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Learning Objectives

- 1 Explain the ethics of Food Insecurity (FI) as it relates to personal beliefs and the specialized role of nutrition professionals.
- 2 Distinguish individuals at risk for malnutrition related to FI and explain the ethics behind nutrition education.
- 3 Apply the ethics of screening for FI and list resources to improve food access and health outcomes.

Ethics of Hunger Awareness 101

- **Hunger** is an ethical issue first. It isn't just a charity or moral issue.
- **Assumptions and perceptions** about a person's access to healthy food hurts our client's health.
- If we **don't ask** the right questions we potentially encourage the stigma associated with food assistance, increase the risk of 10 major chronic diseases, exacerbate existing chronic disease, and perpetuate the cycle of poor food access.
- **Providing medical nutrition therapy** or nutrition education without screening for FI first is unethical.

USDA, Economic Research Service Calculations Using National Health Interview Survey Data 2011-2015.

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Code of Ethics: Principles & Standards

- **Assess the validity and applicability** of scientific evidence without personal bias.
- **Make evidence-based practice decisions**, taking into account the unique values and circumstances of the patient/client and community, in combination with the practitioner's expertise and judgment.
- **Act in a caring and respectful manner**, mindful of individual differences, cultural, and ethnic diversity.

Code of Ethics for the Nutrition and Dietetics Professionals, 2018

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Code of Ethics: Principles & Standards

- **Participate in and contribute** to decisions that affect the well-being of patient/clients.
- **Collaborate with others** to reduce health disparities and protect human rights.
- **Promote fairness and objectivity** with fair and equitable treatment.
- **Seek leadership opportunities** in professional, community, and service organizations to enhance health and nutritional status while protecting the public.

Code of Ethics for the Nutrition and Dietetics Professionals, 2018

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The Ethics of Personal Beliefs

The dietitian/nutrition professional:

- Understands the impact of personal values and beliefs in practice
- Anticipates and manages the potential outcomes of his/her own actions or the actions of others



Commission on Dietetic Registration, CPE Indicators

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The Ethics of Personal Beliefs

- Accepts his/her own responsibility and accountability for actions and decisions related to customers
- Recognizes the limits of his/her own cultural knowledge, skills and abilities, and consults with others when needed



Commission on Dietetic Registration, CPE Indicators

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Food Security Definitions Review

High Food Security

- “No reported indications of food access problems or limitations... Access by all people, at all times to sufficient food for an active and healthy life.”

Marginal Food Security

- “One or two reported indications, typically anxiety over food sufficiency or shortage of food in the house.”

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Food Insecurity Definition Review

Low Food Security

- “Reports of reduced quality, variety, or desirability of diet. Little or no indication of reduced food intake.”

Very Low Food Security

- “Reports of multiple indications of disrupted eating patterns and reduced food intake.”

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Causes of Food Insecurity Are Mostly Situational

- Loss of job/part-time job
- Working hours cut back
- Medical expenses
- Affordable childcare
- Affordable housing
- Natural disasters (Harvey, Irma, Maria)
- Death of family member
- College student
- Location of grocery store
- People who are shut in

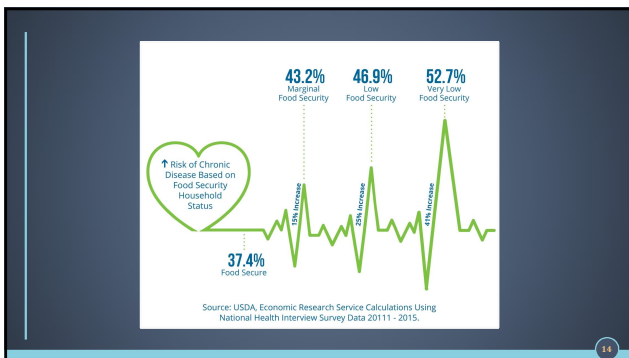
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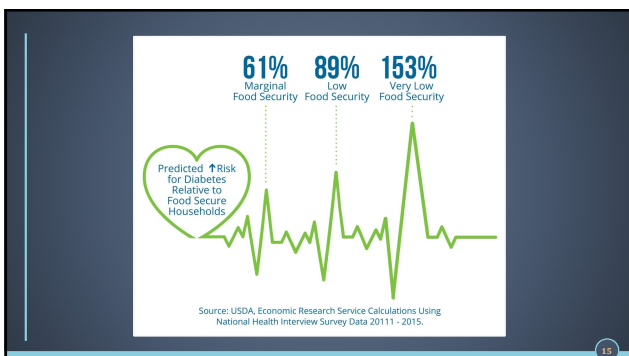
Almost **60%** of Americans with **MULTIPLE CHRONIC** medical conditions **STRUGGLED to afford** at least one basic need for health care, housing, utilities or food in 2017.

