uptake):

4.3.C. Debriefing

After your visit, discuss the experiences with resident and faculty colleagues.

How can you collaborate with this agency in your clinical practice? (e.g. distributing their resources to your patients, warm handoff referrals, etc)

Is there an opportunity to volunteer? Consider organizing a group of your co-residents or clinic colleagues to volunteer in a meaningful way.

Are there other opportunities for the residency program/residents to support this community based organization (potentially related to funding, visibility, awareness, etc)?

Part 4: Activity 4.4

Intersectionality Activity on Screening and Referral

Food insecurity often does not exist in isolation. There may be other intersecting needs of the population being screened. Considerations may include incorporating trauma-informed care, cultural considerations, special populations (children and youth with special health care needs, language differences, unhoused population, refugee populations).

4.4.A. Exploring Other SDOH Screening

Explore if your clinic or hospital performs other SDOH screenings

List the other SDOH screenings that are performed at your clinic or hospital.

Describe how the screening process is similar or differs from the screening for FI.

List additional community partners which address other SDOH in your community.

4.4.B. Intersection between other SDOH and FI

For each SDOH and examples listed below, describe how this may intersect with food insecurity. For example, when considering the neighborhood and built environment, a patient who is unhoused may not have access to a refrigerator. How might this affect food insecurity? For each response, explore how the barrier identified could be addressed.

SDOH	Potential Barriers to FI Screening and Referral	Ways Barriers Could be Addressed
Education access and quality <ul style="list-style-type: none"> • Literacy • Language • Higher education 		
Health care access and quality <ul style="list-style-type: none"> • Health care coverage • Provider availability • Provider linguistic and cultural competency 		
Economic stability <ul style="list-style-type: none"> • Employment • Income • Expenses • Working conditions 		
Neighborhood and built environment <ul style="list-style-type: none"> • Housing • Transportation • Safety • Walkability 		
Social and community context <ul style="list-style-type: none"> • Social integration • Support systems • Community engagement • Discrimination 		

Part 4: Overall Reflection

Review your completed tables and reflect with your faculty and peers. Identify and fill gaps in knowledge. Note remaining questions below.





Part 4: Dig Deeper

The “Dig Deeper” section has additional activities that allow learners to dig deeper into this topic. If you choose to explore them, use this table to take notes on your observations and resources located.

Dig Deeper Activity 4.1 - Public Charge

Examine the impact of perceived implications around the Public Charge Rules in terms of how accessing food support impacts immigration status.

Dig Deeper Activity 4.2 – Policies, Regs, and EMR Integration

Explore policies/regulations and EMR integration options regarding implementing Food Insecurity Screening at your institution.

Part 4: Dig Deeper cont.

Dig Deeper Activity 4.3 - Trauma-Informed Approach

Review the **six key principles of a trauma-informed approach**. Examine how these can be used in FI Screening and Referral.

Dig Deeper Activity 4.4 – Screening Inequity

Are there inequities seen in screening rates between populations in your institution? If so, how are these being addressed?





