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**American Academy of Pediatrics Commits to Promoting Food Security for All Children**  
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### American Academy of Pediatrics Commits to Promoting Food Security for All Children

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In 2022, 14.8% of households with children experienced food insecurity. The rate of food insecurity for Black and Hispanic families are more than twice that of White families (American Academy of Pediatrics [AAP], 2022a). Food insecurity is defined as the limited or uncertain access to enough food at one or more times during the year and has been associated with chronic health conditions, behavioral, emotional, and school difficulties (AAP, 2017). One in seven children in general and almost one in two socioeconomically disadvantaged children experience food insecurity and hunger in the United States (AAP & Food Research and Action Center [FRAC] 2021).

There are many factors associated with food insecurity including poverty, unemployment, underemployment, immigrant families, large families, single mother families, and those with parents who have less education, or have experienced divorce (AAP, 2015). Effects of food insecurity on child health and growth and development include poorer overall health, iron deficiency, lower bone density, increased obesity, lower cognitive indicators, dysregulated behavior, impaired school performance, worry, anxiety, and depression (AAP, 2015). There are various programs designed to mitigate food insecurity including The Special Supplemental Nutrition Program for Women, Infants and Children or WIC, Supplemental Nutrition Assistance Program previously referred to as food stamps, national school breakfasts and lunches, summer food services, as well as local food pantries. In 2018, AAP published a second policy statement that focused on advocating for improving nutrition in the first 1000 days of life to support childhood growth and development (AAP, 2018). Based on data that have shown that calories and key nutrients are essential for neurodevelopmental growth, they recommended breastfeeding promotion, feeding of infants and toddlers, and iron supplementation and provided an extensive list of resources for pediatric providers to optimize nutrition in the first two years (AAP, 2018).

Screening tools to assess for food insecurity are available. An updated toolkit for pediatricians on screening and interventions for food insecurity is offered by AAP and FRAC (2021). They recommended screening and identifying children at risk, connecting families to community resources, and advocating with other key policy stakeholders at the local, state, and federal levels. However, while AAP strongly advocates for food insecurity screening and intervention for patients living in every community, a 2019 survey of pediatricians revealed many barriers to routine screening, including time constraints, lack of resources, and concerns that screening will reveal other issues about which providers are not prepared to address (FRAC & AAP, 2021).

Unfortunately, since 2015 and during the COVID-19 pandemic, food insecurity rates have increased, and households are facing even higher levels of hunger. Pediatric providers must not assume that they know which families are facing food insecurity. As per AAP, *Hunger Could be Hiding in Plain Sight, You Can't Tell if you Don't Screen* (AAP, 2021b). In September 2022, The White House spotlighted the newest AAP initiative to reduce food insecurity which includes an offer of training to all 67,000 of AAP members to increase screening and referral (AAP, 2022b). Pediatric nurses also have a pivotal role in improving the staggering rates of childhood food insecurity including identifying families at risk and offering information about resources in the community and federal and state assistance. Let this be an urgent call to action to maternal child nurses to lead the way in promoting food security for all children and their families.

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