Source: Material Hardship among Nonelderly and their Families in 2017, Urban Institute 2018

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Food Assistance Program Participation

59% of households with FI participated in at least 1 of the 3 major federal food assistance programs:

- SNAP** (Food Stamps)
- School Feeding Programs**
- WIC** (Women, Infant and Children)

https://www.ers.usda.gov/webdocs/publications/849/err237_summary.pdf?v42979

Reasons for Non-participation

- Don't qualify
- Stigma
- Treatment by staff or volunteers
- Office/work hours
- Lack of knowledge
- Technical difficulties
- Transportation



Access and Access Barriers to Getting Food Stamps: A Review of the Literature. February 2008.
Food insecurity, social capital and perceived personal disparity in predominantly rural region of Texas: an individual-level analysis. 2011

The Ethics of Screening for Food Insecurity

The dietitian/nutrition professional:

- Takes into consideration the economic status of the client when making recommendations and ensuring optimal care
- Identifies a need and seeks additional resources when needed
- Recognizes the strengths and limitations of a client



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What You Do Matters!

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graph LR; A[Recognize] --> B[Educate]; B --> C[Collaborate]
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What You Do Matters!

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graph LR; A[Screen] --> B[Use Sensitivity]; B --> C[Code Refer Follow up]
```

I can help!
Text dignity to 44222

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Symptoms of Food Insecurity

- Developmental delays
- Behavioral problems
- Depression, anxiety, or stress in parent and/or child
- Low bone density
- Iron deficiency anemia
- Obesity
- Poor growth
- Inappropriate feeding practices
- Dental caries

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Adult Health Risks

- Arthritis
- Asthma
- Increase in C-reactive protein
- Cancer
- Chronic kidney disease
- COPD
- Depression/Stress/Anxiety
- Diabetes
- Dyslipidemia
- Hepatitis
- Hyperlipidemia
- Hypertension
- Poor functional Health
- Poor sleep cycles
- Obesity
- Poor dietary intake
- Poor health status
- Stroke
- Suicide ideation

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Maternal/Fetal/New Born Health Risks

- Anxiety and depression
- Birth defects
- Gestational diabetes
- Iron deficiency
- Low birth weight
- Preterm birth
- Stress on fetus



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Elderly Health Risks

- Congestive heart failure
- Gestational weight gain
- Gum disease
- Osteoporosis
- Peripheral arterial disease
- Poor cognitive function



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Child Health Risks

- Anxiety and behavior disorders
- Depression
- Low bone density
- ADHD
- Iron deficiency
- Low nutrient intake
- Low cognitive development
- Increased illness and hospitalization
- Suicide ideation



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Incorporate the Hunger Vital Sign

1. "Within the past 12 months we worried whether our food would run out before we got money to buy more."
2. "Within the past 12 months the food we bought just didn't last and we didn't have money to get more."

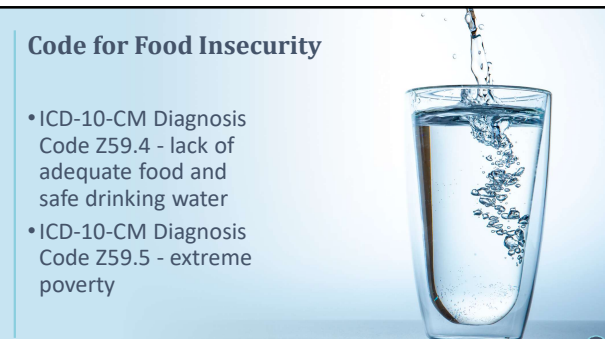
Often True | Sometimes True | Never True

<http://www.childrenshealthwatch.org/wp-content/uploads/FINAL-Hunger-Vital-Sign-2-page1.pdf>

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Code for Food Insecurity


- ICD-10-CM Diagnosis Code Z59.4 - lack of adequate food and safe drinking water
- ICD-10-CM Diagnosis Code Z59.5 - extreme poverty



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The Ethics of Screening with Sensitivity

- Builds rapport and trust within the relationship while respecting boundaries
- Anticipates and manages the potential outcomes of one's own actions or the actions of others



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How Can A Person Be Overweight *and* Food Insecure?

- **Hunger and obesity** often occur within the same populations — even the same families
- **Both hunger and obesity** can be consequences of low income and the resulting lack of access to enough food
- **Studies show** that participation in federal nutrition programs can combat both hunger and obesity

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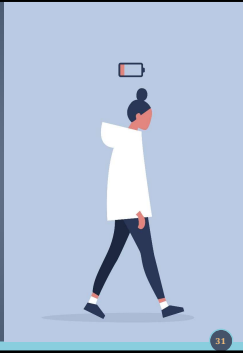
The Hunger/Obesity Connection

- Media/marketing of unhealthy foods
- Stretch food dollars and buy high-calorie, low nutrient-dense food
- Types of grocery stores
- Location of grocery stores
- Transportation to and from food retailers
- Quantity and quality of available food
- Hormonal stress response
- Lack access to basic health care

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The Hunger/Obesity Connection

- FI is a stressor related to low physical activity, depression, and disordered eating patterns
- Fewer opportunities for physical activity
- High rates of crime keeps children indoors
- Low-income neighborhoods are underfunded for safe parks, bike trails, and more



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Screen with Sensitivity

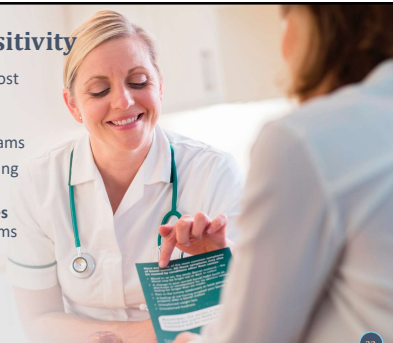
- Screen everyone about FI
- Decide how to screen (verbally or written)
- If verbally, consider asking when a child is not in the room
- Screen in private (away from other staff)
- Normalize
- Use family's preferred language



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Screen with Sensitivity

- **Inform the person** that most people need help
- **Talk positively** about nutrition assistance programs
- **Be clear** that you are making a *recommendation*
- **Use posters and brochures** on food assistance programs
- **Share** personal stories (if applicable)



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The Ethics of Nutrition Education

- **Identifies and respects** economic and sociocultural factors when determining the goals and wants of the client
- **Seeks timely and appropriate** advice and guidance to provide optimal service
- **Applies strategies that engage** the client in a collaborative approach
- **Advocates for financial support** for clients to sustain a nutrition and treatment plan

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The Truth Behind People with Food Insecurity

- **Forgo or postpone** preventive or needed medical care
- **Skip food** needed for medical meal plans
- **Medication** – skip, take less, delay filling prescription, or do not take with food (as prescribed)



Meet the Person at Their Starting Point

As dietitians we are experts in food and nutrition, but we are not experts in the personal battles that our clients face.

Ask the difficult questions with sensitivity:

- 1 Transportation
- 2 Type of grocery store
- 3 Distance to grocery store
- 4 Cooking equipment
(simple things like a can opener!)

The Most Important Question You Can Ask a Client Is...
What is your biggest fear as it relates to food access?

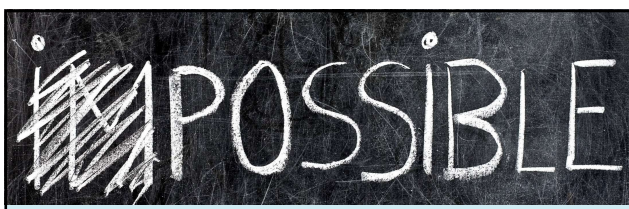
Their answer might surprise you and give you a deeper insight.

Other ways to ask this question:

1. What keeps you up at night?
2. What do you worry about most?
3. What is your biggest challenge?



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How Can You Restructure Your Educational Approach?

Provide lists:

- Local food bank/food pantry programs
- Transportation options in the community
- Vital kitchen equipment and have client circle what they have access to

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How Can You Restructure Your Educational Approach?

Consider assisting the person with completing a food assistance program application for the entire family:

- Applications or links on site for school meal programs
- Eligibility screening for food assistance programs
- A list of required documents needed to apply for programs
- Access to a computer with a person to help the client apply for a program

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Programs That Combat Food Insecurity and Obesity

Participants have access to more milk, vegetables, and whole grains when participating in the following programs:

- National School Lunch Program
- National School Breakfast Program
- Afterschool Snacks and Meals
- Summer Food Service Program
- WIC (Women, Infants, and Children)

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Benefits of Programs

- Reduce food insecurity
- Improve health outcomes
- Confidence in feeding family
- Improved health/nutrition intake
- Less stress
- Peace of mind
- Stimulate economic growth
- Behavior of kids
 - Academic - better outcomes, job placement, higher degree
 - Better sleep, higher energy
 - Improved health

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Consider New Partnerships

- Existing community resources
- Community RDs
- Social Workers
- Local WIC dietitians (local referral list)
- School guidance counselors and nurses
- Interns - dietetic students in community rotation, nursing students, public health students

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Follow Up Questions

- Screen again for FI
- Address concerns from prior appointments
- Transportation
- Receiving benefits yet?
- Taking medication as directed?
- Following medical meal plan?
- How can the meal plan be improved, if food access changed?

DOCUMENT, DOCUMENT, DOCUMENT



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Addressing Food Insecurity: A Toolkit for Pediatricians. The American Academy of Pediatrics, February 2017. <https://www.aap.org/2017/02/15/Addressing-Food-Insecurity-A-Toolkit-for-Pediatricians>
Food Insecurity and Health, Humana, Feeding America, 2019. <https://hungerandhealth.feedingamerica.org/wp-content/uploads/2017/11/Food-Insecurity-Toolkit.pdf>

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“Food security is the *linchpin* of healthful living and must be achieved to improve the health of our clients.”

YOU are the linchpin!



Position of the American Dietetic Association: Food Insecurity in the United States, 2010

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Your Action Steps

- 1 Screen all people at all visits with sensitivity
- 2 Provide a handout with 3-5 food assistance resources
- 3 Download my toolkit (text Dignity to 44222)
- 4 Reach out to your local WIC RD to collaborate (WIC has an existing community referral system)

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Bonus Action!

If you are a non-profit, become a member agency of Feeding America

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Find Your Local Food Bank

<http://www.feedingamerica.org/find-your-local-foodbank>


200 Feeding America Food Banks that serve the United States

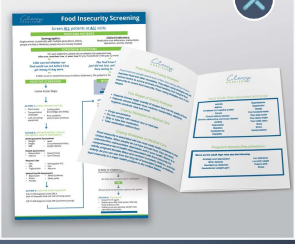
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Questions?
Get the Toolkit!

Text Dignity to 44222
and receive the following:

- One-page Screening Tool
- List of Health Risks and References
- Prescription Tool with Resources
- 3 Strategies to Improve Food Access & MORE!

 @ClancyCHarrison
www.ClancyHarrison.com
Clancy Harrison



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Credit Claiming

You must complete a brief evaluation of the program in order to obtain your certificate. The evaluation will be available for 1 year; you do not have to complete it today.

CREDIT CLAIMING INSTRUCTIONS:

1. Go to www.CE.TodaysDietitian.com
2. Go to "My Courses" and click on the webinar title.
3. Click "Take Course" on the webinar description page.
4. Select "Start/Resume" Course to complete and submit the evaluation.
5. Download and print your certificate.

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